

***Juan F.* v. Malloy Exit Plan
Status Report
April 1, 2018 – September 30, 2018
Civil Action No. 2:89 CV 859 (SRU)**

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April 1, 2018 – September 30, 2018

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***Juan F. v Malloy* Exit Plan Status Report
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Highlights

- The Court Monitor’s findings regarding the 2017 Revised Exit Plan Outcome Measures indicate that the Department maintained compliance with 5 of the remaining 10 measures during both the Second Quarter 2018 and the Third Quarter 2018. The five measures that were met have each been previously pre-certified as compliant and the Department continued to maintain compliance. The summary chart on page 20 provides the automated outcome measure performance/percentages while additional analysis and review of specific cases inform the final decisions of the Court Monitor with respect to compliance. Of the measures that did not meet the established standards in these two quarters, the most concerning continue to be the Department’s investigation practice, case planning process, meeting children and families service needs, appropriate visitation with children and required adult family members of the agency’s in-home cases, and caseloads for Social Work staff.
- Paragraph 4 of the 2017 Revised Exit Plan mandated that a strategic plan be developed by the DCF Commissioner in consultation with the Court Monitor, to address compliance with the 2017 Revised Exit Plan Outcome Measures. The plan was drafted and filed with the Court on April 26, 2018. The plan outlines specific implementation steps and strategies for each of the six (6) measures that had not been pre-certified at that point and there is a section devoted to Quality Assurance activities. Since the finalization of the Strategic Plan, the Court Monitor’s Office has pre-certified an additional Outcome Measure (Outcome Measure 1) concerning the Department’s investigation response time. This was reported in the last Status Update and a copy of the Strategic Plan was attached as an appendix. The plan is meant to be dynamic and over the last few months it has been systematically reviewed by the Department and the Court Monitor’s Office to identify progress, areas of concern and revisions that are necessary. The Strategic Plan is currently being updated to reflect the findings of the review and an updated Plan will be produced over the next month.
- Although the automated reporting indicates that the Department has achieved compliance with Outcome Measure 2 (Completion of Investigation) previous sampling confirmed that issues exist regarding the quality of the investigative work. At the request of the DCF Regional Administrators, the Court Monitor has sampled additional cases during the previous quarters to ascertain if the Department efforts have improved the outcomes for this measure. A new protocol was tested on these sample cases and the data was entered into SPSS for analysis. Findings from this sampling were shared with the parties and also with each DCF regional office in face-to face discussions with staff. The findings are being utilized to adjust/revise elements of the Strategic Plan. The findings indicated that the Department continues to do well in response time after a report is made and a majority of the subjects cited in the reports are seen by the 45 day limit standard that is set for investigation and Family Assessment Response (FAR) cases. Improvement in

timely utilization of the Regional Resource Group staff on complex cases was noted in the reviewed cases and background checks were routinely completed on most cases. There remain a number of areas that require continued improvement and they include: accurate and timely assessment utilizing the Structured Decision Making model (SDM), the quantity and quality of family and collateral contacts (especially with non-custodial parents), timely and adequate supervision, and ongoing documentation issues. The Department has continued a statewide investigation review being conducted at the regional level utilizing its own QA process in each office.

- Another key element outlined in the Strategic Plan is sufficient staffing. Outcome Measure 6 (Caseload Standards) has not been met in the last eleven quarters. Improving the Department's efforts in areas such as formal assessments, purposeful visitation, effective supervision, service provision, care coordination, and case planning require adherence to the established best practice standards as well as maintaining sufficient staffing and services. As outlined in previous reports and the Time Study conducted by the Court Monitor, this is a significant issue that impacts the quality of the Department's work on behalf of the families for whom it provides service. During those periods in which staffing was stable and nearing sufficiency, children and families were better served and the related Outcome Measures being tracked improved.

In the last four quarters, the State has made a commitment to addressing this issue in a substantive manner. The Department has brought on 120 new staff to assist in addressing excessive caseloads. New staff have months of training before they can assume full caseloads. The Department is also struggling to retain staff and this has undermined the hiring efforts. In addition, the number of reports to the Careline has significantly increased which translates into more cases needing to be serviced.

The state has wisely moved to a system of predictive hiring for DCF. This allows them to plan blocks of hiring that track roughly with their attrition rate. The Department must strive to maintain stable staffing levels.

The Staffing/Caseload summary as of December 14, 2018 is:

- The current average caseload utilization which is defined as the average caseload of all caseload carrying workers is 80.30%. The average includes 67 Social Workers Trainees with low utilization as they are still in training and working their way up to full caseloads.
- Based on the current caseloads, the Department needs 1,210 Social Workers to be at the 75% average utilization outlined in the 2017 Revised Exit Plan. Currently there are 1,136 Social Workers carrying cases, 102 approved vacancies waiting to be filled and 2 Social Workers hired but not yet appearing in LINK. In November, the Department had 1,149 Social Workers carrying cases.
- In order to get to 75% utilization, 74 additional active, caseload carrying Social Worker positions and 19 Social Work Supervisors need to be established.

- There are 102 Social Workers with caseloads over 100%. In October, there were 108 Social Workers over 100%. There are 53 Social Workers who have been over 100% for 25 or more days.
 - Approximately 54% of the Intake Workers in the Department are carrying more than 12 cases, which is the standard set by the Community of Practice. Approximately 50% of the Ongoing Social Workers are over an 80% caseload utilization.
 - The Department continues to fill available Social Worker vacancies.
- The 2017 Revised Exit Plan provides a new framework to assist the Department in taking a progressive approach to improving performance on the key Outcome Measures of OM 3-Case Planning and OM 4-Needs Met. The agreement will now focus attention on the individual domains for each measure. The agreement allows the Department to pre-certify for compliance on an individual domain basis. This was not previously the case. By focusing on individual domains the Department can better identify the many strengths in its practice and also work on specific strategies to address ongoing areas of concern. The Strategic Plan identifies multiple approaches to build on existing strengths while addressing known areas needing improvement.

The 2017 Revised Exit Plan requires the Department to be compliant at 90% for two quarters for an individual domain in Outcome Measure 3 (Case Planning). It requires the Department to be compliant at 85% for 2 consecutive quarters for an individual domain for Outcome Measure 4 (Needs Met).

Based on the data from this review period of the **Outcome Measure 3 (Case Planning)** three case planning domains have met and sustained the required benchmark: Identifying Information, Approving Case Plans, and providing translation/interpreter services to meet families' language needs. The Department continues to struggle most with the domains related to engaging children and families and assessment of children and families. The summary chart on page 37 regarding the Department's engagement efforts indicates fairly low percentages of older youth, fathers, providers and attorneys taking part in the Administrative Case Review process. While not achieving the benchmark, the Third Quarter results did show improvement in the domains related to setting goals/objectives and detailing the progress in the case. Case Plans are critical to identifying the progress that has been made and the steps and actions required by all parties involved with families. The antiquated LINK system presents challenges in assisting staff with ticklers, updates and prefilling and the Department has created additional reports to try to compensate for these shortcomings. The Department must continue to look for any and all opportunities to assist SWS whether that be additional training, mentoring, evaluation or workload reduction. Further discussion of Outcome Measure 3 findings is found on page 20 with a summary chart of the findings for the domains of Outcome Measure 3.

Based on the data from this review period, 5 of the 11 **Outcome Measure 4 (Needs Met)** maintained an 85% or higher compliance. Two domains that were previously pre-certified dealing with the appropriateness of the child's placement and medical needs dipped slightly. See page 27 for the summary chart for Outcome Measure 4. As we have

noted consistently in previous status reports, service needs noted via this methodology and other review activities which include discussions with staff and stakeholders indicate that services that are not readily available in areas of the state. They often include: outpatient mental health services, in-home services, substance abuse services, domestic violence services, mentoring, supportive housing vouchers, foster and adoptive resources, readily available placement/treatment options. This review period the top five unmet needs were referral to the ARG, Dental Screenings and Substance Abuse Screening/Evaluation – Parent, Individual Counseling-Child and Health/Medical Screening – Child.

As outlined in the Strategic Plan in Appendix A, an analysis of the service array identified critical service needs that could be enhanced within the fiscal constraints facing the State and the Department. During the previous Quarter the Department has moved deliberately to implement the following services:

- MDFT QA-The Department sought applications to design and deliver a program development, training, consultation and clinical quality assurance system to support DCF and their funded Multi-Dimensional Family Therapy (MDFT) service providers.
- MST:BSF-Multi Systemic Therapy/ Building Stronger Families is an evidenced based treatment model that provides intensive family and community based treatment for active DCF cases. The Department developed one additional team.
- MDFT-The Department developed 14 Multi-Dimensional Family therapy teams to provide statewide access for this intensive in-home service.
- MST:EA-The Department procured two Multi-Systemic: Emerging Adults teams to provide intensive in-home services for young adults in Connecticut
- Project SAFE-The Department redesigned and procured substance abuse toxicology, screening, brief intervention, referrals to treatment assessment (SBIRT) assessment, Multi-dimensional Family Recovery (MDFR), and Recovery Management Checkups (RMC) services to adult caregivers involved in child protective services statewide.
- Fatherhood Engagement-The Department established six (6) FES teams to assist DCF in achieving better outcomes related to father engagement through implementation of support, guidance, education, and mentoring for fathers whose children are involved with DCF.

The top five barriers to service provision identified this period were client refusal, failure to assess the need during the period under review, delay in referral, no referral made during the PUR and lack of communication between DCF and the provider. As previously reported, ongoing communication and interviews with Social Workers and Social Work Supervisors continues to indicate that some percentage of the categories of “lack of referral” or “delayed referral” are due to staff having knowledge that certain services are not readily available. Therefore, they don’t make referrals, even when all staff involved have assessed that a service is the best match for a client’s particular need. Thus, the number of cases with unmet needs due to waitlists and provider issues is understated in this status report.

- Outcome Measure 5 (Worker-Child Visitation of In-Home cases) is not able to be tracked or analyzed accurately by the current LINK system with respect to the standard of a minimum of two visits per month with each active member of an in-home case. A previous review of this measure to ascertain pre-certification failed and a number of concerns with both the quality and quantity of the visits were identified. Until the “CT Kind” LINK replacement system is implemented there is no readily viable method to evaluate this measure short of individual cases reviews. This path will require considerable resource allocation and will be difficult to accomplish in a real time manner. Nevertheless the Court Monitor and the Department are exploring the methodologies that that can be used to accomplish this goal. While the Department has begun implementing efforts to improve this area of case management, it is imperative that a process be developed to evaluate the progress.
- The Department has continued to work on implementing a new data entry system to replace the antiquated LINK system. While the LINK system continues to provide the Department with adequate reporting data, it is severely limited and outdated in meeting the Department’s need for an efficient and streamlined data entry and retrieval. The Department has continued to perform a very detailed analysis of each of the primary work components. These LEAN efforts which include time studies will eventually address all elements of the Department’s work. These efforts have detailed and mapped current work flows and processes and they are allowing the Department to plan for a much more streamlined and effective data collection and reporting environment.

The Department announced on January 29, 2019 the selection of a vendor for the Careline CPS Reports and Online Reporting functionality. Currier, McCabe and Associates (CMA) has been selected to begin working with the CT-KIND Team. Along with the current DCF teams working on the builds for the Universal Referral Form (URF), Master Data Management (MDM) tools, Case Review System (CRS) and Structured Decision Making (SDM) enhancements for the Intake Risk and Safety Assessments, CMA/Care Director will work collaboratively with the CT-KIND team to provide their technological expertise in child welfare solutions. As new functionality is built in CT-KIND, it will be released to Department users.

DCF staff are hampered in performing their work while out in the field efficiently and in a quality manner due to the lack of mobility technology. Staff are currently not able to readily access their desk top system when they are away from the office. This means that they don’t have access to their case files. In order to address the mobility challenges presented by the outdated LINK system and until CT KIND is implemented, the Department has recently upgraded and replaced thousands of iPhones. In addition the Department is preparing to release tablets through a phase-in plan. The tablets will be released once the Department of Administrative Services (DAS) is ready with Office 365, since they are in charge of the state wide Microsoft tenant. DAS is working on the tenant configuration and policies with a Microsoft partner, Planet Technologies. This will not be finalized for a couple of months or more.

- For many years, the Department has utilized Structured Decision Making (SDM) as the formal means to assess the families it serves. There are a number of evidence-based tools

required to be completed through engagement of the family at various points of the Department's intervention. The quality of the Department's assessment activities is a major part of the core of the work that is performed and is a key component to the process of case planning. It remains very concerning that the Department's consistency and reliability in using this approach is still not adequate. The most recent sampling reviews have noted that formal assessment is not being performed timely or adequately in many cases. That is not to say that informal assessment has not occurred in many cases but informal assessment is prone to being influenced by individual bias, varied application of relevant standards and is inconsistent across the agency. DCF continues to work with the Children's Research Center to both revise the tools and ready new training and mentoring for staff. Implementation of edited tools for the Careline SDM process has been accomplished and there is initial evidence of substantive attempts to better utilize these tools. Ongoing review and changes to the SDM tools is continuing regarding other components of the Department's work.

- The court-ordered 2017 Revised Exit Plan applies to class members who receive placements, case management, and services from any successive Connecticut state agencies that provide applicable placement, case management and services to class members. The class includes youth who are dually committed (abuse/neglect and delinquent). Dating back to the original Consent Decree and throughout the period of the previously-governing 2004 Exit Plan (and as modified) these youth have been part of monitoring and performance reviews conducted by the Court Monitor. All sampling of individual cases and system wide data runs include these youth and the Court Monitor has had full access to DCF staff and records.

As outlined in the previous status reports, the legislature passed Public Act 17-02 and SB1502, transferring juvenile services from DCF to the Judicial Branch (Court Support Services Division). The effective transfer occurred in July 2018. Productive discussions have been held with staff from the Judicial Branch (CSSD) and agreement was reached on how to continue to monitor the small number of *Juan F.* youth that are now being serviced by CSSD. The agreement allows the Court Monitor to have timely access to staff, data, and records that are required to report on the Exit Plan performance for those class members serviced by CSSD.

- Since July 2017, the Department has been receiving technical assistance from the Harvard Kennedy School, Government Performance Lab (GPL) to improve and enhance the Department's service coordination efforts. The goal is to allow the Department to achieve the revised OM 3 and OM 4 standards of the 2017 Revised Exit Plan through more efficient use of the Department's existing resources and development of data reporting structures to inform where existing resources/funding could be better directed based on actual use patterns and outcomes data to demonstrate where programs can most effectively reduce entries into foster care, reduce repeat maltreatment and improve permanency outcomes.

There are a number of core practice changes that the Department is hoping to achieve through implementation of the Enhanced Service Coordination (ESC) model that is focused on improving the match between need and service referral. This effort has also

helped to guide the application of an active contract management to selected services where there may be patterns of over- or under-utilization, and guide procurement decisions around service expansions or additions through use of data collected as part of this effort.

The change in practice is rolling out one region at a time and focuses on streamlining referral pathways by utilizing a dedicated Service Coordinator who helps guide service matching and referral decision making by Social Workers and their Supervisors.

The Service Coordinator also maintains dashboards that assist with leadership decisions by focusing on 4 key metrics including: 1) service matching; 2) service utilization trends; 3) timeliness of referral; and 4) barriers and waitlists.

The process emphasizes earlier engagement with RRG clinicians via multidisciplinary consultations on high-priority cases as well as review of cases upon transfer to ongoing service.

The focus is on “what do families need” rather than what is available. There are various issues noted repeatedly with DCF’s service referral processes that have made it difficult to determine the value of various service types and the quantity that is needed to reach the Needs Met goal. Social Workers will often make referrals based on non-value added factors like what is available as opposed to what is needed, their trust and confidence in a specific contractor, or advice given to them by a peer instead of assessing needs based on clinical or other objective criteria.

This effort has contributed toward improved and more consistent data informed collaboration during discussion between providers/Central Office/Regions and utilization of proactive “deep-dive” analysis of a specific question to inform program design and re-engineering guided by the SARA-E meetings.

The Department had chosen to test the changes with Intensive Family Preservation (IFP) in early 2018, followed by Adolescent Community Reinforcement Approach (ACRA) in fall 2018, with other services to be identified in early 2019.

The Department has developed a Universal Referral Form (URF) that is currently being automated as part of DCF’s CT-KIND build with the first iteration of the URF to be launched in March 2019 for 3 contracted service types to be determined based on feedback from the ESC implementation and URF User Acceptance Testing in February 2019. The URF will address two critical issues. It will assist in answering the questions of what does a family need and what is available and also provide data on the demand for services or areas of unmet need. These are important areas where the Department’s current information is limited.

The initial implementation of the ESC model was launched in Regions 5 and 6 where preliminary results from a year in review are very encouraging and demonstrate important insights into the utilization and effectiveness of selected in-home services. The importance of the improvements in the collaboration between the Department and service

providers cannot be understated as the model is predicated on strong collaboration and communication between DCF's Central Office, Regions and provider network.

The statewide roll-out will move next into DCF's Region 3 pending the identification of their Service Coordinator, as these positions draw from current Social Work Supervisors, and require a backfill to ensure there is a good supervision ration for caseload carrying Social Workers.

Given the ESC model has now passed a 1-year milestone of launching in Region 5, and 6-month milestone in Region 6, the Department is working with the Division of Quality and Planning to establish a strong Quality Assurance framework with reporting to demonstrate the benefits an efficacy of this model to service matching. This QA framework is currently under development and will include a focus on lessons learned from streamlining decision making and internal service referral processes.

Through the ESC model and early data collecting the Department is seeing benefits where families are matched to more appropriate services to meet their needs, reducing the likelihood of repeat maltreatment. The model is also enabling the Department to collect more meaningful and accurate data to guide decisions around procurement and make adjustments to the service network by repurposing funding with data-driven metrics.

- Closely associated with the Department's Enhanced Service Coordination (ESC) efforts, described above, is the Department's Service Array Resource Allocation (SARA) process. The Department does not have a comprehensive needs assessment process, although there have always been pockets of individualized needs assessment work that have proven effective and consistent. Their efforts in revising and enhancing the SARA process have moved them closer to achieving this goal. Over the last few quarters, the Department implemented a SARA-W component. This workgroup is systemically undertaking a review of the Department's service array. At each meeting of this workgroup a set of services is reviewed utilizing available data from multiple sources and input from staff that oversee the programs as well as regional and facility staff input. A series of questions are addressed including utilization, waitlists, and number of quality indicators. The chairs of this group summarize the findings and present to the Executive SARA group on a regular basis. The findings are incorporated into decisions about renewing, enhancing, or reducing the set of services. Over the course of the last few quarters, the staff have become much more comfortable and adept at implementing this critical process.
- The Division of Foster Care's report for July-September 2018 indicates that there are 2170 licensed DCF foster homes. This is an increase of 123 homes when compared with the previous status report. Of the total of 2,170 licensed DCF foster homes, 1,064 are kin/fictive kin families. The number of approved private provider foster care homes is 785 which is an increase of seven (7) homes from the previous status report. The number of private provider foster homes currently available for placement is 95.

During the last quarter the Department released an RFP and has again implemented Service Area Lead Agencies within the therapeutic foster care structure. The Department

chose to re-implement this concept with the hope of creating a hub for all TFC referrals and to better disseminate, track, monitor and handle emergency referrals to providers in the network. In addition, the SALAS's will perform quality assurance efforts on behalf of the TFC system. The Court Monitor was involved with a number of discussions with both DCF and TFC providers. Improved communication and coordination within the TFC system was sorely needed and this process should address those issues. Nevertheless, some providers indicated that the new process would not address the core issue of needing additional foster homes in the system and expressed concern that the money being used from their budgets to fund this implementation would be harmful to their ongoing efforts.

- As of November 2018, the number of children with the goal of Other Planned Permanent Living Arrangement (OPPLA) was 113. This is a slight increase from May 2018, when there were 106 children with an OPPLA goal. While this goal is appropriate for some youth, it is not a preferred goal due to its lack of formal permanent and stable relationships with an identified adult support, be it relative or kin. This will remain an ongoing point of focus by the Department.
- As of November 2018, there were 91 *Juan F.* children placed in residential facilities. This is an increase of nine children compared with May 2018. The number of children residing in residential care for greater than 12 months was 21 which is six less than May 2018.
- The Department continues to focus on the number of *Juan F.* children residing and receiving treatment in out-of-state residential facilities. As of July 3, 2018, there are 8 children in DCF custody residing in out-of-state residential facilities. This increase may be attributable to the closure of CJTS.
- The number of children age 12 years old or younger in congregate care as of November 2018 was 17 children which is the same as the number in May 2018. Of the current total, eight (8) are placed in residential care, four (4) children are placed in group homes, four (4) and one is placed in a DCF facility.
- As of November 2018, there was one (1) child aged 1 to 5 years of age residing in a group home placement.
- The number of children utilizing Short-term Family Integrated Treatment (SFIT) has increased as the Department has broadened access for referrals from Emergency Mobile Psychiatric Service and others. SFIT is a residential crisis-stabilization program for children ages 12-17 with a goal of stabilizing a youth and their family, guardian or fictive kin to coordinate a reintegration back into the homes. The intended length of stay is 15 days or less. The average length of stay is approximately 15 days for the last two quarters. The data with respect to discharges that meet treatment goals fluctuate from quarter to quarter (Quarter 2, 83% and Quarter 3, 92%) but are typically tied to the increased needs of the children being served. The data for April-September 2018 is found below.

Client Status	Q2 SFY 2018	Q3 SFY 2018
	April-June 2018	July-September 2018
In-Care at Period Start	87	87
Admitted in Period	94	103
Discharged in Period	94	95
Remaining in Care at Period End	87	95
Episodes Served in Period	181	190
Distinct Clients Served in Period	171	182

- Data source: PIE
- *PIE tracks length of stay data by months (not days)

- There were 23 youth in STAR/Shelter programs as of November 2018. This is 3 less than the 29 reported in May 2018. Twelve or 52% of these youth in STAR programs were in overstay status (>60 days) as of November 2018. There was four children with a length of stay longer than six months as of November 2018.
- The Monitor's quarterly review of the Department for the period of April 1, 2018 through September 30, 2018 indicates that the Department has not achieve compliance with five (5) measures:
 - Completion of Investigation¹
 - Case Planning
 - Children's Needs Met
 - Worker-Child Visitation In-Home (N/A)²
 - Caseload Standards

A full copy of the Department's Second Quarter 2018 and Third Quarter 2018 submission may be found on page 42.

¹ Based on sampling of Differential Response cases over two quarters it has been determined that the quality of the investigative work (OM 1 and 2) is not in compliance with the provisions of the Exit Plan.

² 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.

Juan F. v. Malloy Exit Plan Status Report
February 2019

Statewide		Positive Outcomes For Children																																
Measure	Measure	Q4 2016	Q1 2016	Q2 2016	Q3 2016	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018	Q3 2018	Q4 2018	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021	Q4 2021	Q1 2022	Q2 2022						
1. Commencement of Investigation	>=90%	96.7%	96.7%	97.0%	96.5%	96.9%	96.8%	96.4%	95.5%	94.7%	94.8%	94.6%	95.2%	95.8%	95.7%	95.2%	95.1%	94.5%	93.8%	93.2%	93.6%	94.7%	96.0%	96.2%	95.5%	94.9%	95.7%	96.1%	96.6%	97.1%	97.3%	97.2%	97.2%	
2. Completion of the investigation	>=85%	88.5%	89.5%	89.8%	89.4%	91.0%	89.8%	87.0%	85.8%	86.7%	86.4%	82.7%	85.8%	88.9%	86.0%	88.9%	85.6%	81.9%	78.8%	77.3%	77.6%	83.7%	92.5%	92.2%	89.1%	90.2%	92.5%	92.4%	91.9%	93.3%	94.0%	94.4%	92.7%	
3.1 Tr. Plan Case Plan Approval	>=90%	88.1%	94.3%	84.2%	88.8%	96.2%	87.0%	86.8%	90.6%	92.7%	90.6%	94.4%	90.7%	96.3%	88.9%	86.8%	84.9%	81.5%	79.6%	88.9%	85.2%	96.4%	92.6%	92.7%	90.7%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
3.2 Tr. Plan Family's Language Needs	>=90%	96.3%	94.3%	81.5%	81.1%	96.2%	81.5%	83.0%	84.9%	92.7%	90.6%	92.6%	90.7%	88.9%	88.9%	92.5%	88.7%	94.4%	90.7%	96.3%	100.0%	96.4%	98.1%	100.0%	98.1%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
3.3 Tr. Plan Reason for DCF Involvement	>=90%	83.3%	81.1%	81.5%	75.5%	88.7%	81.5%	79.2%	86.8%	92.7%	96.2%	94.4%	94.4%	92.6%	88.9%	84.9%	100.0%	90.7%	87.0%	96.3%	87.0%	94.5%	94.4%	94.5%	88.9%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
3.4 Tr. Plan Identifying Information	>=90%	92.6%	92.5%	85.2%	81.1%	92.5%	79.6%	84.9%	88.7%	90.9%	96.2%	98.1%	94.4%	92.6%	96.3%	88.7%	98.1%	87.0%	85.2%	96.3%	87.0%	94.5%	88.9%	94.5%	96.3%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
3.5 Tr. Plan Child/Family Engagement	>=90%	55.6%	54.7%	51.9%	50.9%	66.0%	55.6%	45.3%	56.6%	58.2%	50.9%	55.6%	42.6%	51.9%	51.9%	47.2%	47.2%	47.2%	59.3%	42.6%	63.0%	66.7%	72.7%	72.2%	63.6%	64.8%	N/A	N/A	N/A	N/A	N/A	N/A		
3.6 Tr. Plan Situation Assessment	>=90%	57.4%	50.9%	51.9%	32.1%	47.2%	42.6%	43.4%	52.9%	47.3%	64.2%	68.5%	40.7%	53.7%	44.4%	47.2%	49.1%	48.1%	55.6%	53.7%	53.7%	67.3%	66.7%	66.7%	43.6%	57.4%	N/A	N/A	N/A	N/A	N/A	N/A		
3.7 Tr. Plan Goals/Objectives	>=90%	79.6%	60.4%	53.7%	58.5%	62.3%	66.7%	58.3%	64.2%	72.7%	73.6%	74.1%	63.0%	61.1%	64.8%	54.7%	66.0%	63.0%	55.6%	74.1%	59.3%	78.2%	79.6%	69.1%	70.4%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
3.8 Tr. Plan Progress	>=90%	80.8%	69.2%	66.7%	62.3%	64.7%	67.9%	71.2%	78.0%	81.8%	88.7%	88.5%	78.9%	82.0%	70.4%	82.2%	84.9%	88.7%	78.4%	84.3%	72.2%	83.6%	78.0%	81.5%	79.6%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
3.9 Tr. Plan Action Steps	>=90%	70.3%	62.3%	53.7%	52.8%	81.8%	78.3%	80.6%	96.8%	89.7%	96.3%	89.7%	96.6%	93.5%	93.1%	83.3%	75.9%	93.8%	90.6%	87.0%	80.0%	78.3%	94.4%	95.2%	89.5%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
3.10 Tr. Plan Planning for Permanency	>=90%	83.3%	84.9%	74.1%	73.6%	84.9%	70.4%	79.2%	83.0%	85.5%	88.7%	90.7%	83.3%	88.9%	85.2%	88.7%	88.7%	81.5%	83.3%	88.9%	90.7%	92.7%	88.9%	80.0%	90.7%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.1 Needs Met: Risk In-Home	>=85%	70.0%	73.9%	81.3%	82.1%	81.8%	78.3%	80.6%	96.8%	89.7%	96.3%	89.7%	96.6%	93.5%	93.1%	83.3%	75.9%	93.8%	90.6%	87.0%	80.0%	78.3%	94.4%	95.2%	89.5%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.2 Needs Met: Risk Child-in-Placement	>=85%	96.2%	96.8%	100.0%	96.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	96.3%	96.2%	91.7%	96.0%	96.0%	92.0%	97.0%	97.2%	92.1%	100.0%	100.0%	97.3%	N/A	N/A	N/A	N/A	N/A	N/A		
4.3 Needs Met: Permanency, Securing Permanent Placement - Action Plan	>=85%	100.0%	100.0%	95.8%	100.0%	93.5%	97.1%	100.0%	95.7%	92.6%	100.0%	100.0%	88.9%	100.0%	88.5%	91.7%	91.7%	91.3%	91.7%	97.0%	94.3%	91.7%	94.4%	94.4%	88.6%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.4 Needs Met: Permanency, DCF Case Mgt- Legal Action to Achieve Permanency	>=85%	87.0%	90.6%	92.5%	94.3%	90.6%	98.1%	90.4%	90.6%	92.7%	96.2%	83.0%	92.6%	98.1%	92.5%	90.6%	90.4%	94.4%	98.9%	94.4%	94.3%	96.4%	91.7%	92.7%	90.7%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.5 Needs Met: Permanency, DCF Case Mgt- Recruitment of Placement Providers	>=85%	100.0%	90.3%	95.7%	96.0%	93.8%	100.0%	100.0%	100.0%	92.6%	100.0%	92.6%	92.0%	85.2%	83.3%	75.0%	91.3%	95.8%	90.9%	91.4%	100.0%	94.4%	88.9%	88.6%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.6 Needs Met: Permanency, DCF Case Mgt- Contracting/Providing Services	>=85%	51.9%	50.9%	51.9%	49.1%	52.8%	57.4%	64.2%	58.5%	61.8%	69.8%	64.8%	61.1%	59.3%	46.3%	50.9%	45.3%	53.7%	55.6%	46.3%	55.6%	67.3%	72.2%	63.6%	48.1%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.7 Needs Met: Medical Needs	>=85%	83.3%	90.6%	85.2%	79.3%	86.8%	94.4%	88.7%	79.2%	83.6%	94.3%	83.3%	85.2%	75.9%	88.9%	81.1%	73.6%	88.9%	75.9%	83.3%	77.8%	87.3%	94.4%	87.3%	88.9%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.8 Needs Met: Dental Needs	>=85%	87.0%	81.1%	75.9%	81.1%	83.0%	85.2%	83.0%	90.6%	76.4%	84.9%	83.3%	83.3%	77.8%	79.6%	66.0%	86.8%	81.5%	81.5%	83.3%	77.8%	89.1%	88.9%	89.1%	87.0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.9 Needs Met: Behavioral Health	>=85%	70.4%	73.6%	61.1%	50.9%	83.0%	85.2%	83.0%	90.6%	76.4%	84.9%	83.3%	83.3%	77.8%	79.6%	66.0%	86.8%	81.5%	81.5%	83.3%	77.8%	89.1%	88.9%	89.1%	87.0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.10 Needs Met: Child's Current Placement	>=85%	91.7%	77.4%	91.3%	84.0%	66.0%	75.9%	75.5%	71.7%	72.7%	71.7%	73.9%	71.7%	69.2%	53.7%	58.0%	63.3%	67.3%	67.9%	75.9%	63.0%	74.5%	88.9%	72.7%	67.9%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
4.11 Needs Met: Education	>=85%	86.3%	87.5%	86.8%	80.4%	88.0%	83.3%	91.7%	90.0%	87.5%	91.5%	88.2%	90.4%	86.5%	72.9%	80.9%	80.0%	87.5%	78.0%	87.2%	80.4%	84.3%	94.3%	89.1%	84.3%	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
5. Worker-Child Visitation (In-Home)	>=85%	89.4%	86.5%	87.5%	87.5%	87.5%	89.2%	89.4%	89.5%	86.0%	86.9%	86.1%	88.2%	88.7%	87.5%	89.2%	86.1%	83.3%	83.3%	83.9%	83.0%	85.3%	86.1%	88.6%	88.1%	84.1%	87.0%	85.8%	84.8%	85.9%	86.3%	89.7%	88.5%	
6. Carebed Standards	100%	90.8%	92.0%	91.0%	89.9%	91.5%	93.5%	88.1%	93.9%	97.3%	95.6%	94.2%	88.1%	89.7%	89.8%	100.0%	90.6%	87.3%	84.5%	83.6%	94.5%	97.6%	99.9%	99.9%	99.8%	99.8%	99.8%	100.0%	99.6%	99.8%	99.8%	100.0%	100.0%	100.0%
7. Repeat Maltreatment of In-Home Children	<=7%	5.8%	6.1%	6.1%	6.4%	6.6%	6.6%	6.3%	6.2%	6.8%	6.6%	6.6%	6.1%	5.4%	5.0%	5.7%	6.7%	6.3%	5.8%	6.3%	4.5%	4.9%	5.7%	4.4%	4.9%	4.3%	4.1%	4.3%	6.0%	6.1%	5.4%	5.7%		
8. Maltreatment of Children in Out-of-Home Care	<=2%	0.2%	0.2%	0.0%	0.2%	0.3%	0.0%	0.3%	0.3%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.3%	0.1%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.1%	0.1%	0.2%	0.1%		
9. Re-Entry into DCF Custody	<=7%	3.9%	4.2%	6.6%	8.3%	6.2%	5.6%	8.2%	6.7%	5.1%	6.4%	5.8%	3.7%	4.1%	5.8%	5.0%	3.8%	7.7%	8.0%	4.8%	4.9%	5.5%	8.6%	7.4%	7.0%	9.1%	6.8%	5.8%	6.4%	7.2%	4.4%	7.7%		
10. Worker-Child Visitation (Out-of-Home)	>=85% (w) >=100% (a)	95.9%	95.9%	95.7%	95.8%	95.6%	96.7%	97.0%	96.7%	95.4%	96.3%	95.6%	96.7%	96.1%	94.9%	96.5%	94.9%	92.6%	93.4%	94.3%	94.9%	95.4%	94.6%	95.8%	95.9%	94.2%	93.6%	92.7%	95.1%	92.3%	95.0%	95.1%	95.8%	
11. Placement Within Licensed Capacity	>=85%	91.7%	91.1%	92.2%	92.0%	94.0%	94.0%	93.6%	93.8%	94.3%	92.9%	92.9%	93.5%	94.3%	95.5%	94.9%	95.4%	96.3%	95.3%	95.4%	96.0%	95.7%	96.2%	96.4%	97.1%	96.7%	95.8%	95.3%	97.7%	96.1%	95.2%	95.6%	96.8%	
12. Multiple Placements	>=85%	94.9%	95.3%	95.0%	95.1%	95.2%	94.4%	95.2%	95.6%	96.3%	96.2%	96.5%	96.7%	96.7%	96.5%	96.8%	96.7%	96.4%	96.5%	96.7%	96.8%	97.1%	96.6%	96.7%	96.4%	96.5%	96.4%	96.6%	96.6%	96.4%	96.4%	96.1%	96.1%	
13. Skipped Placement	>=85%	87.7%	87.7%	88.7%	86.7%	86.5%	86.9%	87.3%	87.3%	88.8%	90.1%	89.8%	91.7%	92.1%	92.0%	91.4%	90.9%	90.6%	88.7%	89.3%	90.6%	89.9%	92.5%	88.0%	89.5%	87.5%	87.5%	89.2%	88.5%	91.8%	89.3%	85.8%	86.7%	
14. Reduction in the Number of Children Placed in Residential Care	<=1%	2.3%	2.4%	2.2%	2.2%	2.3%	2.2%	2.2%	2.1%	2.1%	2.3%	2.2%	2.5%	2.6%	2.8%	2.7%	2.8%	2.7%	2.7%	2.7%	3.4%	4.0%	4.2%	4.3%	4.9%	5.1%	5.8%	6.3%	6.9%	7.5%	8.5%	8.8%	10.0%	

*Automated reporting for Outcome Measures 1 (Commencement of Investigation), 2 (Completion of Investigation), and 17 (Worker-Child Visitation In-Home) are subject to Court Monitor review for precertification. Preliminary reviews identified issues with data entry and accuracy in reporting for these measures as well as the quantity and quality of the Department's performance.

Juan F. Pre-Certification Review-Status Update (April 1, 2018 – September 30, 2018)

The Department is currently operating under the 2017 Revised Exit Plan, in which the Court Monitor is required to conduct what the parties and the Court Monitor refer to as a “Certification” reviews 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 Juan F. 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 Juan F. 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.

Of the ten remaining Outcome Measures there are five that have not been pre-certified. The status of all 2017 Revised Exit Plan Outcome Measures is found in the table that follows.

2017 Measure	2006 Outcome Measure	Statement of Outcome	Status
OM1	OM1: Commencement of Investigations	At least 90% of all reports ³ must be commenced same calendar day, 24 hours or 72 hours depending on the response time designation.	Pre-Certified November 2018
OM2	OM2: Completion of Investigation	At least 85% of all reports of alleged child maltreatment accepted by the DCF Careline shall have their investigations completed within 45 calendar days of acceptance by the Careline.	Requires assertion of compliance and Pre-Certification
OM3	OM3: Case Plans	<p>Except probate, interstate, and subsidy only cases, appropriate case plans shall be developed as set forth in the “DCF Court Monitor’s Protocol for Outcome Measures 3 and 4” and the accompanying “Directional Guide for Outcome Measures 3 and 4 Reviews” attached collectively as Appendix B hereto. The enforceable domains of this Outcome Measure shall not include the ‘overall score’ domain. The domains in Appendix B for which compliance at 90% or better has been met for a quarter and then sustained for an additional quarter as of the date of this 2017 Revised Exit Plan, shall be considered to have achieved Pre-Certification. Currently, three of the ten domains: Case Plan Approval, Family and Child Language Needs Accommodation, and Identifying Information have achieved two quarters of compliance.</p> <p>For each of domain, once compliance at 90% or better has been met for a quarter and then sustained for an additional quarter, that domain shall also be considered to have achieved Pre-Certification.</p> <p>Once all of the domains achieve Pre-Certification, then Outcome Measure 3 shall be considered to have achieved Pre-Certification and subject to the process in Paragraphs 10 and 11 hereof as to whether a final review is required in connection with a request to terminate jurisdiction over this action</p>	Requires assertion of compliance and Pre-Certification. See report to follow for results on individual domains to date.

³ Except Probate and Voluntary cases.

2017 Measure	2006 Outcome Measure	Statement of Outcome	Status
OM4	OM15: Needs Met	<p>Families and children shall have their medical, dental, mental health, and other service needs met as set forth in the “DCF Court Monitor’s Protocol for Outcome Measures 3 and 4” and the accompanying “Directional Guide for Outcome Measures 3 and 4 Reviews”, attached collectively as Appendix B hereto. The enforceable domains of this Outcome Measure shall not include the “all needs met” domain. The domains in Appendix B for which compliance at 85% or better has been met for a quarter and then sustained for an additional quarter as of the date of this 2017 Revised Exit Plan, shall be considered to have achieved Pre-Certification.</p> <p>Those domains include:</p> <ul style="list-style-type: none"> • Risk: Child-in-Placement • Securing the Permanent Placement • DCF Case Management-Legal action to achieve the permanency goal in the prior six months • DCF Case Management-Recruitment for placement providers to achieve permanency goal during the prior six months • Child’s current placement • Education <p>For each of the remaining domains, once compliance at 85% or better has been met for a quarter and then sustained for an additional quarter, that domain shall also be considered to have achieved Pre-Certification. The remaining domains include:</p> <ul style="list-style-type: none"> • Risk: In-Home • DCF Case Management - Contracting or providing services to achieve permanency during the prior six months; • Medical needs; • Dental needs; • Mental health, behavioral and substance abuse services. <p>Once all of the domains achieve Pre-Certification, then Outcome Measure 4 shall be considered to have achieved Pre-Certification and subject to the process in Paragraphs 10 and 11 hereof as to whether a final review is required in connection with a request to terminate jurisdiction over this action.</p>	Requires assertion of compliance and Pre-Certification. See report to follow for results on individual domains to date.

2017 Measure	2006 Outcome Measure	Statement of Outcome	Status
OM5	OM 17: Worker-Child Visitation (In-Home)	DCF shall visit at least 85% of all in-home family cases at least twice a month, except for probate, interstate or voluntary cases. Definitions and Clarifications: 1. 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.	Reviewed, but not Pre-Certified January 2012
OM6	OM18: Caseload Standards	The caseload of no DCF social worker shall exceed the following caseload standards, with exceptions for emergency reasons on caseloads, lasting no more than 30 days. Additionally, the average caseload of all caseload carrying DCF social workers in each of the following categories shall not exceed 0.75 (<i>i.e.</i> , 75% utilization) of these maximum caseload standards: <ul style="list-style-type: none"> A. Investigators shall have no more than 17 investigative cases at any time. B. In-home treatment workers shall have no more than 15 cases at any time. C. Out-of-home treatment workers shall have no more than 20 individual children assigned to them at any time. This includes voluntary placements. D. Adoption and adolescent specialty workers shall have no more than 20 cases at any time. E. Probate workers shall have no more than 35 cases at any time. When the probate or interstate worker is also assigned to provide services to the family, those families shall be counted as in-home treatment cases with a ratio of 1:20 cases. F. Social workers with in-home voluntary and interstate compact cases shall have no more than 49 cases at any time. G. A worker with a mixed caseload shall not exceed the maximum weighted caseload derived from the caseload standards in A through F above. 	Requires assertion of compliance and Pre-Certification
OM7 (to be maintained)	OM 5: Repeat Maltreatment of Children	No more than 7% of the children who are victims of substantiated maltreatment during any six-month 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.	Pre-Certified* July 2014

* Pre-Certification granted subject to verification of correction to ROM system reporting.

2017 Measure	2006 Outcome Measure	Statement of Outcome	Status
OM8 (to be maintained)	OM6: Maltreatment of Children in Out-of-Home Care	No more than 2% of the children in out of home care on or after January 1, 2004 shall be the victims of substantiated maltreatment by substitute caregivers while in out of home care.	Pre-Certified October 2014
OM9	OM 11: Re-Entry into DCF Care	Of the children who enter DCF custody, seven (7) percent or fewer shall have re-entered care within 12 months of the prior out-of-home placement.	Pre-Certified January 2016
OM10	OM 16: Worker/ Child Visitation (Child in Placement)	DCF shall visit at least 85% of all out-of-home children at least once a month, except for probate, interstate, or voluntary cases. All children must be seen by their DCF Social Worker at least quarterly.	Pre-Certified April 2012

Semi-Annual Status Report of Outcome Measure 3 and Outcome Measure 4 for the Second Quarter 2018 and Third Quarter 2018

Outcome Measure 3

This status report reflects the Department’s progress in achieving the 2017 Revised Exit Plan Outcome Measure 3 and Outcome Measure 4 domain requirements. Outcome Measure 3 requires that “Except probate, interstate and subsidy only cases, appropriate case plans shall be developed as set forth in the “DCF Court Monitor’s Protocol for Outcome Measures 3 and 4” and the accompanying “Directional Guide for Outcome Measure 3 and 4 Reviews”. The enforceable domains of Outcome Measure 3 shall not include the ‘overall score’ domain.

The domains for which compliance at 90% or better has been met for a quarter and then sustained for an additional quarter as of the date of this 2017 Revised Exit Plan are to have consideration for Pre-Certification. At the time of agreement, there were no Outcome Measure 3 domains qualifying for Statewide pre-certification. During this reporting period, Identifying Information was met and sustained above the required benchmark. We also note that during this period of review, the Department achieved a rate of approval of case plans, and accommodation of families’ language needs above the 90% benchmark. It is also noteworthy that findings for Goals/Objectives, Progress and Action Steps reflect a noticeable improvement in the Third Quarter comparative with previous quarter’s results.

Quarterly Statewide Summary of OM3 Domains 2nd Quarter 2018 - 3rd Quarter 2018										
	Has the Case plan been approved by the SWS?	Was the family or child's language needs accommodated?	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
Total Statewide – 3rd Quarter 2018 OM3	98.1%	96.3%	83.3%	92.6%	55.6%	57.4%	79.6%	80.8%	70.3%	83.3%
Total Statewide – 2nd Quarter 2018 OM3	94.3%	94.3%	81.1%	92.5%	54.7%	50.9%	60.4%	69.2%	62.3%	84.9%
Total Statewide - 1st Quarter 2018 OM3	84.2%	81.5%	81.5%	85.2%	51.9%	51.9%	53.7%	66.7%	53.7%	74.1%
Total Statewide - 4th Quarter 2017 OM3	86.8%	81.1%	75.5%	81.1%	50.9%	32.1%	58.5%	62.3%	52.8%	73.6%
Total Statewide - 3rd Quarter 2017 OM3	96.2%	96.2%	88.6%	92.4%	66.0%	47.2%	62.3%	64.7%	56.6%	84.9%
Total Statewide - 2nd Quarter 2017 OM3	88.7%	81.5%	81.1%	79.6%	55.6%	42.6%	66.7%	67.9%	66.7%	70.4%

In the Second Quarter 2018, a total of 50 of the 53 case plans sampled (94.3%) had case planning efforts that were clearly accommodating of the family’s primary language. In the cases that a reviewer identified as potentially problematic, three (3) or (5.7%) of the cases were undetermined as the case plan was not approved at the time of the review and therefore it was unclear if translation or interpreter services were utilized in case planning for a family with a language other than English identified as primary/preferred. In one case there was no case plan initialized.

During Third Quarter 2018, 96.3% of cases reviewed documented appropriate language accommodations. Two (2) case plans were not approved timely, and one (1) was not approved prior to review completion (no case plan). We note the improvements in timely case plan approvals during this semi-annual cycle and continue to stress the need for case plans that are developed and shared timely with families in their preferred language as the process has always intended.

In looking at a more defined view of the data and taking a regional perspective, it is noted that there are some regions that had success with several domains achieving the 90% benchmark. However no region achieved all domains at the 90% requirement in either period.

DCF Court Monitor Review of Outcome Measure 3: Appropriate Case Planning – Regional Summary 2nd Quarter 2018										
	Has the Case plan been approved by the SWS?	Was the family or child's language needs accommodated?	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
Region I - 2nd Quarter 2018	100.0%	100.0%	100.0%	100.0%	50.0%	66.7%	50.0%	100.0%	66.7%	100.0%
Region II - 2nd Quarter 2018	100.0%	100.0%	75.0%	87.5%	37.5%	37.5%	62.5%	62.5%	50.0%	87.5%
Region III - 2nd Quarter 2018	100.0%	100.0%	100.0%	100.0%	50.0%	70.0%	90.0%	80.0%	90.0%	90.0%
Region IV - 2nd Quarter 2018	90.9%	90.9%	81.8%	90.9%	72.7%	45.5%	45.5%	72.7%	45.5%	90.9%
Region V - 2nd Quarter 2018	90.9%	90.9%	54.5%	90.9%	54.6%	36.4%	54.5%	45.5%	63.6%	72.7%
Region VI - 2nd Quarter 2018	85.7%	85.7%	85.7%	85.7%	42.9%	57.1%	57.1%	71.4%	57.1%	71.4%
Total Statewide - 2nd Quarter 2018 OM3 Results	94.3%	94.3%	81.1%	92.5%	54.7%	50.9%	60.4%	69.2%	62.3%	84.9%

DCF Court Monitor Review of Outcome Measure 3: Appropriate Case Planning – 3rd Quarter 2018											
Region	Has the Case plan been approved by the SWS?	Was this case plan approved within 25 days from the ACR or family conference?	Was the family or child's language needs accommodated?	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
Region I – 3rd Quarter 2018	100.0%	83.3%	100.0%	100.0%	100.0%	33.3%	66.7%	83.3%	66.7%	66.7%	100.0%
Region II - 3rd Quarter 2018	100.0%	100.0%	100.0%	75.0%	87.5%	62.5%	50.0%	87.5%	87.5%	100.0%	62.5%
Region III - 3rd Quarter 2018	100.0%	100.0%	100.0%	80.0%	100.0%	70.0%	60.0%	80.0%	77.8%	90.0%	100.0%
Region IV - 3rd Quarter 2018	90.9%	90.9%	100.0%	81.8%	81.8%	36.4%	45.5%	72.7%	81.8%	36.4%	81.8%
Region V – 3rd Quarter 2018	100.0%	91.7%	91.7%	83.3%	91.7%	75.0%	58.3%	75.0%	72.7%	58.3%	72.7%
Region VI - 3rd Quarter 2018	100.0%	100.0%	100.0%	85.7%	100.0%	42.9%	71.4%	85.7%	100.0%	85.7%	100.0%
Total Statewide - 3rd Quarter 2018 OM3 Results	98.1%	94.4%	96.3%	83.3%	92.6%	55.6%	57.4%	79.6%	80.8%	70.3%	83.3%

A full summary of the both the Second and Third Quarter cases related to the Outcome Measure 3 domains are provided in the next two pages for a more in-depth review by Area Office and Region:

Juan F. v. Malloy Exit Plan Status Report
February 2019

Case Summaries for Second Quarter 2018 OM3 Domain Scores Identified by Area Office, Region, Statewide															
Region	What is the social worker's area office assignment?	What is the type of case assignment noted in LNK?	Has the treatment plan been approved by the SWS?	Was this case plan approved within 25 days from the ACR or family conference schedule date?	Was the family or child's language needs accommodated?	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	
Region I	Bridgeport	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Bridgeport	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Bridgeport	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Poor	Too early to note progress	Poor	Very Good	Not an Appropriate Case Plan	
	Bridgeport	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Bridgeport 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	50.0%	50.0%	100.0%	75.0%	100.0%	50.0%	
	Norwalk	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Norwalk	CPS CIP Case	yes	Yes	yes	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
Norwalk 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	50.0%	100.0%	100.0%	100.0%	50.0%		
Region 1 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	66.7%	50.0%	100.0%	100.0%	66.7%	100.0%	50.0%	
Region II	Milford	CPS In-Home Family Case	yes	Yes	UTD	Marginal	Marginal	Marginal	Poor	Marginal	Poor	Poor	Very Good	Not an Appropriate Case Plan	
	Milford	CPS CIP Case	yes	Yes	yes	Optimal	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Milford	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal	Very Good	Appropriate Case Plan	
	Milford	CPS CIP Case	yes	Yes	yes	Marginal	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Marginal	Not an Appropriate Case Plan	
	Milford 2Q 2018		100.0%	100.0%	75.0%	50.0%	75.0%	50.0%	25.0%	50.0%	50.0%	25.0%	75.0%	50.0%	
	New Haven	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Very Good	Very Good	Not an Appropriate Case Plan	
	New Haven	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	New Haven	CPS CIP Case	yes	Yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	New Haven	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Optimal	Marginal	Optimal	Optimal	Not an Appropriate Case Plan	
	New Haven 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	75.0%	75.0%	75.0%	75.0%	100.0%	50.0%	
Region II 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	75.0%	75.0%	75.0%	75.0%	100.0%	50.0%		
Region III	Middletown	CPS CIP Case	yes	Yes	yes	Optimal	Very Good	Optimal	Optimal	Very Good	Optimal	Marginal	Optimal	Appropriate Case Plan	
	Middletown	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Middletown 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	100.0%	
	Norwich	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Norwich	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Optimal	Marginal	Very Good	Very Good	Not an Appropriate Case Plan	
	Norwich	CPS CIP Case	yes	Yes	yes	Optimal	Very Good	Optimal	Very Good	Optimal	Very Good	Very Good	Optimal	Appropriate Case Plan	
	Norwich	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Marginal	Optimal	Not an Appropriate Case Plan	
	Norwich	CPS CIP Case	yes	Yes	yes	Very Good	Optimal	Marginal	Very Good	Optimal	Very Good	Optimal	Optimal	Appropriate Case Plan	
	Norwich 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	20.0%	60.0%	100.0%	80.0%	100.0%	80.0%	100.0%	
	Willimantic	CPS In-Home Family Case	yes	Yes	yes	Optimal	Optimal	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Willimantic	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Marginal	Marginal	Very Good	Very Good	Not an Appropriate Case Plan	
Willimantic	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Optimal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan		
Willimantic 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	66.7%	66.7%	66.7%	66.7%	100.0%	33.3%		
Region III 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	70.0%	90.0%	80.0%	90.0%	90.0%	60.0%		
Region IV	Hartford	CPS CIP Case	yes	Yes	yes	Marginal	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS In-Home Family Case	yes	Yes	yes	Optimal	Very Good	Very Good	Marginal	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Appropriate Case Plan	
	Hartford	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Hartford	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Hartford 2Q 2018		100.0%	100.0%	100.0%	85.7%	100.0%	85.7%	42.9%	57.1%	71.4%	28.6%	100.0%	28.6%	
	Manchester	Voluntary Services CIP Case	No	No	yes	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Not an Appropriate Case Plan
	Manchester	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Manchester	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Optimal	Very Good	Very Good	Not an Appropriate Case Plan	
Manchester	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan		
Manchester 2Q 2018		75.0%	75.0%	100.0%	75.0%	75.0%	50.0%	50.0%	25.0%	75.0%	75.0%	75.0%	25.0%		
Region IV 2Q 2018		90.9%	90.9%	100.0%	81.8%	90.9%	72.7%	45.5%	45.5%	72.7%	45.5%	90.9%	27.3%		
Region V	Danbury	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Appropriate Case Plan	
	Danbury	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
	Danbury 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	50.0%	100.0%	50.0%	
	Torrington	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal	Not an Appropriate Case Plan	
	Torrington	CPS In-Home Family Case	yes	Yes	yes	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Torrington 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	100.0%	50.0%	50.0%	
	Waterbury	CPS CIP Case	yes	Yes	yes	Marginal	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Waterbury	CPS CIP Case	yes	Yes	yes	Marginal	Very Good	Marginal	Marginal	Marginal	Marginal	Very Good	Marginal	Not an Appropriate Case Plan	
	Waterbury	CPS CIP Case	yes	Yes	yes	Marginal	Very Good	Marginal	Marginal	Very Good	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
	Waterbury	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
	Waterbury	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Waterbury	CPS In-Home Family Case	No	No	UTD	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Not an Appropriate Case Plan	
	Waterbury	CPS In-Home Family Case	yes	Yes	yes	Marginal	Very Good	Marginal	Marginal	Very Good	Marginal	Very Good	Very Good	Not an Appropriate Case Plan	
Waterbury 2Q 2018		85.7%	85.7%	85.7%	28.6%	85.7%	28.6%	0.0%	42.9%	28.9%	57.1%	71.4%	0.0%		
Region V 2Q 2018		90.9%	90.9%	90.9%	54.5%	90.9%	54.5%	36.4%	54.5%	45.5%	63.6%	72.7%	18.2%		
Region VI	Meriden	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Optimal	Appropriate Case Plan	
	Meriden	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Meriden 2Q 2018		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	50.0%	100.0%	100.0%	100.0%	100.0%	
	New Britain	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	New Britain	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Appropriate Case Plan	
	New Britain	CPS In-Home Family Case	No	No	UTD	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Not an Appropriate Case Plan	
	New Britain	CPS CIP Case	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
New Britain	CPS In-Home Family Case	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan		
New Britain 2Q 2018		80.0%	80.0%	80.0%	80.0%	80.0%	40.0%	40.0%	60.0%	60.0%	40.0%	60.0%	20.0%		
Region VI 2Q 2018		85.7%	85.7%	85.7%	85.7%	85.7%	42.9%	57.1%	57.1%	71.4%	57.1%	71.4%	42.9%		
Statewide Total 2Q 2018		94.3%	94.3%	94.3%	81.1%	92.5%	54.7%	50.9%	60.4%	69.2%	62.3%	84.9%	39.6%		

Case Summaries for Third Quarter 2018 OM3 Domain Scores Identified by Area Office, Region, Statewide															
Region	What is the social worker's area office assignment?	What is the type of case assignment noted in LNK?	Has the treatment plan been approved by the SWS?	Was this case plan approved within 25 days from the ACR Schedule Date?	Was the family or child's language needs accommodated?	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	
Region I	Bridgeport	SPM CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan	
	Bridgeport	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
	Bridgeport	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
	Bridgeport	CPS CIP	yes	No	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan	
	Bridgeport Area Office 3Q 2018			100.0%	75.0%	100.0%	100.0%	100.0%	50.0%	50.0%	75.0%	50.0%	50.0%	100.0%	50.0%
	Norwalk	CPS CIP	yes	Yes	yes	Optimal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Norwalk	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Norwalk Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Region I 3Q 2018			100.0%	83.3%	100.0%	100.0%	100.0%	33.3%	66.7%	83.3%	66.7%	100.0%	100.0%	66.7%
	Region II	Milford	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan
Milford		CPS In-Home Family	yes	Yes	yes	Marginal	Optimal	Marginal	Marginal	Very Good	Very Good	Optimal	Marginal	Not an Appropriate Case Plan	
Milford		CPS CIP	yes	Yes	yes	Marginal	Marginal	Marginal	Marginal	Very Good	Very Good	Very Good	Marginal	Not an Appropriate Case Plan	
Milford		CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan	
Milford Area Office 3Q 2018			100.0%	100.0%	100.0%	50.0%	75.0%	50.0%	25.0%	75.0%	100.0%	100.0%	50.0%	25.0%	
New Haven		CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
New Haven		CPS CIP	yes	Yes	yes	Very Good	Optimal	Marginal	Very Good	Very Good	Marginal	Very Good	Marginal	Not an Appropriate Case Plan	
New Haven		CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
New Haven		SPM CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
New Haven Area Office 3Q 2019			100.0%	100.0%	100.0%	100.0%	100.0%	75.0%	75.0%	100.0%	75.0%	100.0%	75.0%	50.0%	
Region II 3Q 2018			100.0%	100.0%	100.0%	75.0%	87.5%	62.5%	50.0%	87.5%	87.5%	100.0%	62.5%	37.5%	
Region III	Middletown	CPS CIP	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Middletown	CPS In-Home Family	yes	Yes	yes	Marginal	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good	Not an Appropriate Case Plan	
	Middletown Area Office 3Q 2018			100.0%	100.0%	100.0%	50.0%	100.0%	50.0%	0.0%	50.0%	50.0%	50.0%	100.0%	0.0%
	Norwich	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Norwich	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good	Appropriate Case Plan	
	Norwich	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Norwich	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Norwich	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Too early to note progress	Very Good	Appropriate Case Plan	
	Norwich Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	60.0%	80.0%	75.0%	100.0%	100.0%	80.0%
	Willimantic	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
Willimantic	CPS CIP	yes	Yes	yes	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Optimal	Not an Appropriate Case Plan		
Willimantic	CPS CIP	yes	Yes	yes	Optimal	Very Good	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Appropriate Case Plan		
Willimantic Area Office 3Q 2018			100.0%	100.0%	100.0%	66.7%	100.0%	66.7%	100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	
Region III 3Q 2019			100.0%	100.0%	100.0%	80.0%	100.0%	70.0%	60.0%	80.0%	77.8%	90.0%	100.0%	60.0%	
Region IV	Hartford	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Marginal	Not an Appropriate Case Plan	
	Hartford	CPS CIP	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS CIP	yes	Yes	yes	Very Good	Optimal	Very Good	Very Good	Optimal	Very Good	Optimal	Very Good	Appropriate Case Plan	
	Hartford	CPS CIP	yes	Yes	yes	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS In-Home Family	yes	Yes	yes	Optimal	Optimal	Very Good	Optimal	Optimal	Optimal	Very Good	Optimal	Appropriate Case Plan	
	Hartford	CPS In-Home Family	no	No	yes	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Not an Appropriate Case Plan	
	Hartford Area Office 3Q 2018			85.7%	85.7%	100.0%	71.4%	85.7%	28.6%	57.1%	71.4%	42.9%	71.4%	28.6%	
	Manchester	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Manchester	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Optimal	Very Good	Very Good	Appropriate Case Plan	
Manchester	SPM CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan		
Manchester	CPS In-Home Family	yes	Yes	yes	Very Good	Marginal	Marginal	Marginal	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan		
Manchester Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	75.0%	50.0%	25.0%	75.0%	100.0%	25.0%	100.0%	25.0%	
Region IV 3Q 2018			90.9%	90.9%	100.0%	81.8%	81.8%	36.4%	45.5%	72.7%	81.8%	36.4%	81.8%	27.3%	
Region V	Danbury	CPS CIP	yes	Yes	yes	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Marginal	Very Good	Appropriate Case Plan	
	Danbury	CPS In-Home Family	yes	Yes	UTD	Marginal	Very Good	Very Good	Marginal	Marginal	Too early to note progress	Poor	Marginal	Not an Appropriate Case Plan	
	Danbury Area Office 3Q 2018			100.0%	100.0%	50.0%	50.0%	100.0%	100.0%	50.0%	50.0%	100.0%	0.0%	50.0%	50.0%
	Torrington	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Torrington	SPM CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Marginal	Not an Appropriate Case Plan	
	Torrington Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	100.0%	100.0%	50.0%	50.0%
	Waterbury	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Waterbury	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Waterbury	CPS CIP	yes	No	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Marginal	Not an Appropriate Case Plan	
	Waterbury	CPS In-Home Family	yes	Yes	UTD	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
Waterbury	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan		
Waterbury	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan		
Waterbury	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Marginal	Marginal	Not an Appropriate Case Plan		
Waterbury	CPS In-Home Family	yes	Yes	yes	Marginal	Marginal	Marginal	Marginal	Very Good	Marginal	Very Good	Very Good	Not an Appropriate Case Plan		
Waterbury Area Office 3Q 2018			100.0%	87.5%	87.5%	87.5%	87.5%	62.5%	62.5%	75.0%	62.5%	62.5%	75.0%	37.5%	
Region V 3Q 2018			100.0%	91.7%	91.7%	83.3%	91.7%	75.0%	58.3%	75.0%	72.7%	58.3%	72.7%	41.7%	
Region VI	Meriden	CPS CIP	yes	Yes	yes	Optimal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Optimal	Not an Appropriate Case Plan	
	Meriden	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Meriden Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	50.0%	100.0%	100.0%	100.0%	0.0%	
	New Britain	CPS CIP	yes	Yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Appropriate Case Plan	
	New Britain	CPS In-Home Family	yes	Yes	yes	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	New Britain	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	New Britain	CPS In-Home Family	yes	Yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	New Britain	CPS CIP	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	New Britain Area Office 3Q 2018			100.0%	100.0%	100.0%	80.0%	100.0%	60.0%	80.0%	80.0%	100.0%	80.0%	100.0%	60.0%
	Region VI 3Q 2018			100.0%	100.0%	100.0%	85.7%	100.0%	42.9%	71.4%	85.7%	100.0%	85.7%	100.0%	42.9%
OM3 Statewide Total 3Q 2018			98.1%	94.4%	96.3%	83.3%	92.6%	55.6%	57.4%	79.6%	80.8%	70.3%	83.3%	44.4%	

Outcome Measure 4

The 2017 Revised Exit Plan requirement for Outcome Measure 4 – Needs Met is that:

“ Families and children shall have their medical, dental, mental health and other service needs met as set forth in the “DCF Court Monitor’s Protocol for Outcome Measures 3 and 4” and the accompanying “Directional Guide for Outcome Measures 3 and 4 Reviews”. The enforceable domains of this Outcome Measure shall not include the “All Needs Met” domain. The domains for which compliance at 85% or better has been met for a quarter and then sustained for an additional quarter as of the date of this 2017 Revised Exit Plan, shall be considered to have achieved Pre-Certification. These domains include:

- *Risk: Child in Placement*
- *Securing the Permanent Placement*
- *DCF Case Management – Legal Action to Achieve the Permanency Goal in the Prior Six Months*
- *DCF Case Management – Recruitment for Placement Providers to Achieve Permanency Goal during the Prior Six Months*
- *Child’s Current Placement*
- *Education*

For Each of the remaining Domains, once compliance at 85% or better has been met for a quarter and then sustained for an additional quarter that domain shall also be considered to have achieved Pre-Certification. Once all of the domains achieve Pre-Certification, then Outcome Measure 4 shall be considered to have achieved Pre-Certification and subject to the process in Paragraphs 10 and 11 hereof as to whether a final review is required in connection with a request to terminate jurisdiction over this action.”

Based upon the data from the Second and Third Quarters of 2018 there are no additional domains that achieved two consecutive quarter at the 85% requirement.

As you will recall from the prior semi-annual reporting periods the Department currently had met and sustained for an additional quarter the following domains:

- Risk: Child in Placement (July 2018 Status Report)
- Securing the Permanent Placement (July 2018 Status Report)
- DCF Case Management – Legal Action to Achieve the Permanency Goal in the Prior Six Months (July 2018 Status Report)
- DCF Case Management – Recruitment for Placement Providers to Achieve Permanency Goal during the Prior Six Months (July 2018 Status Report)
- Child’s Current Placement (January 2018 Status Report)
- Education (January 2018 Status Report)
- Medical (January 2018 Status Report)

In this reporting cycle, the Court Monitor notes that as in the past, the prior trend has not been continuously maintained for several of the previously pre-certified domains: Medical and Child’s Current Placement did not maintain the standard across the current period under review. However, given the sample size and percentages noted it is too soon to determine if there is reason to determine that sustained effort has not been adequate and whether full review would be required at the point of a full compliance assertion by the State. The Court Monitor will continue to review all 11 Outcome Measure 4 domains in coming cycles and make that assessment in future reviews.

Quarter	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
Statewide 3 rd Quarter 2018 OM4 Results	70.0%	96.2%	100.0%	87.0%	100.0%	51.9%	83.3%	87.0%	70.4%	91.7%	86.3%
Statewide 2 nd Quarter 2018 OM4 Results	73.9%	96.8%	100.0%	90.6%	90.3%	50.9%	90.6%	81.1%	73.6%	77.4%	87.5%
Statewide - 1st Quarter 2018 OM4 Results	81.3%	100.0%	95.8%	92.5%	95.7%	51.9%	85.2%	75.9%	61.1%	91.3%	86.8%
Statewide - 4th Quarter 2017 OM4 Results	82.1%	96.0%	100.0%	94.3%	96.0%	49.1%	79.3%	81.1%	50.9%	84.0%	80.4%
Statewide - 3rd Quarter 2017 OM4 Results	81.8%	100.0%	93.5%	90.6%	93.8%	52.8%	86.8%	83.0%	64.2%	87.1%	88.0%
Statewide - 2nd Quarter 2017 OM4 Results	78.3%	100.0%	95.8%	98.1%	100.0%	57.4%	94.4%	85.2%	75.9%	93.9%	83.3%

A full summary of the Second Quarter 2018 and for Third Quarter 2018 Domain summaries by region and area office for Outcome Measure 4 are found respectively on the following two pages.

Case Summaries for Third Quarter 2018 OM3 Domain Scores Identified by Area Office, Region, Statewide															
Region	What is the social worker's area office assignment?	What is the type of case assignment noted in LINK?	Has the treatment plan been approved by the SWS?	Was this case plan approved within 25 days from the ACR Schedule Date?	Was the family or child's language needs accommodated?	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	
Region I	Bridgeport	SPM CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan	
	Bridgeport	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
	Bridgeport	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Marginal	Marginal	Very Good	Not an Appropriate Case Plan	
	Bridgeport	CPS CIP	yes	No	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan	
	Bridgeport Area Office 3Q 2018			100.0%	75.0%	100.0%	100.0%	100.0%	50.0%	50.0%	75.0%	50.0%	50.0%	100.0%	50.0%
	Norwalk	CPS CIP	yes	Yes	yes	Optimal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Norwalk	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
Norwalk Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
Region I 3Q 2018			100.0%	83.3%	100.0%	100.0%	100.0%	33.3%	66.7%	83.3%	66.7%	66.7%	100.0%	66.7%	
Region II	Milford	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Milford	CPS In-Home Family	yes	Yes	yes	Marginal	Optimal	Marginal	Marginal	Very Good	Very Good	Optimal	Marginal	Not an Appropriate Case Plan	
	Milford	CPS CIP	yes	Yes	yes	Marginal	Marginal	Marginal	Marginal	Very Good	Very Good	Very Good	Marginal	Not an Appropriate Case Plan	
	Milford	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Appropriate Case Plan	
	Milford Area Office 3Q 2018			100.0%	100.0%	100.0%	50.0%	75.0%	50.0%	25.0%	75.0%	100.0%	100.0%	50.0%	25.0%
	New Haven	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	New Haven	CPS CIP	yes	Yes	yes	Very Good	Optimal	Marginal	Very Good	Very Good	Marginal	Very Good	Marginal	Not an Appropriate Case Plan	
	New Haven	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	New Haven	SPM CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	New Haven Area Office 3Q 2019			100.0%	100.0%	100.0%	100.0%	100.0%	75.0%	75.0%	100.0%	75.0%	100.0%	75.0%	50.0%
Region II 3Q 2018			100.0%	100.0%	100.0%	75.0%	87.5%	62.5%	50.0%	87.5%	87.5%	100.0%	62.5%	37.5%	
Region III	Middletown	CPS CIP	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Middletown	CPS In-Home Family	yes	Yes	yes	Marginal	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Middletown Area Office 3Q 2018			100.0%	100.0%	100.0%	50.0%	100.0%	50.0%	0.0%	50.0%	50.0%	50.0%	100.0%	0.0%
	Norwich	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Norwich	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good	Appropriate Case Plan	
	Norwich	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Norwich	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Norwich	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Too early to note progress	Very Good	Very Good	Appropriate Case Plan	
	Norwich Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	60.0%	80.0%	75.0%	100.0%	100.0%	80.0%
	Willimantic	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
Willimantic	CPS CIP	yes	Yes	yes	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Optimal	Not an Appropriate Case Plan		
Willimantic	CPS CIP	yes	Yes	yes	Optimal	Very Good	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Appropriate Case Plan		
Willimantic Area Office 3Q 2018			100.0%	100.0%	100.0%	66.7%	100.0%	66.7%	100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	
Region III 3Q 2019			100.0%	100.0%	100.0%	80.0%	100.0%	70.0%	60.0%	80.0%	77.8%	90.0%	100.0%	60.0%	
Region IV	Hartford	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Marginal	Not an Appropriate Case Plan	
	Hartford	CPS CIP	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS CIP	yes	Yes	yes	Very Good	Optimal	Very Good	Very Good	Optimal	Very Good	Optimal	Very Good	Appropriate Case Plan	
	Hartford	CPS CIP	yes	Yes	yes	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Hartford	CPS In-Home Family	yes	Yes	yes	Optimal	Optimal	Very Good	Optimal	Optimal	Optimal	Very Good	Optimal	Appropriate Case Plan	
	Hartford	CPS In-Home Family	no	No	yes	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Not an Appropriate Case Plan	
	Hartford Area Office 3Q 2018			85.7%	85.7%	100.0%	71.4%	85.7%	28.6%	57.1%	71.4%	71.4%	42.9%	71.4%	28.6%
	Manchester	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Manchester	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Optimal	Very Good	Very Good	Appropriate Case Plan	
Manchester	SPM CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal	Very Good	Not an Appropriate Case Plan		
Manchester	CPS In-Home Family	yes	Yes	yes	Very Good	Marginal	Marginal	Marginal	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan		
Manchester Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	75.0%	50.0%	25.0%	75.0%	100.0%	25.0%	100.0%	25.0%	
Region IV 3Q 2018			90.9%	90.9%	100.0%	81.8%	81.8%	36.4%	45.5%	72.7%	81.8%	36.4%	81.8%	27.3%	
Region V	Danbury	CPS CIP	yes	Yes	yes	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Marginal	Very Good	Appropriate Case Plan	
	Danbury	CPS In-Home Family	yes	Yes	yes	Marginal	Very Good	Very Good	Marginal	Marginal	Too early to note progress	Poor	Marginal	Not an Appropriate Case Plan	
	Danbury Area Office 3Q 2018			100.0%	100.0%	50.0%	50.0%	100.0%	100.0%	50.0%	50.0%	100.0%	0.0%	50.0%	50.0%
	Torrington	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Torrington	SPM CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Marginal	Not an Appropriate Case Plan	
	Torrington Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	100.0%	100.0%	50.0%	50.0%
	Waterbury	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan	
	Waterbury	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	Waterbury	CPS CIP	yes	No	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Marginal	Marginal	Not an Appropriate Case Plan	
	Waterbury	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
Waterbury	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan		
Waterbury	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan		
Waterbury	CPS CIP	yes	Yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Marginal	Marginal	Not an Appropriate Case Plan		
Waterbury	CPS In-Home Family	yes	Yes	yes	Marginal	Marginal	Marginal	Marginal	Very Good	Marginal	Very Good	Very Good	Not an Appropriate Case Plan		
Waterbury Area Office 3Q 2018			100.0%	87.5%	87.5%	87.5%	87.5%	62.5%	62.5%	75.0%	62.5%	62.5%	75.0%	37.5%	
Region V 3Q 2018			100.0%	91.7%	91.7%	83.3%	91.7%	75.0%	58.3%	75.0%	72.7%	58.3%	72.7%	41.7%	
Region VI	Meriden	CPS CIP	yes	Yes	yes	Optimal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Optimal	Not an Appropriate Case Plan	
	Meriden	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	Meriden Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	50.0%	100.0%	100.0%	100.0%	100.0%	0.0%
	New Britain	CPS CIP	yes	Yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Appropriate Case Plan	
	New Britain	CPS In-Home Family	yes	Yes	yes	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Not an Appropriate Case Plan	
	New Britain	CPS In-Home Family	yes	Yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
	New Britain	CPS In-Home Family	yes	Yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Appropriate Case Plan	
New Britain	CPS CIP	yes	Yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Marginal	Very Good	Not an Appropriate Case Plan		
New Britain Area Office 3Q 2018			100.0%	100.0%	100.0%	80.0%	100.0%	60.0%	80.0%	80.0%	100.0%	80.0%	100.0%	60.0%	
Region VI 3Q 2018			100.0%	100.0%	100.0%	85.7%	100.0%	42.9%	71.4%	85.7%	100.0%	85.7%	100.0%	42.9%	
OM3 Statewide Total 3Q 2018			98.1%	94.4%	96.3%	83.3%	92.6%	55.6%	57.4%	79.6%	80.8%	70.3%	83.3%	44.4%	

Case Summaries for Third Quarter 2018 OM4 Domain Scores Identified by Area Office, Region, Statewide															
	What is the social worker's area office assignment?	What is the type of case assignment noted in LINK?	Risk: In-Home	Risk: Child Placement	Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months	Permanency: DCF Case Mgmt Achieve the Permanency Goal During the Prior Six Months	Permanency: DCF Case Mgmt - Recruitment for 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 4	
Region I	Bridgeport	SPM CIP	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Marginal	Optimal	Optimal	Needs Met	
	Bridgeport	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Marginal	Very Good	Very Good	Marginal	N/A to Case	Marginal	Needs Not Met	
	Bridgeport	CPS In-Home Family	Marginal	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Marginal	Marginal	Very Good	N/A to Case	Marginal	Needs Not Met	
	Bridgeport	CPS CIP	N/A to Case	Optimal	Optimal	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met	
	Bridgeport Area Office 3Q 2018			66.7%	100.0%	100.0%	100.0%	100.0%	50.0%	75.0%	75.0%	50.0%	100.0%	50.0%	50.0%
	Norwalk	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Optimal	Very Good	Optimal	Needs Met	
	Norwalk	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Very Good	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met	
	Norwalk Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	100.0%	50.0%
	Region I 3Q 2018			75.0%	100.0%	100.0%	100.0%	100.0%	66.7%	83.3%	83.3%	50.0%	100.0%	66.7%	50.0%
Region II	Milford	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Marginal	Marginal	Very Good	N/A to Case	Very Good	Needs Not Met	
	Milford	CPS In-Home Family	Very Good	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	
	Milford	CPS CIP	N/A to Case	Marginal	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Poor	Needs Not Met	
	Milford	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Very Good	Very Good	Very Good	N/A to Case	Optimal	Needs Met	
	Milford Area Office 3Q 2018			100.0%	0.0%	100.0%	75.0%	100.0%	25.0%	75.0%	75.0%	100.0%	100.0%	75.0%	25.0%
	New Haven	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Very Good	Very Good	Very Good	N/A to Case	N/A to Case	Needs Not Met	
	New Haven	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	Marginal	Very Good	Very Good	Needs Not Met	
	New Haven	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Very Good	Marginal	Very Good	N/A to Case	Marginal	Needs Met	
	New Haven Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	75.0%	75.0%	75.0%	100.0%	66.7%	50.0%
Region II 3Q 2018			100.0%	66.7%	100.0%	87.5%	100.0%	37.5%	75.0%	75.0%	87.5%	100.0%	71.4%	37.5%	
Region III	Middletown	CPS CIP	N/A to Case	Very Good	Very Good	Optimal	Very Good	Marginal	Optimal	Optimal	Very Good	Very Good	Optimal	Needs Not Met	
	Middletown	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Marginal	Optimal	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met	
	Middletown Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	50.0%	100.0%	100.0%	0.0%
	Norwich	CPS CIP	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	
	Norwich	CPS CIP	N/A to Case	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	Optimal	Very Good	Very Good	Optimal	Needs Met	
	Norwich	CPS CIP	N/A to Case	Very Good	Optimal	Marginal	Optimal	Very Good	Optimal	Optimal	Very Good	Optimal	Very Good	Needs Not Met	
	Norwich	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Marginal	Optimal	Very Good	Very Good	N/A to Case	N/A to Case	Needs Not Met	
	Norwich	CPS In-Home Family	Marginal	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Very Good	Very Good	Very Good	N/A to Case	Very Good	Needs Met	
	Norwich Area Office 3Q 2018			50.0%	100.0%	100.0%	80.0%	100.0%	60.0%	100.0%	100.0%	100.0%	100.0%	100.0%	60.0%
Willimantic	CPS In-Home Family	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	Optimal	Needs Met		
Willimantic	CPS CIP	N/A to Case	Very Good	Optimal	Very Good	Very Good	Marginal	Optimal	Optimal	Marginal	Marginal	Very Good	Needs Not Met		
Willimantic	CPS CIP	N/A to Case	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Needs Met		
Willimantic Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	100.0%	100.0%	66.7%	50.0%	100.0%	66.7%	
Region III 3Q 2018			75.0%	100.0%	100.0%	90.0%	100.0%	50.0%	100.0%	100.0%	80.0%	83.3%	100.0%	50.0%	
Region IV	Hartford	CPS In-Home Family	Marginal	N/A to Case	N/A to Case	Marginal	N/A to Case	Marginal	Very Good	Very Good	Very Good	N/A to Case	Very Good	Needs Not Met	
	Hartford	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Optimal	Very Good	Very Good	Very Good	Needs Not Met	
	Hartford	CPS In-Home Family	Marginal	N/A to Case	N/A to Case	Very Good	N/A to Case	Poor	Very Good	Marginal	Marginal	N/A to Case	Very Good	Needs Not Met	
	Hartford	CPS CIP	N/A to Case	Optimal	Very Good	Optimal	Optimal	Marginal	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Not Met	
	Hartford	CPS CIP	N/A to Case	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Not Met	
	Hartford	CPS In-Home Family	Very Good	Very Good	N/A to Case	Optimal	N/A to Case	Very Good	Optimal	Optimal	Very Good	N/A to Case	Very Good	Needs Met	
	Hartford	CPS In-Home Family	Marginal	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 Not Met	
	Hartford Area Office 3Q 2018			25.0%	100.0%	100.0%	71.4%	100.0%	28.6%	100.0%	85.7%	85.7%	100.0%	100.0%	14.3%
	Manchester	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Optimal	Needs Met	
	Manchester	CPS In-Home Family	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	
	Manchester	SPM CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Marginal	Needs Not Met	
	Manchester	CPS In-Home Family	Marginal	N/A to Case	N/A to Case	Poor	N/A to Case	Marginal	Marginal	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met	
	Manchester Area Office 3Q 2018			50.0%	100.0%	100.0%	75.0%	100.0%	75.0%	50.0%	100.0%	50.0%	100.0%	75.0%	50.0%
Region IV 3Q 2018			33.3%	100.0%	100.0%	72.7%	100.0%	45.5%	81.8%	90.9%	72.7%	100.0%	90.9%	27.3%	
Region V	Danbury	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Met	
	Danbury	CPS In-Home Family	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	Optimal	Needs Met	
	Danbury Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
	Torrington	CPS In-Home Family	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	
	Torrington	SPM CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Needs Met	
	Torrington Area Office 3Q 2018			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
	Waterbury	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Marginal	Marginal	Marginal	N/A to Case	Very Good	Needs Not Met	
	Waterbury	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Very Good	Very Good	Very Good	N/A to Case	N/A to Case	Needs Met	
	Waterbury	CPS CIP	N/A to Case	Very Good	Very Good	Marginal	Very Good	Marginal	Marginal	Marginal	Marginal	N/A to Case	Very Good	Needs Not Met	
	Waterbury	CPS In-Home Family	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	Optimal	Needs Met	
	Waterbury	CPS In-Home Family	Marginal	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Very Good	Very Good	Very Good	N/A to Case	Very Good	Needs Not Met	
	Waterbury	CPS CIP	N/A to Case	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Optimal	Needs Met	
	Waterbury	CPS CIP	N/A to Case	Very Good	Very Good	Marginal	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Marginal	Needs Not Met	
Waterbury	CPS In-Home Family	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		
Waterbury Area Office 3Q 2018			80.0%	100.0%	100.0%	75.0%	100.0%	50.0%	50.0%	62.5%	62.5%	100.0%	71.4%	37.5%	
Region V 3Q 2018			85.7%	100.0%	100.0%	83.3%	100.0%	66.7%	66.7%	75.0%	75.0%	100.0%	81.8%	58.3%	
Region VI	Meriden	CPS CIP	N/A to Case	Very Good	Optimal	Very Good	Optimal	Marginal	Very Good	Optimal	Marginal	Very Good	Very Good	Needs Not Met	
	Meriden	CPS In-Home Family	Poor	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Very Good	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met	
	Meriden Area Office 3Q 2018			0.0%	100.0%	100.0%	100.0%	100.0%	0.0%	100.0%	100.0%	0.0%	100.0%	0.0%	
	New Britain	CPS CIP	N/A to Case	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Needs Met	
	New Britain	CPS In-Home Family	Marginal	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Very Good	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met	
	New Britain	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Very Good	Very Good	Very Good	N/A to Case	Very Good	Needs Met	
	New Britain	CPS In-Home Family	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	
	New Britain	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal	Marginal	Very Good	Needs Not Met	
	New Britain Area Office 3Q 2018			66.7%	100.0%	100.0%	100.0%	100.0%	60.0%	100.0%	100.0%	60.0%	50.0%	100.0%	60.0%
Region VI 3Q 2018			50.0%	100.0%	100.0%	100.0%	100.0%	42.9%	100.0%	100.0%	42.9%	66.7%	100.0%	42.9%	
Total Statewide 3Q 2018 OM4			70.0%	96.2%	100.0%	87.0%	100.0%	51.9%	83.3%	87.0%	70.4%	91.7%	86.3%	44.4%	

The individual unmet needs identified in the cases sampled included a total of 183 unmet needs for the Second Quarter 2018 and 190 for the 3rd Quarter 2018 for a total of 373 unmet needs across the cases reviewed. This is a decrease in comparison to the prior 6 month reporting cycle which included 479 unmet needs across 107 cases. Visitation with parents and contacts with providers aside, the top five unmet needs identified during the period under review was referral to the ARG, Dental Screenings and Substance Abuse Screening/Evaluation – Parent, Individual Counseling-Child and Health/Medical Screening – Child.

The top five barriers identified this period were client refusal, failure to assess the need during the period under review, delay in referral, no referral made during the PUR and lack of communication between DCF and the provider.

Unmet Need	Barrier Identified	Frequency 2 nd Quarter 2018	Frequency 3 rd Quarter 2018	Semi Annual Total
Adoption Recruitment	Delay in Referral by Worker	1	0	1
Adoption Recruitment	Area Office did not respond to reviewer request for clarification on the barrier	1	0	1
Adoption Supports (PPSP)	Delay in Referral by Worker	1	0	1
Adoption Supports (PPSP)	No Referral Made by DCF During the Period	0	1	1
Anger Management – Parent	Client Refused	0	1	1
ARG Consultation	No Referral during the Period	4	6	10
ARG Consultation	DCF failed to properly assess child/family member related to this need during the PUR	3	1	4
ARG Consultation	Delay in Referral by Worker	1	3	4
Basic Foster Care	Service Not Available in primary language	1	0	1
Basic Foster Care	Other: Multiple Disruptions not due to permanency change.	0	1	1
Behavior Management	Placed on Wait List	1	1	2
Case Management/Support/Advocacy: Other	STOG not done timely or during PUR	0	2	2
Case Management/Support/Advocacy: Other	Assessment of Risk/Safety not done timely	0	1	1
Case Management/Support/Advocacy: Other	PSE Plan not created	0	1	1
Childcare/Daycare Program	Lack of Communication between DCF and Provider	0	1	1
Day Treatment/Partial Hospitalization – Parent	Client Refused Service	1	0	1
Day Treatment/Partial Hospitalization – Parent	Transportation Unavailable	0	1	1

Unmet Need	Barrier Identified	Frequency 2nd Quarter 2018	Frequency 3rd Quarter 2018	Semi Annual Total
Dental or Orthodontic Service	Client Refused Service	3	2	5
Dental or Orthodontic Service	Provider Issues – staffing, lack of follow through, etc.	1	0	1
Dental or Orthodontic Service	UTD from Case Plan or Narratives	0	1	1
Dental or Orthodontic Service	Delay in Referral by Worker	1	0	1
Dental or Orthodontic Service	No Service Identified to Meet this Need	1	0	1
Dental Screening or Evaluation	Client Refused Service	4	4	8
Dental Screening or Evaluation	DCF failed to properly assess child/family member related to this need during the PUR	2	1	3
Dental Screening or Evaluation	No Service Identified to Meet this Need	1	1	2
Dental Screening or Evaluation	Insurance Issues	1	1	2
Dental Screening or Evaluation	Other: Mother needs to make appointment	0	1	1
Dental Screening or Evaluation	Other: Rescheduled due to DCF Emergency	0	1	1
Dental Screening or Evaluation	Child hospitalized	1	0	1
Developmental Screening or Evaluation	Other: Mother failed to make the Birth to 3 Appointment during the PUR	1	0	1
Developmental Screening or Evaluation	UTD from case plan or narrative	1	0	1
Domestic Violence Prevention Services	Lack of Communication between DCF and Provider	0	1	1
Domestic Violence Services for Perpetrator	Client Refused Service	3	4	7
Domestic Violence Services for Perpetrator	Placed on Wait List	1	1	2
Domestic Violence Services for Perpetrator	Service Deferred Pending Completion of Another	1	1	2
Domestic Violence Services for Victim	Client Refused Service	1	4	5
Domestic Violence Services for Victim	Placed on Wait List	1	1	2
Domestic Violence Services for Victim	Provider Issues – staffing, lack of follow through, etc.	1	0	1
Educational Screening or Evaluation	DCF failed to properly assess child/family member related to this need during the PUR	3	0	3
Educational Screening or Evaluation	Delay in Referral by Worker	1	1	2
Educational Screening or Evaluation	Client Refused Service	0	1	1
Emergency Adult/Family Shelter	Client Refused Service	1	0	1
Emergency Adult/Family Shelter	No Referral made by DCF During the Period	0	1	1
Extended Day Treatment	Transportation Unavailable	0	1	1
Family or Marital Counseling	Client Refused Service	0	1	1

Unmet Need	Barrier Identified	Frequency 2nd Quarter 2018	Frequency 3rd Quarter 2018	Semi Annual Total
Family Reunification Services	Delay in Referral by Worker	1	0	1
Family Reunification Services	Placed on Wait List	1	0	1
Family Reunification Services	DCF failed to properly assess child/family member related to this need during the PUR	0	1	1
Family Stabilization Service	Delay in Referral by Worker	0	1	1
Foster Care Supports	Services deferred pending completion of another	1	0	1
Foster Care Supports	No Referral made by DCF during the Period	0	1	1
Group Counseling – Child	Client Refused Service	1	0	1
Group Counseling – Parents	Client Refused Service	1	0	1
Head Start	Placed on Wait List	1	0	1
Head Start	Client Refused Service	1	0	1
Health /Medical Screening or Evaluation	Client Refused Service	4	3	7
Health /Medical Screening or Evaluation	No Referral Made by DCF during the Period	0	2	2
Health /Medical Screening or Evaluation	DCF failed to properly assess child/family member related to this need during the PUR	1	1	2
Health /Medical Screening or Evaluation	Delay in Referral by Worker	0	1	1
Health /Medical Screening or Evaluation	Insurance Issue	0	1	1
Health /Medical Screening or Evaluation	Other: Facility unable to draw blood of infant	0	1	1
Health /Medical Screening or Evaluation	Area Office did not respond to Reviewer Request for Clarification on Barrier	0	1	1
Housing Assistance: Section 8	No Slots Available	0	1	1
Housing Assistance: Section 8	Client Refused Services	0	1	1
Housing Assistance: Section 8	Approval Process	1	0	1
Housing Assistance: Section 8	No Referral made by DCF During the Period	1	0	1
Housing Assistance: Section 8	Placed on Wait List	1	0	1
IEP Programming	Client Refused Service	1	0	1
IEP Programming	Lack of Communication between DCF and Provider	1	0	1

Unmet Need	Barrier Identified	Frequency 2nd Quarter 2018	Frequency 3rd Quarter 2018	Semi Annual Total
Individual Counseling - Child	Client Refused Service	3	7	10
Individual Counseling - Child	No Referral made by DCF during the period	1	1	2
Individual Counseling - Child	Delay in Referral by Worker	0	1	1
Individual Counseling - Child	Provider Issues – Staffing, Lack of follow through, etc.	0	1	1
Individual Counseling - Child	Client Discharged due to Non-Compliance	0	1	1
Individual Counseling - Child	Lack of Communication between DCF and Provider	1	0	1
Individual Counseling - Parent	Client Refused Service	0	10	10
Individual Counseling - Parent	Delay in Referral by Worker	0	1	1
Individual Counseling - Parent	Insurance Issues	0	1	1
Individual Counseling - Parent	Client engaged in recommended service by end of PUR	0	1	1
In-Home Parent Education	Client Refused Service	3	2	5
In-Home Parent Education	Delay in Referral by Worker	1	1	2
In-Home Parent Education	DCF failed to properly assess child/family member related to this need during the PUR	2	0	2
In-Home Parent Education	Placed on Wait List	0	1	1
In-Home Parent Education	No Service Identified to Meet this Need	1	0	1
In-Home Treatment	Client Refused Service	1	3	4
In-Home Treatment	Placed on Wait List	0	2	2
In-Home Treatment	Service Not Available for Age Group	0	1	1
Job Coaching/Placement	No Referral Made by DCF during the Period	0	1	1
Job Coaching/Placement	DCF failed to properly assess child/family member related to this need during the PUR	1	0	1
Job Coaching/Placement	No Referral Made by DCF during the Period	1	0	1
Life Skills Training	No Referral Made by DCF During the Period	0	1	1
Life Skills Training	Provider Issues – Staffing, lack of follow through, etc.	0	1	1
Maintaining Family Ties	No Service Identified to Meet this Need	0	1	1

Unmet Need	Barrier Identified	Frequency 2nd Quarter 2018	Frequency 3rd Quarter 2018	Semi Annual Total
Matching/Placement/Processing (includes ICO)	Lack of Communication between DCF and Provider	1	0	1
Matching/Placement/Processing (includes ICO)	DCF failed to properly assess child/family member related to this need during the PUR	1	0	1
Matching/Placement/Processing (includes ICO)	Delay in Referral by Worker	0	1	1
Medication Management (Child's)	Approval Process	1	0	1
Medication Management (Child's)	Client Refused	1	0	1
Medication Management (Parent)	Client Refused	3	1	4
Mental Health Screening or Evaluation - Child	Delay in Referral by Worker	0	1	1
Mental Health Screening or Evaluation - Child	DCF failed to properly assess child/family member related to this need during the PUR	1	0	1
Mental Health Screening or Evaluation – Parent	Client Refused Service	2	1	3
Mental Health Screening or Evaluation – Parent	Other: Parent Incarcerated	1	0	1
Mental Health Screening or Evaluation – Parent	DCF failed to properly assess child/family member related to this need during the PUR	1	1	2
Mental Health Screening or Evaluation – Parent	Insurance Issue	0	1	1
Mentoring	Lack of Communication between DCF and Provider	0	1	1
Mentoring	DCF failed to properly assess child/family member related to this need during the PUR	1	0	1
Mentoring	No Referral Made by DCF during the Period	1	0	1
Mentoring	No Slots Available	1	0	1
Other IH Service: Child First	Placed on Wait List	1	0	1
Other Medical Intervention: Specialist Care for CP	Client Refused Service	0	1	1
Other Medical Intervention: Vision Care	Client Refused Service	1	0	1
Other Medical Intervention: Weight Management/Nutrition Program	Placed on Wait List	0	1	1
Other Medical Intervention: Wheelchair	Insurance Issues	0	1	1

Unmet Need	Barrier Identified	Frequency 2nd Quarter 2018	Frequency 3rd Quarter 2018	Semi Annual Total
Other Mental Health Service: Child First Service	No Referral Made by DCF during the Period	0	1	1
Other Mental Health Service: Trauma Therapy	No Referral Made by DCF during the Period	0	1	1
Other OOH Service: CST	No Referral Made by DCF during the Period	0	1	1
Other OOH Service: Secure State ID	No Referral Made by DCF during the Period	0	1	1
Other State Agency Program (DDS, DMHAS, MSS)	Client Refused Service	1	0	1
Other State Agency Program (DDS, DMHAS, MSS)	Placed on Wait List	0	1	1
Parenting Classes	Client Refused Service	2	2	4
Parenting Classes	Service Deferred Pending Completion of Another	0	1	1
Parenting Classes	No Referral Made by DCF during the Period	0	1	1
Parenting Groups	No Service Identified to Meet this Need	1	1	2
Positive Youth Development Program	DCF failed to properly assess child/family member related to this need during the PUR	1	0	1
Problem Sexual Behavior Therapy	Client Refused Service	1	0	1
Psychological or Psychosocial Evaluation – Child	Client Refused Service	0	1	1
Psychological or Psychosocial Evaluation – Parent	Client Refused Service	0	1	1
Psychological or Psychosocial Evaluation – Parent	No Referral Made by DCF during the Period	1	0	1
Relative Foster Care	Approval Process	2	0	2
Relative Foster Care	Delay in Referral by Worker	2	0	2
Relative Foster Care	No Referral Made by DCF during the Period	1	0	1
Sexual Abuse Therapy – Victim	Client Refused Service	0	1	1
Sexual Abuse Therapy – Victim	No Service Identified to Meet this Need	1	0	1
Sexual Abuse Therapy – Victim	DCF failed to properly assess child/family member related to this need during the PUR	0	1	1
Social Recreational Programming	Delay in Referral by Worker	1	0	1
Social Recreational Programming	DCF failed to properly assess child/family member related to this need during the PUR	1	0	1
Social Recreational Programming	No Service Identified to Meet this Need	0	1	1

Unmet Need	Barrier Identified	Frequency 2nd Quarter 2018	Frequency 3rd Quarter 2018	Semi Annual Total
Substance Abuse Treatment: Drug & Alcohol Education – Parent	Service Deferred Pending Completion of Another	0	1	1
Substance Abuse Treatment: Drug & Alcohol Education – Parent	Client Discharged due to Non-Compliance	0	1	1
Substance Abuse Treatment: Drug & Alcohol Testing – Child	No Referral Made by DCF during the Period	0	1	1
Substance Abuse Treatment: Detoxification – Parent	Client Refused Service	1	0	1
Substance Abuse Treatment: Drug/Alcohol Testing - Parent	Client Refused Service	1	2	3
Substance Abuse Treatment: Drug/Alcohol Testing - Parent	No Service Identified to Meet this Need	0	1	1
Substance Abuse Treatment: Drug/Alcohol Testing - Parent	UTD from Case Plan or Narrative	1	0	1
Substance Abuse Treatment: Inpatient – Parent	Client Refused Service	2	0	2
Substance Abuse Treatment: Outpatient - Parent	Client Refused Service	3	6	9
Substance Abuse Treatment: Outpatient - Parent	Transportation Issues	1	0	1
Substance Abuse Treatment: Outpatient - Parent	DCF failed to properly assess child/family member related to this need during the PUR	1	0	1
Substance Abuse Treatment: Outpatient – Parent	UTD from Case Plan or Narratives	1	0	1
Substance Abuse Treatment: Outpatient – Parent	Client Engaged in Recommended Service by End of PUR	0	1	1
Substance Abuse Treatment: Prevention – Parent	Service Deferred Pending Completion of Another	1	0	1
Substance Abuse Treatment: Relapse Prevention – Parent	Provider Issues – Staffing, lack of follow through, etc.	1	0	1
Substance Abuse Treatment: Screening/Evaluation - Child	Delay in Referral by Worker	1	0	1
Substance Abuse Treatment: Screening/Evaluation - Child	No Referral made by DCF during the Period	0	1	1
Substance Abuse Treatment: Screening/Evaluation - Child	DCF failed to properly assess child/family member related to this need during the PUR	0	1	1

Unmet Need	Barrier Identified	Frequency 2nd Quarter 2018	Frequency 3rd Quarter 2018	Semi Annual Total
Substance Abuse Treatment: Screening/Evaluation - Parent	Client Refused Service	5	7	12
Substance Abuse Treatment: Screening/Evaluation - Parent	DCF failed to properly assess child/family member related to this need during the PUR	2	0	2
Substance Abuse Treatment: Screening/Evaluation - Parent	UTD from Case Plan or Narratives	1	0	1
Substance Abuse Treatment: Screening/Evaluation - Parent	OTHER: Parent Incarcerated	1	0	1
Substance Abuse Treatment: Screening/Evaluation - Parent	Delay in Referral by Worker	0	1	1
Substance Abuse Treatment: Screening/Evaluation - Parent	No Service Identified to Meet this Need	0	1	1
Substance Abuse Treatment: Supportive Housing for Recovering Families	Placed on Wait List	0	2	2
Substance Abuse Treatment: Supportive Housing for Recovering Families	UTD from Case Plan or Narrative	1	0	1
Substance Abuse Treatment: Supportive Housing for Recovering Families	DCF failed to properly assess child/family member related to this need during the PUR	1	0	1
Supervised Visitation	Placed on a Wait List	1	0	1
Supervised Visitation	Service Deferred Pending Completion of Another	1	0	1
SW Case Management/Support/Advocacy	Delay in Referrals	8	0	8
SW Case Management/Support/Advocacy	DCF failed to properly assess child/family member related to this need during the PUR	3	0	3
SW Case Management/Support/Advocacy	DCF failed to properly assess caretakers related to this need during the PUR	1	0	1
SW/Child Visitation	Delays in Visitation by Worker	2	3	5
SW/Child Visitation	DCF failed to properly assess child/family member related to this need during the PUR	3	0	3
SW/Child Visitation	DCF failed to properly assess caretakers related to this need during the PUR	0	3	3
SW/Child Visitation	Client Refused Service	0	1	1
SW/Child Visitation	UTD from Case Plan or Narrative	0	1	1

Unmet Need	Barrier Identified	Frequency 2 nd Quarter 2018	Frequency 3 rd Quarter 2018	Semi Annual Total
SW/Parent Visitation	DCF failed to properly assess child/family member related to this need during the PUR	7	6	13
SW/Parent Visitation	Delays in Visitation by Worker	5	6	11
SW/Parent Visitation	Client Refused Service	2	3	5
SW/Provider Contacts	Lack of Communication between DCF and Provider	9	5	14
SW/Provider Contacts	Delays in Contacts by Worker	6	4	10
SW/Provider Contacts	DCF failed to properly assess child/family member related to this need during the PUR	1	1	2
SW/Provider Contacts	UTD from Case Plan or Narrative	0	2	2
SW/Provider Contacts	Client refused ROI	0	1	1
Therapeutic Foster Care	Service Not Available for Age Group	0	1	1
Translation Services	No Service Identified to Meet this Need	1	0	1
		183	190	373

During the Second Quarter 2018, 54.7% of the cases included very good or optimal engagement of families in the case planning process. This included documented discussions with the family and social worker during the period under review and/or attendance at the ACR. This percentage was slightly improved at 55.6% of families engaged adequately during the Third Quarter 2018.

Stakeholders' involvement varied. As shown in the table below there is still room for improvement in the level of engagement in case planning, particularly engagement inclusive of the ACR (note: percentages are based on the number of applicable case participants/stakeholders, not the number of cases reviewed)

Stakeholder/Participant	ACR Attendance (Includes Teleconference)	Documented Engagement in Narratives
Child Older than 12 Years of Age	20.0%	97.1%
Mother	46.7%	81.3%
Father	19.5%	52.9%
Foster Parent	53.2%	95.8%
Active Providers	22.7%	75.7%
Attorney/GAL	31.5%	49.4%
Attorney for Parent(s)	37.2%	53.7%

73.6% of the Second Quarter cases documented a discussion of some or all of the needs that were identified as unmet in the prior six month planning cycle and incorporate them going forward in the planning process. Reviewers identified four (4) cases where the planning process did not address any of the needs that were unmet from the last planning cycle. In six (6) cases the reviewers indicated that all needs identified from the prior case plan or during the PUR were reviewed at the Administrative Case Review (ACR) and were fully achieved or no longer needed and therefore no longer needed to be planned for. In four (4) cases, the plan reviewed was the initial case plan and no comparison of needs could be made.

During the Third Quarter 2018, 77.8% of the cases documented a discussion of some or all of the needs that were identified as unmet in the six month planning cycle. Reviewers identified one (1) case where the planning process did not address any of the needs that were unmet from the last planning cycle. In four (4) cases the reviewers indicated that all needs identified from the prior case plan or during the PUR were reviewed at the Administrative Case Review (ACR) and were fully achieved or no longer needed and therefore no longer needed to be planned for. In seven (7) cases, the plan reviewed was the initial case plan and no comparison of needs could be made.

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

Needs Unmet Incorporated into Current Case Plan	Frequency 2 nd Quarter 2018	Frequency 3 rd Quarter 2018	Semi-Annual Frequency
Yes - All	19	20	39
Yes - Partially	20	22	41
No - None	4	1	5
N/A - There are no Unmet Needs	6	4	10
N/A - This is the Initial Case Plan	4	7	11
Total	53	54	107

Our review also looked at the recurrence of unmet needs across planning cycles. In the Second Quarter 2018, a need was identified in 17 of 35 cases in which Structured Decision Making (SDM) was conducted that was identical to that which was identified on the prior case plan assessment. This would indicate a rate of 48.6% of the cases having at least one unmet priority need for greater than six months, or spanning two planning cycles for the 53 cases sampled. This occurred at a rate of 40.6% in the 32 applicable cases within the Third Quarter 2018.

Reviewers continue to see issues noted in the record, or identified at the ACR that fail to get included with identified services to address the priority needs in the plans going forward. Reviewers noted 28 cases within the Second Quarter 2018 (52.8%), and 22 cases within the Third Quarter 2018 (40.7%) that had documented issues or assessed objectives with known barriers; but which subsequently did not get incorporate into the plan document. There were several unapproved case plans which contributed to scores as well.

A table of 113 such needs as identified by the reviewers follows. It is notable that this is a decline in the number of needs not incorporated from the prior status report which totaled 197:

Unmet Needs Not Incorporated Into the Upcoming Six Month Case Plan

Unmet Need	Barrier Identified	Frequency 2 nd Quarter 2018	Frequency 3 rd Quarter 2018	Semi Annual Total
Adoption Recruitment	No Service Identified to Meet this Need	2	0	2
Adoption Supports (PPSP)	No Service Identified to Meet this Need	2	3	5
ARG Consultation	DCF Failed to Properly Assess the Child/Family related to this need during the PUR	0	1	1
ARG Consultation	No Service Identified to Meet this Need	0	1	1
Behavior Management	No Approved Case Plan	1	0	1
Dental or Orthodontic Service	No Service Identified to Meet this Need	2	1	3
Dental Screening or Evaluation	No Approved Case Plan	1	0	1
Dental Screening or Evaluation	No Service Identified to Meet this Need	5	0	5
Developmental Screening or Evaluation	No Service Identified to Meet this Need	1	0	1
Domestic Violence Services for Perpetrator	No Service Identified to Meet this Need	0	2	2
Domestic Violence Services for Victim	No Approved Case Plan	1	0	1
Domestic Violence Services for Victim	No Service Identified to Meet this Need	0	1	1
Educational Screening or Evaluation	DCF Failed to Assess Child/Family member related to this need during the PUR	1	0	1
Educational Screening or Evaluation	No Service Identified to Meet this Need	1	0	1
Family Reunification Services	No Service Identified to Meet this Need	3	1	4
Health/Medical Screening or Evaluation	No Service Identified to Meet this Need	1	4	5
Housing Assistance: Section 8	DCF Failed to Assess Child/Family member related to this need during the PUR	1	0	1
Housing Assistance: Section 8	No Service Identified to Meet this Need	0	2	2
IEP Programming	No Service Identified to Meet this Need	3	0	3
Individual Counseling - Child	Delay in Referral by Worker	1	0	1
Individual Counseling – Child	No Approved Case Plan	0	1	1
Individual Counseling - Parent	DCF Failed to Properly Assess Child/Family related to this need during the PUR	1	0	1
Individual Counseling - Parent	Insurance Issues	1	0	1
Individual Counseling - Parent	No Service Identified to Meet this Need	2	0	2
In-Home Parent Education and Support	DCF Failed to Properly Assess Child/Family related to this need during the PUR	2	0	2
In-Home Parent Education and Support	No Approved Case Plan	2	0	2

Unmet Need	Barrier Identified	Frequency 2nd Quarter 2018	Frequency 3rd Quarter 2018	Semi Annual Total
In-Home Treatment	UTD from Case Plan or Narratives	1	0	1
In-Home Treatment	No Service Identified to Meet this Need	1	2	3
Job Coaching/Placement	DCF Failed to Assess Child/Family member related to this need during the PUR	1	0	1
Life Skills Training	No Service Identified to Meet this Need	1	2	3
Maintaining Family Ties	No Service Identified to Meet this Need	0	1	1
Medical Intervention (Other): Surgery, tubes and adenoid removal	No Service Identified to Meet this Need	1	0	1
Medical Intervention (Other): Vision Care	Other: No Service Identified to Meet this Need and no Objective identified on Case Plan	1	0	1
Medical Intervention (Other): Medical Alert System	Delay in Referral by Worker	0	1	1
Medication Management (Child's)	No Service Identified to Meet this Need	2	0	2
Mental Health Screening or Evaluation – Child	No Service Identified to Meet this Need	2	0	2
Mental Health Screening or Evaluation – Parent	No Service Identified to Meet this Need	1	2	3
Mental Health Screening or Evaluation – Parent	No Approved Case Plan	1	0	1
Mentoring	No Service Identified to Meet this Need	3	0	3
Other OOH Service Need: Concurrent Legal Work	No Service Identified to Meet this Need	1	0	1
Other OOH Service Need: CST	No Service Identified to Meet this Need	0	1	1
Other State Agency (DDS, DMHAS, MSS)	No Approved Case Plan	1	0	1
Parenting Classes	No Approved Case Plan	0	1	1
Parenting Classes	No Service Identified to Meet this Need	0	1	1
Positive Youth Development Program	No Service Identified to Meet this Need	1	0	1
Preparation for Adult Living Services	No Service Identified to Meet this Need	0	1	1
Psychiatric Evaluation – Parent	No Service Identified to Meet this Need	1	0	1
Psychological or Psychosocial Evaluation – Parent	No Service Identified to Meet this Need	1	0	1
Sexual Abuse Therapy – Victim	No Service Identified to Meet this Need	1	0	1
Social Recreational Programming	No Service Identified to Meet this Need	2	0	2
Social Recreational Programming	No Approved Case Plan	0	1	1
Substance Abuse Treatment – Detoxification	No Service Identified to Meet this Need	1	0	1

Unmet Need	Barrier Identified	Frequency 2 nd Quarter 2018	Frequency 3 rd Quarter 2018	Semi Annual Total
Substance Abuse Treatment: Drug/Alcohol Testing - Parent	No Service Identified to Meet this Need	1	0	1
Substance Abuse Treatment: Inpatient - Parent	No Service Identified to Meet this Need	1	0	1
Substance Abuse Treatment: Inpatient - Parent	No Approved Case Plan	0	1	1
Substance Abuse Treatment: Outpatient - Parent	No Service Identified to Meet this Need	1	0	1
Substance Abuse Treatment: Outpatient - Parent	No referral Made by DCF for PUR	1	0	1
Substance Abuse Treatment: Outpatient - Parent	No Approved Case Plan	0	1	1
Substance Abuse Treatment: Screening/Evaluation – Child	No Service Identified to Meet this Need	0	2	2
Substance Abuse Treatment: Screening/Evaluation - Parent	No Service Identified to Meet this Need	2	3	5
Substance Abuse Treatment: Supportive Housing for Recovering Families	No Service Identified to Meet this Need	2	0	2
SW Case Management/Support/Advocacy: Case Plan	Case Plan lacked clear action steps to achieve timely permanency	0	1	1
SW/Child Visitation	DCF Failed to meet standards or properly assess child/family member related to visitation needs during the PUR (<i>Was not incorporated into ongoing plan.</i>)	0	1	1
SW/Parent Visitation	No Service Identified to Meet this Need	1	1	2
SW/Parent Visitation	DCF Failed to meet standards or properly assess child/family member related to visitation needs during the PUR (<i>Was not incorporated into ongoing plan.</i>)	0	2	2
SW/Parent Visitation	Client Refused Service	0	1	1
SW/Provider Contacts	Provider Issues – Staffing, lack of follow through, etc.	0	1	1
SW/Provider Contacts	Delays in Referral	0	1	1
Translation Services	No Service Identified to Meet this Need	1	0	1
		68	45	113

JUAN F. ACTION PLAN MONITORING REPORT

November 2018

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 2004 through 2018.

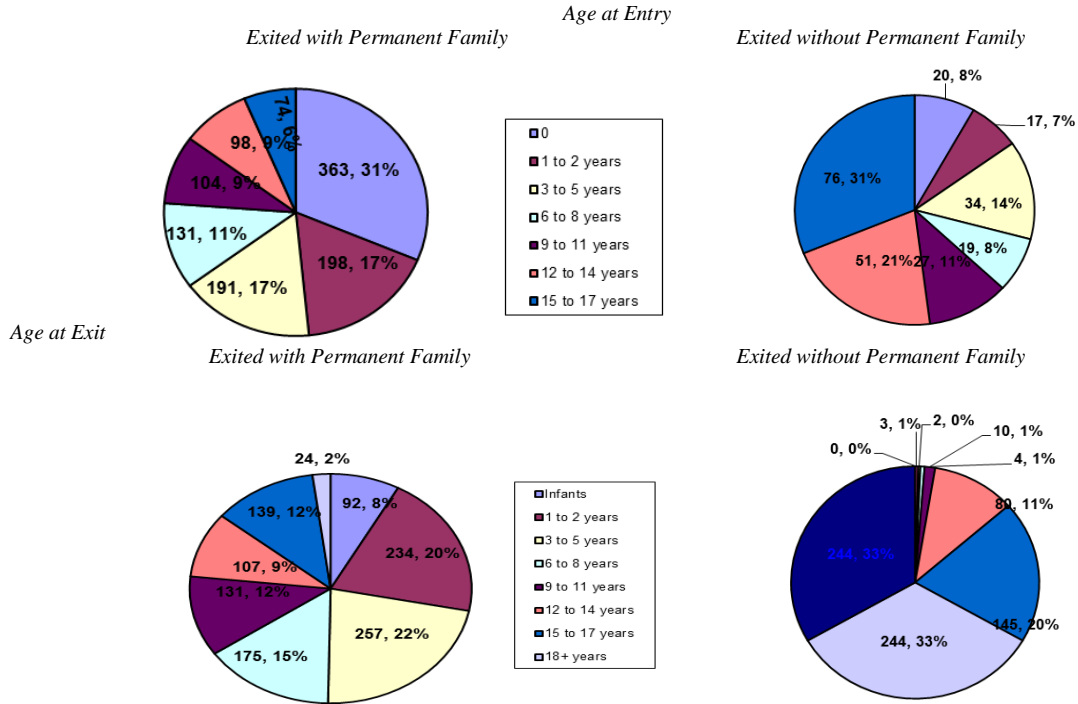
Figure 1: Children Exiting With Permanency, Exiting Without Permanency, Unknown Exits and Remaining In Care (Entry Cohorts)

	Period of Entry to Care													
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Total Entries	3090	3407	2853	2829	2627	2693	2298	1859	2005	1929	1990	2261	2084	1776
Permanent Exits														
In 1 yr	1128 36.5%	1262 37.0%	1095 38.4%	1098 38.8%	1092 41.6%	1025 38.1%	707 30.8%	560 30.1%	535 26.7%	499 25.9%	427 21.5%	565 25.0%		
In 2 yrs	1739 56.3%	1972 57.9%	1675 58.7%	1676 59.2%	1581 60.2%	1378 51.2%	1052 45.8%	857 46.1%	841 41.9%	789 40.9%	754 37.9%			
In 3 yrs	2011 65.1%	2324 68.2%	1974 69.2%	1943 68.7%	1791 68.2%	1676 62.2%	1245 54.2%	1035 55.7%	1072 53.5%	998 51.7%				
In 4 yrs	2156 69.8%	2499 73.3%	2090 73.3%	2033 71.9%	1894 72.1%	1780 66.1%	1357 59.1%	1120 60.2%	1159 57.8%					
To Date	2256 73.0%	2620 76.9%	2171 76.1%	2121 75.0%	1950 74.2%	1844 68.5%	1435 62.4%	1151 61.9%	1194 59.6%	1118 58.0%	989 49.7%	972 43.0%	584 28.0%	205 11.5%
Non-Permanent Exits														
In 1 yr	289 9.4%	259 7.6%	263 9.2%	250 8.8%	208 7.9%	196 7.3%	138 6.0%	95 5.1%	125 6.2%	111 5.8%	95 4.8%	68 3.0%		
In 2 yrs	371 12.0%	345 10.1%	318 11.1%	320 11.3%	267 10.2%	243 9.0%	188 8.2%	146 7.9%	182 9.1%	140 7.3%	124 6.2%			
In 3 yrs	431 13.9%	401 11.8%	354 12.4%	363 12.8%	300 11.4%	275 10.2%	220 9.6%	190 10.2%	218 10.9%	157 8.1%				
In 4 yrs	461 14.9%	449 13.2%	392 13.7%	394 13.9%	328 12.5%	309 11.5%	257 11.2%	218 11.7%	236 11.8%					
To Date	585 18.9%	551 16.2%	465 16.3%	474 16.8%	405 15.4%	380 14.1%	297 12.9%	250 13.4%	264 13.2%	183 9.5%	164 8.2%	98 4.3%	69 3.3%	40 2.3%

	Period of Entry to Care													
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
<i>Unknown Exits</i>														
<i>In 1 yr</i>	83 2.7%	76 2.2%	61 2.1%	60 2.1%	75 2.9%	127 4.7%	205 8.9%	133 7.2%	102 5.1%	113 5.9%	200 10.1%	270 11.9%		
<i>In 2 yrs</i>	124 4.0%	117 3.4%	97 3.4%	91 3.2%	139 5.3%	303 11.3%	399 17.4%	254 13.7%	311 15.5%	346 17.9%	438 22.0%			
<i>In 3 yrs</i>	164 5.3%	140 4.1%	123 4.3%	125 4.4%	192 7.3%	381 14.1%	475 20.7%	335 18.0%	398 19.9%	449 23.3%				
<i>In 4 yrs</i>	182 5.9%	167 4.9%	155 5.4%	167 5.9%	217 8.3%	400 14.9%	499 21.7%	374 20.1%	445 22.2%					
<i>To Date</i>	239 7.7%	225 6.6%	206 7.2%	212 7.5%	251 9.6%	434 16.1%	534 23.2%	406 21.8%	468 23.3%	487 25.2%	539 27.1%	537 23.8%	305 14.6%	70 3.9%
<i>Remain In Care</i>														
<i>In 1 yr</i>	1590 51.5%	1810 53.1%	1434 50.3%	1421 50.2%	1252 47.7%	1345 49.9%	1248 54.3%	1071 57.6%	1243 62.0%	1206 62.5%	1268 63.7%	1358 60.1%		
<i>In 2 yrs</i>	856 27.7%	973 28.6%	763 26.7%	742 26.2%	640 24.4%	769 28.6%	659 28.7%	602 32.4%	671 33.5%	654 33.9%	674 33.9%			
<i>In 3 yrs</i>	484 15.7%	542 15.9%	402 14.1%	398 14.1%	344 13.1%	361 13.4%	358 15.6%	299 16.1%	317 15.8%	325 16.8%				
<i>In 4 yrs</i>	291 9.4%	292 8.6%	216 7.6%	235 8.3%	188 7.2%	204 7.6%	185 8.1%	147 7.9%	165 8.2%					
<i>To Date</i>	10 0.3%	11 0.3%	11 0.4%	22 0.8%	21 0.8%	35 1.3%	32 1.4%	52 2.8%	79 3.9%	141 7.3%	298 15.0%	654 28.9%	1126 54.0%	1461 82.3%

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 (2017 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 1, 2018⁴)

Is the child legally free (his or her parents' rights have been terminated)?			
Yes 614	No ↓ 3115		
<i>Goals of:</i>		Has the child been in care more than 15 months?	
574 (93%) Adoption	No ↓ 2002	Yes ↓ 1113	
27 (4%) APPLA			Has a TPR proceeding been filed?
10 (2%) Transfer of Guardianship		Yes 259	No ↓ 854
2 (<1%) Blank		<i>Goals of:</i>	Is a reason documented not to file TPR?
1 (<1%) Reunification		218 (84%) Adoption	Yes 187
		18 (7%) Reunify	No 667
		12 (5%) Trans. of Guardian: Sub/Unsub	<i>Goals of:</i>
		9 (3%) APPLA	95 (51%) Trans. of Guardian: Sub/Unsub
		2 (1%) Blank	45 (24%) Adoption
			32 (17%) Reunify
			15 (8%) APPLA
			Services not provided
			<i>Documented Reasons:</i>
			56% Compelling Reason
			19% Child is with relative
			18% Petition in process
			7% Services not provided
			<i>Goals of:</i>
			247 (37%) Trans. of Guardian: Sub/Unsub
			206 (31%) Reunify
			162 (24%) Adoption
			50 (7%) APPLA
			2 (<1%) Blank

⁴ Children over age 18 are not included in these figures.

Preferred Permanency Goals:

Reunification	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Total number of children with Reunification goal, pre-TPR and post-TPR	1602	1556	1531	1555	1615	1587
Number of children with Reunification goal pre-TPR	1601	1556	1531	1555	1614	1586
<ul style="list-style-type: none"> Number of children with Reunification goal, pre-TPR, >= 15 months in care 	325	307	296	308	283	256
<ul style="list-style-type: none"> Number of children with Reunification goal, pre-TPR, >= 36 months in care 	44	41	38	33	29	30
Number of children with Reunification goal, post-TPR	1	0	0	0	1	1

Transfer of Guardianship (Subsidized and Non-Subsidized)	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Total number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR and post TPR	519	498	522	538	558	558
Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR	503	484	512	530	548	548
<ul style="list-style-type: none"> Number of children with Transfer of Guardianship goal (subsidized and non-subsidized , pre-TPR, >= 22 months) 	186	157	186	202	223	230
<ul style="list-style-type: none"> Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR , >= 36 months) 	63	62	61	59	63	64
Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), post-TPR	16	14	10	8	10	10

Adoption	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Total number of children with Adoption goal, pre-TPR and post-TPR	1167	1181	1153	1188	1198	1249
Number of children with Adoption goal, pre-TPR	589	633	620	618	626	675
Number of children with Adoption goal, TPR not filed, >= 15 months in care	202	219	213	195	194	207
<ul style="list-style-type: none"> Reason TPR not filed, Compelling Reason 	6	9	7	6	9	10
<ul style="list-style-type: none"> Reason TPR not filed, petitions in progress 	21	26	23	26	31	29
<ul style="list-style-type: none"> Reason TPR not filed , child is in placement with relative 	4	11	8	5	8	5
<ul style="list-style-type: none"> Reason TPR not filed, services needed not provided 	5	3	0	0	3	1
<ul style="list-style-type: none"> Reason TPR not filed, blank 	166	170	175	158	143	162
Number of cases with Adoption goal post-TPR	578	548	533	570	572	574
<ul style="list-style-type: none"> Number of children with Adoption goal, post-TPR, in care >= 15 months 	544	521	509	551	552	541
<ul style="list-style-type: none"> Number of children with Adoption goal, post-TPR, in care >= 22 months 	471	444	429	465	473	483
Number of children with Adoption goal, post-TPR, no barrier, > 3 months since TPR	12	19	10	10	14	14
Number of children with Adoption goal, post-TPR, with barrier, > 3 months since TPR	55	46	40	49	42	39

Adoption	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Number of children with Adoption goal, post-TPR, with blank barrier, > 3 months since TPR	265	284	267	308	361	317

Progress Towards Permanency:	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Total number of children, pre-TPR, TPR not filed, >=15 months in care, no compelling reason	687	628	678	674	686	667

Non-Preferred Permanency Goals:

Long Term Foster Care Relative:	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Total number of children with Long Term Foster Care Relative goal	4	2	1	0	0	0
Number of children with Long Term Foster Care Relative goal, pre-TPR	2	2	1	0	0	0
<ul style="list-style-type: none"> Number of children with Long Term Foster Care Relative goal, 12 years old and under, pre-TPR 	0	0	0	0	0	0
Long Term Foster Care Rel. goal, post-TPR	0	0	0	0	0	0
<ul style="list-style-type: none"> Number of children with Long Term Foster Care Relative goal, 12 years old and under, post-TPR 	0	0	0	0	0	0

APPLA*	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Total number of children with APPLA goal	110	104	109	106	129	113
Number of children with APPLA goal, pre-TPR	87	83	85	78	97	86
<ul style="list-style-type: none"> Number of children with APPLA goal, 12 years old and under, pre-TPR 	0	0	0	0	0	0
Number of children with APPLA goal, post-TPR	23	21	24	28	32	27
<ul style="list-style-type: none"> Number of children with APPLA goal, 12 years old and under, post-TPR 	0	0	0	0	0	0

* 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.

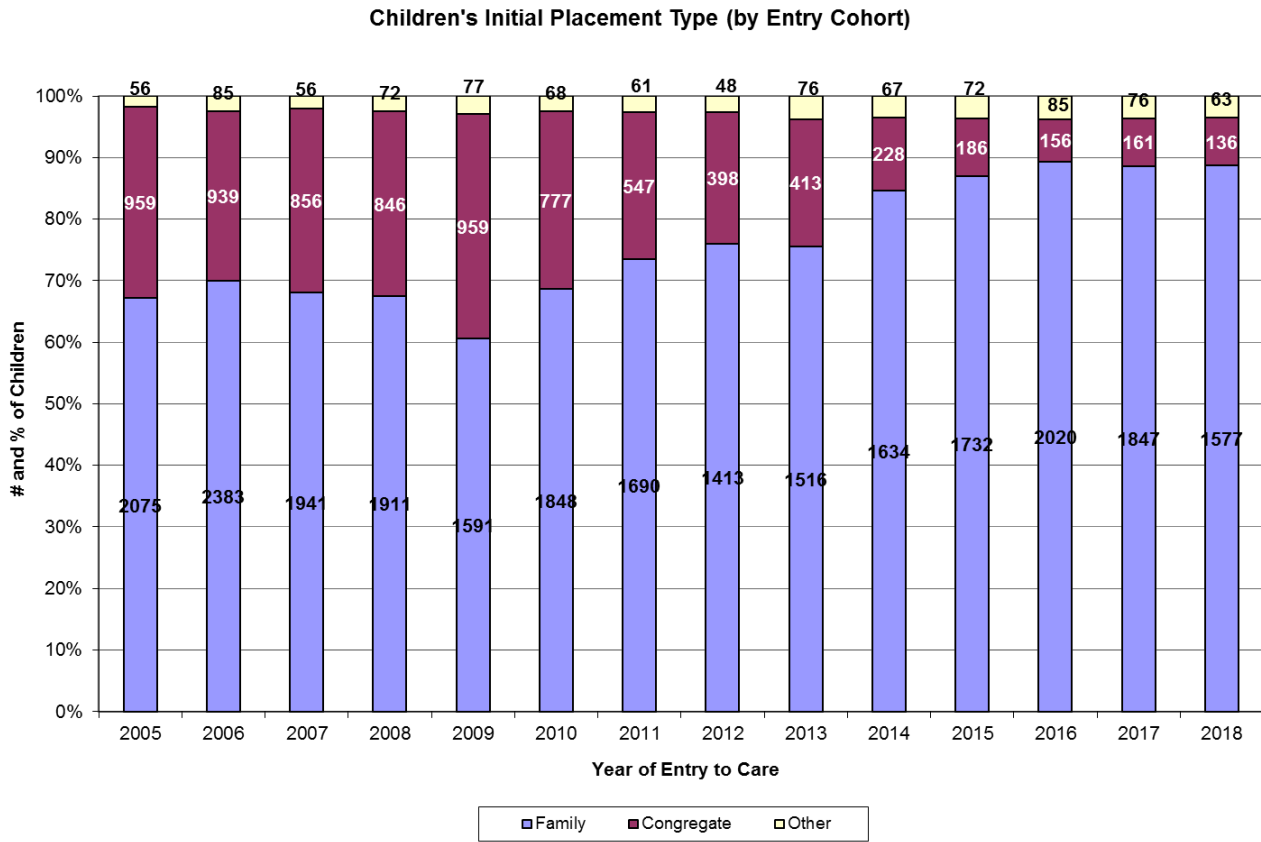
Missing Permanency Goals:

	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Number of children, with no Permanency goal, pre-TPR, >= 2 months in care	28	29	14	12	15	17
Number of children, with no Permanency goal, pre-TPR, >= 6 months in care	12	15	7	9	8	6
Number of children, with no Permanency goal, pre-TPR, >= 15 months in care	7	9	2	7	6	4
Number of children, with no Permanency goal, pre-TPR, TPR not filed, >= 15 months in care, no compelling reason	4	6	1	5	3	2

B. PLACEMENT ISSUES

Placement Experiences of Children

The following chart shows the change in use of family and congregate care for admission cohorts between 2005 and 2018.

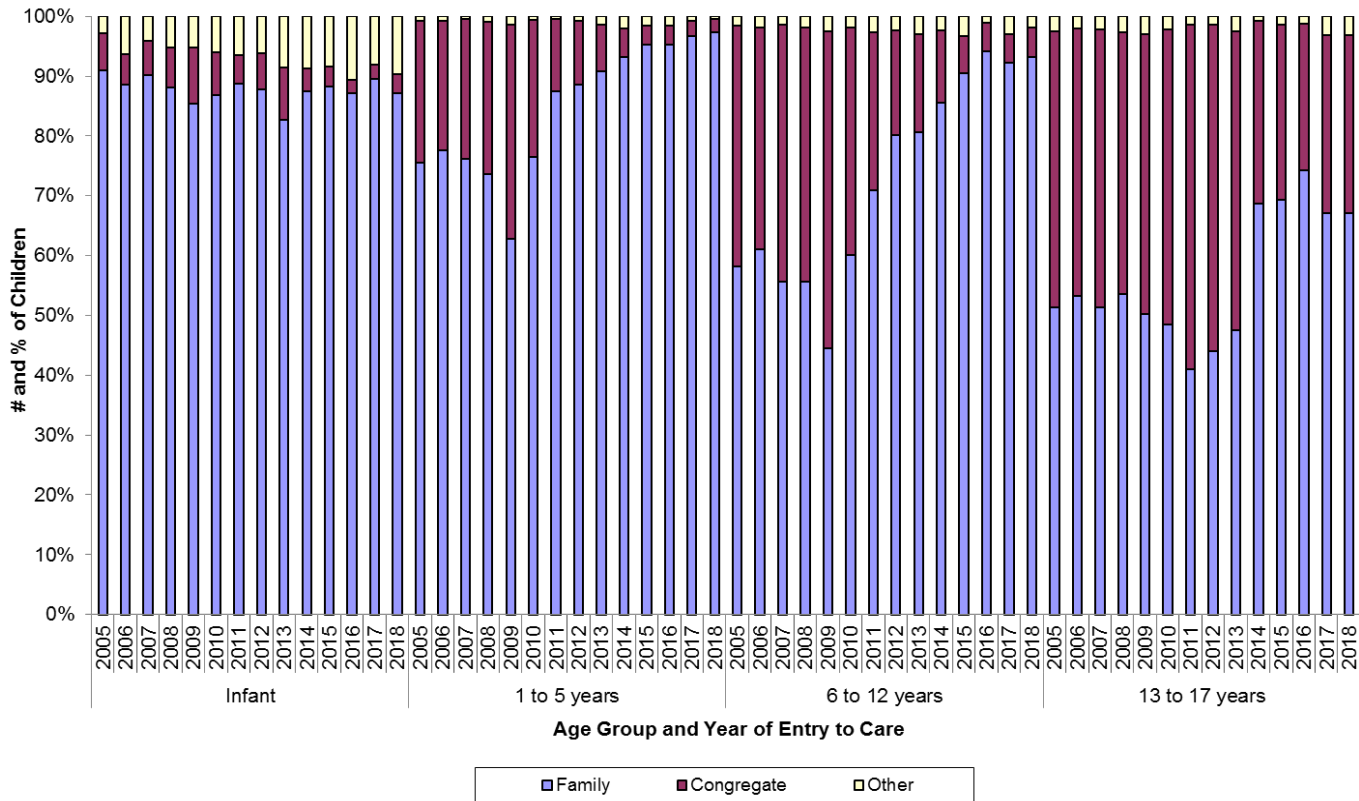


The next table shows specific care types used month-by-month for entries between October 2017 and September 2018.

Case Summaries													
First placement type		enterOct17	enterNov17	enterDec17	enterJan18	enterFeb18	enterMar18	enterApr18	enterMay18	enterJun18	enterJul18	enterAug18	enterSep18
Residential	N	2	3	1	1	4	2	2	5	3	5	3	5
	%	1.0%	2.2%	0.7%	0.6%	2.0%	1.1%	1.0%	2.4%	1.4%	2.5%	1.4%	2.7%
DCF Facilities	N	2	1	1	3	1	3	3	1	3			1
	%	1.0%	0.7%	0.7%	1.7%	0.5%	1.7%	1.5%	0.5%	0.5%	1.5%		0.5%
Foster Care	N	78	62	62	93	108	104	83	105	101	92	108	77
	%	40.2%	44.9%	45.9%	53.4%	54.3%	57.5%	40.9%	51.0%	48.8%	46.7%	48.9%	41.0%
Group Home	N			1	1	1	1	3	1	2	1	2	1
	%			0.7%	0.6%	0.5%	0.6%	1.5%	0.5%	1.0%	0.5%	0.9%	0.5%
Relative Care	N	70	51	46	50	55	44	88	69	77	70	81	78
	%	36.1%	37.0%	34.1%	28.7%	27.6%	24.3%	43.3%	33.5%	37.2%	35.5%	36.7%	41.5%
Medical	N	10	7	5	8	7	9	8	3	9	9	7	3
	%	5.2%	5.1%	3.7%	4.6%	3.5%	5.0%	3.9%	1.5%	4.3%	4.6%	3.2%	1.6%
Safe Home	N	5	3	5	6	7	7	4	7	4	4		3
	%	2.6%	2.2%	3.7%	3.4%	3.5%	3.9%	2.0%	3.4%	1.9%	2.0%		1.6%
Shelter	N	4		3	5	4	2	2	5	5	3	2	7
	%	2.1%		2.2%	2.9%	2.0%	1.1%	1.0%	2.4%	2.4%	1.5%	0.9%	3.7%
Special Study	N	23	11	11	7	12	9	10	10	5	10	18	13
	%	11.9%	8.0%	8.1%	4.0%	6.0%	5.0%	4.9%	4.9%	2.4%	5.1%	8.1%	6.9%
Total	N	194	138	135	174	199	181	203	206	207	197	221	188
	%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

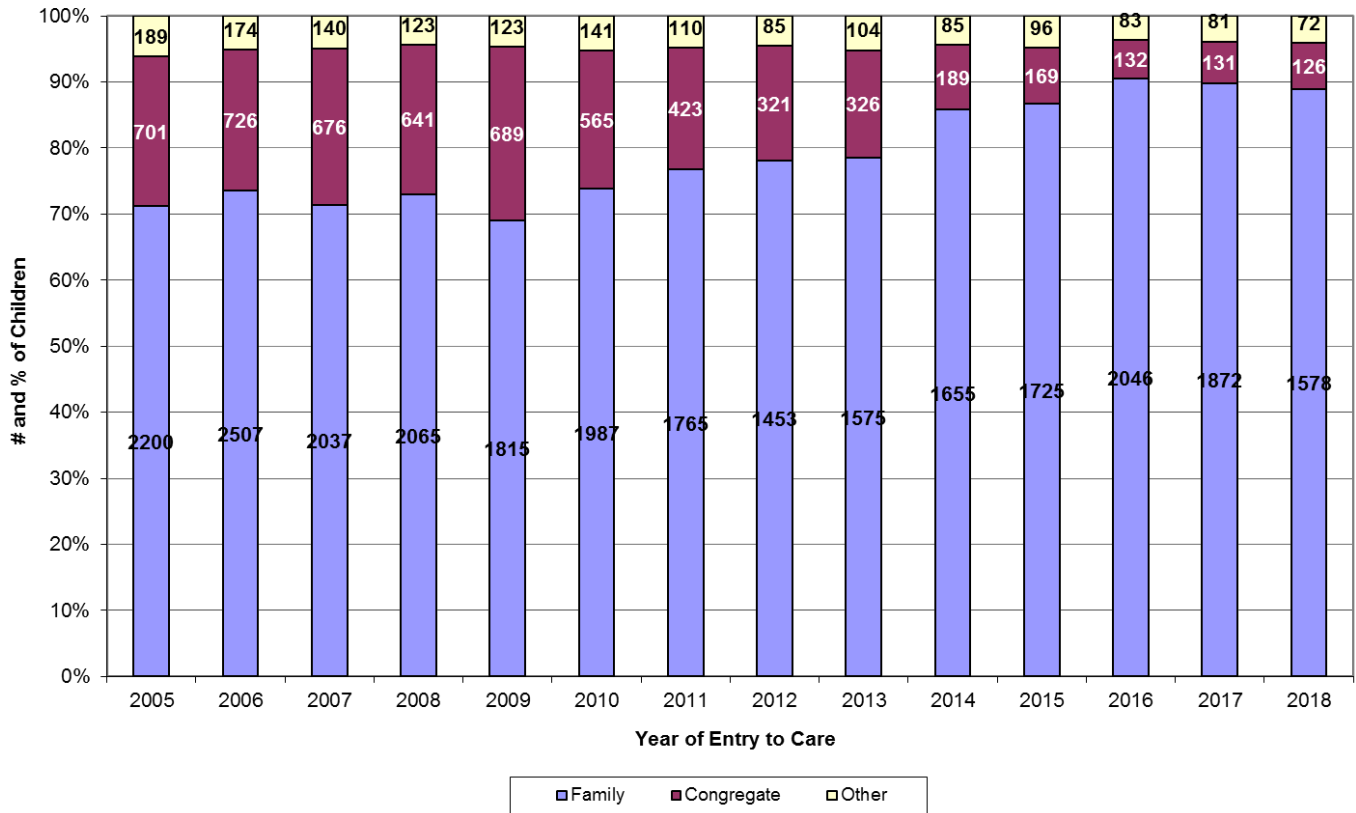
The chart below shows the change in level of care usage over time for different age groups.

Children's Initial Placement Settings By Age And Entry Cohort



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 2005 through 2018 admission cohorts.

Children's Predominant Placement Type (by Entry Cohort)



The following chart shows monthly statistics of children who exited from DCF placements between October 2017 and September 2018, 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)		exitOct17	exitNov17	exitDec17	exitJan18	exitFeb18	exitMar18	exitApr18	exitMay18	exitJun18	exitJul18	exitAug18	exitSep18
Residential	N	3	5	4	5	2	4	4	1	4	7	4	
	%	1.9%	2.3%	2.5%	3.4%	1.6%	2.1%	2.4%	0.6%	2.2%	4.9%	1.8%	
DCF Facilities	N	3	3	2		1	4	2		4	3	4	1
	%	1.9%	1.4%	1.2%		0.8%	2.1%	1.2%		2.2%	2.1%	1.8%	0.8%
Foster Care	N	56	90	71	64	48	83	74	78	81	67	85	51
	%	34.8%	41.9%	43.8%	43.2%	37.8%	43.2%	43.5%	47.0%	45.3%	46.9%	38.5%	38.9%
Group Home	N	3	3	7	7	5	9	4	2	6	5	4	7
	%	1.9%	1.4%	4.3%	4.7%	3.9%	4.7%	2.4%	1.2%	3.4%	3.5%	1.8%	5.3%
Independent Living	N	2	2	5	1	6	5	4	1	5	2	1	2
	%	1.2%	0.9%	3.1%	0.7%	4.7%	2.6%	2.4%	0.6%	2.8%	1.4%	0.5%	1.5%
Relative Care	N	75	88	53	51	47	71	60	60	56	46	89	53
	%	46.6%	40.9%	32.7%	34.5%	37.0%	37.0%	35.3%	36.1%	31.3%	32.2%	40.3%	40.5%
Medical	N	2	6	3	4	2	5	1		2	1	4	
	%	1.2%	2.8%	1.9%	2.7%	1.6%	2.6%	0.6%		1.1%	0.7%	1.8%	
Safe Home	N		1	1	3		2	2	2	1	2	3	1
	%		0.5%	0.6%	2.0%		1.0%	1.2%	1.2%	0.6%	1.4%	1.4%	0.8%
Shelter	N	2	3		4	2		2	4	5	3	1	3
	%	1.2%	1.4%		2.7%	1.6%		1.2%	2.4%	2.8%	2.1%	0.5%	2.3%
Special Study	N	14	12	15	7	13	8	15	16	14	7	22	11
	%	8.7%	5.6%	9.3%	4.7%	10.2%	4.2%	8.8%	9.6%	7.8%	4.9%	10.0%	8.4%
Unknown	N	1	2	1	2	1	1	2	2	1		4	2
	%	0.6%	0.9%	0.6%	1.4%	0.8%	0.5%	1.2%	1.2%	0.6%		1.8%	1.5%
Total	N	161	215	162	148	127	192	170	166	179	143	221	131
	%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

The next chart shows the primary placement type for children who were in care on October 1, 2018 organized by length of time in care.

Primary type of spell (>50%) * Duration Category Crosstabulation										
			Duration Category							
			< 30	durat < 90	durat < 180	durat < 365	durat < 545	durat <	1095	Total
Primary type of spell (>50%)	Residential	Count	5	7	9	15	8	20	20	84
		% Row	6.0%	8.3%	10.7%	17.9%	9.5%	23.8%	23.8%	100.0%
		% Col	2.8%	1.8%	1.8%	2.1%	1.4%	2.0%	3.1%	2.1%
DCF		Count	1	0	1	3	5	7	0	17
		% Row	5.9%	0.0%	5.9%	17.6%	29.4%	41.2%	0.0%	100.0%
		% Col	0.6%	0.0%	0.2%	0.4%	0.9%	0.7%	0.0%	0.4%
Foster Care		Count	68	146	178	313	263	508	395	1871
		% Row	3.6%	7.8%	9.5%	16.7%	14.1%	27.2%	21.1%	100.0%
		% Col	37.6%	38.4%	36.3%	43.4%	45.4%	51.9%	62.0%	47.2%
Group		Count	1	3	9	9	4	26	37	89
		% Row	1.1%	3.4%	10.1%	10.1%	4.5%	29.2%	41.6%	100.0%
		% Col	0.6%	0.8%	1.8%	1.2%	0.7%	2.7%	5.8%	2.2%
Independent		Count	0	0	0	0	0	0	1	1
		% Row	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	100.0%
		% Col	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.0%
Relative		Count	79	172	219	283	239	293	76	1361
		% Row	5.8%	12.6%	16.1%	20.8%	17.6%	21.5%	5.6%	100.0%
		% Col	43.6%	45.3%	44.7%	39.3%	41.3%	29.9%	11.9%	34.3%
Medical		Count	0	3	1	0	2	5	2	13
		% Row	0.0%	23.1%	7.7%	0.0%	15.4%	38.5%	15.4%	100.0%
		% Col	0.0%	0.8%	0.2%	0.0%	0.3%	0.5%	0.3%	0.3%
Mixed (none)		Count	1	1	6	9	12	30	70	129
		% Row	0.8%	0.8%	4.7%	7.0%	9.3%	23.3%	54.3%	100.0%
		% Col	0.6%	0.3%	1.2%	1.2%	2.1%	3.1%	11.0%	3.3%
Safe Home		Count	3	0	5	4	1	2	1	16
		% Row	18.8%	0.0%	31.3%	25.0%	6.3%	12.5%	6.3%	100.0%
		% Col	1.7%	0.0%	1.0%	0.6%	0.2%	0.2%	0.2%	0.4%
Shelter		Count	7	5	6	9	3	0	0	30
		% Row	23.3%	16.7%	20.0%	30.0%	10.0%	0.0%	0.0%	100.0%
		% Col	3.9%	1.3%	1.2%	1.2%	0.5%	0.0%	0.0%	0.8%
Special		Count	14	30	37	62	41	76	32	292
		% Row	4.8%	10.3%	12.7%	21.2%	14.0%	26.0%	11.0%	100.0%
		% Col	7.7%	7.9%	7.6%	8.6%	7.1%	7.8%	5.0%	7.4%
Unknown		Count	2	13	19	14	1	12	3	64
		% Row	3.1%	20.3%	29.7%	21.9%	1.6%	18.8%	4.7%	100.0%
		% Col	1.1%	3.4%	3.9%	1.9%	0.2%	1.2%	0.5%	1.6%
Total		Count	172	314	443	791	612	824	660	3816
		% Row	4.5%	8.2%	11.6%	20.7%	16.0%	21.6%	17.3%	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 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Total number of children 12 years old and under, in Congregate Care	17	20	17	17	15	17
• Number of children 12 years old and under, in DCF Facilities	0	0	0	0	0	1
• Number of children 12 years old and under, in Group Homes	5	6	6	5	7	4
• Number of children 12 years old and under, in Residential	9	8	7	7	7	8
• Number of children 12 years old and under, in Safe Home or SFIT	2	3	2	4	1	4
• Number of children 12 years old and under in Shelter	1	3	2	1	0	0
Total number of children ages 13-17 in Congregate Placements	237	243	225	228	233	218

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													
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Total Entries	3090	3407	2853	2829	2627	2693	2298	1859	2005	1929	1990	2261	2084	1776
SAFE Homes/ SFIT	394 13%	395 12%	382 13%	335 12%	471 18%	331 12%	145 6%	68 4%	56 3%	30 2%	9 0%	23 1%	54 3%	42 2%
Shelter	178 6%	114 3%	136 5%	144 5%	186 7%	175 6%	194 8%	169 9%	175 9%	91 5%	58 3%	53 2%	35 2%	35 2%
Total	572 19%	509 15%	518 18%	479 17%	657 25%	506 19%	339 15%	237 13%	231 12%	121 6%	67 3%	76 3%	89 4%	77 4%

	Period of Entry to Care													
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Total Initial Plcmnts	572	509	518	479	657	506	339	237	231	121	67	76	89	77
<= 30 days	241 42%	186 37%	162 31%	150 31%	229 35%	135 27%	103 30%	60 25%	63 27%	37 31%	28 42%	28 37%	36 40%	52 68%
31 - 60	114 20%	73 14%	73 14%	102 21%	110 17%	106 21%	56 17%	44 19%	41 18%	27 22%	9 13%	13 17%	25 28%	8 10%
61 - 91	76 13%	87 17%	79 15%	85 18%	157 24%	91 18%	54 16%	39 16%	38 16%	18 15%	8 12%	8 11%	12 13%	6 8%
92 - 183	100 17%	118 23%	131 25%	110 23%	124 19%	136 27%	84 25%	56 24%	57 25%	24 20%	15 22%	17 22%	10 11%	10 13%
184+	41 7%	45 9%	73 14%	32 7%	37 6%	38 8%	42 12%	38 16%	32 14%	15 12%	7 10%	10 13%	6 7%	1 1%

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 2017	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Total number of children in SAFE Home/SFIT	8	8	11	10	17	13	9
• Number of children in SAFE Home/SFIT, > 60 days	3	3	4	5	14	5	4
• Number of children in SAFE Home/SFIT, >= 6 months	0	0	1	1	1	1	1
Total number of children in STAR/Shelter Placement	29	25	26	24	26	25	23
• Number of children in STAR/Shelter Placement, > 60 days	12	16	16	12	14	13	12
• Number of children in STAR/Shelter Placement, >= 6 months	2	4	1	3	3	3	4
Total number of children in MH Shelter	0	0	0	0	0	0	0
• Total number of children in MH Shelter, > 60 days	0	0	0	0	0	0	0
• Total number of children in MH Shelter, >= 6 months	0	0	0	0	0	0	0

Time in Residential Care

Placement Issues	May 2017	Aug 2017	Nov 2017	Feb 2018	May 2018	Aug 2018	Nov 2018
Total number of children in Residential care	86	86	89	89	82	93	91
• Number of children in Residential care, >= 12 months in Residential placement	24	27	31	28	27	29	21
• Number of children in Residential care, >= 60 months in Residential placement	0	0	0	1	0	0	0