

***Juan F.* v. Lamont Exit Plan Status Report
October 1, 2019 - March 31, 2020
Civil Action No. 2:89 CV 859 (SRU)**

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October 1, 2019 - March 31, 2020**

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Highlights

This Status Report officially covers the Fourth Quarter of 2019 (October-December 2019) and the First Quarter of 2020 (January-March 2020). But, given the extraordinary events of the last several months, the *Juan F.* parties in discussion with the Court Monitor have decided to also utilize this report to provide a real time update on the Department's activities and performance during the COVID-19 pandemic episode that began in March 2020. The report presents both formal findings that address compliance with the remaining Outcome Measures and informal data that examines a variety of current foundational child welfare issues since March 2020. The informal summary data is presented in a separate section, *Appendix A-Data Summary for March 2020 - August 2020 (COVID-19)* of the report beginning on page 66.

Extraordinary efforts have been made by the agency and their partners during this time of crisis. Commissioner Dorantes and her team maintained ongoing operations throughout this period as the agency continues to respond to the everchanging circumstances and emerging challenges with additional instructions, precautions and actions. Communication by the DCF Administration has been frequent, honest, and effective with both her staff and outside stakeholders. Front-line Social Worker responders, Solnit North and South facility staff, and Careline staff continued their 24/7 work despite the many challenges. Foster parents (both Department Core families and Therapeutic Foster families) continued to meet the needs of the children in their homes despite the threat and hardships that COVID-19 presents for them. Their dedication is remarkable. The small number of children that had to be moved is proof of their commitment. The private non-profit provider network responded to the crisis by both continuing their work while also reinventing their interventions to include virtual therapy strategies to meet family's needs in the most appropriate manner possible. DCF staff (Regional and Central Office) made substantial efforts to contact all foster parents, older adolescents, in-home serviced families, and providers on a regular basis. Information Systems, CT-Kind, Help Desk and staff from the Academy for Workforce Development coordinated and supported the unprecedented move of more than 2,000 staff to a teleworking environment. Fiscal and Engineering staff tackled the need for infection prevention activities with great success. After initial challenges, supplies of PPE and routine deep cleaning protocols for offices were quickly put in place. Despite these safety efforts by the Department, in maintaining a balance to meet the staff needs and needs of the families they serve; there has been a significant impact on families given the inability for many parents with children in placement to visit face-to-face. Further, delays in court proceedings mean many reunification, adoption, and transfer of guardianship decisions have been delayed and actions related to petitions filed since March 2020 have not occurred. Children's and family's therapeutic needs have been disrupted during this time period despite considerable effort by community providers to quickly pivot to virtual platforms and tele-therapy. The Department has developed a plan for continued operation during the pandemic crisis and it is formally being reviewed at the time of this report. The plan, in part, calls for deliberate and continued movement to more face-to-face contact while closely tracking any adverse consequences. It is hoped that by end of August all cohorts of children will be included in the person visitation triage process that has been set up.

Significant progress has been made with respect to the remaining 2017 Revised Exit Plan measures that have not been pre-certified. The Department has maintained their performance with the pre-certified Outcome Measures and the Court Monitor has determined that Outcome Measure 2 (Completion of Investigation/FAR) is pre-certified. The findings were recently shared with the Honorable Judge Stefan R. Underhill and the *Juan F.* parties. The findings indicate that 87.6% of the reviewed cases were deemed compliant with the standards outlined in the 2017 Revised Exit Plan. The review demonstrated that the Department makes strong efforts to interview children and families in a timely manner, conduct appropriate formal and informal assessments, offer services as needed, and document the resulting findings in the case record. The findings of the review of 370 cases is detailed in a separate section of the report beginning on page 19. Finally, the Department has shown progress over the last two quarters with specific domains of Outcome Measure 3 (Case Planning) and Outcome Measure 4 (Children's Needs Met). It appears that the enhancement of services with documented waitlists that was part of the current budget, along with continued improvements with assessment and care coordination are having a positive impact. The number of incidents of unmet needs identified within sampled cases was again reduced from previous quarters. Each of these measures are discussed in further detail within the report.

- The Court Monitor's findings regarding the 2017 Revised Exit Plan Outcome Measures indicate the Department has now met and sustained compliance with seven (7) of the 10 measures as of the period reporting for the Fourth Quarter 2019 and the First Quarter 2020. As described above, Outcome Measure 2 (Completion of Investigation/FAR) was met and maintained resulting in pre-certification during this period. The summary chart on page 12 provides the automated Outcome Measure performance/percentages. 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 significant issues continue to be the Department's case planning process, meeting children and families service needs, and appropriate visitation with children and required adult family members of the agency's in-home cases.
- Paragraph 4 of the 2017 Revised Exit Plan mandates 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 outlined specific implementation steps and strategies for each of the four (4) measures that had not been pre-certified at that point. The plan is meant to be dynamic and it is systemically reviewed by the Department and the Court Monitor's Office to identify progress, areas of concern and revisions that are necessary. Most elements in the plan have now been addressed. The Department's evolving plan to resume full operation of servicing was a more viable effort to focus on given the circumstances during the ongoing pandemic and has been discussed with the Parties.

- The 2017 Revised Exit Plan provides a framework that focuses on the individual domains comprising Outcome Measures 3 (Case Planning) and Outcome Measure 4 (Needs Met). The agreement allows the Department to pre-certify for compliance on an individual domain basis. By focusing on individual domains, the Department can better identify the many strengths in its practice and work on specific strategies to address ongoing areas of concern. The *Juan F.* 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)** four case planning domains have met and sustained the required benchmark:

- Case Plan Approvals
- Accommodating Family/Child's Language Needs
- Identifying Information
- Reason for Involvement

During the last eight quarters, the Department has consistently met the requirement for Supervisory Approval and Accommodation of Language Needs. The domain Identifying Information was met and sustained in Second Quarter 2018 through First Quarter 2019 and then after a gap in performance, again in this reporting cycle of Fourth Quarter 2019 and First Quarter 2020. Reason for DCF Involvement, was achieved and maintained during the reporting period encompassing Fourth Quarter 2018 and First Quarter 2019. It was not sustained in the remainder of 2019 but has again been met in the First Quarter 2020.

While the findings for two domains had dropped slightly in the prior period, these domains remain pre-certified at this time and are above the benchmark standards as of the First Quarter results. Additionally, for the first time since reporting began on these domains, Engagement of Child and Family, Progress and Planning for Permanency have been met. The requirement for precertification is that they be achieved and maintained, this will be monitored going forward into 2020/2021 when we resume full monitoring of the identified domains later this year.

While the Department must continue to improve in engaging children and families in case planning and assessment of the needs of children and families, most cases reviewed demonstrated better engagement by DCF staff in the case planning process across the six months reviewed for this Status Report. The attendance at Administrative Case Reviews continues to be an area needing improvement. The summary chart on page 36 regarding the attendance at the Administrative Case Reviews (ACR) indicates that adolescents, fathers, Guardians ad Litem (GAL), and active providers have attendance rates that must improve. We note the agency made strong efforts to utilize teleconference options during the months since March to allow for participation.

As mentioned in each Status Report, the antiquated LINK system presents challenges in assisting staff with ticklers, updates, navigating within the plan and prefilling critical information. The Department has created additional reports to try to compensate for these shortcomings. Further discussion of Outcome Measure 3 findings is found on page 31 with a summary chart of the findings for the domains of Outcome Measure 3 on page 32.

Based on the data from this review period, eight (8) of the 11 **Outcome Measure 4 (Needs Met)** domains maintained an 85% or higher compliance in each of the quarters.

The Department currently has 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)
- Dental (August 2020 Status Report)

It must be noted that for the first time ever, that the findings for the First Quarter 2020 indicates the Department achieved all the domains. Once formal reviews begin again, most likely in the Fourth Quarter 2020, we will follow up to see if these gains have been maintained.

Some domains have fluctuated in maintenance or required rates following initial pre-certification as noted in our reporting of monitored performance in the quarters since goal achievement.

Joining the list of pre-certified domains for the first time is Dental Needs, which were met with findings of 86.8% and 87.0% across two quarters of the period under review. The three domains with which the Department continues to have the most difficulty are: Risk: In-Home, Permanency: DCF Case Management - Contracting or Providing Services to Achieve the Permanency Goal During the Prior Six Months, and Well Being: Mental Health, Behavioral Health, and Substance Abuse Services.

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 are not readily available in all areas of the state consistently. This has improved in recent quarters given the budget support that allowed the Department to address some waitlist service issues and the ongoing efforts to improve service coordination within the agency. Services that have various levels of wait listing or struggle with timely availability include: outpatient mental health services, in-home services, substance abuse services, domestic violence services, mentoring, supportive

housing vouchers, foster and adoptive resources, and readily available placement/treatment options.

The budget that was passed last year by the legislature and signed by Governor Lamont provided additional funding for an array of some of the services that are either not available statewide or have demonstrated wait lists. It is important to note that the findings from two quarters reviewed for this status report have again demonstrated a drop in unmet needs from the previous findings. The previous status report indicated a total of 325 unmet needs documented. This report found 237 for the period of review. As indicated above, the current stable service funding level along with the continued efforts to improve care coordination are two of the likely foundations in the noted improvement in timely service provision. This review period, the top unmet needs were Individual Counseling-Parent, Visitation with Parents, DCF Contact with active providers Individual Counseling-Child, and Dental Screening/Evaluation. Client refusal remains the top noted reason for unmet need. The summary chart on page 42 details the findings for Outcome Measure 4.

- 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 two visits per month with each active member of an in-home case. A previous review of this measure to ascertain compliance for pre-certification identified concerns with both the quality and quantity of the visits. Until the "CT Kind" LINK replacement system is implemented there is no readily viable automated method to evaluate this measure. Individual case reviews are required. Thus, the Court Monitor conducted a statistically valid sample of in-home cases to establish a benchmark for current practice. Approximately 350 cases were reviewed to determine the Department's performance in both seeing children and families as often as prescribed in their policy and in a quality manner. A formal report was not prepared, but the findings were shared and discussed with *Juan F.* parties. Improvement from a 2012 review was noted but DCF did not achieve compliance with required goals. The move to teleworking necessitated by the COVID-19 pandemic has introduced virtual visitation to the agency's work on a widespread basis. While in-person visitation will remain the most appropriate means to provide case management services to families this technological development has provided the Department with an additional effective method to engage families and children. Informal reviews being conducted during the last several months by Court Monitor staff and DCF Quality Improvement staff have revealed improved timely documentation and concerted efforts to contact families, children and stakeholders involved with in-home service cases by the Department. Quality indicators for this measure include whether the Department is assessing all identified members of the family, speaking with the children alone when possible, appropriate documentation of their meetings, addressing the key elements that resulted in reports to the Department, correct utilization of SDM to determine risk levels that inform the required frequency of visitation, supervision activities and follow up to Social Work Supervisors' directives with respect to visitation, etc.
- Outcome Measure 6 (Caseload/Staffing) remains in compliance after being pre-certified during the previous review period. This compliance is critical to continuing to improve outcomes for children and families. The maintenance of this standard allowed workers relief from excessive caseload size and has assisted the Department in improving their performance on many foundational practices such as contact and visitation, engagement,

assessment, documentation in the case record, ensuring that family's needs are met, service coordination and the pre-certification of the remaining Outcome Measures such as Outcome Measure 2 (Completion of Investigation/FAR) presented in this report.

- 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 via the CT-Kind team has continued to perform a very detailed analysis of each of the primary work components. There are many activities in progress or being implemented. None has been more important given the impact of the COVID-19 pandemic than the efforts regarding mobility. The original intent was to give users access to the DCF communications and case management systems while outside the office to improve timeliness, data quality and business results. This mobile capability will be enhanced and integrated into the CT-Kind modules being developed. The pandemic accelerated plans and hundreds of Dell tablets were rapidly deployed to promote remote access. In very rapid fashion the Department geared up and had approximately 2000 staff able to work remote at the time of this report. The support provided by Department's IS staff, Academy for Workforce Development staff, and the Fiscal staff was remarkable. Based on the ongoing informal reviews being done by the Court Monitor it is evident that this mobility component greatly enhances the timeliness and quality of the agencies primary work and documentation with families and providers.

The agency has just launched the Kronos Timekeeping and Scheduling build. This project will eliminate manual timekeeping and scheduling processes through the statewide use of Kronos for all agencies. The system will track time and attendance, project staffing needs, create schedules and rotations, and provide real-time feedback to management and synchronize with Core-CT. The agency is also working on a new phone system for Careline that will be compatible with the new statewide technology being implemented. The Careline and CT-Kind are in the final stages of selecting a carrier and will begin implementation later in 2020. The last project that will be mentioned in this report (there are many additional important components is the Office 365 effort. Office 365 will enable work from anywhere as this cloud-based system provides access to e-mail, files and software form any internet connected device.

This is being partially addressed by the release and use of the tablets. The positive impact will be fully realized once the new CT-Kind is released. Staff can now readily access their desk top system when they are away from the office. This means that they have remote access to their case files. As mentioned earlier, current review activity indicates that the tablets are already making a difference in the quality of the case record documentation.

- For many years, the Department has utilized Structured Decision Making (SDM) as the formal means to assess the families it serves. There are several 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 in achieving the remaining Outcome Measures. The pre-certification review of Outcome Measure 2 (Completion of Investigation/FAR) determined that the Department's SDM efforts for this

work were consistent with Assessment visits occurring timely and being recorded accurately. Documentation of the assessments was not, however always entered timely as prescribed by the DCF policy. Case readings conducted by DCF Quality Improvement, Administrative Case Review, and Workforce for Development and Training staff reached similar conclusions regarding the quality of the Investigations SDM work. Additionally, virtual training of Intake Social Work Supervisors and Program Supervisors was conducted that reinforced the blending of SDM in Investigation work.

The Departments efforts with SDM with respect to their Ongoing Services work is less timely and consistent and is an area that must improve to meet the requirements for the remaining three Outcome Measures that have not been pre-certified. Formal and informal review of cases demonstrates that while documentation often reflects that informal assessment does occur in many cases, it is prone to being influenced by individual bias, varied application of relevant standards and is be inconsistent across the 14 offices of the agency. Thus, the focus on ensuring that the formal assessment work utilizing SDM is imperative to ground the Department consistent decision making.

- The court-ordered 2017 Revised Exit Plan applies to class members who receive placement, 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 methodologies of individual cases and system wide data runs include these youth and the Court Monitor has had full access to DCF staff and records if they are selected for review.

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 were held with staff from the Judicial Branch (CSSD) and an agreement was reached on how to continue to monitor the small number of *Juan F.* youth that are now being serviced by CSSD. The Court Monitor has been provided with timely access to staff, data, and records that are required to report on the Exit Plan performance for those class members serviced by CSSD.

- The Division of Foster Care's report for January-March 2020 indicates that there are 2,202 licensed DCF foster homes. This is an increase of 30 homes when compared with the previous status report. Of the total of 2,202 licensed DCF foster care homes, 996 (45%) are kin/fictive kin families. The number of approved private provider foster care homes (Therapeutic Foster Homes) is 811 which is an increase of 40 homes from the previous status report. The number of private provider foster homes currently available for placement is 104. The number of children in placement as of August 2020 was 4,080 which is similar to the total from January 2020 of 4,084.
- As of May 2020, the number of children with the goal of Other Planned Permanent Living Arrangement (OPPLA) was 131. This is a decrease from November 2019, when there were 136 children with an OPPLA goal. While this goal is appropriate for some youth, it is not a

preferred goal due to the lack of formal permanent and stable relationships with an identified adult support, be it relative or kin.

- As of May 2020, there were 81 *Juan F.* children placed in residential facilities. This is a decrease of one child compared with November 2019. The number of children residing in residential care for greater than 12 months was 25 which is two more than reported in November 2019.
- The Department continues to focus on the number of *Juan F.* children residing and receiving treatment in out-of-state residential facilities. As of August 2020, there are six (6) children in DCF custody residing in out-of-state residential facilities.
- The number of children age 12 years old or younger in congregate care as of May 2020 was 14 children, which is one less child than the number reported in November 2019. Of the current total, eight (8) are placed in residential care, three (3) children are placed in group homes, and three (3) are in a shelter.
- As of May 2020, there are no children aged 1 to 5 years of age residing in a congregate setting. There are four (4) children placed in medical settings.
- The number of children utilizing Short-term Family Integrated Treatment (SFIT) remained strong in the Fourth Quarter 2019. The Department previously had 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. Episodes of care include all children served in the S-FIT and these include respites, DCF and non-DCF. The numbers for the First Quarter 2020 below show some of the impact of the COVID-19 pandemic on utilization of this service during March 2020.

Client Status	Q4 SFY 2019	Q1 SFY 2020
	Oct.-Dec. 2019	Jan.-March 2019
In-Care at Period Start	45	32
Admitted in Period	100	74
Discharged in Period	113	66
Remaining in Care at Period End	132	40
Episodes Served in Period	145	110
Distinct Clients Served in Period	137	104

▪ Data source: PIE

- There were 16 youth in STAR/Shelter programs as of May 2020. This is 8 more than the 8 reported in November 2019. Six (6) of these youth in STAR programs were in overstay status (>60 days) as of May 2020.

- The Monitor’s quarterly review of the Department for the period of October 1, 2019 through March 31, 2020 indicates that the Department has not achieve compliance with three (3) measures:
 - Case Planning
 - Children's Needs Met
 - Worker-Child Visitation In-Home (N/A)¹

A full copy of the Department's Fourth Quarter 2019 and First Quarter 2020 submission including the Commissioner's Highlights may be found on page 100.

¹ Outcome Measure 5 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 5 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.

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Statewide		Positive Outcomes For Children																	
Measure	Measure	Q1 2020	Q4 2019	Q3 2019	Q2 2019	Q1 2019	Q4 2018	Q3 2018	Q2 2018	Q1 2018	Q4 2017	Q3 2017	Q2 2017	Q1 2017	Q4 2016	Q3 2016	Q2 2016	Q1 2016	
1: Commencement of Investigation	>=90%	97.2%	97.0%	97.0%	97.1%	97.2%	96.7%	96.7%	97.0%	96.5%	96.9%	96.8%	96.4%	95.5%	94.7%	94.8%	94.6%	95.2%	
2: Completion of the Investigation	>=85%	89.6%	89.8%	89.2%	89.8%	88.3%	88.5%	89.5%	89.8%	89.4%	91.0%	89.8%	87.0%	85.8%	86.7%	86.4%	82.7%	85.8%	
3.1: Tx Plan: Case Plan Approval	>=90%	92.6%	100.0%	92.6%	92.5%	96.2%	96.2%	98.1%	94.3%	84.2%	86.8%	96.2%	87.0%	86.8%	90.6%	92.7%	90.6%	94.4%	
3.2: Tx Plan: Family's Language Needs	>=90%	92.6%	92.5%	92.6%	92.5%	94.3%	92.5%	96.3%	94.3%	81.5%	81.1%	96.2%	81.5%	83.0%	84.9%	92.7%	90.6%	92.6%	
3.3: Tx Plan: Reason for DCF Involvement	>=90%	87.0%	84.9%	87.0%	88.7%	90.6%	96.2%	83.3%	81.1%	81.5%	75.5%	88.7%	81.5%	79.2%	86.8%	92.7%	96.2%	94.4%	
3.4: Tx Plan: Identifying Information	>=90%	88.9%	90.6%	88.9%	84.9%	92.5%	92.5%	92.6%	92.5%	85.2%	81.1%	92.5%	79.6%	84.9%	88.7%	90.9%	96.2%	98.1%	
3.5: Tx Plan: Child/Family Engagement	>=90%	63.0%	86.8%	63.0%	64.2%	54.7%	64.2%	55.6%	54.7%	51.9%	50.9%	66.0%	55.6%	45.3%	56.6%	58.2%	50.9%	55.6%	
3.6: Tx Plan: Situation & Assessment	>=90%	57.4%	69.8%	57.4%	45.3%	52.8%	47.2%	57.4%	50.9%	51.9%	32.1%	47.2%	42.6%	43.4%	52.8%	47.3%	64.2%	68.5%	
3.7: Tx Plan: Goals/Objectives	>=90%	68.5%	66.0%	68.5%	71.7%	67.9%	64.2%	79.6%	60.4%	53.7%	58.5%	62.3%	66.7%	58.5%	64.2%	72.7%	73.6%	74.1%	
3.8: Tx Plan: Progress	>=90%	75.5%	75.0%	75.5%	71.2%	75.0%	71.7%	80.8%	69.2%	66.7%	62.3%	64.7%	67.9%	71.2%	78.0%	81.8%	88.7%	88.5%	
3.9: Tx Plan: Action Steps	>=90%	66.7%	69.8%	66.7%	60.4%	66.0%	60.4%	70.3%	62.3%	53.7%	52.8%	81.8%	78.3%	80.6%	96.8%	89.7%	96.3%	89.7%	
3.10: Tx Plan: Planning for Permanency	>=90%	88.9%	88.7%	88.9%	75.5%	77.4%	83.0%	83.3%	84.9%	74.1%	73.6%	84.9%	70.4%	79.2%	83.0%	85.5%	88.7%	90.7%	
4.1: Needs Met: Risk: In-Home	>=85%	75.0%	85.2%	75.0%	90.3%	69.0%	66.7%	70.0%	73.9%	81.3%	82.1%	81.8%	78.3%	80.6%	96.8%	89.7%	96.3%	89.7%	
4.2: Needs Met: Risk: Child-in-Placement	>=85%	100%	100%	100%	100%	92.0%	92.6%	96.2%	96.8%	100%	96.0%	100%	100%	100%	100%	100%	100%	100%	
4.3: Needs Met: Permanency: Securing Permanent Placement - Action Plan	>=85%	96.3%	96.1%	96.3%	87.5%	91.7%	91.3%	100%	100%	95.8%	100%	93.5%	97.1%	100%	95.7%	92.6%	100%	100%	
4.4: Needs Met: Permanency: DCF Case Mgt - Legal Action to Achieve Permanency	>=85%	85.2%	86.8%	85.2%	90.6%	86.8%	78.9%	87.0%	90.6%	92.5%	94.3%	90.6%	98.1%	90.4%	90.6%	92.7%	96.2%	83.0%	
4.5: Needs Met: Permanency: DCF Case Mgt - Recruitment of Placement Providers	>=85%	100%	96.1%	100%	87.5%	87.5%	91.7%	100%	90.3%	95.7%	96.0%	93.8%	100%	100%	100%	92.6%	100%	100%	
4.6: Needs Met: Permanency: DCF Case Mgt - Contracting/Providing Services	>=85%	74.1%	81.1%	74.1%	75.5%	60.4%	58.5%	51.9%	50.9%	51.9%	49.1%	52.8%	57.4%	64.2%	58.5%	61.8%	69.8%	64.8%	
4.7: Needs Met: Medical Needs	>=85%	94.4%	90.6%	94.4%	94.3%	81.1%	81.1%	83.3%	90.6%	85.2%	79.3%	86.8%	94.4%	88.7%	79.2%	83.6%	94.3%	83.3%	
4.8: Needs Met: Dental Needs	>=85%	87.0%	98.1%	87.0%	86.8%	81.1%	75.5%	87.0%	81.1%	75.9%	81.1%	83.0%	85.2%	83.0%	90.6%	76.4%	84.9%	83.3%	
4.9: Needs Met: Behavioral Health	>=85%	74.1%	79.2%	74.1%	71.2%	56.6%	63.5%	70.4%	73.6%	61.1%	50.9%	66.0%	75.9%	75.5%	71.7%	72.7%	71.7%	75.9%	
4.10: Needs Met: Child's Current Placement	>=85%	100%	100%	100%	91.7%	83.3%	91.3%	91.7%	77.4%	91.3%	84.0%	66.0%	75.9%	75.5%	71.7%	72.7%	71.7%	75.9%	
4.11: Needs Met: Education	>=85%	86.3%	98.0%	86.3%	84.3%	74.5%	84.6%	86.3%	87.5%	86.8%	80.4%	88.0%	83.3%	91.7%	90.0%	87.5%	91.5%	88.2%	
5: Worker-Child Visitation (In-Home)	>=85%	87.7%	91.5%	90.3%	90.7%	94.7%	89.4%	86.5%	87.5%	87.5%	87.5%	89.2%	89.4%	89.5%	86.0%	86.9%	86.1%	88.2%	
6: Caseload Standards	100%	99.8%	99.5%	96.2%	92.6%	91.9%	90.8%	92.0%	91.0%	89.9%	91.5%	93.5%	88.1%	93.9%	97.3%	95.6%	94.2%	98.1%	
7: Repeat Maltreatment of In-Home Children	<=7%	5.2%	5.4%	5.9%	5.6%	5.2%	5.6%	5.8%	6.1%	6.1%	6.4%	6.6%	6.6%	6.5%	6.2%	6.8%	6.6%	6.6%	
8: Maltreatment of Children in Out-of-Home Care	<=2%	0.2%	0.1%	0.1%	0.4%	0.3%	0.2%	0.2%	0.0%	0.2%	0.3%	0.0%	0.3%	0.5%	0.3%	0.2%	0.2%	0.2%	
9: Re-Entry into DCF Custody	<=7%	5.6%	5.1%	5.7%	7.0%	5.6%	3.9%	4.2%	6.6%	8.3%	6.2%	5.6%	8.2%	6.7%	5.1%	6.4%	5.8%	3.8%	
10: Worker-Child Visitation (Out-of-Home)	>=85%(M) >=100%(Q)	94.0%	95.8%	95.9%	96.1%	95.2%	95.9%	95.9%	95.7%	95.8%	95.6%	96.7%	97.0%	96.7%	95.4%	96.3%	95.6%	96.7%	
		99.3%	99.4%	99.4%	99.3%	99.3%	99.2%	99.3%	99.1%	99.1%	99.3%	99.2%	99.5%	99.5%	98.9%	99.5%	99.1%	99.3%	
11: Placement Within Licensed Capacity	>=96%	92.4%	92.0%	90.3%	90.7%	91.0%	91.7%	91.1%	92.2%	92.0%	94.0%	94.0%	93.6%	93.8%	94.3%	92.9%	92.9%	93.5%	
12: Multiple Placements	>=85%	95.1%	95.1%	95.4%	95.7%	95.0%	94.9%	95.3%	95.0%	95.1%	95.2%	94.4%	95.2%	95.6%	96.3%	96.2%	96.5%	96.7%	
13: Sibling Placement	>=95%	85.6%	87.7%	88.0%	86.0%	87.9%	87.9%	87.7%	88.7%	86.7%	86.5%	86.9%	87.3%	87.3%	88.8%	90.1%	89.8%	91.7%	
14: Reduction in the Number of Children Placed in Residential Care	<=11%	2.0%	2.1%	2.1%	2.2%	2.2%	2.3%	2.4%	2.2%	2.2%	2.3%	2.2%	2.2%	2.1%	2.1%	2.3%	2.2%	2.5%	

*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 (October 1, 2019 - March 31, 2020)

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 three (3) that have not been pre-certified. Outcome Measure 2 was pre-certified in August 2020. 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 ² 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.	Pre-Certified August 2020
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 OM3 report to follow for results on individual domains. At the time of this reporting four case planning domains are pre-certified: Case Plan Approvals, Accommodating Family/Child’s Language Needs, Identifying Information, and Reason for Involvement.

² 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>	<p>Requires assertion of compliance and Pre-Certification. See OM4 report to follow for results on individual domains to date.</p> <p>At the time of this reporting six domains are pre-certified: Risk: Child in Placement, Permanency: Securing the Permanent Placement – Action Plan for the Next Six Months, Permanency: DCF Case Management – Recruitment for Placement Providers during the Prior Six Months, DCF Case Management – Legal Action to Achieve Permanency in the Prior Six Months, child’s Current Placement, and Well Being- Education.</p> <p>Well-Being: Medical Needs which had previously been deemed pre-certified had been below the required 85% benchmark in the last three quarters. During the PUR, Well-Being/Medical achieved the required benchmark and will remain pre-certified. DCF achieved pre-certification of Dental during this PUR (Second-Third Quarter 2019).</p>

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.e., 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. 	Pre-certified January 2020

2017 Measure	2006 Outcome Measure	Statement of Outcome	Status
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
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

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

Outcome Measure 2: Completion of Investigation/FAR Pre-Certification Review

Outcome Measure 2: *Completion of Investigation/FAR* requires that:

"At least 85% of all reports shall have their investigation/FAR assessment completed within 45 days of acceptance by the Hotline.

1. The completion of the investigation/FAR assessment occurs when the investigator has interviewed each family member, including the parents, other adults and all children in the home as well as necessary collateral contacts and the investigator's DCF supervisor verifies the investigator's determination of substantiation or non-substantiation and the determination is entered in LINK.
2. Workers who speak the primary language of the family shall conduct investigations/FAR assessments or an interpreter shall accompany the investigator.
3. The investigation universe to be reported quarterly would be all investigations/FAR assessments, including special investigations conducted by Hotline staff."

Methodology

Using the Department's data base of completed Differential Response System investigation/FAR assessments, the Court Monitored determined that the Department completed a total of 8,330 total DRS during the period of November 1, 2019 through January 31, 2020. The parties agreed upon a sample of 95% +/-5% which required a total of 367 cases. The office oversampled and arrived at a final total of 370 cases reviewed. Selection was random, stratified by area office and including 8 cases completed by the Careline staff as required by the Outcome Measure.

A Differential Response System (DRS) instrument and instructions was developed in conjunction with the DCF Quality Improvement staff; and used to review the work completed during Intake. Both Child Protective Services Investigations (CPS) and Family Assessment Response (FAR) were included to understand the agency's performance and functioning across its DRS. The review instrument was used by Court Monitor's Office staff for the purpose of conducting pre-certification reviews to assess the agency's compliance with the *Juan F.* Outcome Measure 2. To complete the review instrument, staff conducted qualitative case record reviews of the work as documented within LINK during the investigation or assessment phase of the case.

The review instrument is organized into case information, intake social worker demographics, and components to focus on the timeliness, and then quality of the investigation or assessment. Each component collects information using questions related to that component. Each component can relate to both investigation and FAR assessment cases. While all components reflect best case practice, some components were more heavily weighted in determining compliance with Outcome Measure 2.

Each component is rated a Strength or Area Needing Improvement with the ability for the reviewer to score upon the individual circumstances of the case. Secondary input by the Court

Monitor or Assistant Court Monitor was used as needed and each case arrived at an overall final score of met or not met. Scores were then aggregated to arrive at a determination of compliance for Outcome Measure 2.

A sample of all completed Differential Response (DRS) was randomly selected from all completed DRS in the months of November 2019, December 2019 and January 2020 as follows:

Crosstabulation: DCF Office * What type of intake was accepted? * Region					
Region			What type of intake was accepted at Careline?		Total
			Child Protective Services Investigation	Family Assessment Response (FAR)	
Region I	DCF Office	Bridgeport	13	18	31
		Norwalk	7	18	25
	Total		20	36	56
Region II	DCF Office	Meriden	1	0	1
		Milford	12	17	29
		New Haven	11	14	25
	Total		24	31	55
Region III	DCF Office	Middletown	6	9	15
		Norwich	13	18	31
		Willimantic	7	12	19
	Total		26	39	65
Region IV	DCF Office	Hartford	19	20	39
		Manchester	13	22	35
	Total		32	42	74
Region V	DCF Office	Danbury	6	11	17
		Torrington	8	7	15
		Waterbury	14	14	28
	Total		28	32	60
Region VI	DCF Office	Meriden	3	11	14
		New Britain	12	25	37
		Waterbury	0	1	1
	Total		15	37	52
SIU	DCF Office	SIU	8		8
	Total		8		8
	Total		153	217	370

While initially inclusive of 216 FAR and 154 CPS Investigations at the point of Careline acceptance, the review subsequently found that the agency identified the need for track change in

50 of the 216 FAR accepts - this resulted in a review of 204 CPS cases and 166 FAR at the close/disposition of the case.

Findings

In review of the quality underlying Outcome Measure 2 we looked at the identified components as directed by the 2017 Revised Exit Plan and agreement of the parties. **The Court Monitor asserts that Outcome Measure 2: Completion of Investigation/FAR Assessment is met with a Statewide quality ranking of "strength" (adequate/sufficient) in 87.6% of the 370-case sample.**

Language Accommodation

The measure requires that workers who speak the primary language of the family shall conduct investigations/FAR assessments or an interpreter shall accompany the investigator. *Across all sample cases, the primary language was accommodated in 96.9% of all 370 cases.*

In those where the primary language was other than English (n=27), documentation reflected 81.5% of language needs were accommodated. All five of the cases with negative response were Spanish speaking families. (This is likely a documentation issue rather than a lack of accommodation - in several cases the ISW did not document the use of interpreter or fluency of the family language; but the narratives provided indicated no language barrier. Reviewers were instructed to specifically look for documentation of accommodation.)

Preferred Language Identified for Named Case Participant				
	Frequency	Percent	Valid Percent	Cumulative Percent
English	331	89.5	89.5	90.3
Spanish	25	6.8	6.8	99.5
Bi-Lingual (English/Spanish)	7	1.9	1.9	92.4
Albanian	1	.3	.3	.3
Bengali	1	.3	.3	.5
Chinese	1	.3	.3	.8
Bi-Lingual (English/Sherpa)	1	.3	.3	90.5
Napolanese	1	.3	.3	92.7
Swahili	1	.3	.3	99.7
Vietnamese	1	.3	.3	100.0
Total	370	100.0	100.0	

Response and Tracking

Priority response designations (timeframe requirement for contact with subject child/children and parent/guardian) for the sample is distributed as follows:

Priority Response Designation of Sample (n=370)				
	Frequency	Percent	Valid Percent	Cumulative Percent
Same Day	37	10.0	10.0	10.0
24 Hours	70	18.9	18.9	28.9
72 Hours	263	71.1	71.1	100.0
Total	370	100.0	100.0	

The quality of the Careline designation of response and tracking, and the Area Office early assessment and track change determination were reviewed for all 370 cases. *Response Time designation was accurate given known facts documented for 350 cases or 94.6% of the sample. Initial Track was accurate based on documented facts in 341 cases or 92.2% of the sample.*

- Following initial review at the Area Office level 76.9% of cases with factors identified by policy/practice as necessitating track change were changed (50/65 cases).

Crosstabulation : Response Time Designation and Track Designation by Careline				
		Based on the circumstances of the incident reported to Careline, was the report assigned the appropriate track by Careline?		Total
		Yes	No	
Was the accepted report assigned the appropriate "response time" by Careline?	Yes	339	11	350
	No	2	18	20
Total		341	29	370

In another area of strength in practice for the Department, a *total of 97.8% of the DRS (362) were commenced within the specified priority response (Same Day, 24 hour or 72 hour).* (98.1% of all FAR and 97.4% of CPS)

Crosstabulation: Priority Response of the report * Was the target investigation or assessment initiated/commenced in accordance with the agency's time frames and requirements for a report of that priority? (same day, 24 hours, or 72 hours) * What type of intake was accepted?					
What type of intake was accepted?			Was the target investigation or assessment initiated/commenced in accordance with the agency's time frames and requirements for a report of that priority?		Total
			yes	no	
Child Protective Services Investigation	Please indicate the timeframe to contact the subject of the report	Same Day	37	0	37
		24 Hours	69	1	70
		72 Hours	44	3	47
	Total		150	4	154
Family Assessment Response (FAR)	Please indicate the timeframe to contact the subject of the report	72 Hours	212	4	216
		Total	212	4	216
Total	Please indicate the timeframe to contact the subject of the report	Same Day	37	0	37
		24 Hours	69	1	70
		72 Hours	256	7	263
	Total		362	8	370

Timeframe for Completion of DRS

In 86.2%, the Outcome Measure 45-day completion timeframe requirement was met or exceeded. Reviewers found that many of the extensions of time were beneficial to the quality of the case as needs were assessed and attended to prior to transfer to Ongoing Services, and/or hand off to the Community Partner Agency (CPA). Of note, only 4.5% of the cases reviewed had a DRS that extended greater than 60 days.

Days to Completion	Number of Cases	%
<45 Days (8...45)	319	86.2%
46-50 Days	18	4.9%
51-55 Days	8	2.2%
56-60 Days	8	2.2%
>60 Days (61...157)	17	4.6%

The Court Monitor in his discretion maintains precertification of Outcome Measure 1 and finds the Statewide quantity (timeframe) requirement for Outcome Measure 2 met.

As noted prior, 319 of the 370 DRS were completed within the 45-day mandated timeframe. Reviewers noted that 3 of the cases not meeting the mandate had extenuating circumstances beyond the control of the agency that required the extension of the DRS. This included collaboration with police or other state agencies. With these exceptions factored in the 45-day mandate was met in 87.0% of the sample. In other instances, the extension of the DRS was the result of connecting families to the Community Provider Agency. This could be a factor in the variance in completion of the DRS was noted with CPS 86.4% completed timely while FAR completions were 82.9% timely.

Crosstabulation: Was this DRS completed in accordance with the agency's time frames and requirements for completion in 45 calendar days? * What type of intake was accepted?				
		What type of intake was accepted?		
		CPS Investigation	FAR	Total
Was this DRS completed in accordance with the agency's time frames and requirements for completion in 45 calendar days?	yes	133	179	312
	no	21	37	58
Total		154	216	370

Contacts with Children

Reviewers assessed the overall contact with children as a strength (compliant with all policy and practice requirements) in 72.4% of the DRS cases. There was a marked difference in the percentage of accepted CPS investigation cases noted as strength versus those accepted as FAR cases. With 77.3% of those initially identified as CPS cases identified as strength versus 68.9% of those initially identified as FAR. Reviewers most frequently noted delay in an initial contact and/or the frequency of contacts with children throughout the PUR of the investigation or assessment as an issue when noting an area needing improvement (ANI). In others, there was a lack of consistency in quality of contacts with children within a given case, or there was a lack of documentation related to separate individual interviews. This is an area where the Department should take additional actions to improve.

Crosstabulation: Contact with Children Rating Question 33 * What type of intake was accepted?				
		What type of intake was accepted?		Total
		Child Protective Services Investigation	Family Assessment Response (FAR)	
Contact with Children Rating Q 33	Strength	119	148	267
	Area Needing Improvement	35	67	102
	N/A - Whereabouts unknown during entire PUR or victim deceased	0	1	1
Total		154	216	370

Barriers to achieving priority contact were most frequently related to parental consent or inability to locate/connect with children within the priority response.

- There were 320 cases in which there were verbal children identified as subjects of abuse/neglect.
 - While response time was met in many instances, the initial visit to the home did not result in successful interviews. 64.9% of the DRS found that all subject children in each case were seen within same day, 24-hour, or 72-hour priority response designation. In an additional 108 cases, 29.2% of Investigation Social Workers (ISW) demonstrated concerted efforts to comply with priority response interviews of all subject children, with mixed or no results with each subject child in the case.
 - In 20 or 5.4% of the cases, there was no documented concerted effort, and no subject children were seen within the priority response window.

- Interviews with all verbal subject children were held alone (or in the presence of a disinterested adult) in 81.8% of the applicable cases. In an additional 11 cases (3.4%) there were some verbal subject children documented as interviewed alone.

- Face to face contact with all non-subject children in the home (183) was made within 5 days of report acceptance in 65.0% or 119 of the cases. In an additional 21 cases, the worker made efforts to do so, and some of the non-subject verbal children were successfully interviewed within five days of the report. In 70.1% of cases with non-subject verbal children ISW had interviews with all such children in the home by the close of the assessment or investigation.

Was face to face contact made with all non-subject children, including observation of children who are non-verbal, or an infant, or who is otherwise unable to communicate due to significant delays or limitations in accordance with policy (within 5 days of report acceptance)					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	119	32.2	32.2	32.2
	No, Some	21	5.7	5.7	37.8
	No, None	43	11.6	11.6	49.5
	N/A - No non-subject children in the home	187	50.5	50.5	100.0
	Total	370	100.0	100.0	

In 76.4% of the DRS, reviewers felt that documentation related to all child participants within a case was comprehensive and enough to complete the assessment/disposition. In an additional 17.0% of the cases, there were mixed results with contacts with children - some were sufficiently comprehensive, and others were lacking. In only 6.5% of the cases did reviewers indicate that all child interviews were insufficient.

Contacts with Adults

Contact with all adults in a case was identified as a strength (compliant with all policy and practice mandates) in 71.1% of the sample reviewed.

Crosstabulation: Contact with Adult Participant, Alleged Perpetrator and Case Stakeholder Q59 SCORE * What type of intake was accepted?				
		What type of intake was accepted?		
		CPS Investigation	FAR	Total
Contact with Adult Participant, Alleged Perpetrator and Case Stakeholder Q59 SCORE	Strength	116	147	263
	Area Needing Improvement	38	69	107
Total		154	216	370

Specific to parents, the review found that all or some of the parents involved in the case were interviewed 94.3% of the time.

Were ALL parents contacted during the investigations					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes, All	185	50.0	50.0	50.0
	No, Some	164	44.3	44.3	94.3
	No, None	16	4.3	4.3	98.6
	N/A	5	1.4	1.4	100.0
	Total	370	100.0	100.0	

- 50.7 % of the DRS sample included contact with all parents within the case prior to disposition/approval.
- 44.9% of the sample included contact with some of the parents. In the majority of cases with "no, some" responses, the non-custodial parent was the identified party not contacted. Concerted efforts to locate were frequently documented.
- 9.7% had no documented contact with any parent/guardian.

Documentation that an interview was held with the alleged perpetrator(s) of abuse/neglect was present in 337 or 91.1% of the cases. In 7.0% (26 cases) there were one or more perpetrators not interviewed. In seven (7) cases or 1.9%, it was noted that the interviews could not be completed given factors outside the control of DCF.

Collateral contacts (reporters, police, relatives, medical, dental or community providers) were noted as a strength as in 350 of the 370 case sample (94.6%), all or some of the necessary case collaterals were successfully contacted during the investigation or assessment.

As with contact with children, the overall scores reflecting the quality of contact with adults showed higher level of compliance and quality within those cases accepted as CPS (75.3%) versus FAR (68.0%).

In 74.3% of the DRS, reviewers felt that documentation related to all adult participants within a case was comprehensive and enough to complete the assessment/disposition. In an additional 27.6% of the cases, there were mixed results within contacts with adults - some were sufficiently comprehensive, and others were lacking. In only 5 cases did reviewers feel that none of the adults in a given case were the subject of sufficiently comprehensive contacts to assess safety/factors identified.

Safety/Risk

The Overall Safety and Risk score designated by reviewers was designated a strength in 58.6%. This lower overall score within the Safety and Risk category largely reflects the lack of compliance with timely initialization and approval of the formal SDM Safety tool as specified in the DCF policy. In many instances, it was noted that the assessment date was not within 5 days of initialization of the tool but rather entered at the end of the investigation.

In spite of the issues related to documentation timing of the SDM Safety tool and some lapses in documentation of ongoing safety plan monitoring, reviewers found that safety and risk related to

all identified allegations accepted for investigation/assessment were addressed within the FAR or CPS protocol in 95.7% of the sample.

Statistics gathered in relation to components of the risk and safety policy found:

- SDM Risk was completed timely in 92.1% of the applicable cases (SIU does not require).
- SDM Risk was felt to be accurate given facts of the case documented in 85.3% of the cases reviewed.
- SDM Safety Assessments were completed timely in 55.5% of the applicable cases.
- SDM Safety Assessments were felt to be accurate in 85.6% of the cases (includes those cases with no safety factors identified)
 - In 69.2% of the 63 cases with safety concerns, there was evidence of good quality documented formal SDM assessment and safety planning, and visitation that consistently monitored the safety plan across the full period of review. This is not to say that assessment work was not being done for the remaining cases, however as in many instances, informal risk and safety assessment was ongoing and accurate across the entire period of review (80.3% of the cases reviewed).

Needs Assessment During Investigation

This is an area of great progress and strength for the Department in that 92.4% of the cases identified needs assessment/services to families to protect children in the home and prevent removal as a strength. Investigation Social Workers documented strong efforts to engage adults and children in the home as well as gathering input from collaterals and the Department's RRG. The one area that was noted as inconsistent was legal consultations. This could be more of a documentation issue than actual practice issue as cases often identify a need for legal consult then do not revisit such in the documentation though the matter has been the source of discussion. The directives then appear unattended rather than resolved.

- 91.6% of all cases sampled included documentation of engagement with all necessary household participants to identify needs to maintain children in the home safely.
- 94.6% of the cases included RRG consultations as directed/required by facts identified.
- 91.9% of cases had documented assessment and provision of needed services to address children's safety and prevent removal.
- 89.3% of cases had documented assessment and provision of needed services to address parental capacity/need as it related to children's safety and prevent removal.
- 91.4% of cases with circumstances requiring a CRM documented such prior to or immediately after a child's removal. This included 23 cases in which the CRM resulted in a family arrangement.
- 69.6% of cases had documentation of legal consultation as directed/required by facts identified.

Family Arrangements

There were 26 cases with family arrangements in place during the investigation/assessment. Overall, 65.4% were identified a strength (compliant with all policy and practice expectations).

- In 91.4% of applicable cases within the sample, the Department documented a Considered Removal Child and Family Team Meeting. 65.7% of these meetings resulted in the child remaining in the home.
 - Deficits noted include a lack of monitoring of the safety plan via visitation or contacts with the family member responsible for the care of the child or lack of documented expectations related to responsibility or timeframe.

Protocol Document

In compliance with the 85% quality benchmark for precertification, reviewers found that 88.1% of the actual protocol documents reviewed were felt to be a strength in case practice.

- 88.4% had the baseline sufficiency to support the decision making relative to the investigation/assessment. Deficits noted included missing interviews or contacts which were key to the assessment, facts included within the document with little assessment in relation to disposition, cut and paste of historical and current information causing confusion related to the current event, and in a few instances, a truncated document in which sections were missing.

Supervision

Supervisory Oversight and guidance rating were designated as a strength (in relation to policy and practice requirements) in 72.7% of the cases reviewed.

- In 97.4% of the cases reviewed, the outcome(close/refer/transfer) was adequate given the disposition and case circumstances.
- In 95.7% of the CPS investigations, the ISWS disposition was consistent with statutory definitions and case specifics.
- In 77.0% of the cases, the supervisory documentation was of sufficient quality to ensure that the ISW conducted a comprehensive assessment.
- Most frequently the deficit noted was the issue of follow up on prior to disposition or assessment approval which was identified in 76.5% of the cases.

Composite Scores

As referenced at the outset of this report, the following overall composite scores were arrived at by the reviewers, factoring in all individual components as they related to sufficiency of the investigation disposition and outcome (close, transfer or refer to CPA)

Score - Quantity (Timeliness of the Investigation or Assessment)

- *In 86.2% of the cases, upon completion of the review process (initial and secondary screening), the review found the timeliness of the investigation/FAR completion to be a strength (adequate/sufficient).*

Score - Quality

- *Overall the quality score ranking practice as a strength (adequate/sufficient) upon completion of the review process (initial and secondary screening) is 87.6%. This included situations in which the 45 day mandate was not met, or an individual component may not have scored as a strength but that the concerted effort was documented in the face of barriers to contacts, and/or the delay was outside of the control of the ISW.*

Semi-Annual Status Report of Outcome Measure 3 and Outcome Measure 4 for the Fourth Quarters of 2019 and First Quarter 2020 (October-March)

This status report reflects the Department's progress in achieving the 2017 Revised Exit Plan Outcome Measure 3 and Outcome Measure 4 domain requirements during the period of October 2019 through March 2020 and largely reflects performance prior to the impact of COVID 19 on the Department's work. By the agreement of the parties going forward into 2020 April through October, the Court Monitor's Office is assisting the agency with monitoring of these measures through informal QI activities to improve and sustain quality practice in the age of virtual contact and return to a new normal practice as the pandemic resolves.

Outcome Measure 3

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.”

At the time of agreement there were no Outcome Measure 3 domains qualifying for statewide precertification.

In previous quarters the Department met and sustained:

- Case Plan Approval by SWS (August 2018 Status Report)
- Accommodation of Family or Child's Language Needs (February 2019 Status Report)
- Identifying Information (February 2019 Status Report)
- Reason for DCF Involvement (July 2019 Status Report)

During the last eight quarters, the Department has consistently met the requirement for Supervisory Approval and Accommodation of Language Needs. The domain Identifying Information Reason was met and sustained in Second Quarter 2018 through First Quarter 2019 and then after a gap in performance, again in this reporting cycle of Fourth Quarter 2019 and First Quarter 2020. Reason for DCF Involvement, was achieved and maintained during the reporting period encompassing Fourth Quarter 2018 and First Quarter 2019. It was not sustained in the remainder of 2019 but has again been met in the First Quarter 2020.

While the findings for two domains had dropped slightly in the prior period, these domains remain pre-certified at this time and have recovered to above benchmark results with the First Quarter results. Additionally, for the first time since reporting began on these domains, Engagement of Child and Family, Progress and Planning for Permanency have been met. The requirement for precertification is that they be achieved and maintained, this will be monitored going forward into 2020/2021 when we resume full monitoring of the identified domains later this year.

Quarterly Statewide Summary of OM3 Domains 2 nd Quarter 2017 – 3rd Quarter 2019 (Requirement 90.0%)										
Quarter	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 - 1st Quarter 2020	96.2%	98.1%	94.2%	96.2%	94.2%	71.7%	84.6%	92.2%	82.7%	92.3%
Total Statewide - 4th Quarter 2019	92.5%	92.5%	84.9%	90.6%	86.8%	69.8%	66.0%	75.0%	69.8%	88.7%
Total Statewide - 3rd Quarter 2019	92.6%	92.6%	87.0%	88.9%	63.0%	57.4%	68.5%	75.5%	66.7%	88.9%
Total Statewide - 2nd Quarter 2019	92.5%	92.5%	88.7%	84.9%	64.2%	45.3%	71.7%	71.2%	60.4%	75.5%
Total Statewide – 1 st Quarter 2019	96.2%	94.3%	90.6%	92.5%	54.7%	52.8%	67.9%	75.0%	66.0%	77.4%
Total Statewide – 4 th Quarter 2018	96.2%	92.5%	96.2%	92.5%	64.2%	47.2%	64.2%	71.7%	60.4%	83.0%
Total Statewide – 3rd Quarter 2018	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	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	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	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	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	88.7%	81.5%	81.1%	79.6%	55.6%	42.6%	66.7%	67.9%	66.7%	70.4%

In looking at a more defined view of the data from a regional perspective, it is noted, as in the past that several regions have had success with achievement of several domains at the 90% requirement in each quarter. The following two tables reflect findings for each quarter sorted at the regional level. No region met all ten domains in either quarter, but there was progress toward exit achieved within First Quarter 2020 for all regional offices in comparison to prior reporting periods.

Quarterly Regional Summary of OM3 Domains 4th Quarter 2019 (Requirement 90.0%)										
	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 - 4th Quarter 2019	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%
Region II - 4th Quarter 2019	100.0%	100.0%	88.9%	100.0%	100.0%	66.7%	66.7%	88.9%	55.6%	88.9%
Region III - 4th Quarter 2019	100.0%	100.0%	70.0%	90.0%	90.0%	70.0%	60.0%	77.8%	80.0%	100.0%
Region IV - 4th Quarter 2019	81.8%	81.8%	81.8%	72.7%	72.7%	54.5%	72.7%	54.5%	63.6%	81.8%
Region V - 4th Quarter 2019	100.0%	90.9%	90.9%	100.0%	81.8%	81.8%	54.5%	81.8%	72.7%	90.9%
Region VI - 4th Quarter 2019	100.0%	100.0%	100.0%	100.0%	100.0%	71.4%	85.7%	71.4%	71.4%	85.7%
Statewide 4th Quarter 2019 OM3 Results	92.5%	92.5%	84.9%	90.6%	86.8%	69.8%	66.0%	75.0%	69.8%	88.7%

Quarterly Regional Summary of OM3 Domains 1st Quarter 2020 (Requirement 90.0%)										
	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 - 1st Quarter 2020	100.0%	100.0%	83.3%	83.3%	100.0%	33.3%	66.7%	83.3%	83.3%	100.0%
Region II - 1st Quarter 2020	85.7%	100.0%	100.0%	100.0%	100.0%	71.4%	85.7%	85.7%	71.4%	85.7%
Region III - 1st Quarter 2020	100.0%	100.0%	100.0%	100.0%	100.0%	88.9%	77.8%	100.0%	100.0%	100.0%
Region IV - 1st Quarter 2020	90.0%	90.0%	90.0%	90.0%	90.0%	80.0%	90.0%	90.0%	80.0%	90.0%
Region V - 1st Quarter 2020	100.0%	100.0%	91.7%	100.0%	91.7%	66.7%	83.3%	100.0%	75.0%	91.7%
Region VI - 1st Quarter 2020	100.0%	100.0%	100.0%	100.0%	87.5%	75.0%	100.0%	85.7%	87.5%	87.5%
Statewide 1st Quarter 2020 OM3 Results	96.2%	98.1%	94.2%	96.2%	94.2%	71.1%	84.6%	92.2%	82.7%	92.3%

The full summary documents reflecting data to the individual case level within the area offices are provided for review below:

Fourth Quarter 2019 Outcome Measure 3: Individual Domain Case Summaries by Office, Region, State

	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 SW?	Was this case plan approved within 25 days from the ACR schedule date indicated in LINK?	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	Bridgeport	CPS CIP	No	No	UTD-No Case Plan	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse
	Bridgeport	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Optimal	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good
	Bridgeport	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	Bridgeport 4th Quarter OM3		66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%	66.7%
	Norwalk	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
Region II	Norwalk 4th Quarter OM3		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Region I 4th Quarter OM3		60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%
	Milford	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good
	Milford	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good
	Milford	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	Milford	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal
	Milford 4th Quarter OM3		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	60.0%	100.0%	80.0%	80.0%
	New Haven	CPS CIP	Yes	No	Yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good
	New Haven	CPS In-Home Family Case	Yes	Yes	Yes	Marginal	Very Good	Very Good	Marginal	Marginal	Very Good	Marginal	Very Good
	New Haven	CPS CIP	Yes	Yes	Yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
Region III	New Haven 4th Quarter OM3		100.0%	75.0%	100.0%	75.0%	100.0%	100.0%	50.0%	75.0%	75.0%	25.0%	100.0%
	Region II 4th Quarter OM3		100.0%	66.7%	100.0%	66.7%	100.0%	100.0%	66.7%	66.7%	66.7%	66.7%	66.7%
	Middletown	CPS CIP	Yes	Yes	Yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	Middletown	CPS In-Home Family Case	Yes	Yes	Yes	Optimal	Optimal	Optimal	Optimal	Optimal	Optimal	Very Good	Optimal
	Middletown 4th Quarter OM3		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Norwich	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	Norwich	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	Marginal	Very Good
	Norwich	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	Norwich	CPS In-Home Family Case	Yes	Yes	Yes	Marginal	Very Good	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good
	Norwich	CPS In-Home Family Case	Yes	Yes	Yes	Marginal	Very Good	Very Good	Marginal	Marginal	Too early to note progress	Very Good	Very Good
Region IV	Norwich 4th Quarter OM3		100.0%	100.0%	100.0%	60.0%	100.0%	100.0%	60.0%	60.0%	75.0%	60.0%	100.0%
	Willimantic	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Optimal	Very Good
	Willimantic	CPS CIP	Yes	Yes	Yes	Optimal	Optimal	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good
	Willimantic	CPS In-Home Family Case	Yes	Yes	Yes	Poor	Marginal	Marginal	Poor	Marginal	Marginal	Very Good	Very Good
	Willimantic 4th Quarter OM3		100.0%	100.0%	100.0%	66.7%	66.7%	66.7%	66.7%	33.3%	66.7%	100.0%	100.0%
	Region III 4th Quarter OM3		100.0%	100.0%	100.0%	70.0%	80.0%	90.0%	70.0%	80.0%	77.9%	90.0%	100.0%
	Hartford	CPS CIP	No	No	UTD-No Case Plan	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse
	Hartford	CPS CIP	No	No	UTD-No Case Plan	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse
	Hartford	CPS CIP	Yes	Yes	Yes	Optimal	Optimal	Optimal	Optimal	Optimal	Optimal	Very Good	Optimal
	Hartford	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Marginal	Very Good
Hartford	CPS In-Home Family Case	Yes	Yes	Yes	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
Hartford	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Marginal	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good	
Hartford	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Marginal	Very Good	
Hartford 4th Quarter OM3		71.4%	71.4%	71.4%	71.4%	57.1%	57.1%	42.9%	42.9%	57.1%	42.9%	71.4%	
Region V	Manchester	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Very Good
	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
	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
	Manchester	CPS CIP	Yes	Yes	Yes	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	Manchester 4th Quarter OM3		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	75.0%	75.0%	75.0%	100.0%	100.0%
	Region IV OM3 4th Quarter		61.3%	61.3%	61.3%	61.3%	72.7%	72.7%	54.5%	72.7%	54.5%	63.6%	61.3%
	Danbury	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal
	Danbury	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	Danbury 4th Quarter OM3		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%
	Torrington	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
Torrington	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
Torrington 4th Quarter OM3		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 Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	
Waterbury	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	
Waterbury	CPS In-Home Family Case	Yes	Yes	no	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	
Waterbury	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Marginal	Very Good	
Waterbury	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Marginal	Very Good	
Waterbury	CPS In-Home Family Case	Yes	Yes	Yes	Poor	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Very Good	
Waterbury	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	
Waterbury 4th Quarter OM3		100.0%	100.0%	85.7%	85.7%	100.0%	71.4%	71.4%	28.6%	71.4%	57.1%	100.0%	
Region V 4th Quarter OM3		100.0%	100.0%	90.9%	90.9%	100.0%	81.8%	81.8%	54.5%	81.8%	72.7%	90.9%	
Region VI	Meriden	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Very Good
	Meriden	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	Meriden 4th Quarter OM3		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	50.0%	50.0%	100.0%	100.0%
	New Britain	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	New Britain	CPS In-Home Family Case	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good
	New Britain	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good
	New Britain	CPS CIP	Yes	Yes	Yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Marginal
	New Britain	CPS In-Home Family Case	Yes	Yes	Yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
	New Britain 4th Quarter OM3		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	100.0%	80.0%	80.0%	80.0%
	Region VI 4th Quarter OM3		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	71.4%	69.7%	71.4%	71.4%	85.7%
Statewide 4th Quarter 2019 OM3		100.0%	92.5%	92.5%	84.9%	90.6%	86.8%	69.8%	66.0%	75.0%	69.8%	88.7%	

First Quarter 2020 Outcome Measure 3: Individual Domain Case Summaries by Office, Region, State

Region	What is the social worker's area of assignment?	What is the type of case assignment noted in LINK?	Was the family or child's language needs accommodated?	Has the treatment plan been approved by the SWS?	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	Bridgeport	CPS In-Home Family	yes	yes	Very Good	Marginal	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good	
	Bridgeport	CPS In-Home Family	yes	yes	Marginal	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	
	Bridgeport	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Bridgeport	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal	Very Good	
	Bridgeport 1st Quarter OMB Domain Scores		100.0%	100.0%	75.0%	75.0%	100.0%	25.0%	75.0%	75.0%	75.0%	75.0%	100.0%
	Norwalk	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	
	Norwalk	CPS Child-in-Placement	yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	
	Norwalk 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	50.0%	100.0%	100.0%	100.0%	100.0%
	Region I 1st Quarter OMB Domain Scores		100.0%	100.0%	83.3%	83.3%	100.0%	33.3%	66.7%	83.3%	83.3%	100.0%	100.0%
	Region II	Milford	Services Post Majority CIP	yes	yes	Very Good	Very Good	Very Good	Marginal	Marginal	Marginal	Marginal	Very Good
Milford		CPS In-Home Family	yes	no	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
Milford		CPS Child-in-Placement	yes	yes	Optimal	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	
Milford		CPS Child-in-Placement	yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
Milford 1st Quarter OMB Domain Scores		100.0%	75.0%	100.0%	100.0%	100.0%	50.0%	75.0%	75.0%	75.0%	75.0%	100.0%	
New Haven		CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
New Haven		CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
New Haven		CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Marginal	
New Haven 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	66.7%	
Region II 1st Quarter OMB Domain Scores		100.0%	85.7%	100.0%	100.0%	100.0%	71.4%	85.7%	85.7%	71.4%	85.7%	85.7%	
Region III	Middletown	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	
	Middletown	CPS Child-in-Placement	yes	yes	Optimal	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Optimal	
	Middletown 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	50.0%	100.0%	100.0%	100.0%	
	Norwich	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Norwich	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	
	Norwich	CPS In-Home Family	yes	yes	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	
	Norwich	CPS Child-in-Placement	yes	yes	Optimal	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Optimal	
	Norwich 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Willimantic	CPS In-Home Family	yes	yes	Very Good	Optimal	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	
	Willimantic	CPS In-Home Family	yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
Willimantic	Services Post Majority CIP	yes	yes	Optimal	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Optimal		
Willimantic 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	100.0%	100.0%	100.0%		
Region III 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	100.0%	88.9%	77.8%	100.0%	100.0%	100.0%	100.0%	
Region IV	Hartford	CPS Child-in-Placement	yes	yes	Very Good	Optimal	Optimal	Marginal	Very Good	Very Good	Very Good	Very Good	
	Hartford	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	
	Hartford	CPS Child-in-Placement	yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	
	Hartford	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Hartford	CPS In-Home Family	No Case Plan	no	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	Absent/Averse	
	Hartford	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Hartford 1st Quarter OMB Domain Scores		83.3%	83.3%	83.3%	83.3%	83.3%	66.7%	83.3%	83.3%	83.3%	83.3%	
	Manchester	CPS Child-in-Placement	yes	yes	Optimal	Very Good	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	
	Manchester	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Manchester	CPS Child-in-Placement	yes	yes	Optimal	Very Good	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	
Manchester	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good		
Manchester 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	75.0%	100.0%		
Region IV 1st Quarter OMB Domain Scores		90.0%	90.0%	90.0%	90.0%	90.0%	80.0%	90.0%	90.0%	80.0%	90.0%		
Region V	Danbury	CPS In-Home Family	yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Danbury	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Danbury 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
	Torrington	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Optimal	
	Torrington	CPS In-Home Family	yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	
	Torrington	CPS In-Home Family	yes	yes	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Torrington 1st Quarter OMB Domain Scores		100.0%	100.0%	66.7%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
	Waterbury	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	
	Waterbury	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	
	Waterbury	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
Waterbury	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Marginal	Very Good		
Waterbury	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good		
Waterbury	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Marginal	Marginal	Marginal	Very Good	Marginal	Marginal		
Waterbury	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good		
Waterbury 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	85.7%	42.9%	71.4%	100.0%	57.1%	85.7%		
Region V 1st Quarter OMB Domain Scores		100.0%	100.0%	91.7%	100.0%	91.7%	66.7%	83.3%	100.0%	75.0%	91.7%		
Region VI	Meriden	CPS In-Home Family	yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Meriden	Services Post Majority CIP	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Marginal	Very Good	
	Meriden 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	50.0%	100.0%	100.0%	
	New Britain	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	New Britain	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	New Britain	CPS Child-in-Placement	yes	yes	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	New Britain	CPS In-Home Family	yes	yes	Very Good	Very Good	Very Good	Very Good	Very Good	Too early to note progress	Very Good	Very Good	
	New Britain	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Marginal	
	New Britain	CPS Child-in-Placement	yes	yes	Very Good	Very Good	Marginal	Marginal	Very Good	Very Good	Very Good	Very Good	
	New Britain 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	50.0%	50.0%	100.0%	100.0%	100.0%	50.0%	
Region VI 1st Quarter OMB Domain Scores		100.0%	100.0%	100.0%	100.0%	87.5%	75.0%	100.0%	85.7%	87.5%	87.5%		
Statewide 1st Quarter OMB Domain Scores		98.1%	96.2%	94.2%	96.2%	94.2%	71.1%	84.6%	92.2%	82.7%	92.3%		

Issues with inclusion/engagement of case participants in the case planning process were noted in prior reporting. During this period under review, the Department engaged case participants with varying amounts of success. While documentation reflected some level of case planning discussions with most key case participants, attendance at the Administrative Case Reviews continues to be low in many cases especially with respect to adolescents, fathers, Guardian Ad Litem (GAL), and active service providers. There was an improvement in DCF staff attendance at ACR during the First Quarter 2020. The low participation, especially of older youth attending the ACR has been reflected in previous reports and remains an area needing improvement.

Participation in Case Planning and Attendance at the ACR 4th Quarter 2019			Participation in Case Planning and Attendance at the ACR 1st Quarter 2020		
Case Participant	Documentation of Case Planning during PUR	Attendance at the ACR	Case Participant	Documentation of Case Planning during PUR	Attendance at the ACR
Child (Age 12 or more)	87.5%	17.0%	Child (Age 12 or more)	89.4%	0.0%
Mother	88.0%	66.7%	Mother	88.9%	55.6%
Father	60.4%	30.4%	Father	75.0%	36.8%
Foster Parent	88.5%	52.0%	Foster Parent	92.0%	50.0%
Active Service Provider	83.3%	23.1%	Active Service Provider	80.6%	23.8%
Attorney/GAL	57.1%	26.9%	Attorney/GAL	60.6%	22.2%
Attorney for Parent	52.6%	33.3%	Attorney for Parent	60.0%	44.4%
Other DCF Staff	75.0%	33.3%	Other DCF Staff	100.0%	66.7%
Other Case Participants	75.0%	44.4%	Other Case Participants	82.4%	66.7%

Outcome Measure 4

The 2017 Revised Exit Plan requirement for Outcome Measure 4 – Needs Met, is stated as:

“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 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 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.”

In previous quarters, the Department 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)
- Dental Needs (January 2020 Status Report)

Some domains have fluctuated in maintenance or required rates following initial pre-certification as noted in our reporting of monitored performance in the quarters since goal achievement. Joining the list of pre-certified domains for the first time is Dental Needs, which were met 86.8% and 87.0% consecutively across the two quarters of the period under review. During the First Quarter 2020 all domains achieved the statewide benchmark requirement. This is the first time that this has been achieved. Reviewing both quarters to arrive at precertification determination, the Department the three domains with which the Department continues to have the most difficulty are: Risk: In-Home, Permanency: DCF Case Management – Contracting or Providing Services to Achieve the Permanency Goal During the Prior Six Months, and Well Being: Mental Health, Behavioral Health, and Substance Abuse Services.

Quarterly Statewide Summary of OM4 Domains 2 nd Quarter 2017 – 1st Quarter 2020 (Requirement 85.0%)											
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 1st Quarter 2020 OM4 Results	92.3%	96.4%	100.0%	96.2%	92.3%	90.4%	96.2%	88.5%	86.0%	100.0%	96.2%
Statewide 4th Quarter 2019 OM4 Results	85.2%	100.0%	96.1%	86.8%	96.1%	81.1%	90.6%	98.1%	79.2%	100.0%	98.0%
Statewide 3rd Quarter 2019 OM4 Results	75.0%	100.0%	96.3%	85.2%	100.0%	74.1%	94.4%	87.0%	74.1%	100.0%	86.3%
Statewide 2nd Quarter 2019 OM4 Results	90.3%	100.0%	87.5%	90.6%	87.5%	75.5%	94.3%	86.8%	71.2%	91.7%	84.3%
Statewide 1st Quarter 2019 OM4 Results	69.0%	92.0%	91.7%	86.8%	87.5%	60.4%	81.1%	81.1%	56.6%	83.3%	74.5%
Statewide 4th Quarter 2018 OM4 Results	66.7%	92.6%	91.3%	78.9%	91.7%	58.5%	81.1%	75.5%	63.5%	91.3%	84.6%
Statewide 3rd 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 2nd 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 summary of this measure by region during each quarter is found on the following pages. All regions had successes across many of the identified domains, Region II (Milford, New Haven) and Region VI (Meriden, New Britain) achieved full compliance on all measured domains within the First Quarter 2020 reporting period.

Quarterly Regional Summary of OM4 4th Quarter 2019 (Requirement 85.0%)											
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
Region I - 4th Quarter 2019	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	80.0%	80.0%	100.0%	100.0%	100.0%
Region II - 4th Quarter 2019	75.0%	100.0%	100.0%	77.8%	100.0%	88.9%	100.0%	100.0%	77.8%	100.0%	85.7%
Region III - 4th Quarter 2019	80.0%	100.0%	100.0%	90.0%	100.0%	80.0%	90.0%	100.0%	90.0%	100.0%	100.0%
Region IV - 4th Quarter 2019	83.0%	100.0%	80.0%	90.9%	80.0%	63.6%	81.8%	100.0%	63.6%	100.0%	100.0%
Region V - 4th Quarter 2019	83.3%	100.0%	100.0%	72.7%	100.0%	90.9%	90.9%	100.0%	81.8%	100.0%	100.0%
Region VI - 4th Quarter 2019	100.0%	100.0%	100.0%	100.0%	100.0%	85.7%	100.0%	100.0%	71.4%	100.0%	100.0%
Statewide - 4th Quarter 2019 OM3 Results	85.2%	100.0%	96.1%	86.8%	96.1%	81.1%	90.6%	98.1%	79.2%	100.0%	98.0%

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Quarterly Regional Summary of OM4 1st Quarter 2020 (Requirement 85.0%)											
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
Region I - 1st Quarter 2020	100.0%	100.0%	100.0%	83.3%	100.0%	100.0%	83.3%	83.3%	83.3%	100.0%	100.0%
Region II - 1st Quarter 2020	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	85.7%	100.0%	100.0%	100.0%
Region III - 1st Quarter 2020	100.0%	100.0%	100.0%	100.0%	100.0%	88.9%	100.0%	100.0%	77.8%	100.0%	88.9%
Region IV - 1st Quarter 2020	60.0%	100.0%	100.0%	90.0%	100.0%	80.0%	100.0%	90.0%	77.8%	100.0%	100.0%
Region V - 1st Quarter 2020	100.0%	80.0%	100.0%	100.0%	80.0%	91.7%	91.7%	91.7%	91.7%	100.0%	91.7%
Region VI - 1st Quarter 2020	100.0%	100.0%	100.0%	100.0%	100.0%	87.5%	100.0%	87.5%	100.0%	100.0%	100.0%
Statewide - 1st Quarter 2020 OM3 Results	92.7%	96.4%	100.0%	96.2%	92.3%	90.4%	96.2%	88.5%	86.0%	100.0%	96.2%

A reporting of the measures by Area Office at the case level is provided for consideration on the following pages.

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Fourth Quarter 2019 Outcome Measure 4 Domain Performance by Area Office, Region and State														
	What is the social worker's area office assignment?	What is the type of case assignment noted in LINK?	Risk: In-Home	Risk: Child In Placement	Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months	Permanency: 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: Behavioral and Substance Abuse Services	Well-Being: Child's Current Placement	Well-Being: Education	Overall Score for Outcome Measure 15
Region I	Bridgeport	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Not Met
	Bridgeport	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
	Bridgeport	CPS In-Home Family Case	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Marginal	Marginal	Very Good	N/A to Case	Very Good	Needs Met
	Bridgeport 4th Quarter OM4		100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	66.7%	66.7%	100.0%	100.0%	100.0%	66.7%
	Norwalk	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
	Norwalk	CPS In-Home Family Case	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
	Norwalk 4th Quarter OM4		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Region I 4th Quarter OM4		100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	80.0%	80.0%	100.0%	100.0%	100.0%	80.0%	
Region II	Milford	CPS In-Home Family Case	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
	Milford	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Needs Met
	Milford	CPS CIP	N/A to Case	Very Good	Very Good	Optimal	Very Good	Marginal	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Not Met
	Milford	CPS In-Home Family Case	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
	Milford	CPS CIP	N/A to Case	Very Good	Very Good	Marginal	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Optimal	Needs Met
	Milford 4th Quarter OM4		100.0%	100.0%	100.0%	80.0%	100.0%	80.0%	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%
	New Haven	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
	New Haven	CPS In-Home Family Case	Marginal	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	Marginal	Needs Not Met
	New Haven	CPS CIP	N/A to Case	Very Good	Very Good	Marginal	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	N/A to Case	Needs Met
	New Haven	CPS In-Home Family Case	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	N/A to Case	Needs Met
	New Haven 4th Quarter OM4		80.0%	100.0%	100.0%	75.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	50.0%
	Region II 4th Quarter OM4		75.0%	100.0%	100.0%	77.8%	100.0%	100.0%	88.9%	100.0%	100.0%	77.8%	100.0%	85.7%
Region III	Middletown	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Optimal	Marginal	Very Good	Very Good	Needs Not Met
	Middletown	CPS In-Home Family Case	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	N/A to Case	Needs Met
	Middletown 4th Quarter OM4		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	100.0%	50.0%
	Norwich	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	N/A to Case	Very Good	Needs Met
	Norwich	CPS In-Home Family Case	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
	Norwich	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	Norwich	CPS In-Home Family Case	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
	Norwich	CPS In-Home Family Case	Very Good	N/A to Case	N/A to Case	Marginal	N/A to Case	Marginal	Marginal	Very Good	Very Good	N/A to Case	Very Good	Needs Not Met
	Norwich 4th Quarter OM4		100.0%	100.0%	100.0%	80.0%	100.0%	80.0%	80.0%	100.0%	100.0%	100.0%	100.0%	80.0%
	Willimantic	CPS CIP	N/A to Case	Very Good	Optimal	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	Willimantic	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Optimal	Optimal	Needs Met
	Willimantic	CPS In-Home Family Case	Marginal	Very Good	N/A to Case	Very Good	N/A to Case	Marginal	Optimal	Optimal	Very Good	N/A to Case	Very Good	Needs Not Met
	Willimantic 4th Quarter OM4		0.0%	100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	100.0%	100.0%	100.0%	100.0%	66.7%
Region III 4th Quarter OM4		80.0%	100.0%	100.0%	90.0%	100.0%	100.0%	80.0%	90.0%	100.0%	90.0%	100.0%	70.0%	
Region IV	Hartford	CPS CIP	N/A to Case	Optimal	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Met
	Hartford	CPS CIP	N/A to Case	Very Good	Marginal	Very Good	Marginal	Marginal	Optimal	Optimal	Marginal	Very Good	Very Good	Needs Not Met
	Hartford	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	Hartford	CPS In-Home Family Case	Very Good	N/A to Case	N/A to Case	Marginal	N/A to Case	Marginal	Optimal	Optimal	Very Good	N/A to Case	Very Good	Needs Not Met
	Hartford	CPS In-Home Family Case	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 Case	Marginal	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Optimal	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met
	Hartford	CPS In-Home Family Case	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Marginal	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met
	Hartford 4th Quarter OM4		75.0%	100.0%	66.7%	85.7%	66.7%	42.9%	85.7%	100.0%	42.9%	100.0%	100.0%	42.9%
	Manchester	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Met
	Manchester	CPS In-Home Family Case	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Very Good	Optimal	Very Good	N/A to Case	Very Good	Needs Met
	Manchester	CPS In-Home Family Case	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
	Manchester	CPS CIP	N/A to Case	Optimal	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Needs Met
	Manchester 4th Quarter OM4		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	75.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Region IV 4th Quarter OM4		83.0%	100.0%	80.0%	90.9%	80.0%	63.6%	81.8%	100.0%	63.6%	100.0%	100.0%	63.6%	
Region V	Danbury	CPS CIP	N/A to Case	Optimal	Very Good	Marginal	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	N/A to Case	Needs Met
	Danbury	CPS In-Home Family Case	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
	Danbury 4th Quarter OM4		100.0%	100.0%	100.0%	50.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
	Torrington	CPS CIP	N/A to Case	Very Good	Optimal	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Needs Met
	Torrington	CPS In-Home Family Case	Marginal	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 Not Met
	Torrington 4th Quarter OM4		0.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%
	Waterbury	CPS In-Home Family Case	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
	Waterbury	CPS CIP	N/A to Case	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Needs Met
	Waterbury	CPS In-Home Family Case	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
	Waterbury	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
	Waterbury	CPS In-Home Family Case	Very Good	N/A to Case	N/A to Case	Marginal	N/A to Case	Marginal	Very Good	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met
	Waterbury	CPS In-Home Family Case	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Marginal	Very Good	Marginal	N/A to Case	Very Good	Needs Not Met
	Waterbury	CPS CIP	N/A to Case	Optimal	Very Good	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Optimal	Optimal	Needs Met
Waterbury 4th Quarter OM4		100.0%	100.0%	100.0%	71.4%	100.0%	85.7%	85.7%	100.0%	71.4%	100.0%	100.0%	71.4%	
Region V 4th Quarter OM4		83.3%	100.0%	100.0%	72.7%	100.0%	90.9%	90.9%	100.0%	81.8%	100.0%	100.0%	72.7%	
Region VI	Meriden	CPS In-Home Family Case	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Marginal	Optimal	Optimal	Very Good	N/A to Case	Very Good	Needs Not Met
	Meriden	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	Optimal	Needs Met
	Meriden 4th Quarter OM4		100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	100.0%	50.0%	100.0%	50.0%	
	New Britain	CPS In-Home Family Case	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 Case	Optimal	Optimal	N/A to Case	Optimal	N/A to Case	Optimal	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	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Needs Met
	New Britain	CPS CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Needs Not Met
	New Britain	CPS In-Home Family Case	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Optimal	Very Good	Very Good	N/A to Case	Very Good	Needs Met
	New Britain 4th Quarter OM4		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	80.0%	100.0%	100.0%	80.0%
	Region VI 4th Quarter OM4		100.0%	100.0%	100.0%	100.0%	100.0%	85.7%	100.0%	100.0%	71.4%	100.0%	100.0%	71.4%
Statewide 4th Quarter OM4		85.2%	100.0%	96.1%	86.8%	96.1%	81.1%	90.6%	98.1%	79.2%	100.0%	98.0%	71.7%	

Juan F. v. Lamont Exit Plan Status Report
September 2020

First Quarter 2020 Outcome Measure 4 Domain Scores (Benchmark Requirement 85%)														
Region	What is the social worker's area office assignment?	What is the type of case assignment noted in LINK?	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	
Region I	Bridgport	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Marginal	Marginal	Very Good	N/A to Case	Very Good	
	Bridgport	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	
	Bridgport	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	
	Bridgport	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	Bridgport 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	75.0%	100.0%	100.0%	75.0%	75.0%	100.0%	100.0%	
	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	
	Norwalk	CPS Child-in-Placement	N/A to Case	Optimal	Optimal	Very Good	Optimal	Very Good	Very Good	Optimal	Optimal	Optimal	Optimal	
	Norwalk 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	50.0%	100.0%	100.0%
	Region I 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	83.3%	100.0%	100.0%	83.3%	83.3%	100.0%	100.0%	
	Milford	Services Post Majority CIP	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Marginal	Very Good	Very Good	Very Good	
Milford	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		
Milford	CPS Child-in-Placement	N/A to Case	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good		
Milford	CPS Child-in-Placement	N/A to Case	Optimal	Very Good	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good		
Milford 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	100.0%	100.0%		
Region II	New Haven	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good	
	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	Very Good	Very Good	N/A to Case	Very Good	
	New Haven	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	
	New Haven 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
	Region II 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	85.7%	100.0%	100.0%	100.0%	
	Middletown	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	Marginal	N/A to Case	Marginal	
	Middletown	CPS Child-in-Placement	N/A to Case	Very Good	Optimal	Very Good	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	Very Good	
	Middletown 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	50.0%	50.0%	100.0%	50.0%	
	Region III	Norwich	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Very Good
		Norwich	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Optimal	Very Good	Marginal	N/A to Case	Very Good
Norwich		CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Very Good	Optimal	Very Good	Very Good	N/A to Case	Very Good	
Norwich		CPS Child-in-Placement	N/A to Case	Optimal	Very Good	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Optimal	Optimal	
Norwich 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	75.0%	100.0%	100.0%		
Willimantic		CPS In-Home Family	Very Good	Optimal	N/A to Case	Optimal	N/A to Case	Marginal	Optimal	Very Good	Marginal	Optimal	Very Good	
Willimantic		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	
Willimantic		Services Post Majority 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	
Willimantic 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	66.7%	100.0%	100.0%		
Region III 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	88.9%	100.0%	77.8%	100.0%	88.9%		
Region IV	Hartford	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Optimal	Optimal	Very Good	Optimal	Optimal	
	Hartford	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	N/A to Case	Very Good	Very Good	
	Hartford	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Optimal	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	Very Good	
	Hartford	CPS In-Home Family	Very Good	Optimal	N/A to Case	Optimal	N/A to Case	Very Good	Optimal	Very Good	Very Good	N/A to Case	Very Good	
	Hartford	CPS In-Home Family	Marginal	N/A to Case	N/A to Case	Very Good	N/A to Case	Poor	Very Good	Absent/Averse	Marginal	N/A to Case	Very Good	
	Hartford	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	
	Hartford 1st Quarter O4M Domain Scores			66.7%	100.0%	100.0%	100.0%	83.3%	100.0%	83.3%	80.0%	100.0%	100.0%	
	Manchester	CPS Child-in-Placement	N/A to Case	Optimal	Optimal	Very Good	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	
	Manchester	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	
	Manchester	CPS Child-in-Placement	N/A to Case	Optimal	Very Good	Marginal	Optimal	Very Good	Very Good	Very Good	Very Good	Very Good	Optimal	
Manchester	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Manchester	N/A to Case	Very Good	N/A to Case	Very Good	Optimal	N/A to Case	Very Good		
Manchester 1st Quarter O4M Domain Scores			50.0%	100.0%	100.0%	75.0%	100.0%	75.0%	100.0%	100.0%	75.0%	100.0%		
Region IV 1st Quarter O4M Domain Scores			60.0%	100.0%	100.0%	90.0%	100.0%	80.0%	100.0%	77.8%	100.0%	100.0%		
Danbury	CPS In-Home Family	Optimal	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Very Good	Optimal	Very Good	N/A to Case	Very Good		
Danbury	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Very Good	Marginal	Very Good	Marginal	Very Good	Marginal	Very Good	Very Good		
Danbury 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	80.0%	100.0%	50.0%	100.0%	50.0%	100.0%	100.0%		
Torrington	CPS Child-in-Placement	N/A to Case	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	Very Good	Very Good	Optimal		
Torrington	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Optimal	Very Good	Very Good	N/A to Case	Very Good		
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		
Torrington 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		
Region V	Waterbury	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Optimal	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	
	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	Very Good	
	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	Very Good	
	Waterbury	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Optimal	N/A to Case	Optimal	Very Good	Optimal	Very Good	N/A to Case	Very Good	
	Waterbury	CPS Child-in-Placement	N/A to Case	Optimal	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	Very Good	Optimal	
	Waterbury	CPS Child-in-Placement	N/A to Case	Marginal	Very Good	Very Good	Marginal	Marginal	Very Good	Marginal	Very Good	Very Good	Poor	
	Waterbury	CPS In-Home Family	Very Good	N/A to Case	N/A to Case	Very Good	N/A to Case	Optimal	Very Good	Very Good	Very Good	N/A to Case	Very Good	
	Waterbury 1st Quarter O4M Domain Scores			100.0%	66.7%	100.0%	100.0%	66.7%	85.7%	100.0%	85.7%	100.0%	100.0%	
	Region V 1st Quarter O4M Domain Scores			100.0%	80.0%	100.0%	100.0%	80.0%	91.7%	100.0%	91.7%	100.0%	100.0%	
	Meriden	CPS In-Home Family	Optimal	N/A to Case	N/A to Case	Optimal	N/A to Case	Very Good	Optimal	Optimal	Optimal	N/A to Case	Optimal	
Meriden	Services Post Majority CIP	N/A to Case	Very Good	Very Good	Very Good	Optimal	Very Good	Very Good	Optimal	Optimal	Very Good	Optimal		
Meriden 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		
Region VI	New Britain	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	
	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	N/A to Case	Very Good		
	New Britain	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Optimal	Optimal	Very Good	Very Good	Very Good	N/A to Case	Optimal		
	New Britain	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		
	New Britain	CPS Child-in-Placement	N/A to Case	Optimal	Very Good	Optimal	Optimal	Optimal	Optimal	Optimal	Very Good	Very Good		
	New Britain	CPS Child-in-Placement	N/A to Case	Very Good	Very Good	Very Good	Optimal	Marginal	Very Good	Marginal	Very Good	Optimal		
	New Britain 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	83.3%	100.0%	83.3%	100.0%	100.0%		
	Region VI 1st Quarter O4M Domain Scores			100.0%	100.0%	100.0%	100.0%	87.5%	100.0%	87.5%	100.0%	100.0%		
	1st Quarter 2020 O4M Statewide Domain Scores			92.7%	96.4%	100.0%	96.2%	92.3%	90.4%	96.2%	88.5%	86.0%	100.0%	

The individual needs identified in the 105 cases sampled over the two quarters of the review period included a total of 132 unmet needs for the Fourth Quarter 2019 and 105 unmet needs for cases in the First Quarter 2020; for a total of 237 for the full period under review (individual cases may have more than one need identified). The Court Monitor notes that identified unmet continued to decline from the 325 unmet reported in the last status report. The highest noted unmet needs were Dental Screening (n=18) and Individual Therapy - Child (n=15) Outpatient Substance Abuse Treatment - Parents (n=14), and social Worker/Parent Visitation (14). Client refusal remains the top noted reason for the unmet need.

Unmet Needs Priority Needs with Identified Barriers During the Prior Six Months			
Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
Adoption Recruitment	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	1	0
ARG Consultation	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	1	1
Basic Foster Care (Core)	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	0	1
Behavior Management	Placed on Wait List	1	1
Care Coordination	Provider Issues - Staffing, Lack of Follow Through, etc.	1	0
Case Management/Support Advocacy	Delays in Referrals	2	2
Case Management/Support Advocacy	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	1	0
DCF/Provider Contacts	DCF Failed to Properly Assess Child/Family Member related to identified service during the PUR	4	0
DCF/Provider Contacts	Delays in Referrals	2	0
DCF/Provider Contacts	UTD from case plan or narrative	1	0
Dental or Orthodontic Services	Client Refused Service	1	1
Dental or Orthodontic Services	Delay in Referral by SW	1	0
Dental or Orthodontic Services	Insurance Issues	1	0
Dental or Orthodontic Services	Placed on Wait List	1	0

Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
Dental Screening or Evaluation	Client Refused Service	4	8
Dental Screening or Evaluation	Delay in Referral by SW	1	3
Dental Screening or Evaluation	Insurance Issues	1	0
Dental Screening or Evaluation	DCF Failed to Properly Assess Child/Family Member related to identified service during the PUR	0	1
Domestic Violence Services - Perpetrator	Client Refused Service	4	1
Domestic Violence Services - Perpetrator	Insurance Issues	1	0
Domestic Violence Services - Perpetrator	Placed on Wait List	1	1
Domestic Violence Services - Perpetrator	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	1	0
Domestic Violence Services - Perpetrator	No Service Identified to Meet this Need	0	1
Domestic Violence Services - Prevention Services	Client Refused Service	1	0
Domestic Violence Services - Prevention Services	No Service Identified to Meet this Need	0	1
Domestic Violence Services - Victim	Client Refused Service	5	0
Domestic Violence Services - Victim	Placed on Wait List	2	1
Domestic Violence Services - Victim	Delay in Referral by SW	1	0
Domestic Violence Services - Victim	No Referral Made by DCF during the PUR	1	0
Domestic Violence Services - Victim	No Service Identified to Meet this Need	0	1
Domestic Violence Services - Victim	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	0	1
Drug/Alcohol Education Services - Parent	Client Refused Service	2	0
Educational Screening or Evaluation	Client Refused Service	1	2
Educational Screening or Evaluation	Provider Issues - Staffing, Lack of Follow Through, etc.	1	0
Educational Screening or Evaluation	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	0	1
Family Preservation Services	Client Refused Service	1	1

Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
Family Reunification Services	Client Refused Service	1	0
Family Reunification Services	Service Deferred Pending Completion of Another	1	0
Family Reunification Services	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	1	0
Foster Care Supports	Client Refused Service	0	1
Group Counseling - Parents	Client Refused Service	0	1
Head Start Services	Placed on Wait List	1	0
Health/Medical Screening or Evaluation	Delay in Referral by SW	1	2
Health/Medical Screening or Evaluation	Insurance Issues	1	0
Health/Medical Screening or Evaluation	Other: Mother hasn't scheduled to date.	1	0
Health/Medical Screening or Evaluation	Client Refused Service	0	5
Housing Assistance (Section 8)	Placed on Wait List	2	0
IEP Programming	Client Refused Service	2	2
IEP Programming	Service Deferred Pending Completion of Another	1	0
Individual Counseling - Child	Client Refused Service	3	4
Individual Counseling - Child	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	3	0
Individual Counseling - Child	Delay in Referral by SW	2	0

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Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
Individual Counseling - Child	Lack of Communication between DCF and provider	1	0
Individual Counseling - Child	Placed on Wait List	1	0
Individual Counseling - Child	No Referral Made by DCF during the PUR	0	1
Individual Counseling - Parent	Client Refused Service	0	7
Individual Counseling - Parent	Delay in Referral by SW	0	1
Individual Counseling - Parent	Placed on Wait List	0	1
In-Home Parent Education Services	Client Refused Service	3	2
In-Home Treatment	Client Refused Service	2	1
In-Home Treatment	Provider Issues - Staffing, Lack of Follow Through, etc.	1	0
In-Home Treatment	No Referral Made by DCF during the PUR	1	0
In-Home Treatment	Placed on Wait List	0	1
In-Home Treatment	Other: Service in place but assessed as not appropriate - requires alternate service	0	1

Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
Inpatient Substance Abuse Treatment - Parent	Client Refused Service	1	3
Inpatient Substance Abuse Treatment - Parent	Placed on Wait List	0	1
Juvenile Justice Intermediate Evaluation	Client Refused Service	1	0
Life Skills Training	Client Refused Service	1	0
Matching/Placement Processing (includes ICO)	Placed on Wait List	0	1
Medication Management - Child	Client Refused Service	2	0
Medication Management - Child	Lack of Communication between DCF and provider	1	0
Medication Management - Parent	Lack of Communication between DCF and provider	1	0
Medication Management - Parent	Client Refused Service	0	1
Mental Health Screening or Evaluation - Child	Client Refused Service	2	0
Mental Health Screening or Evaluation - Parent	Client Refused Service	2	2
Mentoring	Placed on Wait List	1	0
Mentoring	Provider Issues - Staffing, Lack of Follow Through, etc.	1	0
Mentoring	No Referral Made by DCF during the PUR	0	2
Occupational Therapy	Client Refused Service	0	1
Other IH Service - Legal	Delay in Referral by SW	1	0
Other IH Service - Legal	No Referral Made by DCF during the PUR	0	1
Other Medical Intervention: bloodwork	Client Refused Service	1	0
Other Medical Intervention: gynecology appointment	Client Refused Service	2	0
Other Medical Intervention: VNA	Delay in Referral by SW	1	0
Other Medical Intervention: Eyeglasses	Insurance Issues	0	1
Other Mental Health Need: In Patient/Dual Diagnosis	Client Refused Service	0	1
Other Mental Health Need: Psychosexual Evaluation	Client Refused Service	0	1
Other OOH Service - Ice Breakers	Delay in Referral by SW	1	0
Other OOH Service - Legal	Neglect Petitions not filed	2	0
Other OOH Service - Subsidy/Adoption paperwork	No Referral Made by DCF during the PUR	0	1

Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
Outpatient Substance Abuse Treatment - Parent	Client Refused Service	7	5
Outpatient Substance Abuse Treatment - Parent	Lack of Communication between DCF and provider	1	0
Outpatient Substance Abuse Treatment - Parent	Hours of Operation	0	1
Parenting Classes	Client Refused Service	2	4
Parenting Classes	No Referral Made by DCF during the PUR	1	1
Parenting Classes	Delay in Referral by SW	0	1
Parenting Groups	No Service Identified to Meet this Need	1	0
Parenting Groups	Client Refused Service	1	1
Physical Therapy	Client Refused Service	0	1
Positive Youth Development Program	Placed on Wait List	0	1
Problem Sexual Behavior Evaluation	Client Refused Service	1	1
Psychiatric Evaluation - Child	Delay in Referral by SW	1	0
Relative Foster Care	Approval Process	0	1
Relative Foster Care	Delay in Referral by SW	0	1
Relative Foster Care	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	0	1
Relative Foster Care	Other: Licensing Delay	0	1
Relapse Prevention Program - Parent	Client Refused Service	1	0
Sexual Abuse Therapy - Victim	Client Refused Service	0	1
Social Recreational Programming	UTD from case plan or narrative	0	1
Substance Abuse Screening - Child	Client Refused Service	1	0
Substance Abuse Screening - Parent	Client Refused Service	2	1
Substance Abuse Screening - Parent	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	1	1
Supportive Housing for Recovering Families	Placed on Wait List	2	0
Supportive Housing for Recovering Families	Approval Process	1	0

Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
SW/Child Visitation	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	2	0
SW/Child Visitation	Delays in Visitation	1	2
SW/Parent Visitation	Delay in Referral by SW	4	0
SW/Parent Visitation	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	4	3
SW/Parent Visitation	Client Refused Service	1	1
SW/Parent Visitation	No Referral Made by DCF during the PUR	1	0
		132	105

In looking at discussion of the unmet needs identified within the six-month planning cycle reviewed, reviewers noted that most of the 105 cases reviewed across the two quarters, cases addressed all (43.8%) or some (23.8%) of these needs in the approved plan going forward.

There are a total of 5 cases in which needs and services unmet during the prior period were discussed at the ACR but were not addressed in the current approved case plan.

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?			
Need Unmet Incorporated into the Current Case Plan	Frequency Fourth Quarter 2019	Frequency First Quarter 2020	Semi-Annual Frequency
Yes - All	22	24	46
Yes - Partially	15	10	25
No - None	4	1	5
N/A - There are no Unmet Needs	7	10	17
N/A - this is the initial plan	5	7	12
Total	53	52	105

In looking at the recurrence of unmet needs across consecutive planning cycles, the review found that during the fourth quarter there were 21 cases (39.6%) identifying the same unmet need carrying across the two planning case planning cycles. There were 22 cases in the First Quarter 2020 which represent 42.3% of the cases with an unmet need that carried across two planning cycles.

Reviewers also noted that there continue to be discrepancies between issues noted in the case record (or identified at the ACR) and those incorporated into the case plan. This occurred related to 21 cases (39.6%) during the Fourth Quarter 2019 and 12 cases (23.1%) during the First Quarter 2020. This does not mean that the agency was not working on addressing the priority need, but rather that the case plan failed to accurately identify the priority need for the families as evidenced by the documentation or noted at ACR. A listing of all 75 individual needs not incorporated are presented below.

Service Needs Not Identified on the Case Plan That Should Have Been as a Result of the Documentation or Meeting Attended by Reviewer			
Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
Adoption Recruitment	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	1	0
Adoption Recruitment	Placed on Wait List	0	1
After School Programs	No Service Identified to Meet this Need	1	0
Case Management/Support Advocacy	Other - Delay in Permanency (TOG)	1	0
Dental Screening or Evaluation	No Service Identified to Meet this Need	1	4
Dental Screening or Evaluation	Client Refused Service	0	1
Domestic Violence Services - Perpetrator	No Service Identified to Meet this Need	2	1
Domestic Violence Services - Perpetrator	Other: No Current Approved Case Plan	1	0
Domestic Violence Services - Prevention Programs	No Service Identified to Meet this Need	1	1
Domestic Violence Services - Victim	No Service Identified to Meet this Need	2	1
Domestic Violence Services - Victim	Other: No Current Approved Case Plan	1	0
Head Start Services	No Service Identified to Meet this Need	1	0
Health/Medical Screening or Evaluation	Other: No Current Approved Case Plan	1	0
Health/Medical Screening or Evaluation	No Service Identified to Meet this Need	0	1
Housing Assistance (Section 8)	Other: No Current Approved Case Plan	1	0

Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
IEP Programming	No Service Identified to Meet this Need	1	0
IEP Programming	Other: No Current Approved Case Plan	1	0
Individual Counseling - Child	No Service Identified to Meet this Need	2	0
Individual Counseling - Child	Other: No Current Approved Case Plan	1	1
Individual Counseling - Child	No Referral Made by DCF during the PUR	0	1
Individual Counseling - Parent	No Service Identified to Meet this Need	2	0
Individual Counseling - Parent	Other: No Current Approved Case Plan	1	1
In Home Parent Education and Support	UTD from Case Plan or Narratives	0	1
In-Home Treatment	No Service Identified to Meet this Need	2	0
In-Home Treatment	N/A - While not documented in plan, client Engaged in Service	1	0
Job Coaching/Placement	No Service Identified to Meet this Need	1	0
Matching/Processing (Includes ICO)	Placed on Wait List	0	1
Medical Intervention: Gynecology Appointment	No Service Identified to Meet this Need	1	0
Medical Intervention: Occupational Therapy	No Service Identified to Meet this Need	1	0
Medical Intervention: Eyeglasses	Insurance Issues	0	1
Medication Management - Child	No Service Identified to Meet this Need	1	0
Mental Health Screening or Evaluation - Child	No Service Identified to Meet this Need	2	0
Mentoring	No Referral Made by DCF during the PUR	0	1
Other IH Services - Birth to 3	No Service Identified to Meet this Need	1	0

Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
Other OOH Service - Legal (Filing TPR)	No Referral Made by DCF during the PUR	1	0
Other OOH Service - Permanency Goal	No Service Identified to Meet this Need	2	0
Other OOH Service - Permanency Support Services	No Service Identified to Meet this Need	0	1
Other Mental Health Need: Psychosexual Evaluation	No Service Identified to Meet this Need	0	1
Other State Agency (DMHAS, DDS, MSS, etc.)	Delay in Referral by SW	0	1
Outpatient Substance Abuse Treatment - Parent	Other: No Current Approved Case Plan	1	0
Parenting Classes	No Service Identified to Meet this Need	2	1
Parenting Classes	Other: No Current Approved Case Plan	1	1
Parenting Group	No Service Identified to Meet this Need	2	0
Preparation for Adult Living Services	Other: No Current Approved Case Plan	1	0
Preparation for Adult Living Services	No Service Identified to Meet this Need	1	0
Psychiatric Evaluation - Child	No Service Identified to Meet this Need	1	0
Relapse Prevention Program - Parent	Other: No Current Approved Case Plan	0	1
Relative Foster Care	Other: FM no longer wants TOG. Though no steps to address this need, DCF has identified and is working with relative to determine if they can be resource.	1	0
Substance Abuse Screening - Child	No Service Identified to Meet this Need	1	0
Substance Abuse Screening - Parent	No Service Identified to Meet this Need	1	0
Substance Abuse Screening - Parent	DCF Failed to Properly Assess Child/Family Member related to this need during the PUR	0	1

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Need	Identified Barrier	Fourth Quarter 2019	First Quarter 2020
Supervised Visitation	No Service Identified to Meet this Need	1	0
Supportive Housing for Recovering Families	Other: No Current Approved Case Plan	1	0
Young Parents Program	No Service Identified to Meet this Need	1	0
Young Parents Program	No Referral Made by DCF during the PUR	0	1
		50	25

JUAN F. ACTION PLAN MONITORING REPORT

February 2020

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 2006 through 2019.

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

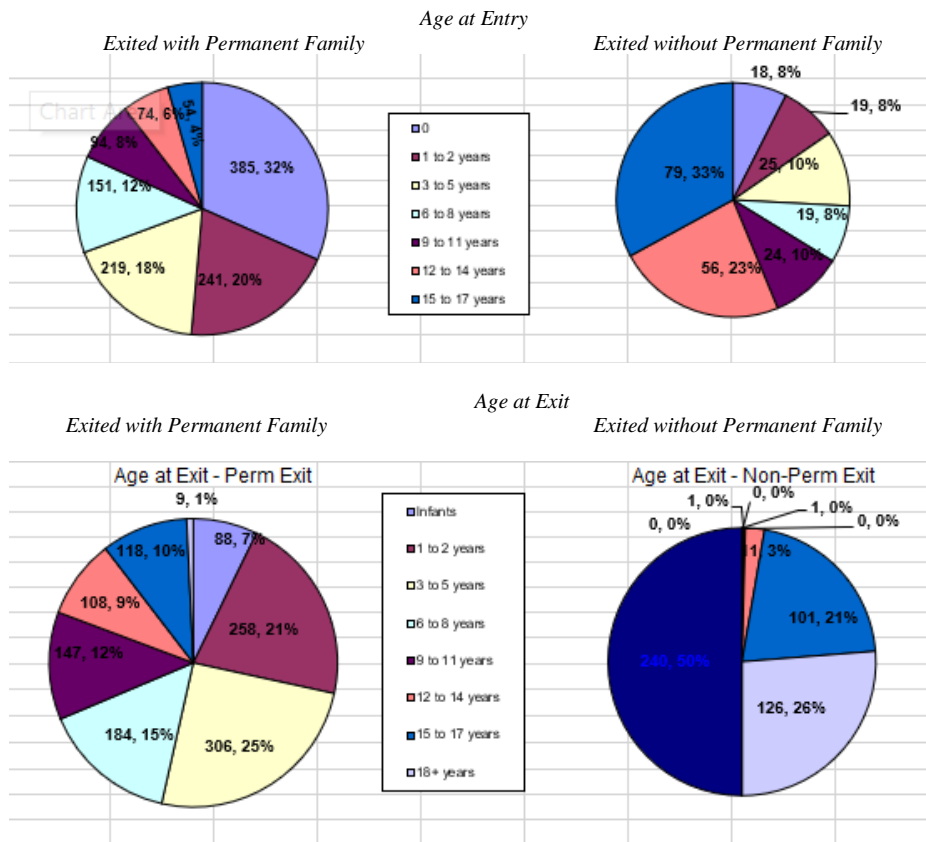
	Period of Entry to Care													
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total Entries	3408	2853	2829	2628	2694	2297	1859	2005	1930	1990	2258	2081	2355	2102
In 1 yr	1262 37.0%	1095 38.4%	1098 38.8%	1093 41.6%	1025 38.0%	707 30.8%	560 30.1%	535 26.7%	499 25.9%	427 21.5%	566 25.1%	542 25.9%	488 20.7%	
In 2 yrs	1972 57.9%	1675 58.7%	1676 59.2%	1582 60.2%	1378 51.2%	1052 45.8%	857 46.1%	841 41.9%	791 41.0%	754 37.9%	903 40.0%	790 38.0%		
In 3 yrs	2324 68.2%	1974 69.2%	1943 68.7%	1792 68.2%	1676 62.2%	1245 54.2%	1035 55.7%	1072 53.5%	1000 51.8%	972 48.8%	1179 52.2%			
In 4 yrs	2500 73.4%	2090 73.3%	2033 71.9%	1895 72.1%	1780 66.1%	1357 59.1%	1119 60.2%	1159 57.8%	1111 57.6%	1075 54.0%				
To Date	2623 77.0%	2174 76.2%	2122 75.0%	1953 74.3%	1851 68.7%	1436 62.5%	1160 62.4%	1213 60.5%	1169 60.6%	1094 55.0%	1253 55.5%	934 44.9%	676 28.7%	284 13.5%
Non-Permanent Exits														
In 1 yr	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%	62 25.9%	97 4.1%	
In 2 yrs	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%	89 3.9%	88 4.2%		
In 3 yrs	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%	156 7.8%	112 5.0%			
In 4 yrs	449 13.2%	392 13.7%	394 13.9%	328 12.5%	309 11.5%	257 11.2%	218 11.7%	236 11.8%	176 9.1%	178 8.9%				
To Date	553 16.2%	468 16.4%	476 16.8%	408 15.5%	388 14.4%	304 13.2%	259 13.9%	280 14.0%	201 10.4%	184 9.2%	119 5.3%	101 4.9%	97 4.1%	59 2.8%

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	Period of Entry to Care													
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
<i>Unknown Exits</i>														
<i>In 1 yr</i>	76 2.2%	62 2.2%	60 2.1%	75 2.9%	127 4.7%	205 8.9%	133 7.2%	101 5.0%	112 5.8%	196 9.8%	250 11.1%	237 11.9%	316 13.4%	
<i>In 2 yrs</i>	117 3.4%	98 3.4%	91 3.2%	139 5.3%	303 11.2%	399 17.4%	254 13.7%	309 15.4%	341 17.7%	431 21.7%	499 22.1%	516 24.8%		
<i>In 3 yrs</i>	140 4.1%	124 4.3%	125 4.4%	192 7.3%	380 14.1%	475 20.7%	336 18.1%	396 19.8%	442 22.9%	530 26.6%	639 28.3%			
<i>In 4 yrs</i>	167 4.9%	156 5.5%	167 5.9%	217 8.3%	399 14.8%	499 21.7%	375 20.2%	442 22.0%	478 24.8%	572 28.7%				
<i>To Date</i>	225 6.6%	207 7.3%	214 7.6%	252 9.6%	438 16.3%	540 23.5%	418 22.5%	475 23.7%	497 25.8%	582 29.2%	663 29.4%	592 28.4%	468 19.9%	131 6.2%
<i>Remain In Care</i>														
<i>In 1 yr</i>	1811 53.1%	1433 50.2%	1421 50.2%	1252 47.6%	1346 50.0%	1247 54.3%	1071 57.6%	1244 62.0%	1208 62.6%	1272 63.9%	1374 60.9%	1240 59.2%	1465 62.2%	
<i>In 2 yrs</i>	974 28.6%	762 26.7%	742 26.2%	640 24.4%	770 28.6%	658 28.6%	602 32.4%	673 33.6%	658 34.1%	681 34.2%	767 34.0%	687 33.0%		
<i>In 3 yrs</i>	543 15.9%	401 14.1%	398 14.1%	344 13.1%	363 13.5%	357 15.5%	298 16.0%	319 15.9%	331 17.2%	332 16.7%	328 14.5%			
<i>In 4 yrs</i>	292 8.6%	215 7.5%	235 8.3%	188 7.2%	206 7.6%	184 8.0%	147 7.9%	168 8.4%	165 8.5%	165 8.3%				
<i>To Date</i>	7 0.2%	4 0.1%	17 0.6%	15 0.6%	17 0.6%	17 0.7%	22 1.2%	37 1.8%	63 3.3%	130 6.5%	223 9.9%	454 21.8%	1114 47.3%	1628 77.5%

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 (2019 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 FEBRUARY 3, 2020³)

Is the child legally free (his or her parents' rights have been terminated)?			
Yes 495	No ↓ 3080		
<i>Goals of:</i>	Has the child been in care more than 15 months?		
452 (91%) Adoption	No 1860	Yes ↓ 1220	
32 (6%) OPPLA	Has a TPR proceeding been filed?		
9 (2%) Transfer of Guardianship	Yes 293		No ↓ 927
1 (<1%) Reunification	Is a reason documented not to file TPR?		
1 (<1%) Blank	<i>Goals of:</i>	Yes 207	No 720
	249 (85%) Adoption	<i>Goals of:</i>	<i>Documented Reasons:</i>
	20 (7%) Trans. of Guardian: Sub/Unsub	97 (47%) Trans. of Guardian: Sub/Unsub	50% Compelling Reason
	17 (6%) Reunify	56 (27%) Adoption	25% Petition in process
	7 (2%) OPPLA	39 (19%) Reunify	21% Child is with relative
		15 (7%) OPPLA	4% Services not provided
			<i>Goals of:</i>
			295 (41%) Trans. of Guardian: Sub/Unsub
			206 (29%) Reunify
			156 (22%) Adoption
			58 (8%) OPPLA
			5 (1%) Blank

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

Preferred Permanency Goals:

Reunification	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Total number of children with Reunification goal, pre-TPR and post-TPR	1587	1673	1589	1557	1501	1432
Number of children with Reunification goal pre-TPR	1586	1671	1588	1557	1498	1431
<ul style="list-style-type: none"> Number of children with Reunification goal, pre-TPR, >= 15 months in care 	256	278	237	251	240	262
<ul style="list-style-type: none"> Number of children with Reunification goal, pre-TPR, >= 36 months in care 	30	29	25	26	35	36
Number of children with Reunification goal, post-TPR	1	2	1	0	3	1

Transfer of Guardianship (Subsidized and Non-Subsidized)	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Total number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR and post TPR	558	567	604	585	636	654
Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR	548	560	592	574	629	645
<ul style="list-style-type: none"> Number of children with Transfer of Guardianship goal (subsidized and non-subsidized , pre-TPR, >= 22 months) 	230	225	214	181	196	197
<ul style="list-style-type: none"> Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR , >= 36 months) 	64	68	81	73	71	67
Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), post-TPR	10	7	12	11	7	9

Adoption	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Total number of children with Adoption goal, pre-TPR and post-TPR	1249	1189	1257	1266	1224	1150
Number of children with Adoption goal, pre-TPR	675	689	714	717	700	698
Number of children with Adoption goal, TPR not filed, >= 15 months in care	207	225	237	229	242	212
<ul style="list-style-type: none"> Reason TPR not filed, Compelling Reason 	10	10	10	11	6	5
<ul style="list-style-type: none"> Reason TPR not filed, petitions in progress 	29	30	30	39	61	45
<ul style="list-style-type: none"> Reason TPR not filed , child is in placement with relative 	5	2	4	6	6	4
<ul style="list-style-type: none"> Reason TPR not filed, services needed not provided 	1	4	4	1	2	2
<ul style="list-style-type: none"> Reason TPR not filed, blank 	162	179	189	172	167	156
Number of cases with Adoption goal post-TPR	574	500	543	549	524	452
<ul style="list-style-type: none"> Number of children with Adoption goal, post-TPR, in care >= 15 months 	541	471	504	515	497	413
<ul style="list-style-type: none"> Number of children with Adoption goal, post-TPR, in care >= 22 months 	483	414	417	434	415	349
Number of children with Adoption goal, post-TPR, no barrier, > 3 months since TPR	14	9	6	7	9	15
Number of children with Adoption goal, post-TPR, with barrier, > 3 months since TPR	39	27	30	29	22	28
Number of children with Adoption goal, post-TPR, with blank barrier, > 3 months since TPR	317	251	246	315	271	277

Progress Towards Permanency:	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Total number of children, pre-TPR, TPR not filed, >=15 months in care, no compelling reason	667	725	653	645	677	720

Non-Preferred Permanency Goals:

Long Term Foster Care Relative:	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Total number of children with Long Term Foster Care Relative goal	0	0	0	0	0	0
Number of children with Long Term Foster Care Relative goal, pre-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, 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

OPPLA	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Total number of children with OPPLA goal	113	107	117	131	136	135
Number of children with OPPLA goal, pre-TPR	86	80	92	104	107	103
<ul style="list-style-type: none"> Number of children with OPPLA goal, 12 years old and under, pre-TPR 	0	0	0	0	0	1
Number of children with OPPLA goal, post-TPR	27	27	25	27	29	32
<ul style="list-style-type: none"> Number of children with OPPLA goal, 12 years old and under, post-TPR 	0	0	0	0	0	0

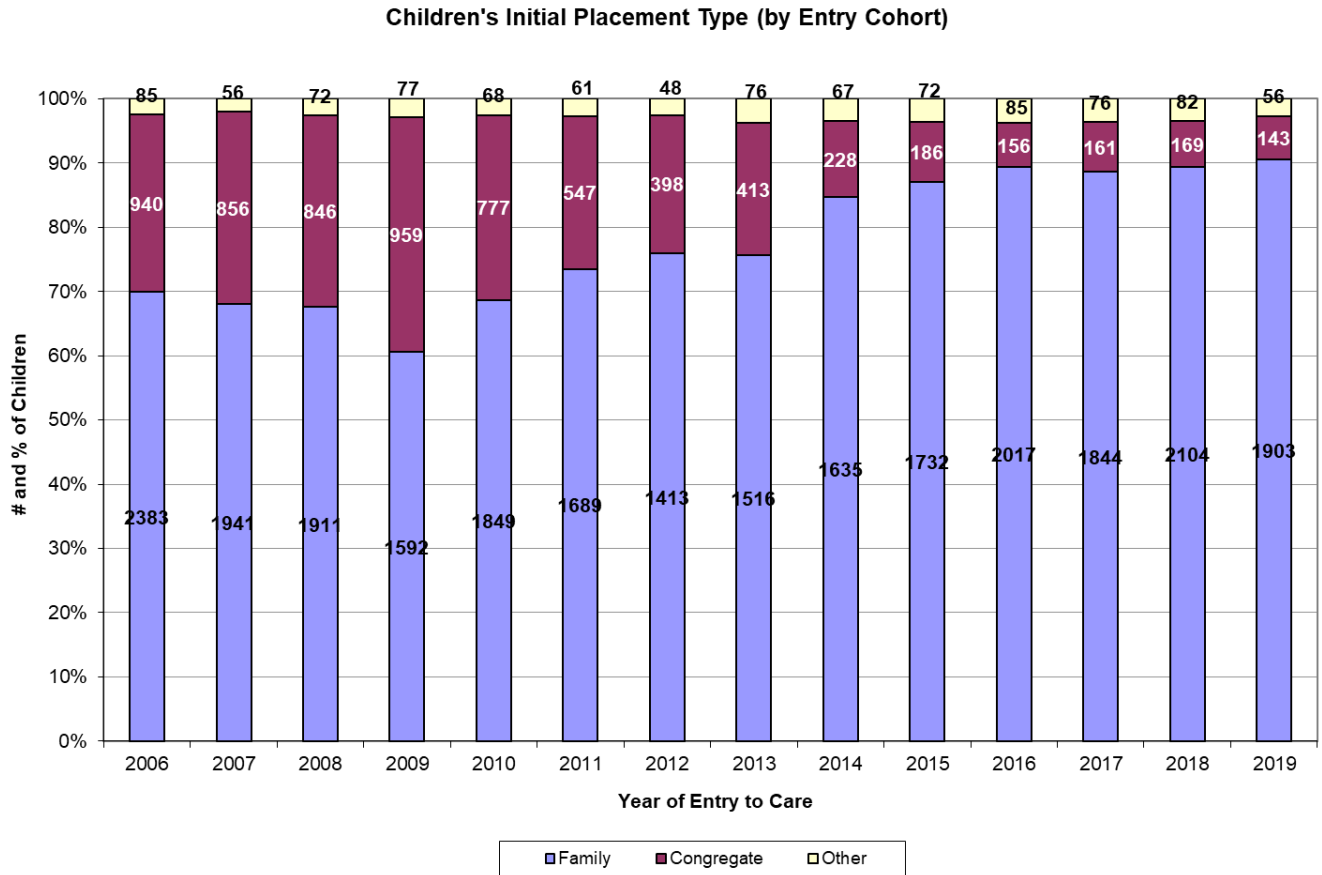
Missing Permanency Goals:

	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Number of children, with no Permanency goal, pre-TPR, >= 2 months in care	17	13	11	16	21	19
Number of children, with no Permanency goal, pre-TPR, >= 6 months in care	6	4	7	8	13	12
Number of children, with no Permanency goal, pre-TPR, >= 15 months in care	4	2	4	0	6	5
Number of children, with no Permanency goal, pre-TPR, TPR not filed, >= 15 months in care, no compelling reason	2	2	1	0	4	5

B. PLACEMENT ISSUES

Placement Experiences of Children

The following chart shows the change in use of family and congregate care for admission cohorts between 2006 and 2019.



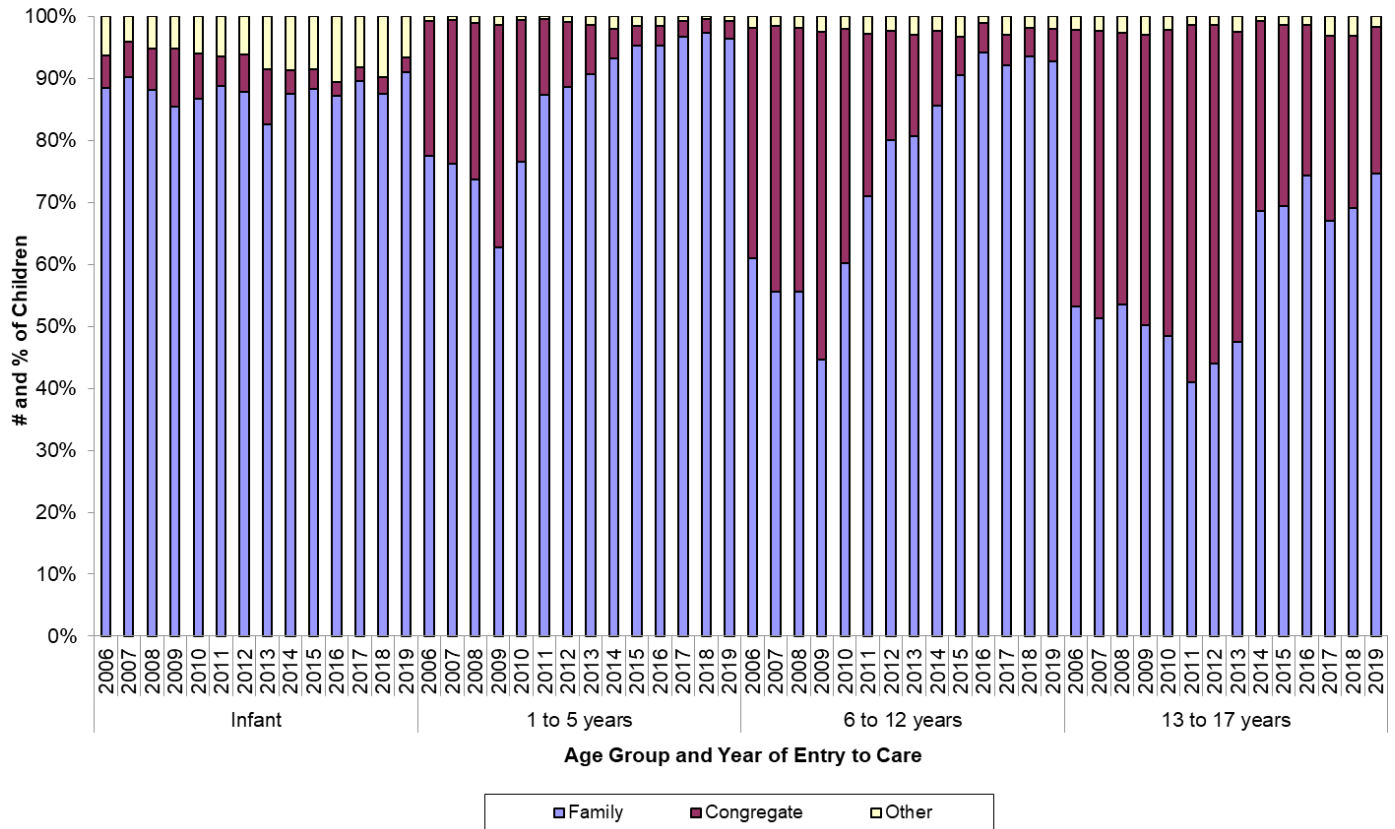
The next table shows specific care types used month-by-month for entries between January 2019 and December 2019.

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Case Summaries													
First placement type		enterJan19	enterFeb19	enterMar19	enterApr19	enterMay19	enterJun19	enterJul19	enterAug19	enterSep19	enterOct19	enterNov19	enterDec19
Residential	N	3	2	4	4	2	1	3	2	1		2	6
	%	1.7%	1.4%	1.9%	2.4%	1.1%	0.5%	1.7%	1.0%	0.5%		1.3%	4.1%
DCF Facilities	N					3		3		1	2		
	%					1.6%		1.7%		0.5%	1.5%		
Foster Care	N	100	70	123	79	107	93	106	84	83	73	77	77
	%	55.2%	47.6%	57.5%	46.5%	56.3%	46.5%	60.2%	42.9%	44.9%	54.9%	50.0%	52.0%
Group Home	N	1		1	1	2	1	1	2	2	2		1
	%	0.6%		0.5%	0.6%	1.1%	0.5%	0.6%	1.0%	1.1%	1.5%		0.7%
Independent Living	N										1		
	%										0.8%		
Relative Care	N	52	60	63	58	47	73	46	80	77	32	54	52
	%	28.7%	40.8%	29.4%	34.1%	24.7%	36.5%	26.1%	40.8%	41.6%	24.1%	35.1%	35.1%
Medical	N	2	3	7	5	3	13	2	3	3	3	6	4
	%	1.1%	2.0%	3.3%	2.9%	1.6%	6.5%	1.1%	1.5%	1.6%	2.3%	3.9%	2.7%
Safe Home	N	4	2	4	3	6	6	3	6	3	3	3	1
	%	2.2%	1.4%	1.9%	1.8%	3.2%	3.0%	1.7%	3.1%	1.6%	2.3%	1.9%	0.7%
Shelter	N	6	2	5	5	10	2	2	3	2	3	2	3
	%	3.3%	1.4%	2.3%	2.9%	5.3%	1.0%	1.1%	1.5%	1.1%	2.3%	1.3%	2.0%
Special Study	N	13	8	7	15	10	11	10	16	13	14	10	4
	%	7.2%	5.4%	3.3%	8.8%	5.3%	5.5%	5.7%	8.2%	7.0%	10.5%	6.5%	2.7%
Total	N	181	147	214	170	190	200	176	196	185	133	154	148
	%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

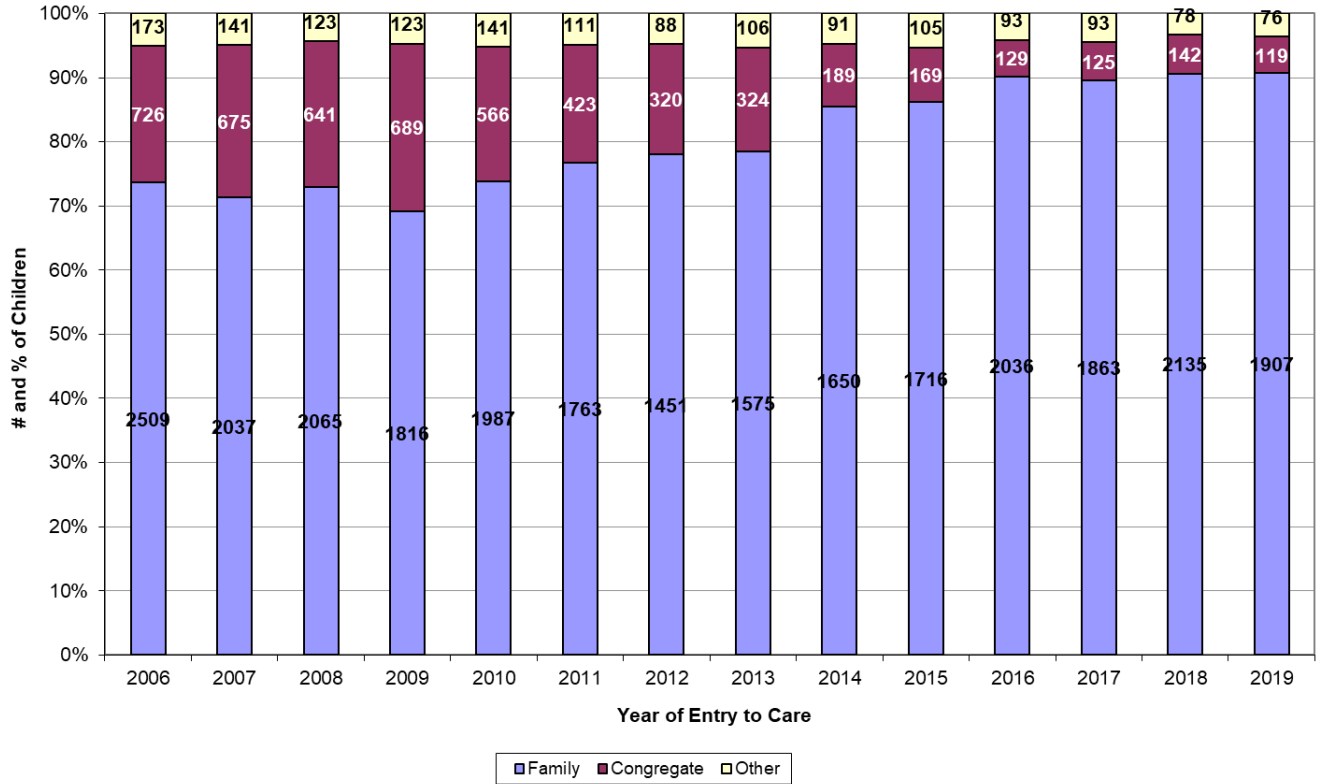
The chart below shows the change in level of care usage over time for different age groups.

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 of the 2006 through 2019 admission cohorts.

Children's Predominant Placement Type (by Entry Cohort)



The following chart shows monthly statistics of children who exited from DCF placements between January 2019 and December 2019, 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)		enterJan 19	enterFeb 19	enterMar 19	enterApr 19	enterMay 19	enterJun 19	enterJul 19	enterAug 19	enterSep 19	enterOct 19	enterNov 19	enterDec 19
Residential	N	4	2	4	2	8	1	4	3	2	2	2	1
	%	2.4	1.5	2.5	1.0	4.0	.5	2.2	1.3	1.1	1.2	.9	.8
DCF Facilities	N		1	2	1	1	1	1	1				
	%		.8	1.2	.5	.5	.5	.6	.4				
Foster Care	N	68	57	57	91	79	111	78	113	98	74	108	58
	%	41.2	43.5	35.4	44.8	39.1	51.4	43.8	49.8	54.1	42.8	46.0	49.2
Group Home	N	7	6	2	5	3	6	1	4	4	2	2	2
	%	4.2	4.6	1.2	2.5	1.5	2.8	.6	1.8	2.2	1.2	.9	1.7
Independent Living	N	2	3	4	4	6	1	2		2	2	2	6
	%	1.2	2.3	2.5	2.0	3.0	.5	1.1		1.1	1.2	.9	5.1
Relative Care	N	64	54	67	75	78	72	66	80	62	72	95	45
	%	38.8	41.2	41.6	36.9	38.6	33.3	37.1	35.2	34.3	41.6	40.4	38.1
Medical	N	1	2	2	5		4	1	3	2	1	3	2
	%	.6	1.5	1.2	2.5		1.9	.6	1.3	1.1	.6	1.3	1.7
Safe Home	N	1	1	1	2	2	5	2	2		1	3	
	%	.6	.8	.6	1.0	1.0	2.3	1.1	.9		.6	1.3	
Shelter	N	3	1	4	5	10	4	4	4	5	2		
	%	1.8	.8	2.5	2.5	5.0	1.9	2.2	1.8	2.8	1.2		
Special Study	N	13	3	16	12	13	11	15	14	4	13	19	4
	%	7.9	2.3	9.9	5.9	6.4	5.1	8.4	6.2	2.2	7.5	8.1	3.4
Unknown	N	2	1	2	1	2		4	3	2	4	1	
	%	1.2	.8	1.2	.5	1.0		2.2	1.3	1.1	2.3	.4	
Total	N	165	131	161	203	202	216	178	227	181	173	235	118
	%	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 February 3, 2020 organized by length of time in care.

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Primary type of spell (>50%) * Duration Category Crosstabulation										
		Duration Category							Total	
		1 <= durat < 30	30 <= durat < 90	90 <= durat < 180	180 <= durat < 365	365 <= durat < 545	545 <= durat < 1095	more than 1095		
Primary type of spell (>50%)	Residential	Count	4	2	2	14	11	23	24	80
		% Row	5.0	2.5	2.5	17.5	13.8	28.7	30.0	100.0
		% Col	2.7	0.8	0.5	1.7	1.7	2.5	4.2	2.1
	DCF Facilities	Count	0	1	3	4	0	1	1	10
		% Row	0.0	10.0	30.0	40.0	0.0	10.0	10.0	100.0
		% Col	0.0	0.4	0.7	0.5	0.0	0.1	0.2	0.3
	Foster Care	Count	70	105	157	352	245	464	359	1752
		% Row	4.0	6.0	9.0	20.1	14.0	26.5	20.5	100.0
		% Col	47.6	43.9	36.6	43.3	36.9	51.3	63.5	46.6
	Group Home	Count	1	3	6	5	9	24	35	83
		% Row	1.2	3.6	7.2	6.0	10.8	28.9	42.2	100.0
		% Col	0.7	1.3	1.4	0.6	1.4	2.7	6.2	2.2
	Independent Living	Count	0.0	0.0	0.0	0	0	2	1	3
		% Row	0.0	0.0	0.0	0.0	0.0	66.7	33.3	100.0
		% Col	0.0	0.0	0.0	0.0	0.0	0.2	0.2	0.1
	Relative Care	Count	58	95	197	342	303	281	51	1327
		% Row	4.4	7.2	14.8	25.8	22.8	21.2	3.8	100.0
		% Col	39.5	39.7	45.9	42.1	45.6	31.1	9.0	35.3
	Medical	Count	3	1	1	6	2	2	1	16
		% Row	18.8	6.3	6.3	37.5	12.5	12.5	6.3	100.0
		% Col	2.0	0.4	0.2	0.7	0.3	0.2	0.2	0.4
	Mixed (none >50%)	Count	0	0	1	3	9	28	60	101
		% Row	0.0	0.0	1.0	3.0	8.9	27.7	59.4	100.0
		% Col	0.0	0.0	0.2	0.4	1.4	3.1	10.6	2.7
	Safe Home	Count	0	1	2	5	0	1	0	9
		% Row	0.0	11.1	22.2	55.6	0.0	11.1	0.0	100.0
		% Col	0.0	0.4	0.5	0.6	0.0	0.1	0.0	0.2
Shelter	Count	5	3	3	5	3	1	0	20	
	% Row	25.0	15.0	15.0	25.0	15.0	5.0	0.0	100.0	
	% Col	3.4	1.3	0.7	0.6	0.5	0.1	0.0	0.5	
Special Study	Count	4	21	36	65	78	62	29	295	
	% Row	1.4	7.1	12.2	22.0	26.4	21.0	9.8	100.0	
	% Col	2.7	8.8	8.4	8.0	11.7	6.9	5.1	7.8	
Unknown	Count	2	7	21	12	4	15	4	65	
	% Row	3.1	10.8	32.3	18.5	6.2	23.1	6.2	100.0	
	% Col	1.4	2.9	4.9	1.5	0.6	1.7	0.7	1.7	

Congregate Care Settings

Placement Issues	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Total number of children 12 years old and under, in Congregate Care	17	17	11	15	15	11
• Number of children 12 years old and under, in DCF Facilities	1	1	1	0	0	0
• Number of children 12 years old and under, in Group Homes	4	4	4	4	3	3
• Number of children 12 years old and under, in Residential	8	7	5	7	8	7
• Number of children 12 years old and under, in Safe Home or SFIT	4	5	1	2	3	1
• Number of children 12 years old and under in Shelter	0	0	0	2	1	0
Total number of children ages 13-17 in Congregate Placements	218	209	202	188	170	175

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													
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total Entries	3408	2853	2829	2628	2694	2297	1859	2005	1930	1990	2258	2081	2355	2102
SAFE Homes/SFIT	396	382	335	471	331	145	68	56	30	9	23	54	54	45
	12%	13%	12%	18%	12%	6%	4%	3%	2%	0%	1%	3%	2%	2%
Shelters	114	136	144	186	175	194	169	175	91	58	53	35	45	45
	3%	5%	5%	7%	6%	8%	9%	9%	5%	3%	2%	2%	2%	2%
Total	510	518	479	657	506	339	237	231	121	67	76	89	99	90
	15%	18%	17%	25%	19%	15%	13%	12%	6%	3%	3%	4%	4%	4%

	Period of Entry to Care													
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
Total Initial Plcmnts	510	518	479	657	506	339	237	231	121	67	76	89	99	90
<= 30 days	186	162	150	229	135	103	60	63	37	28	28	36	56	57
	36.5%	31.3%	31.3%	34.9%	26.7%	30.4%	25.3%	27.3%	30.6%	41.8%	36.8%	40.4%	56.6%	63.3%
31 - 60	73	73	102	110	106	56	44	41	27	9	13	25	15	10
	14.3%	14.1%	21.3%	16.7%	20.9%	16.5%	18.6%	17.7%	22.3%	13.4%	17.1%	28.1%	15.2%	11.1%
61 - 91	87	79	85	157	91	54	39	38	18	8	8	12	8	8
	17.1%	15.3%	17.7%	23.9%	18.0%	15.9%	16.5%	16.5%	14.9%	11.9%	10.5%	13.5%	8.1%	8.9%
92 - 183	118	131	110	124	136	84	56	57	24	15	17	10	14	14
	23.1%	25.3%	23.0%	18.9%	26.9%	24.8%	23.6%	24.7%	19.8%	22.4%	22.4%	11.2%	14.1%	15.6%
184+	46	73	32	37	38	42	38	32	15	7	10	6	6	1
	9.0%	14.1%	6.7%	5.6%	7.5%	12.4%	16.0%	13.9%	12.4%	10.4%	13.2%	6.7%	6.1%	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	Aug 2018	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Total number of children in SAFE Home/SFIT	13	9	10	11	9	9	8
• Number of children in SAFE Home/SFIT, > 60 days	5	4	4	3	4	5	4
• Number of children in SAFE Home/SFIT, >= 6 months	1	1	1	0	1	1	2
Total number of children in STAR/Shelter Placement	25	23	25	24	20	8	16
• Number of children in STAR/Shelter Placement, > 60 days	13	12	15	7	8	7	5
• Number of children in STAR/Shelter Placement, >= 6 months	3	4	4	3	1	1	0
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	Aug 2018	Nov 2018	Feb 2019	May 2019	Aug 2019	Nov 2019	Feb 2020
Total number of children in Residential care	93	91	86	89	87	82	86
• Number of children in Residential care, >= 12 months in Residential placement	29	21	21	23	24	23	26
• Number of children in Residential care, >= 60 months in Residential placement	0	0	0	0	0	0	1

Appendix A

Data Summary for March 2020 - August 2020 (COVID-19)

Data Summary for March 2020 - August 2020 (COVID-19)

With input and coordination from the Court Monitor's Office and external stakeholders including the *Juan F.* Plaintiffs, the Department's Strategic Planning Division Bureau Chief Treena Mazzotta has developed a slide deck of data. The slide deck provides information about foundational components of the Department's work and efforts.

The Department has remained open and active throughout the period beginning in March when the state responded to the COVID-19 threat. The Careline as well as the Solnit facilities remained active 24-7 and hundreds of essential workers were designated to respond to both new reports as well as cases already being serviced. The Department's communication efforts during this crisis have been exemplary. Commissioner Dorantes and her administrative team have provided regular updates and clarification through a variety of contacts. The agency has been transparent, inclusive and responsive to any questions posed. The Department quickly shifted staff to a tele-working platform and 2100 + tablets were distributed and supported by the Information Technology and Workforce for Professional Development staff. Foster parents and private providers rose to the challenge as well, to provide service, care and protection to the children they serve in the pandemic environment. Core and therapeutic foster care foster homes were contacted routinely and Ongoing Social Workers and FASU staff provided ongoing support. The Department coordinated PPE safety equipment needs for both their staff and the private providers; a difficult task in the early days and months of the pandemic.

What has emerged over the months since March 2020 is a comprehensive plan to adjust to the change in how the Department's work needs to be performed during the pandemic. Difficult decisions were routinely made after triaging efforts to provide services as safely as possible for both the DCF staff and the families they work with.

The social distancing recommendations to the pandemic resulted in difficult decisions regarding social worker visitation with families as well as access for biological families to visit with their children in foster care. In person visits were disrupted but technology issues were addressed to provide for visual visits. Court proceedings have been halted and these delays and related trauma for children and families will need to be addressed. In-Home families' case management services by DCF were largely switched to virtual visits with contact and triage processes were quickly established to identify and address situations where virtual contact was not successful, or safety/risk factors warranted in-person contact. Older youth in the Department's Services Post Majority (SPM) care had schooling, work and living arrangements disrupted. The Department made contacts with each of these clients and assessed their needs and challenges; subsequently, supports and case management services were increased via electronic and virtual contacts. The issuance of form DCF-800 (Notice of Proposed Denial, Suspension, Reduction, or Discontinuance of DCF Benefits) used when a youth passes from care was suspended through at least the end of the year and youth who recently passed from care were given the opportunity to again be serviced by the Department.

It is important to note some of the efforts that the Department has made during this trying time to respond to both children and family's needs as the safety and well-being of their staff. These efforts included:

- Consultation with the Governor's Office, other state agencies, child welfare jurisdictions across the country and community partners to be informed of and develop best practices in child protection work.
- The Department has continued its racial justice evolution through this period under review. The confluence of this pandemic, racial unrest, and economic devastation has illuminated existing disparities. This (im)perfect storm reflects the need for systemic attention to institutional level strategies. An anti-racist framework and Senior Leadership coaching components have been added to the cadre of efforts in CTDCF toolbox. Training is necessary for awareness, however change initiatives with defined metrics are being developed to improve outcomes.
- Conducted "table-top" exercises to strategize the steps needed to maintain operations if a facility or division of the Department was compromised due to the pandemic.
- Collaborate with "sister" state agencies on common issues in planning to resume full functioning strategies.
- Provide written guidance and video recorded messages to all staff, including community partners, clarifying new procedures. (This now occurs weekly.)
- Deployed over 1,800 tablets, including approximately 600 in one week alone, leading to over 85% of staff successfully teleworking.
- Implemented two new programs: IFCS (Integrated Family Care and Support) and Voluntary Services with a private provider.
- Engaged with children and families using innovative and creative methods via remote technology such as Face Time and Microsoft Teams.
- Established "after incident reviews" to discuss how a circumstance impacted the Agency and which additional supports are needed if the situations again presented itself.
- Responded in-person to those circumstances which could not be resolved remotely while ensuring staff had access to and utilized personal protective equipment.
- Formalized a visitation triage process for identified cohorts of children to assess the need for resumption of in-person visitation with their families.
- Continued to monitor services to vulnerable populations such as older youth, children with specialized needs and children and families in disproportionately impacted communities.
- Collaborated to create 100 COVID-19 testing slots available each day to youth in care over the age of 18 and to foster parents.
- Established a foster parent contact database so communications could be quickly and consistently delivered and confirmed backup childcare plans with each caregiver.

- Established the statewide media "*When it Builds Up, Talk it Out*" campaign which includes a phone line staffed by community providers whom parents can call when in need of support.
- Conducted a contact tracing process guided by DCF Medical Director of all COVID 19 positive diagnosis.
- Presented twice at the Governor's Council on Women and Girls Health and Safety Subcommittee regarding health and safety resources available to support Connecticut children and families and how to access them during the pandemic as well as services for survivors of intimate partner violence and their children.
- Developed and continue to regularly update a COVID-19 website at <https://portal.ct.gov/DCF/COVID-19/COVID-19> which has resulted in over 19,000 unique individuals accessing the information.
- Established an e-mail address for internal DCF staff and external partners to ask specific questions relating to the pandemic: DCF.COVID-19@ct.gov.
- Produced a daily newsletter with information regarding supports available for children, families and staff as well as highlighting positive efforts of the workforce.
- Published a monthly "*Spotlight on What's Right*" newsletter to enhance the Department's messaging and support the unique contributions of staff.
- Encouraged staff to utilize internal supports, including the Employee Assistance Program, ensuring a healthy work/life balance.
- Engaged in weekly conference calls with key legislators to provide Department updates and resolve issues brought to their attention.
- Met with leadership from 8 different state employee labor unions to answer questions and clarify operational procedures for staff throughout the department. Weekly meetings continue with particular unions.
- Conducted weekly videoconferencing with the Children's League of Connecticut (CLOC) which has now moved to bi-weekly.
- Outreach occurs daily from our Licensing Division to private providers caring for our children in congregate care facilities daily to assess staffing, census, and availability of PPE and from program leads to trouble-shoot concerns with maintaining virtual connections to families they serve.
- Follow up on inquiries from contracted and fee-for-service credentialled providers from our Fiscal Department.
- Solicited PPE need from nonprofit provider community and submitted through the Essential Support Function process.
- Hosted and coordinated weekly meeting of legal directors from state agencies to discuss and coordinate on legal related COVID issues
- Presented the Department's planning on a national call with over 200 representatives from jurisdictions across the country.

- Established 4 subcommittees to develop recommendations to the Commissioner and Executive Team leading to resuming of full operations. Those groups are as follows: Physical Safety, Emotional/Psychological Safety, Health/Medical, Personnel Considerations.
- Established an internal/external workgroup to provide a plan and recommendations towards resuming full operations with contracted and credentialed providers.
- Collaborated with the Statewide Advisory Council, FAVOR and AFCAMP along with soliciting input from members of the Family First workgroups and the entire provider community regarding engaging the "Youth and Family Voice in Resuming Full Operations."
- Created local implementation teams to ensure consistency in planning and implementation as the Department moves towards resuming full operations. This also allows for local plans to be made depending on the unique needs of each office and facility.

Along with existing outcome and data reports, the Department Strategic Planning Division and the Court Monitor's Office launched a series of informal reviews to look at select cohorts of children service by DCF. The protocol developed was relatively simple and easy to use with data entered in Excel for use by the agency's quality improvement efforts. These reviews allowed information to immediately be provided to the chain of command in the regions at a time when the work processes were shifting and gave considerable insight into areas of strength and challenges.

The cohorts explored included:

- In-Home cases with youth aged 0-5
- Services Post Majority cases (older youth)
- Differential Response Service cases (Intake and Family Assessment Response cases)
- Contact and visitation reviews including assessment of the triage efforts begun during the response to the pandemic.

We acknowledge that face-to-face contact is the preferred visitation standard for child welfare but that the current pandemic has in large part limited that type of contact unless risk and/or safety issue prevail or requires mitigation. The general findings of these informal reviews are very positive. We found that:

- The timeliness and quality of documentation in the case records has improved.
- The frequency and quality of supervision is better reflected in the records.
- Narratives documented more attention to the basic needs of families and children as opposed to only the reasons the Department remained involved. The narratives reflected better engagement efforts despite the virtual format.
- Case planning efforts continued.
- Families basic needs including food and internet connectivity challenges were a common theme.

- Contact with families and children was increased from prior to March 2020. Many records reflected 3-5 contacts in a month with not only families with providers and other stakeholders. The only stakeholder group where contact documentation was limited in the records reviewed involved the schools and school personnel.
- While interruptions of community services were evident at first, the private network quickly pivoted to tele-therapy and virtual platforms when possible to support families.
- Due to the reduction in court activity, progress related to court decisions for reunification, adoption and transfer of guardianship have been put on hold. Considerable trauma to children and families is resulting from these delays in permanency.
- Cases reviewed of older youth indicated the majority continued their education virtually online with little interruption. Incidences where connectivity existed were addressed by DCF staff and consistent electronic or virtual contact and assessment was evident in the LINK documentation.

The following is the DCF Quality Improvement Statewide Data Report as of August 2020.

Quality Improvement During COVID

COVID-related Data Pulls

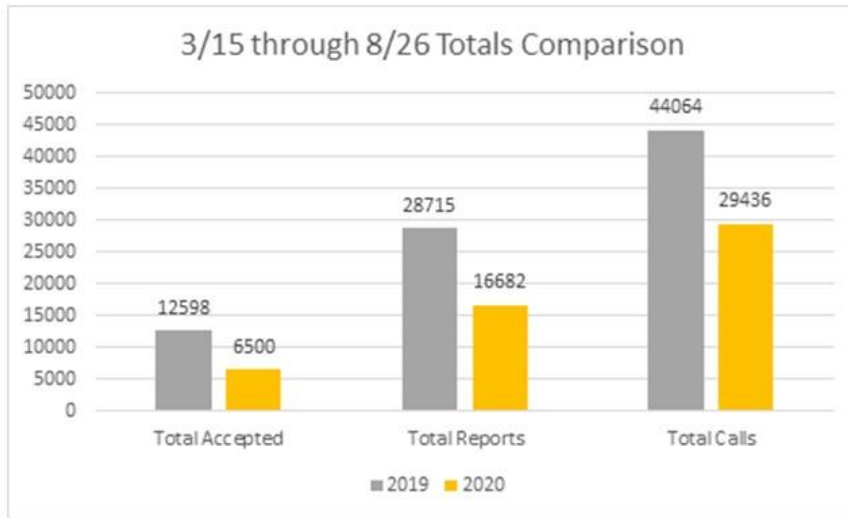
Monthly AO Reports

Qualitative Reviews

Federal Indicators

Process QA (Triage protocols)

Strategic Planning/Child Welfare Collaboration

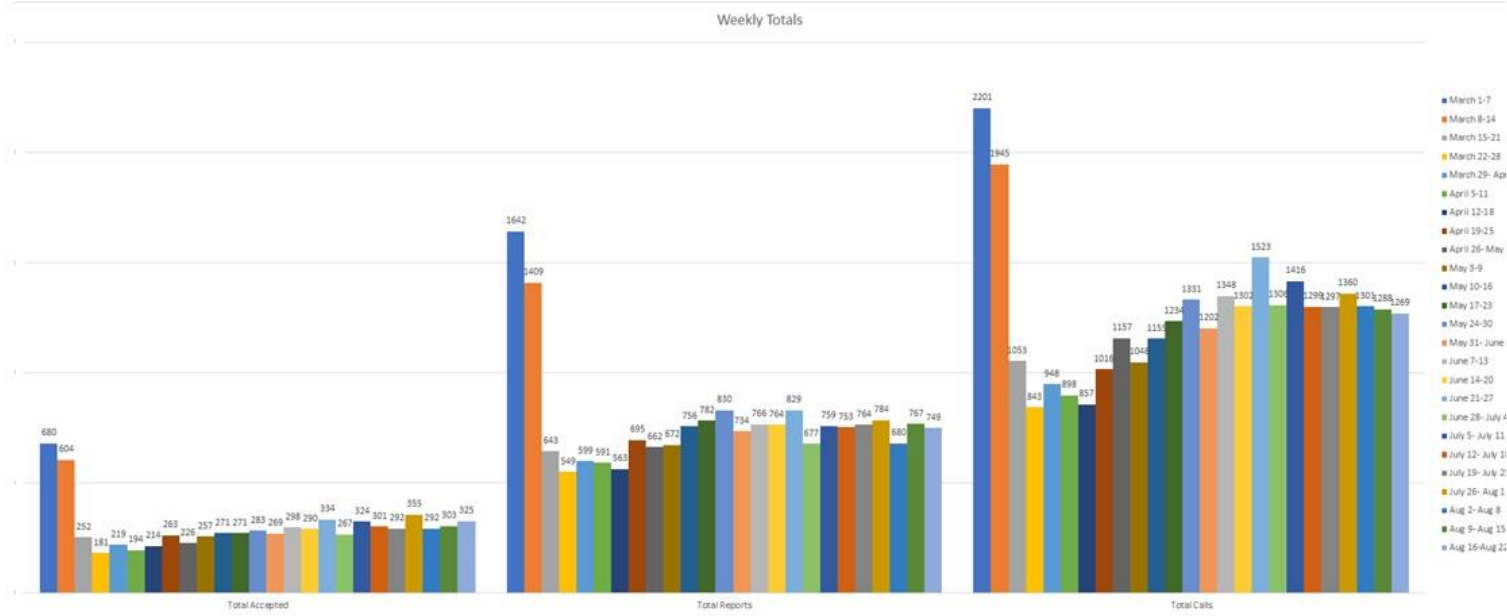


Comparative Data- data extracted from LINK Reports and Careline NEC phone system, comparing March 15 to August 26, 2019, to March 15 to August 26, 2020.

Relative to the same time period of 2019, the Department received about

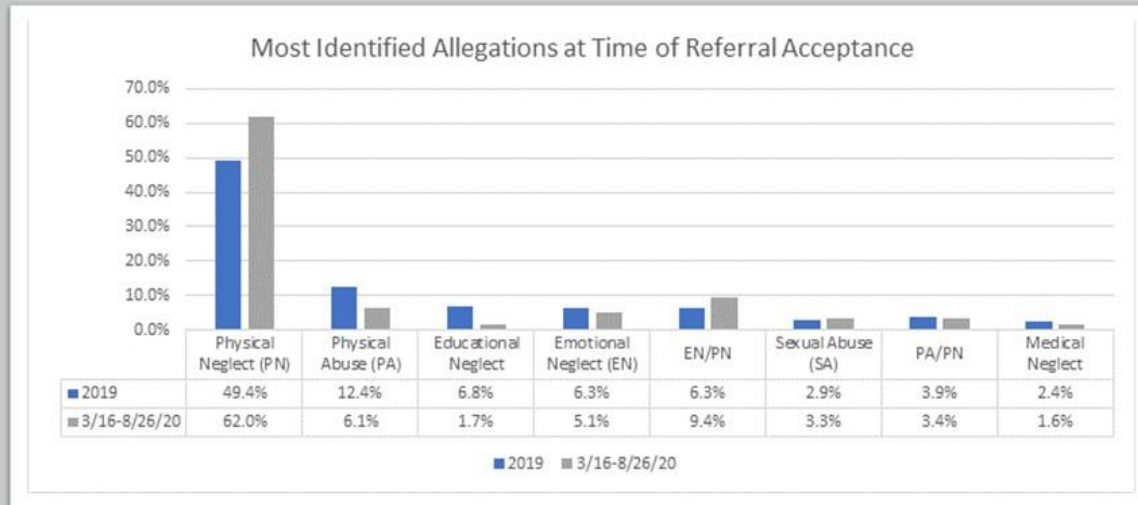
- Created 48.4% fewer accepted reports
- 41.9% fewer reports
- Received 33.2% less calls to the Careline

Longitudinal Data: Data from LINK reports and Careline NEC phone system tracking variables weekly from March 2020 through August 22, 2020

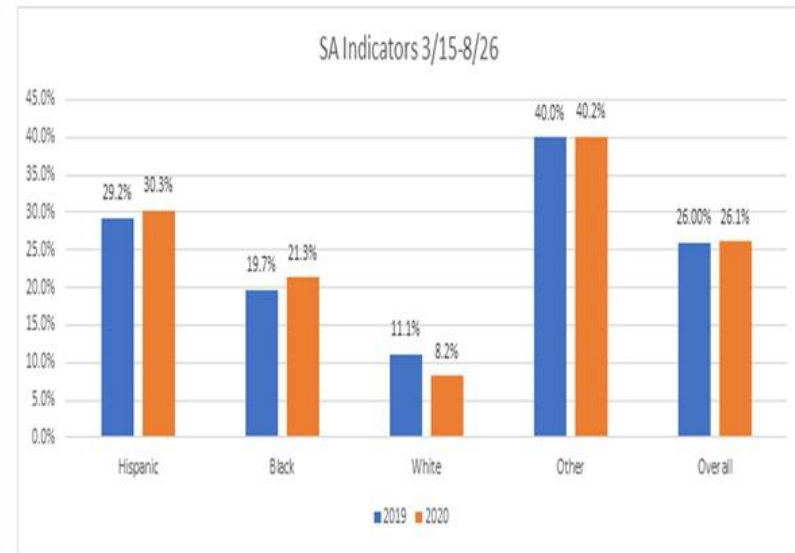
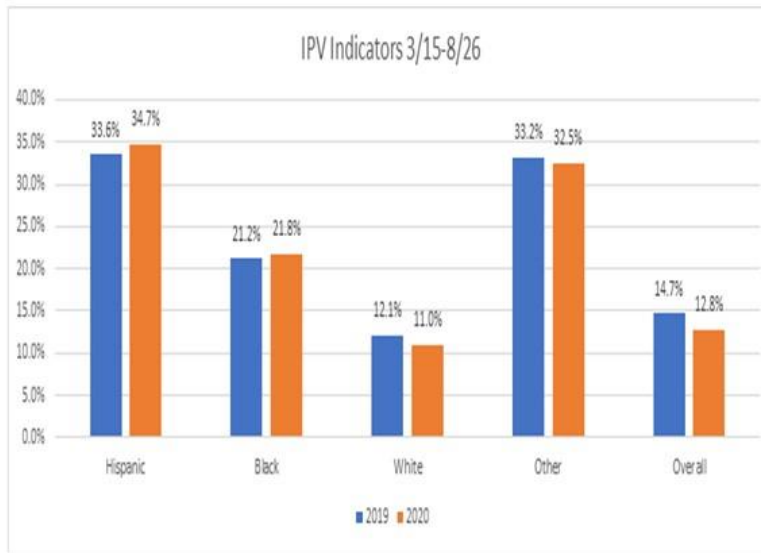




Acceptance Rate by Week

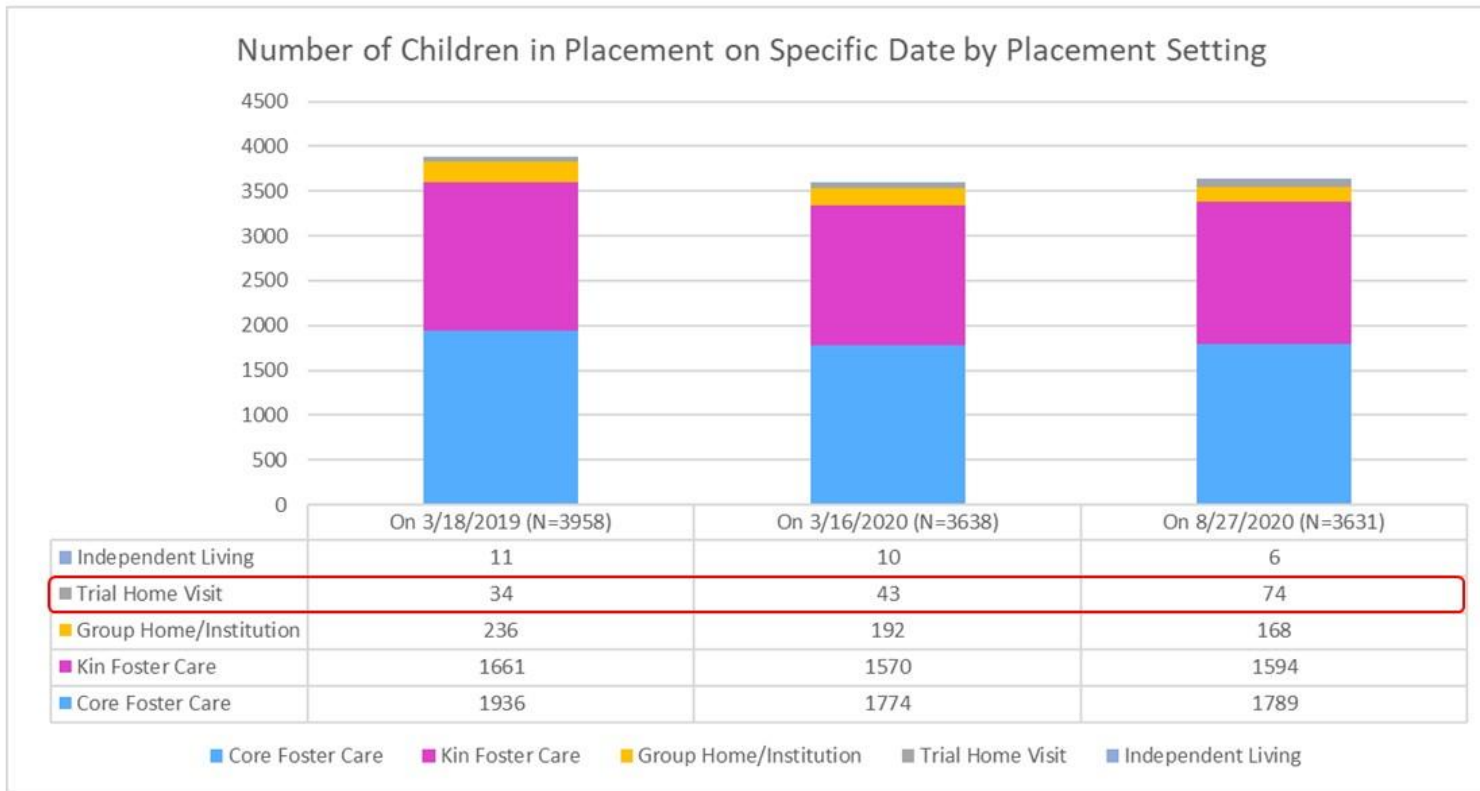


- During the pandemic, the Department accepted a higher rate of referrals for physical neglect than 2019. Physical neglect would be the primary allegation for incidents of IPV and exposure to substance misuse.



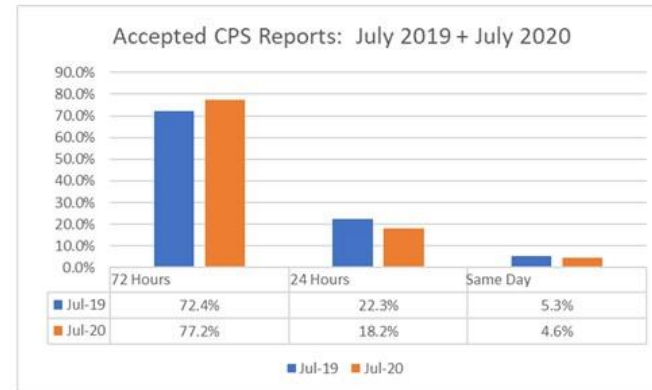
Total Caseload Points and Children-in-Placement (CIP) Distributions September, 2019 to August, 2020

Statewide																			
State	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6													
CIP DASHBOARD			% of Total Children-in-Placement (CIP)					# in Congregate Care Subgroups				# and % of Children Entering Placement During Time Period							
Observation Date	Total Caseload Points	Total CIP	Family Foster Care			Independent Living	Congregate Care	Out of State	Age Group			Entries During Period	Kinship Care		Foster Care	Congregate Care	Independent Living		
			Foster Care	Relative Care	Special Study				>=13	7-12	<6		Relative Care	Special Study					
09/01/2019	13,586	4,252	43.1 %	37.1 %	7.1 %	5.4 %	7.4 %	7	281	30	4	182	45.6 %	6.6 %	41.2 %	5.5 %	1.1 %		
10/01/2019	14,219	4,253	42.4 %	37.8 %	7.4 %	5.2 %	7.2 %	6	275	28	4	141	25.5 %	10.6 %	53.9 %	8.5 %	1.4 %		
11/01/2019	14,396	4,176	42.7 %	37.5 %	7.6 %	5.3 %	7.0 %	6	262	25	4	156	35.9 %	6.4 %	47.4 %	9.0 %	1.3 %		
12/01/2019	14,392	4,095	42.6 %	37.6 %	7.4 %	5.4 %	7.0 %	6	260	25	3	147	38.1 %	3.4 %	51.0 %	6.1 %	1.4 %		
01/01/2020	13,780	4,084	42.5 %	37.8 %	7.2 %	5.4 %	7.2 %	6	267	23	3	163	50.3 %	3.1 %	36.8 %	9.2 %	0.6 %		
02/01/2020	13,749	4,089	42.2 %	38.0 %	7.1 %	5.5 %	7.2 %	7	272	20	2	132	28.0 %	4.5 %	50.0 %	14.4 %	3.0 %		
03/01/2020	13,880	4,047	43.1 %	37.6 %	6.9 %	5.5 %	6.9 %	9	258	18	5	97	47.4 %	10.3 %	30.9 %	10.3 %	1.0 %		
04/01/2020	12,948	4,010	43.4 %	37.2 %	7.2 %	5.4 %	6.9 %	7	253	17	5	92	32.6 %	10.9 %	44.6 %	9.8 %	2.2 %		
05/01/2020	11,167	4,051	43.5 %	37.2 %	7.3 %	5.3 %	6.6 %	7	246	18	5	109	30.3 %	11.0 %	45.9 %	12.8 %	0.0 %		
06/01/2020	11,239	4,113	43.4 %	36.9 %	7.6 %	5.3 %	6.8 %	8	252	23	6	121	39.7 %	5.0 %	41.3 %	11.6 %	2.5 %		
07/01/2020	11,318	4,128	43.3 %	37.3 %	7.6 %	5.3 %	6.5 %	8	241	21	7	112	30.4 %	7.1 %	47.3 %	14.3 %	0.9 %		
08/01/2020	11,285	4,080	43.0 %	37.3 %	7.6 %	5.5 %	6.6 %	8	242	22	4	55	30.9 %	3.6 %	56.4 %	7.3 %	1.8 %		
% Change from 9/1/2019 to Latest			-16.9%	-4.0%	-4.3%	-3.6%	3.7%	-1.3%	-14.9%	14.3%	-13.9%	-26.7%	0.0%	-69.8%	-79.5%	-83.3%	-58.7%	-60.0%	-50.0%



Intake Response Overview

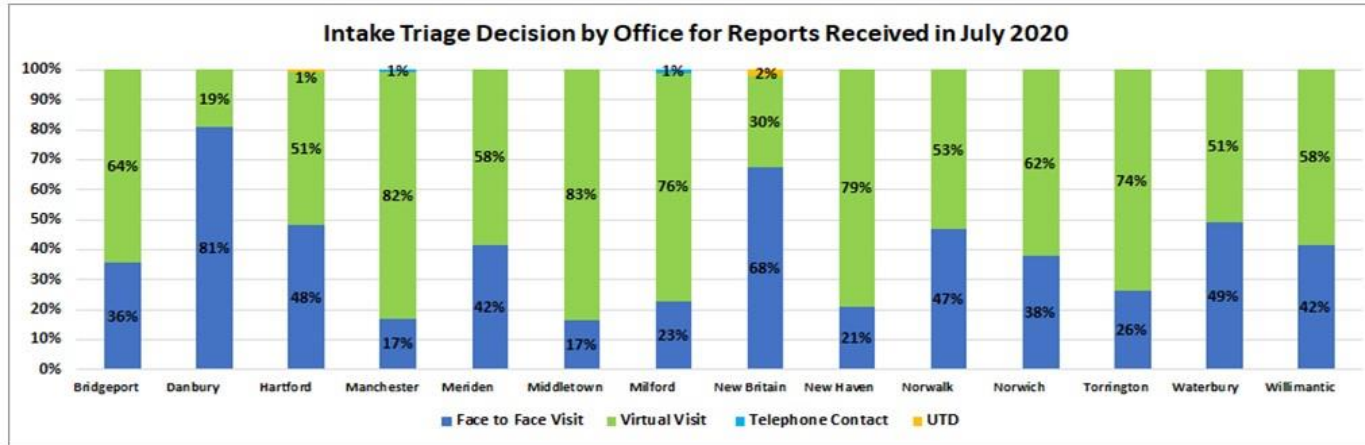
- Every intake received is triaged to determine response type
- June 66% virtual, July 60% Virtual (based on first triage documented in LINK) Other
- June 33% Face to face; July 40% face to face
- Important to note that often a decision may change following the first triage based on next steps and response- triage log only reflects initial triage



March 16-August 26, 2020 Accepted Investigations

Response Time	%
72 Hours	77.1%
24 Hours	18.0%
Same Day	4.8%
Grand Total	100.0%

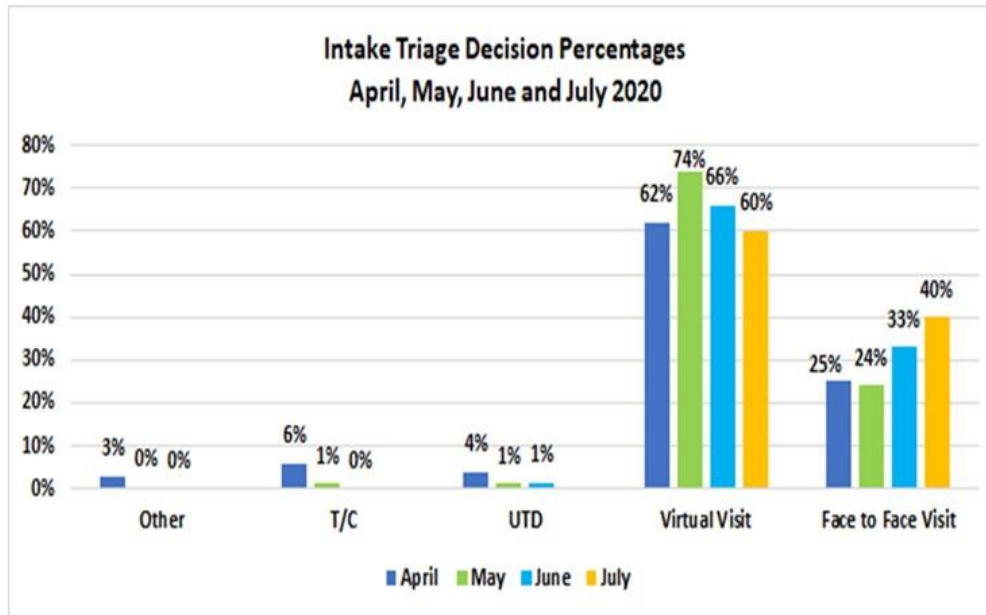
Intake Triage Decision - Contact Type July 2020



Number of accepted reports and types of reports vary by office; this in turn impacts triage decision across offices

Intake Triage Log 8-12-20

Intake Triage Decisions



There has been a consistent increase in the number and percentage of Face to Face contacts in Intake over the last 4 months. The number/percentage of Virtual Visits peaked in May.

Intake Triage Log 8-12-20

Intakes
 Transferred to
 Ongoing

DCF Case Flow Report - August, 2019 to July, 2020, Area Offices: Statewide

Total Cases					
	Start Of Period	Cases Added / Transferred During Period	Cases Closed / Transferred During Period		End Of Period
Time Period	Total Unique Cases Open	Total New Cases	Total Cases Closed	% Closed Intakes Transferred to Ongoing Services	Total Unique Cases Open
Aug - 19	10,830	1,808	2,171	18.3%	10,467
Sep - 19	10,467	2,472	1,820	14.7%	11,119
Oct - 19	11,119	2,638	2,503	15.2%	11,254
Nov - 19	11,254	2,436	2,326	14.2%	11,364
Dec - 19	11,364	2,075	2,697	14.0%	10,742
Jan - 20	10,742	2,585	2,534	15.9%	10,793
Feb - 20	10,793	2,325	2,177	14.9%	10,941
Mar - 20	10,941	1,891	2,686	12.8%	10,146
Apr - 20	10,146	952	2,723	10.1%	8,375
May - 20	8,375	1,133	1,225	17.5%	8,283
Jun - 20	8,283	1,295	1,229	16.7%	8,349
Jul - 20	8,349	1,386	1,450	17.2%	8,285

Substantiations: July 2019- July 2020

- 764 fewer dispositions reflected in the report when comparing July 2020 to July 2019 (decrease in referrals)
- Higher percent substantiated (fewer reports and higher % from police + hospital)
- 66% of cases transferred in July 2020 had a final risk of high (includes AATs)

Jul-19					
	S		U		Total
Office	#	%	#	%	#
Total	561	40 %	849	60 %	1,410

Jul-20					
	S		U		Total
Office	#	%	#	%	#
Total	310	48 %	335	52 %	646

July 2020	
Final Risk	%
Low	1.6%
Moderate	32.4%
High	66.0%
Grand Total	100.0%

24.7% of the IH cases on this report have a recent risk rating of high

41.9% are low or very low

33.5% are moderate

Ongoing services continues to triage cases for decisions related to in-person contact.

In July, 390 in home cases were triaged

As of July 31, 2020, over 800 in home cases have been triaged (cumulative)

In July, 92% of the triages resulted in a decision for face to face contact

In- Home Services Cases by Recent Risk Rating

Row Labels	Very Low	Low	Moderate	High	Grand Total
Bridgeport	22	45	54	24	145
Danbury	22	28	27	8	85
Hartford	17	72	87	73	249
Manchester	13	28	77	74	192
Meriden	5	26	21	10	62
Middletown	3	14	21	19	57
Milford	23	75	74	42	214
New Britain	25	56	105	102	288
New Haven	21	83	73	53	230
Norwalk	42	67	41	11	161
Norwich	12	56	52	70	190
Torrington	6	21	17	10	54
Waterbury	35	88	51	28	202
Willimantic	8	21	46	26	101
Grand Total	254	680	746	550	2230

Prioritizing Reviews + Real-Time Feedback

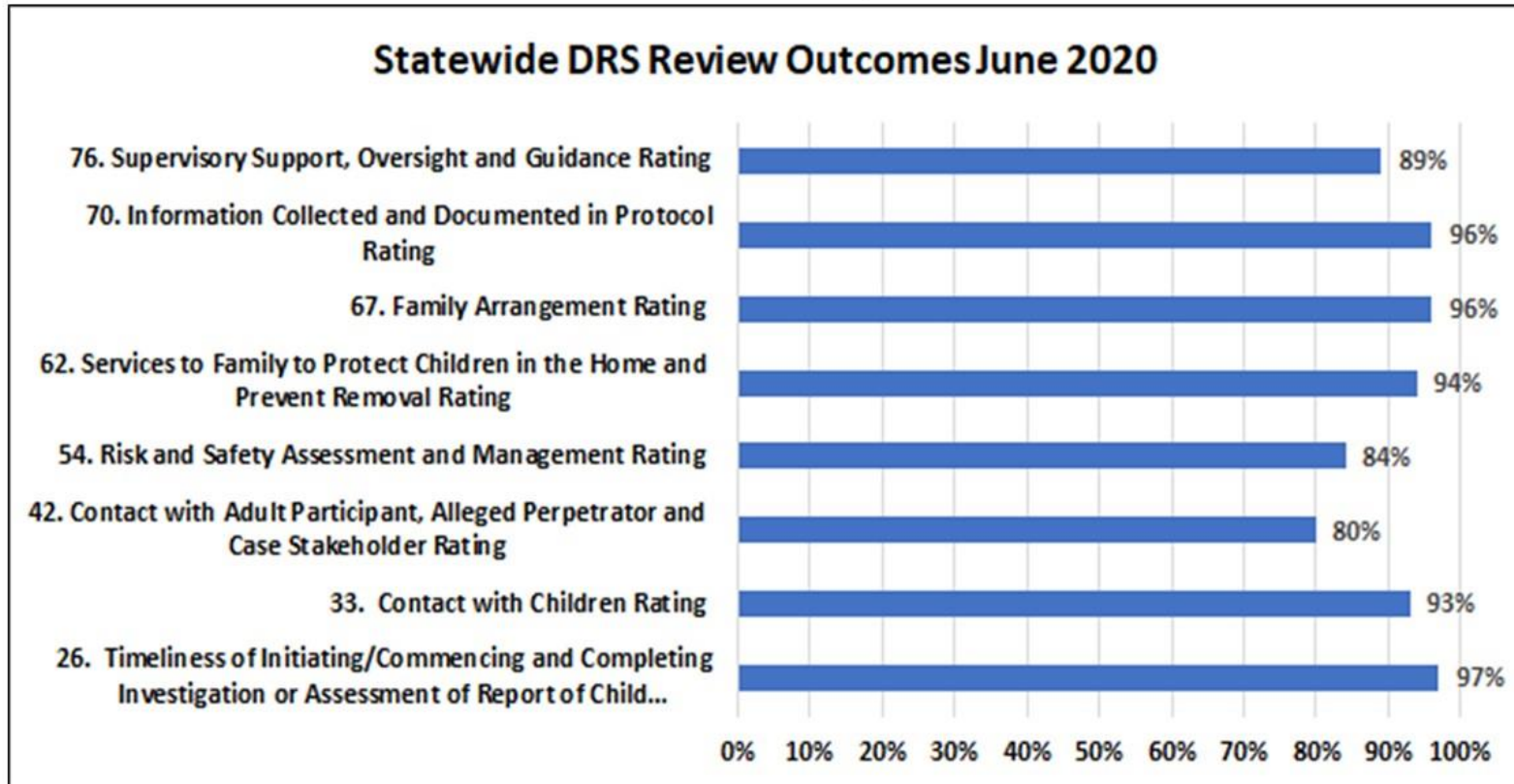


- Since March, QI,QA and the Court Monitor have completed over 1000 case reviews including:

- SDM Case Reads
- Pending Intakes
- IH
- SPM
- DRS

This does not include other ad hoc reviews or Administrative Case Reviews

DRS Statewide Review Results: Protocols Completed June 2020

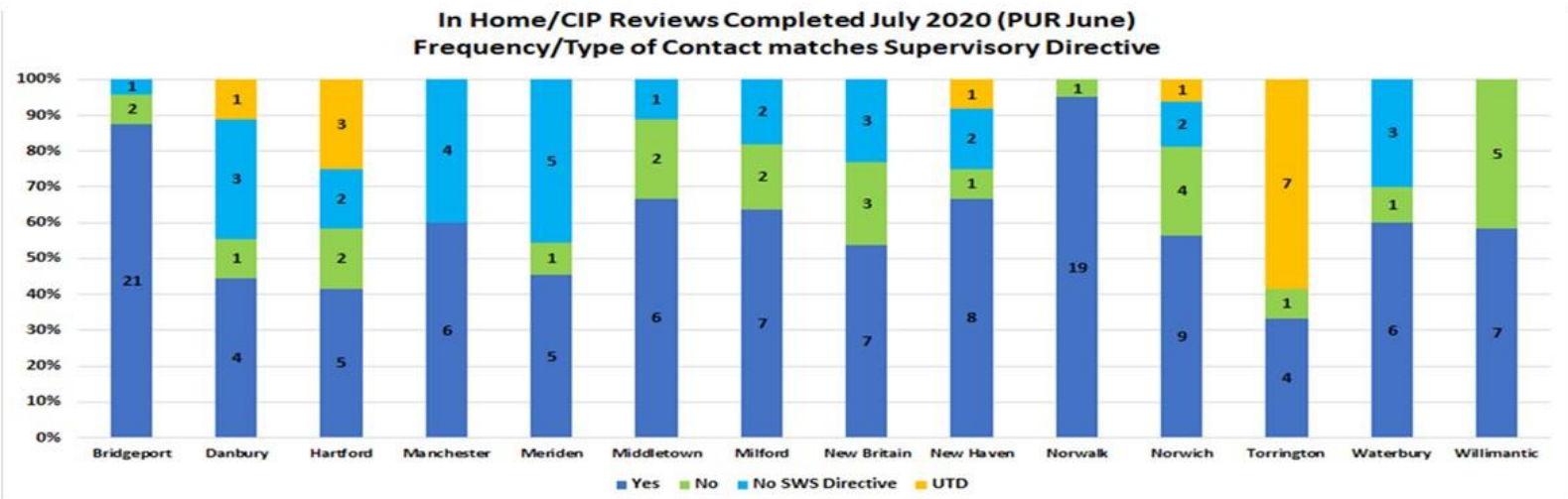


*70 reviews completed in July for protocols approved in June

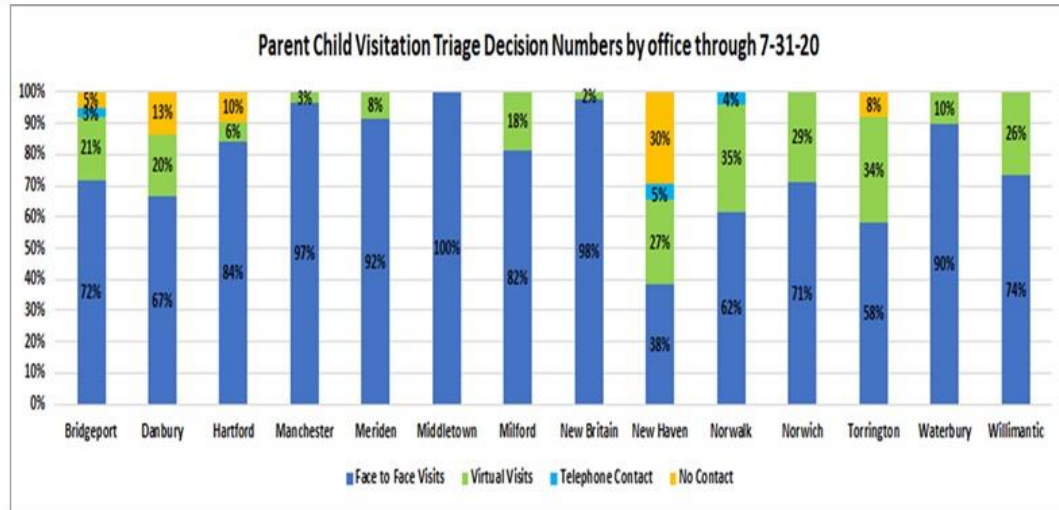
SharePoint ORE/DRS 8/11/2020

QI Case Reviews: Case Contact + Supervision

- 92 In Home and 89 Child in Placement reviews completed in July (period under review is June)
- Assessing frequency/type of SW contact with family and supervisory directive
- Findings are shared with CPS



Parent-Child Visitation Triage Decision by Office (through 7/31/20)



- 568 Triages occurred through 7/31/20
- Decision for face-to-face visitation most often resulted
- Timeframe to reunification and age of child(ren) were the most frequently cited reason for visitation triage

Additional Data During COVID-19

Foster Care Licensure: March through June 2020

Therapeutic Foster Care

- 25 new TFC families licensed (non-kin)

Foster Care- between March-June 2020

- 257 Licenses Issued
- 567 Licenses Pending

Core and Adoptive FC

- 181 families at the beginning of the licensure process
- 208 families prepared for Pre-Licensing training
- Pre-licensing sessions suspended for 34 families

Children in Placement (<18): Medical Appointments

- LINK medical profile icon reflects that for 1062 children in care, the "last *physical exam/visit" date is documented as occurring between 3/16/2020 and 8/27/2020 (*does not identify in-person or telehealth; requires case review)
- The Department is also currently working to establish a new MOU to allow for ongoing monitoring of well visits for children in care on an ongoing basis which will allow for improved data quality/accuracy

Older Youth in Care

- As of 7/30/20, 52 youth statewide reached the age of 18 and elected to continue in care with DCF
- For this same timeframe, DCF reached out to 35 young adults who exited care between January 1st and the onset of the moratorium and 4 re-entered care after re-entry was offered.

Priority Report (IH)

Overview



This report has been developed to assist area office staff with decision-making regarding IH cases, particularly those recently transferred into Ongoing Services from Intake. The "scoring/level" was created based upon factors that prior DCF research has shown have an associated likeness with undesirable outcomes of repeat maltreatment, re-entry into care, and life-threatening event/fatality. The key variables used are as follows:

- SDM Risk
- History of previous child protective services
- Age of youngest children (0-2 years)
- Number of children involved (four or more children)
- Response time (same day or 24 hour)
- Intimate partner violence
- Parent drug or alcohol abuse
- Parent mental health problem
- Child delinquency/behavior problem
- Child physical disability/development problem
- Drug endangered child

Priority Report

- Example Priority Report
- CPS is able to access case details in this report
- Updated monthly and distributed to QI and CPS Office Leadership
- Area Office view is also included

Priority Level Percentage x Region

Location	1	2	3	4	5	UTD	Total
Region 1	38%	28%	21%	10%	3%	0%	100%
Region 2	23%	23%	26%	18%	9%	1%	100%
Region 3	21%	21%	29%	22%	7%	0%	100%
Region 4	22%	27%	25%	16%	9%	1%	100%
Region 5	31%	28%	20%	17%	4%	1%	100%
Region 6	14%	25%	32%	19%	9%	0%	100%
Total	24%	25%	25%	17%	7%	1%	100%

Priority Report Metrics: 08.25.2020

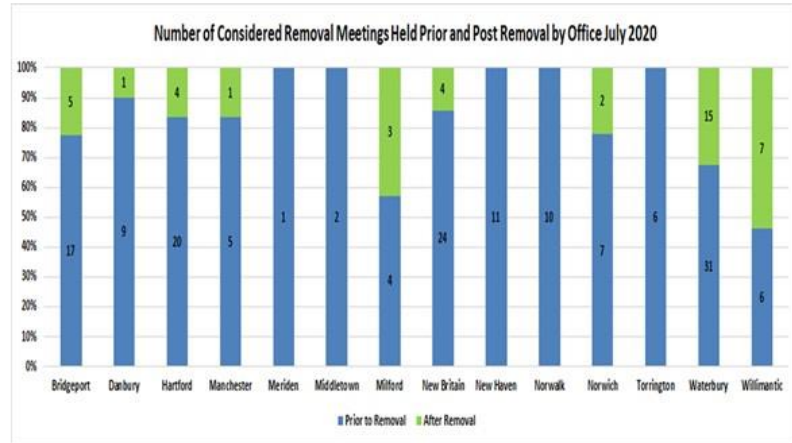
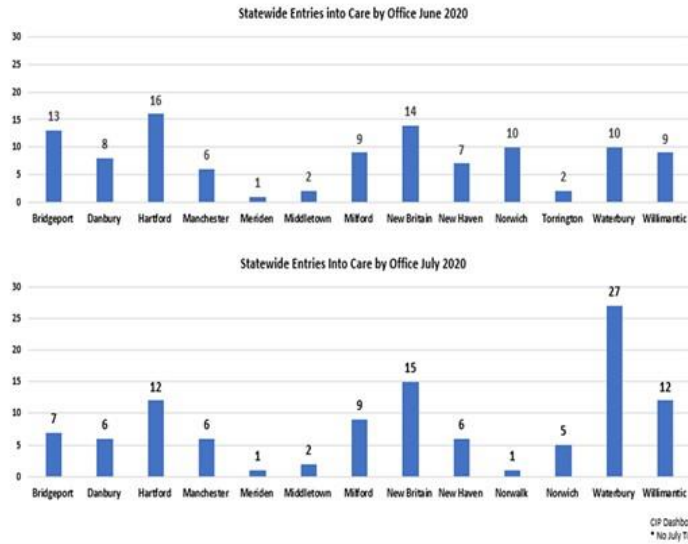
KEY			
5	4	3	2+1
highest			lowest

Monthly AO Reports



Entries into Care

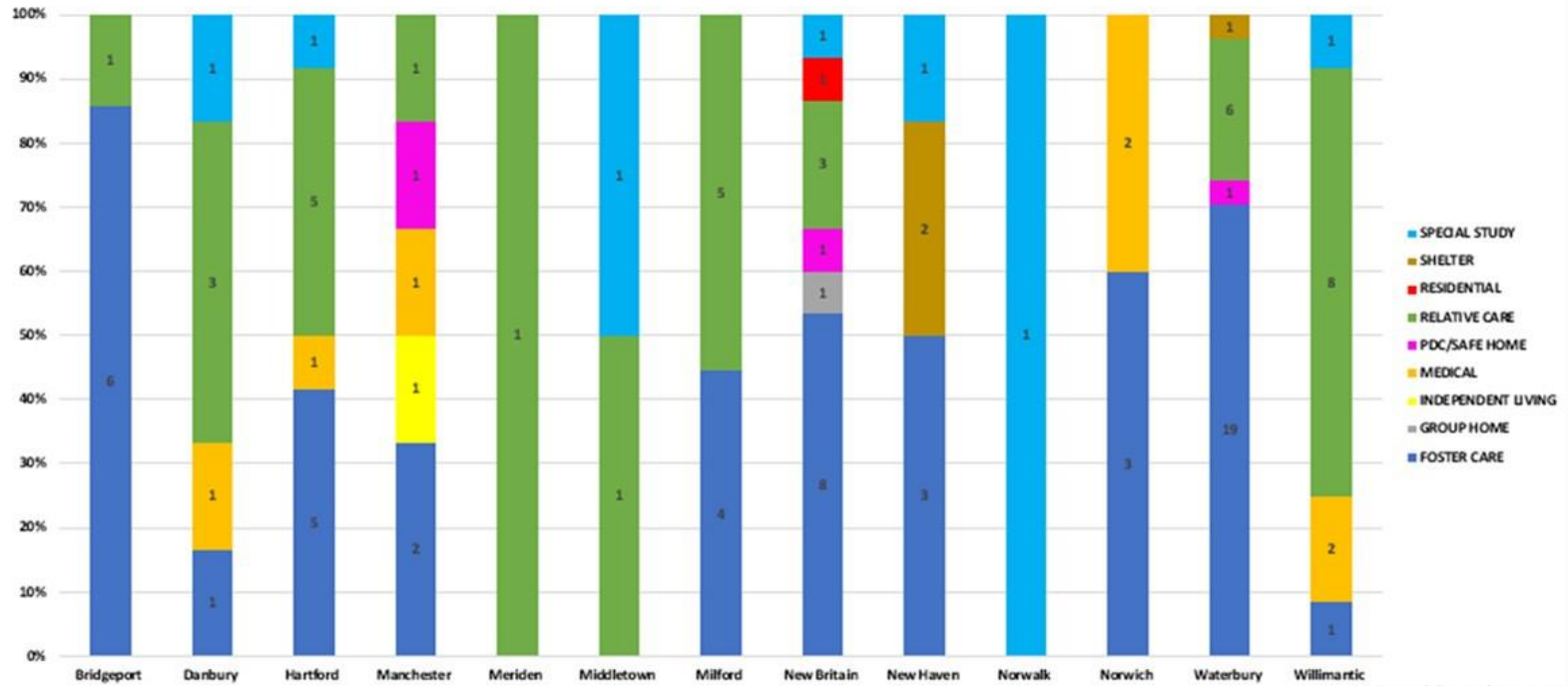
Statewide Entries into Care by Office June and July 2020



Total of 228 Considered Removal Meetings held in July 2020

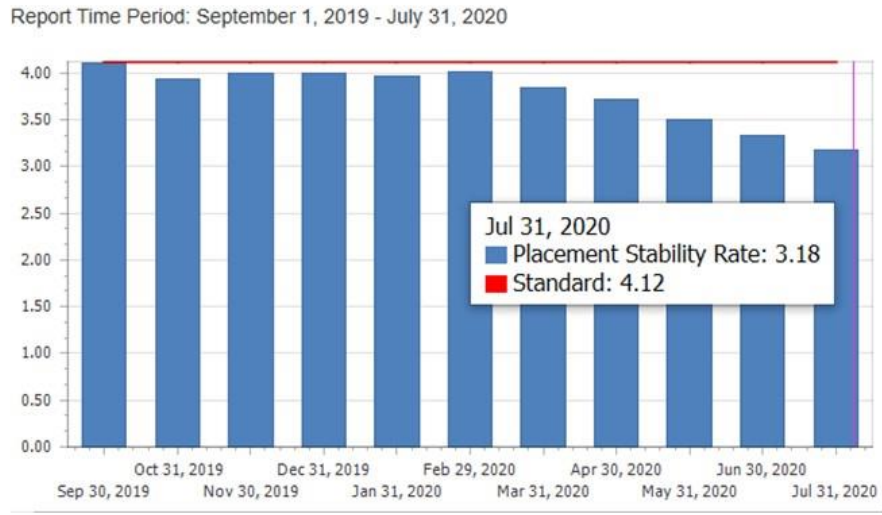
Some variance in numbers is expected due to data entry timeframes and time of report pull

Statewide Entries into Care by Placement Type July 2020

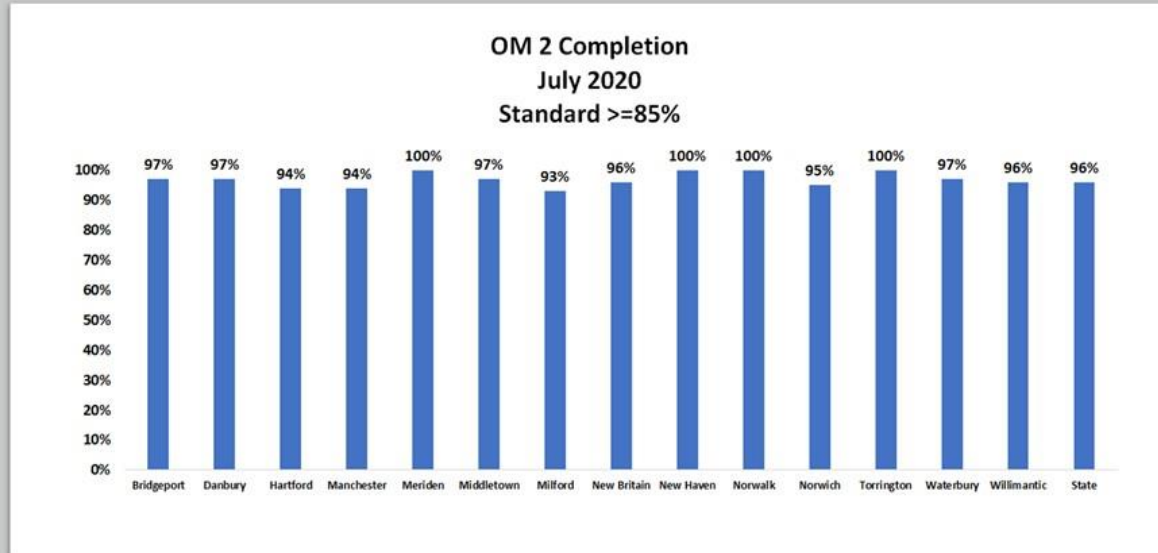


CIP Dashboard 8-13-20
 * No July Torrington Entries

Placement Stability Rate: Of all children who entered during the rolling 12 month period, rate of placement moves per 1000 days in care



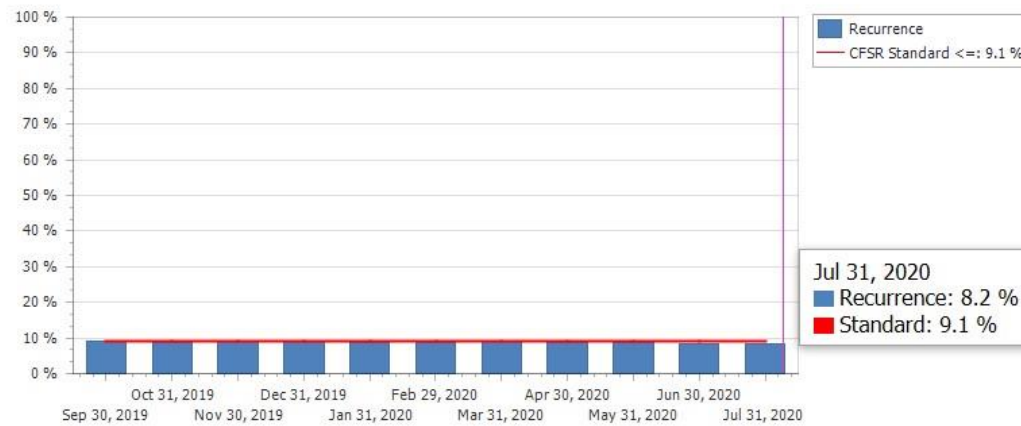
- Placement Stability: Federal Standard is ≤ 4.12
- Agency continues to meet the standard and has seen improved placement stability over recent months



Intake: Timely Completion ROM Report 6/8/20

Federal Recurrence of Maltreatment: Of all children who were victims of a substantiated or indicated report of maltreatment during a 12-month target period, what percent were victims of another substantiated or indicated maltreatment allegation within 12 months of their initial report?

Report Time Period: September 1, 2019 - July 31, 2020



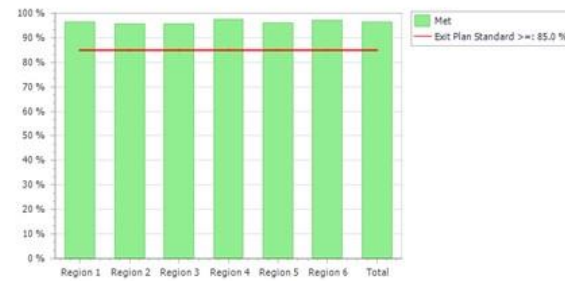
ROM In-Home Visitation July 2020

- Quantitative data for visitation
- QI and Court Monitor continue to review samples of cases to assess quality
- Virtual visitation is reflected in these totals

Exit Plan #16: Monthly Worker-Child Visitation (Out-of-Home)

Months worker-child visit made (of months child in care entire month)

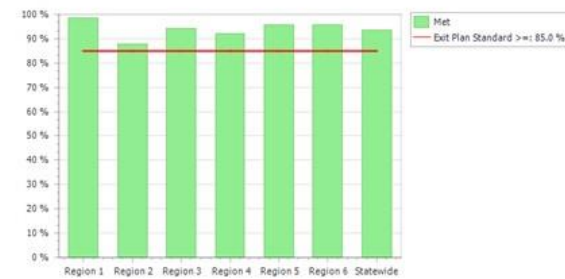
Report Time Period: July 1, 2020 - July 31, 2020



Exit Plan #17: Twice Monthly Worker-Family Visitation (In-Home)

Months with two worker-family visits made (of months with in-home assignment for entire month)

Report Time Period: July 1, 2020 - July 31, 2020



Appendix B
**Commissioner's Highlights from: The Department of
Children and Families Exit Plan Outcome Measures
Status Report
(October 1, 2019 – March 31, 2020)**

Commissioner Statement for *Juan F* v. Lamont Exit Plan Status Report

The last 6 months have challenged this state like never before. The Connecticut Department of Children and Families (CTDCF), as with all other child welfare jurisdictions across the country, has been met with the enormous responsibility of navigating child protection while in the clutches of an international public health crisis. I continue to be in awe of the steadiness of Governor Ned Lamont as he shepherds the state through these uncharted waters. He has demonstrated the precision of a surgeon in his decisive leadership. This unwavering commitment has positioned CT as a forerunner in many of the key metrics being followed in responsiveness to the COVID-19 pandemic. The Lamont administration's directive, from the very beginning of its tenure, was to collaborate, work across sectors and operate with transparency and integrity. This expectation has prepared us for the unimaginable storm we are currently navigating. Honesty and responsiveness to the relationships we have cultivated has afforded CTDCF the opportunity to find our way through mission critical work expectations while simultaneously attending to the health and safety of our workforce.

The well-being of children is paramount to the ultimate strength of a society. In the context of the *Juan F.* Exit Plan, I am humbled that the Court Monitor can pre-certify that CTDCF has worked hard to maintain quality investigation standards. This measure reflects the 'front door' of the timeline that starts the trajectory of our involvement with families. Likewise, to jurisdictions nationwide, the CTDCF Careline has had to adjust to a significantly lower call volume and continued to work around the clock in responding to the reports of child maltreatment after normal workhours. Attention to the components of differential response processes equates to improved safety decisions, more consistent risk assessments and comprehensive intervention. CTDCF partnered differently with our provider community to offer a warmline to any CT parent experiencing pandemic related stressors.

As we partner with providers across our service array, we have steadfast commitment to improved outcomes. Along with appreciation to Governor Lamont, the Office of Policy and Management, and the Connecticut Legislature for their continued support, we thank the provider trade associations, foster parents, families & other stakeholders who together have prioritized the safety of CT's children.

Although tested during this crisis, the vision of this CTDCF Administration is to reinforce clear and simple values:

- Keep children *safely at home* whenever possible;
- Place children with relatives (including maternal and paternal family) or someone they know, to *maintain kinship bonds*, if they must enter state care. As of 9/1/20, 44.3% of children are in placements with extended family members as of this writing.
- If they cannot be safely placed with someone they know, children *will be in a family* setting through our strong networks of foster family homes. On 9/1/20, over 90% of children in care are living with a family.
- We have also steadily *reduced the use of institutional care* for those children who require out of home clinical treatment. Although only 6.5% of children in our care on September 1, 2020 are in group care settings, the congregate care providers we entrust

have worked tremendously hard during the pandemic and also are owed a debt of gratitude.

- Efforts to address ***timely permanency*** have also been compromised by the impact of the shuttering of courthouses in response to this state of emergency. CTDCF is also very thankful to the Judicial branch, the Assistant Attorney Generals and Public Defender's office in their pledge to work with the Dept's Legal division to keep the priority work of the court moving, which they all have done consistently. This attention has resulted in completed adoptions, the establishment of remote hearings and a process of prioritizing pending court actions where feasible.
- Multidisciplinary assessments and Enhanced Service Coordination serve to ensure children are ***better off*** following Department intervention. These components more accurately identify root causes of familial strife and match to the appropriate services to address those needs.
- ***Academic & vocational preparation of older youth*** served by CTDCF continues to be a priority of Departmental reform. The governor's Emergency Declaration allows for the enactment of specific actions to be authorized by agency Commissioners. I have authorized suspension of '*aging out*' during the pandemic, permitted re-entry with more flexible criteria, and made extra efforts to reconnect with young people who had recently transitioned from care to try and ensure their stability. Staff in our *Transitioning Youth for Success* and *Education* divisions work diligently with area office social workers to ensure teens and young adults have technology to stay virtually connected to remote learning. This same collaboration worked to bring our committed students back from college campuses safely to continue their coursework here at home. The unpredictability of this virus' transmission has resulted in the extension of these protections through the remaining months of 2020.
 - While the pandemic has slowed progress in so many areas, this aspect of the work has demonstrated what can happen when systems invest in young people. Our teens have been vocal in their representation of CT in regional & national focus groups and youth-oriented summits. They have continued active participation in well-established quarterly Commissioner meetings and in topical Teen Town Halls designed to afford DCF committed youth forums to discuss pandemic coping challenges and strategies for law enforcement interaction.
 - This quarter has also reflected young adult involvement in curriculum review with the DCF Workforce Academy but also representation in a fiscal process to offer perspective on expenditures that directly impact this age cohort.

When these priorities were tested by this ever-present (*im*)perfect storm of COVID-19, societal unrest and economic devastation, the racial justice evolution of CTDCF has also been enhanced to introduce an antiracist framework with attention to leadership coaching and specific disparity outcome improvement change initiatives. I am very proud of the statewide racial justice workgroup continued development. The Bureau of Strategic Planning has developed and stood up review tools to measure the efficacy of work product in this remote environment. The CTDCF Senior leadership has made significant strides in refining the strategies in each of the identified target areas to maintain focus on the Dept's mission while navigating the unpredictable challenges of a global pandemic.

The pandemic has made the deployment of tablets and other technology imperative for the Department to stay connected. The Academy for Workforce Development (AWD) along with CT-KIND, Information Systems and the DCF HELPDESK has been an incredible collaboration to pivot the work of CTDCF into the virtual space. With the assistance of Human Resources, new staff have been on-boarded and trained during this precarious time. AWD has established an entire virtual platform of course offerings. With the partnership of a local college, AWD, the Dept's Health and Wellness Division have developed a series of instructional videos on the proper use of personal protective equipment and workplace rules. The Dept's Medical Director has valiantly led CTDCF through this public health crisis with exemplary aptitude. A contact tracing protocol has been effective at keeping the workplace virus transmissions very low across the Department.

Along with managing the Department's fiscal solvency, monitoring and adjusting the continuity of operations plan and all of the tremendous physical plant modifications to ensure continued workplace health and safety, Administrative divisions have also conducted the CTDCF's first virtual LEAN events to continue the efforts to streamline Dept processes. Tabletop exercises and an internal replication of the governor's unified command structure resulted in more seamless across Dept information sharing, collaboration and troubleshooting.

Fiscal Services have also worked alongside the System Development division to keep the provider community involved in the Dept's reopening efforts. Although CTDCF has never closed, these divisions, have continued to develop plans of consistent strategies to safely resume full functioning and service to families. I continue to be amazed at the tenacity of each of the divisions to support the work of CTDCF in these harrowing circumstances to ensure children youth and families are supported.

During this period under review, CTDCF's External Affairs Bureau stood up a dedicated COVID 19 mailbox and website to make available information on statewide resources to over 20,000 unique URL's. This effort coupled with weekly Commissioner update videos, regular newsletters and even the Dept's first ever Virtual All Staff Meeting -- keeping CTDCF's workforce informed with accurate information by which to serve families most effectively.

During the previous quarter, the planning stages of developing our CT state plan in response to the federal *Family First Prevention Services Act* began. It is these established stakeholder relationships that have proven very valuable in navigating the service delivery to families. The state plan development timeframe has been extended and the workgroup leads of this endeavor have been re-engaged to resume the work of the identified subcommittees.

CT DCF is committed to continuing progress even in the grips of an international crisis. Along with maintaining aforementioned contacts with the legislative and judicial branches, CTDCF is solidly incorporated with the other health and human services agencies across our state. We actively problem solve and collectively seek guidance from our public health experts, and the Department of Administrative Services' Office of Labor Relations. The CT Comptroller's Office has provided opportunity for state employee testing. All of this has prepared CT to be as safely responsive to the families and communities we mutually serve. Leaders across CTDCF participate regularly in cross jurisdictional forums on regional and national levels. Not only do

we learn from other states, but we have also been frequently called upon to share our innovative strategies on legislator advocacy, fatherhood engagement and racial justice over this quarter.

We greatly appreciate the support of the Office of the Court Monitor and the Federal Court in maintaining our efforts towards approaching an exit from *Juan F.* If our work over the last quarter has taught us nothing else, we have realized that the capacity of a system is not really known until it is stretched beyond its perceived boundaries.

The CTDCF Executive team is grateful to the DCF workforce who make us exceedingly proud as they continue to do this work while making every effort to keep themselves and their own families safe. We thank the thousands of partners in communities across Connecticut standing with us. Service providers, educators, law enforcement officials, court personnel, medical providers and others are all making sacrifices to support children and families through these unprecedented times.

Most of all, we thank the children and families for their active engagements-- even in the face of perilous uncertainty.

We are truly all in this TOGETHER.