

COLORADO

**Department of Human Services
Office of Child and Family Services
Division of Child Welfare**



Child and Family Services Review Program Improvement Plan Quarterly Report

**April 1, 2004 through June 30, 2004
Submitted August 13, 2004**

**Program Improvement Plan
Report of Progress and Status
January – March 2004**

Overview

This is Colorado's third quarterly report of progress on the State Program Improvement Plan. This report provides a narrative regarding Colorado's performance with regard to the National data indicators, information regarding performance from the statewide data collected from reviews by the Administrative Review Division, response to questions, and the matrix. We have also included as attachments A Guide for Colorado Foster Parents Regarding Allegations of Child Abuse/Neglect, data regarding the Chafee Program and a one page fact sheet about the Fatherhood Initiative.

National Data Indicators

Colorado provides information on the National Indicators based upon a rolling fiscal year. Therefore there will be discrepancies between the information provided in the quarterly reports and the NCANDS and AFCARS data.

- Recurrence of Maltreatment – AFCARS data is 3.3%. Based upon the rolling fiscal year from April, 2003 through March 31, 2004, Colorado continues to be in compliance with the National Standard. The point in time data shows that only 3.0% of Colorado's children have another substantiated report of neglect or maltreatment within a six-month period. This is an improvement of .07% from the first quarter report.
- Incidence of Abuse or Neglect in Foster Care – NCANDS data is .29%. Based upon the rolling fiscal year, from April 2003, through March, 2004, Colorado is still out of compliance with a .62%. This will continue to be monitored in order to determine technical assistance needs.
- Reunification in less than 12 months from the time of the latest removal – AFCARS data is 77.3%. Based upon a rolling fiscal year, Colorado continues to be in compliance with the National Standard. The point in time data shows that 81.4% of Colorado Children are reunified with their parents or caretakers within 12 months from the time of their latest removal. It is anticipated that the AFCARS data will reflect this improvement with the next quarterly report.
- Finalized adoption within 24 months from the time of the latest removal from home – Again Colorado continues to be in compliance with the National Standard. The point in time data for the rolling state fiscal year shows that finalized adoptions within 24 months of last coming into care occurs for 59.3% of Colorado's adopted children. The AFCARS data shows 55.5%.
- Stability of foster care –Colorado's data indicates 91% compliance. AFCARS data indicates 80.7%. It is anticipated that the AFCARS data will show statewide compliance with the Fourth Quarterly Report.
- Re-entry into foster care – Again the AFCARS data differs from Colorado's rolling fiscal year data. AFCARS indicates that 17.4% of children re-enter foster care within 12 months of a prior foster care episode. The rolling state fiscal year data show an improvement to 10.8%. Again, it is anticipated that the AFCARS data will reflect this improvement with the next quarterly report.

Statewide Data

Colorado utilizes data collected from Trails, the statewide automated information system, and data provided by the Administrative Review Division (ARD). This information continues to provide valuable information to provide counties with feedback on casework practice and progress on their outcomes.

Response to Questions

1. *What is the progress on the rule changes?*

The rule changes are in process. There has been discussion with the County Administrators about each of the rule changes in order to develop the rule so that the intention of the rule will be met while being sensitive to the county department's needs as they experience staff reductions and fewer resources. Counties have been informed of the proposed rule changes and the Administrative Review Division has been reviewing cases based upon the proposed rules. Baselines have been established and the rule changes are being reflected in practice.

2. *How many agencies and staff participated in the foster family assessment training that the Department indicated had been completed? Has the Monitoring Team noted any improvements in foster homes in the agencies that have sent staff to this training? How many agencies have participated in Confirming Safe Environment Training that began August 2003?*

This question will be responded to in the next quarterly report.

3. *Has there been more technical assistance on the CAC provided to counties? Is the department seeing any improvement in assessments?*

The consultant on contract to provide extensive county specific training has provided training for counties at the Child Welfare Conference as well as in specific counties. A report of the counties that have received training will be provided in the next quarterly report.

4. *Has the Core Training on the incorporation of the Safety Assessment into a Safety Plan been effective in improving safety planning?*

As is noted in the matrix, this is an area of concern. Although the measure is still above the benchmark, the percentage of safety plans that address all the issues identified, has again dropped. This will be discussed with the Administrative Review Division. It appears that this is critical problem in two of the ten large counties. This will be shared with those counties with possible requests for action steps to address the issue.

5. *Is technical assistance on post-reunification services being provided? Are counties providing post-reunification services?*

In May, 2004, ten counties participated in a Reunification Symposium from the NRC for Foster Care and Permanency Planning. Counties use their Core and Promoting Safe and Stable Families funds to provide post-reunification services.

6. *Family to Family is a prominent feature in the Colorado PIP. Is there information regarding the success of this initiative in Denver and El Paso County? How has this initiative impacted the use of congregate care? Are other counties implementing the model?*

Family to Family has indeed had a positive impact in Denver and El Paso Counties as is reported in the matrix under the various items. Four other counties are currently receiving training in the model and are moving toward the implementation. The state is currently soliciting foundations for further funding to make available to other counties for their continued training and technical assistance. In addition, the outcomes from Denver and El Paso are being tracked closely to justify the possible use of other state funding to support this model and philosophy.

7. *Is there evidence that the expert consultants are being utilized and that their consultation is impacting practice?*

This question will be responded to in the next quarterly report.

8. *Has the pilot for the use of NCFAS-R been expanded beyond the initial counties as planned? Has the technical assistance been provided to counties other than Pueblo?*

The NCFAS has been expanded beyond the initial counties and training will be provided by Action for Child Protection. The dates are provided in the matrix below.

**Child and Family Services Review
Program Improvement Plan
Quarterly Report**

**April 1, 2004 through June, 30, 2004
Submitted June 1, 2004**

Outcomes Or Systemic Factors And Item(s) Contributing To Nonconformity	Goal/Negotiated Measure/Percent Of Improvement	Action Steps And (Agency Responsible)	Benchmarks Toward Achieving Goal	Benchmarks Dates of Achievement Goals Projected	Benchmarks Dates of Achievement Goals Actual	Date of Goal Achievement Projected	Date of Goal Achievement Actual	Barriers Or Discussion	Other PIP Related Activities
Outcomes S1 Children are first and foremost protected from abuse and neglect									
Item 1: Timeliness of initiating investigations of reports of maltreatment	85% of report will receive a face-to-face observation of child within assigned timeframe. Baseline 81%.		Statewide County data will indicate attainment of benchmark at 83%	Aug, 2004		Oct, 2005	June, 2004 – 86.7%%	This is the third quarter that this measure has achieved the goal.	
		1. In order to mandate a face-to-face observance of the child when initiating an investigation on both new referrals and referrals on open cases. a. Submit a rule change request to state board b. Announce the change to counties via agency letter. c. Assure that counties implement this practice change	1a. Rule change approved. 1b. Agency ltr. Sent.	1a.Feb, 2004 1b.March, 2004			1c Jan., 2004	The rule change has been submitted. Counties report they are already operating under this new rule, since ARD reviews to it. It will be seen by State Board in September and will be effective by January.	
Incidence of Child Abuse and/or Neglect in Foster Care (Statewide data indicator relating to Item 2)	.57% or less of children in foster care will experience abuse or neglect- Baseline .73%.		Rate for abuse or neglect in foster care will decrease to .61%	Aug, 2004		Oct, 2005		This measure has fallen .01% under the proposed benchmark of .61% This information reflects data through March, 2004. The data through June, 2004 will be reported next quarter.	
		1. The 24-hour monitoring team will continue to provide over-sight and technical assistance to facilities that are determined to be at risk or where there has been an allegation of child abuse/neglect in order to correct situations that put children at risk and to increase the level of quality of care. a. receive referrals b. conduct site visits c. document findings and provide to county department and state staff. d. provide oversight and technical assistance	1. Completion of assessment, oversight and t/a to facility	1.Ongoing	December, 2003				A report from the 24 Hour Monitoring Unit will be submitted semiannually. The last report was submitted through Marach 31,2004. The next report will be submitted through September, 2004.
		2. Statewide training will be provided for county staff and child placement agency staff on Confirming Safe Environment (assessing safety of the foster home prior to and during placement).	2a Training started 2b. Training completed		2a Aug, 2003	2b. June, 2004		Data is currently unavailable. This will be provided in the 4 th quarterly report.	
		3. Statewide foster parent training curriculum (Core and Advanced) will provide information and suggestions to ensure that needs and behaviors of special needs children are addressed to prevent inappropriate or abusive treatment. a. Review and revise curriculum. b. Begin delivery of revised curricula. c. Assess training effectiveness via evaluation.	3a. Review and revision 3b. Deliver training. 3c. Evaluation	3a. Sep, 2003 and ongoing 3b. Dec. 2003 3c. April 2004 and ongoing	3a Sep, 2003 3b Dec. 2003 3c. April 2004 and ongoing	3a Sep 2003 3b Dec 2003 3c. April 2004 and ongoing	3a Sep.. 2003 3b Dec. 2003 3c. April 2004 and ongoing	Data is currently unavailable. This will be provided in the 4 th quarterly report.	

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		4. Foster Family Assessment training will be provided to county and CPA staff to improve their ability to assess and certify appropriate foster homes.	4a. Training started. 4b. Training completed		4a. Aug, 2003	4a. Oct, 2004		4a. Training completed	4a. A validated foster care/adoption assessment (S.A.F.E) is being piloted between July 1- Dec. 31, 2004 by 4 counties and 3 child placement agencies, to determine the appropriateness of expanding it statewide. The assessment is being piloted in several other states. It is portable and would decrease the amount of time to move children into adoptions.
Outcome S2 Children are safely maintained in their homes whenever possible and appropriate									
Item 3: Services to family to protect child(ren) and prevent removal.	95% of Family Services Plans (FSP) contain a description of specific services that address the needs of the child(ren). Baseline 95% New Goal – 88% New Baseline 83.9%		Maintenance of 95% statewide compliance New Benchmark 86%	Jan, 2004 Aug. 2004		Oct, 2005		This is the first quarter that this measure has achieved the benchmark The Status Report from the Regional Office misrepresented the February 2004 report. The measure had fallen 4.8% below the baseline, not 48% below the baseline. There is not an issue of children in foster care receiving services.	ARD began reviewing to services being provided for children /families to prevent removal in January, 2004.
		1. In order to insure that appropriate services are provided, County Department's will conduct reliable assessments of families open to child welfare to provide them an appropriate array of prevention, support and Core services to protect children in their own homes and prevent removal a. Counties have been notified that the use of the Colorado Assessment Continuum (CAC) is now required in Trails. b. State will provide technical assistance to counties on the use of the CAC upon request.	1a .Counties notified. 1b. T/A started and ongoing	1a April 2003	1b June 2003	1b. June, 2004	1a. April, 2003	Efforts are being made to encourage counties to request training. A consultant is on contract to provide extensive county specific training on the use of the CAC.	Action for Child Protection is now on contract to provide training on the development of safety plans.
		2. Use of Team Decision Making (TDM) to consider removal decisions will be expanded beyond Denver and El Paso Counties a. Present Family to Family strategies (including use of TDM) to Metro Child Welfare Administrators and County Directors	2a. Presentations made.		2a Aug, 2003		2a Aug, 2003		Jefferson County, Mesa County, Elbert and Grand County have received technical assistance as well as modest funding for their implementation of the

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		b. Conduct statewide forum to provide information regarding implementation and support for Family to Family strategies c. Additional counties self-select to implement these strategies (Projected: three additional counties) d. The State will provide technical assistance and support to counties as they implement TDM for this purpose.	2b. Forum conducted. 2c. Counties self-selected. 2d. T/A started and ongoing.	 2c. March, 2004 2d. March 2004	2b. Oct, 2003	 2c. June, 2004 2d. Dec, 2004	2b Aug, 2003 2c Mar, 2004 2d Mar, 2004 and ongoing		Family to Family Model. They have received training on the self-evaluation strategy as well as participated in the Casey Site Visit with Denver and El Paso Counties. They will receive training on TDM in August, 2004.
Item 4: Risk of harm to child(ren)	75% of Safety plans will address the issues identified in the safety assessment Baseline 71%.		Statewide county data will indicate that attainment of goal at 73%	Aug, 2004		Oct, 2005	June , 2004 – 73.4%	This is the third quarter that this measure has achieved at least the benchmark. There is concern that the %age has fallen each quarter.	Discuss this item at the State/County QA forum, and look at county technical assistance needs.
		Core Caseworker Statewide training will provide training on how to incorporate the Safety Assessment into a Safety Plan. a. Review and revise curriculum. b. Deliver revised curriculum. c. Assess training effectiveness via evaluation and/or supervisor surveys.	a. Review and revision. b. Deliver training. c. Evaluation	c. Jan, 2004 and ongoing	a. July, 2003 b. Sept, 2003 & ongoing c. Jan, 2004 and ongoing	a Jul 2003 b Sept 2003 c. Jan, 2004 and ongoing	a Jul.. 2003 b Sept. 2003 c. Jan, 2004 and ongoing	Data is currently unavailable. This will be provided in the 4 th quarterly report.	
Outcome P1: Children have permanency and stability in their living situations									
Item 5: Foster care re-entries	No more than 17% of children will experience re-entry into foster care within a 12-month period Baseline was 19.3%.		Re-entry rate will decrease to 18%	Aug, 2004		Oct, 2005	Mar., 2004 - 10.8%	This is the second quarter that this measure has achieved the goal.	This information reflects data through March, 2004. The data through June, 2004 will be reported next quarter.
		1. Post re-unification services will be available for families statewide: a. County departments submit Core Services and PSSF plans that address the post-reunification needs of a family.	1. Plans submitted and reviewed	1. Dec 2003	1. PSSF plans were submitted, reviewed and implementation beginning in October 2003	1. June, 2004	1. June, 2004 All plans have been approved and are being implemented.		In May, 2004, ten counties participated in a Reunification Symposium from the NRC for Foster Care and Permanency Planning. The Symposium assisted counties on how post reunifications services can be provided within the current policies and procedures. Further T.A. will follow in the Fall, 2004.

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		<p>2. Family to Family practice of Team Decision Making (TDM) will occur in Denver and El Paso Counties.</p> <p>a. Denver and El Paso counties expand the use of TDM to include delivering a TDM meeting prior to return of a child home. These TDMS will address post-reunification needs of the family. The current staff in these county TDM units will manage this expansion</p> <p>b. Additional counties will be identified to deliver TDM meetings when a child returns home (refer to Item 3 Action steps for a description of this process.</p> <p>c. The state will provide technical support to the additional counties and the counties will implement TDM.</p>	<p>2. TDM will be completed in 75% of the cases where a child returns home.</p> <p>2b. Solicit county participation.</p> <p>2c. T/A started & ongoing</p>	<p>2. Dec, 2004</p> <p>2a. Dec, 2003</p> <p>2b March 2004</p> <p>2c March 2004</p>		<p>2a June, 2004</p> <p>2b. June, 2004</p> <p>2c. Dec, 2004</p>		<p>2b. Four additional counties have requested T.A. to implement a Family to Family model.</p> <p>2c. TDM training for these counties to occur in August, 2004.</p>	<p>El Paso County reports that the TDM is fully integrated into their system, including reunification staffings. Denver County continues to expand the use of TDM for all placement changes and reunification. .</p>
		<p>3. NCFAS-R's two validated reunification domains will be increasingly used in counties to assist with determining when it is safe/appropriate to return children/youth home</p> <p>a. use of NCFAS-R will be expanded beyond the three pilot counties (Denver, Mesa, and Morgan) to assist with determining when it is safe/appropriate to return children/youth home.</p> <p>b. State will provide technical assistance with counties re: effective use of NCFAS-r.</p> <p>c. State will submit a request for the two new reunification domains to be integrated into Trails.</p> <p>d. NCFAS-R integrated into Trails.</p>	<p>3a. Additional counties identified</p> <p>3b. T/A started and ongoing</p> <p>3c. Request submitted.</p> <p>3d. NCFAS-R in trails</p>	<p>3a. Jan, 2004</p> <p>3b. Jan- 2004</p>	<p>3c. Sept 2003</p>	<p>3b Nov, 2004</p> <p>3d. Nov, 2004</p>			<p>CAC training for the 04/05 FY. The safety training will be done by Action for Child Protection and will be coordinated with NCFAS training. The following dates were pre-scheduled for the 04/05 FY: September 23 & 24, 2004 November 18, & 19, 2004 February 24 & 25, 2005 April 14 & 15, 2005 June 16 & 17, 2005</p>
<p>Foster Care Re-entries (Statewide data indicator relating to Item 5)</p>	<p>17% of children will experience re-entry into foster care within a 12-month period Baseline 19.3%.</p>	<p>See Item 5 for action steps to address this indicator.</p>	<p>Re-entry rate will decrease to 18%</p>	<p>Aug, 2004</p>		<p>Oct, 2005</p>	<p>Mar., 2004 - 10.8%</p>	<p>This is the second quarter that this measure has achieved the goal.</p> <p>This information reflects data through March, 2004. The data through June, 2004 will be reported next quarter.</p>	

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Item 6: Stability of Foster Care	For 76% of children who experience change of placement, the change will be directly related to helping the child achieve his/her goals in the case plan. Baseline from July-Aug data was 72%.		Increase to 74%	Aug, 2004		Oct, 2005	June, 2004 – 74.2%	This is the first quarter that the state has met the benchmark.	
		1. Training and technical assistance in Family Group Decision Making and Team Decision Making to plan for each move made by a child in foster care will be expanded to other counties.	1. Other counties identified.	1. Jan, 2004		1. Dec, 2004			The State continues to provide support for training in Family Group Decision Making. County FGDM staff are supported to attend the National Conference on FGDM. For information on TDM see Item 3 and Item 5.
		2. Recruitment and retention of foster parents will be community- based to better meet the needs of children in their neighborhood home environment. a. Family to Family Counties will develop and implement community recruitment strategies. b. Strategies will be documented and shared with other counties.	2b. Report documenting strategies produced and distributed.	2b. June, 2004					Both Denver County and El Paso County are partnering with faith based organizations and community/family centers to increase the number of foster care families.
		3. Partner with CO State Foster Parent Association (CSFPA) to provide mentoring and supportive services to foster families to minimize the likelihood of placement disruption. a. Inform foster parents of process for requesting a mentor. b. Develop survey to distribute to sample of foster parents to determine adequacy/quality of services. c. Analyze data and provide feedback. d. Identify specific service needs and work with FPA and counties to locate resources/services	3a. Info. to foster parents. 3b. Survey distributed. 3c. Analysis and feedback	3a Dec, 2003 Oct., 2003 3c Feb, 2004	3b Oct, 2003	Dec., 2003 Oct., 2003 3d. Dec, 2004		3c After analyzing the original survey, some of the questions were not clear and appeared to skew the analysis. A revised survey was administered to a limited sample in May and will be available at the Oct. 2004 CSFPA Conference. The data will be analyzed at that time.	3d. Benchmarking project with the NRC for Special Needs Adoptions to identify needs and challenges in the recruitment and retention of Latino/Hispanic foster and adoptive families. In September 2004, the NRC for Special Needs Adoption and the Dept will sponsor two 2-day trainings to provide more awareness regarding the broad diversity within the Latino/Hispanic. A guidebook for foster parents who are

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								Analysis will be provided by February, 2005.	undergoing investigations for abuse and neglect was developed and distributed to all public and private agencies in June 2004. (See attachment). A training regarding allegations will be provided to FP at the CSFPA Conference in Oct 2004
		4. Denver and El Paso Counties will decrease the use of congregate care for children and increase the use of family kinship and family foster homes. a. Counties will utilize TDM practices and safety planning. b. Child Welfare will provide t/a and support around use of TDM.			4a. Jan, 2003	4. Dec, 2003		The increased use of congregate care for youth will be examined and determined if it is an item that must be addressed in the County specific PIP.	Looking at new entries only, From April, 2003 to March, 2004, El Paso County, has increased the use of family/kinship homes from 80% to 90%. For youth the increased use of family/kinship homes increased from 30% to 40%. In the same time span, Denver County has increased the use of family/kinship homes for children from 45% to 78%. For youth the use of congregate care has increased from 92% to 100%
		5. Best practices for recruitment, retention and support for placement stability that were identified in the 14 county foster care review will be shared statewide. a. Information shared at statewide conferences and meetings of county directors. b. Information will be posted on the Child Welfare Website c. Bi-monthly foster care coordinator meeting will highlight best practices and identify barriers to implementation.	5a. Presentations made. 5b. Web posting. 5c. FC Coord. Mtg.		5a June, 2003 5b Oct, 2003 5c Oct, 2003				In SFY04, 4 additional regional FC/Kin Coordinator meetings occurred in rural areas of the state. A foster care development training occurred in June 2004. Conducted a FP Forum and the State CW Conference and shared the results of the foster parents issues and their solutions with FC Coordinators.

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Item 7: Permanency goal for Child	<p>1. 96% of children in foster care will have an appropriate permanency goal. Baseline 95%.</p> <p>2. 50% of children in foster care will have a permanency goal established in a timely manner Baseline 14%.</p>		<p>1. Baseline is maintained.</p> <p>2. 30% of children in care will have timely permanency goal.</p>	<p>1. Aug, 2004</p> <p>2. Aug., 2004</p>	<p>1. Dec., 2003 – 95.8%</p> <p>2. Mar., 2004 45.8%</p>	<p>1. Oct, 2005</p> <p>2. Oct., 2005</p>	<p>Mar., 2004 – 96.1</p>	<p>1. This is the first quarter that this measure has achieved the goal</p> <p>2. This is the second t quarter that this measure has achieved the benchmark.</p>	
		1. Ensure that Statewide Core Caseworker training includes the need to establish an appropriate permanency goal in a timely manner and to consider use of concurrent planning when appropriate. <ul style="list-style-type: none"> a. review/revise curriculum. b. deliver revised curriculum. c. assess training effectiveness via evaluation and/or supervisor survey. 	<p>1a. Review and revise</p> <p>1b. Deliver training</p> <p>1c. Evaluation</p>	<p>1b. Dec, 2003 and ongoing</p> <p>1c. April 2004 and ongoing</p>	<p>1a review Sept, 2003</p> <p>1a revise. Dec, 2003</p>	<p>1b. Jan, 2004 and ongoing</p>	<p>1a review Sept, 2003</p> <p>1a revise. Dec, 2003</p>	Data is currently unavailable. This will be provided in the 4 th quarterly report.	
		2. Judges and magistrates will participate in “Stepping Up To Juvenile Court” – a training on the proper handling of Dependency and Neglect cases (including the timeliness of permanency determination)	<p>2a. Begin training</p> <p>2b Training completed</p>	2a. Feb, 2004		2b. Oct, 2005		The Court Improvement Grant position within the State Judicial Office is currently vacant and detailed information regarding this item is not available. This will be provided in the 4 th quarterly report.	
		3. Agency letter will be sent to reinforce timelines for establishing permanency goal.,	3. Ltr. sent	3. Nov, 2003	3. Nov, 2003.			Completed	
Item 9: Adoption		1. Statewide Caseworker Core and ongoing training on adoption issues/practice will emphasize timelines and efforts to find adoptive homes for all children with a goal of adoption. <ul style="list-style-type: none"> a. review/revise curriculum. b. deliver revised curriculum. c. assess training effectiveness via evaluation and/or supervisor survey. 	<p>1a Review and revise</p> <p>1b. Deliver training</p> <p>1c. Evaluation</p>	<p>1b. Dec, 2003 & ongoing</p> <p>1c. April 2004 & ongoing</p>	<p>1a Sept, 2003</p> <p>1b. Dec, 2003</p>		<p>1a Sept, 2003</p> <p>1b. Dec, 2003</p>		
		2. Adoptive families will be informed on the process for negotiation of subsidies <ul style="list-style-type: none"> a. Handouts and website links regarding the negotiation of subsidies will be provided to adoptive families 	2a. Handouts and website info will be developed.	2a. Jan, 2004		2a June, 2004		Information on financial assistance including subsidies is contained in the Changealiforever web site. The Financial Side of Adoption and The Compass A Family Guide to Post Legal Adoption Services	

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		3. Adoption caseworkers will be trained on resolving challenging issues including; working with children refusing adoption and children being labeled as "unadoptable." a. State child welfare will request technical assistance/training from National Resource Center or AdoptUSKids. b. State will work in partnership with above-listed entities to provide training on working with children refusing adoption.	3a. Training and t.a. request approved. 3b. Training started and completed.	3a. Jan., 2004 3b. June, 2004		3b Dec, 2004		Teleconference with Ms. Nicholason (trainer) working with youth on adoption and connections. Handouts on Adoptability Assessment, Finding Connections and reading lists were provided.	Trails Colorado Adoption Resource Registry is in development and will assist counties to identify children needing photo listing.
		4. ARD will establish a measure to determine effectiveness of county adoption efforts. a. Review questions will be added to Q/A instruments. b. Baseline will be established. c. Goal will be negotiated with RO.	4a. Instrument modified. 4b. Baseline established. 4c. Goal approval by RO.	4a. Jan, 2004 4b. May, 2004 4c. June, 2004	4a Jan, 2004 4b May, 2004			Goal Statement: For children who are legally free for adoption and the goal is adoption, 81% will have an adoptive family identified. Baseline is 76% Benchmark 78%	
Item 10: Permanency goal of other planned permanent living arrangement.	1. 18% of cases will have OPPLA as a permanency goal Baseline 22%. 2. 93% of the IL cases will reflect diligent efforts to prepare youth for emancipation Baseline 89%.		1. 20% of cases will have OPPLA as a permanency goal. 2. ARD report will indicate achievement of benchmark at 91%	Aug, 2004 Aug., 2004		Oct, 2005 October, 2005	Mar., 2004 – 14.10%	This is the second quarter that the measure has achieved the goal. This information reflects data through March, 2004. The data through June, 2004 will be reported next quarter. 2. The quarterly measure for this item has improved to 88.5% which is a 1.9% improvement from the first quarter, but still .5% below the baseline. The critical issue continues to be around I.L. planning.	
		1. State staff will form a cross-system Child Welfare Child Placement Advisory workgroup to assist in gaining insight into current practices regarding permanency with children/youth. a. Cross System workgroup will review AFCARS Data and the use of and the processes that counties follow before use of OPPLA. b. If needed, Focus groups will be held statewide to gain information on barriers in securing permanency, barriers in maintaining permanency, the role of termination of parental rights in permanency, policy issues which create barriers and practice issues which create barriers.	1a. Review completed 1b. Focus groups held. (if needed)	1a. Dec, 2003 1b. Feb, 2004		1. Sept, 2004 Oct, 2003 & ongoing		A report on this item will be provided in the 4 th quarterly report.	

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		<p>c. State policies that have been identified as barriers will be reviewed and if possible revised to meet the outcome of maintaining permanency</p> <p>d. T.A. that focuses on preparing children and youth for permanency and adoption will be provided to state and county staff (especially focusing on those Counties with high use of OPPLA goals or high numbers of children/youth awaiting adoption)</p> <p>e. A written document outlining the CDHS policy regarding permanency and the use of OPPLA, barriers to achieving permanency and revisions made to state policy that creates barriers to permanency will be drafted and distributed to state, county and local agencies</p>	<p>1c. State policy review.</p> <p>1d. Training provided</p> <p>1e. Doc produced and distributed. If appropriate, policy change initiated</p>	<p>1c. March, 2004</p> <p>1d June, 2004</p> <p>1e. July, 2004</p>					
		<p>2. Best practices learned from Adolescent Connections Project for establishing life-long connections for youth in care will be shared statewide</p> <p>a. Information shared at statewide conferences and meetings</p> <p>b. Information will be posted on Child Welfare Website</p>	<p>2a. Presentations made.</p> <p>2b. Website posting.</p>	<p>2a. March, 2004</p> <p>2b March, 2004</p>	<p>2a. March, 2004</p> <p>2.b March, 2004</p>			Completed	
		<p>3. Diligent search will be improved to better connect youth with paternal side of their family</p> <p>a. State/county workgroup formed.</p> <p>b. Request for funding for training.</p> <p>c. Design and delivery of video/teleconference statewide training.</p>	<p>3a. Workgroup formed.</p> <p>3b Funding requested</p> <p>3c Training developed and provided</p>	<p>3c June, 2004</p>	<p>3a. Sept, 2003</p> <p>3b. July, 2003</p>		3b July, 2003	The 4 th quarterly report will provide information regarding training implementation.	
		<p>4. In order to make diligent efforts to prepare youth for emancipation,:</p> <p>a. Review the county on-site review reports from ARD to ascertain that cases are compliant in the following areas:</p> <p>1) Does FSP contain adequate IL Plan</p> <p>2) Are IL services being provided sufficient to address youth's IL needs?</p> <p>3) Are there any indications that the youth has been involved in IL planning?</p> <p>b. State staff will provide TA to county departments found not in compliance.</p> <p>c. State staff will participate in ARD quarterly forum to discuss data and implications</p>	<p>4a. Review of reports</p> <p>4b. T/A provided as needed</p> <p>4c. Quarterly review in county</p>	<p>4a June, 2004</p> <p>4b. June, 2004</p> <p>4c Beginning June, 2004</p>	<p>4a. Oct, 2003</p>		4a Oct., 2003		The attached chart regarding the Chafee Program indicates the expanded services provided over the past years.
Outcome P2: The continuity of family relationships and connections is preserved for children.									

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Item 13: Visiting with parents and siblings in foster care	94% of visitation plans address permanency goal and are of sufficient frequency with each parent Baseline 90%.		92% of visitation plans will address permanency goal and be of sufficient frequency with each parent.	Aug, 2004		Oct, 2005	June, 2004 96.4%	1. This is the second quarter that this measure has achieved the goal.	
		1. Statewide Core and ongoing caseworker training will provide opportunities to increase knowledge and understanding regarding familial contact, including: - developing visitation plans that take into account the child's permanency needs. - assuring parent's visitation plans are of sufficient frequency. - maintaining parent/sibling contact - the importance of parent/sibling contacts including after Termination of Parental Rights. a. review and revise curriculum b. deliver revised curriculum c. measure training effectiveness via evaluation and/or supervisor survey	1a. Review and revision 1b. Training delivered 1c. Evaluation	1a. Revision Jan 2004 1b. Nov, 2003 & ongoing 1c. March 2004 & ongoing	1a. Review Aug, 2003 1b. Nov, 2003		1a. Review Aug, 2003 1b. Nov, 2003	Data is currently unavailable. This will be provided in the 4 th quarterly report	
		2. Joint training (via video conferencing) will be provided for judges and child welfare staff regarding visitation issues (including frequency of contact) for children in foster care	2a. Curriculum developed. 2b. Trainings started 2c. Training completed	2a Oct, 2004 2b.Oct, 2004		2c. Oct, 2005		The Court Improvement Grant position within the State Judicial Office is currently vacant and detailed information regarding this item is not available. This will be provided in the 4 th quarterly report.	
Item 14: Preserving connections	96% of case records address maintaining familial and cultural connections Baseline 95%.		Maintain baseline	Aug, 2004		Oct, 2005	June, 2004 – 93.6%	This is the third quarter that this measure has fallen below the baseline. The barrier appears to be identifying services that take into account the child/family cultural connections.	Discussion will occur between the State and the NRC for Family Centered Practice for T.A. in this area. It has been identified that 2 of the state's largest counties fall well below the baseline on this item.
		1. Family Service Plans, as well as services delivered, will take into account the child's cultural and family connections a. Rule change to clarify state policy and expectation. b. Agency letter distributed advising of rule change.	1a. rule change approved. 1b. agency letter distributed.	1a. Dec, 2003 1b. Jan, 2004		1a Jan, 2004 1b. Jan, 2004	Completed		ARD reviews to the community and cultural connections that are considered when providing services for children and families.

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		2. Statewide Caseworker Core and ongoing training will emphasize the importance of maintaining connections in all areas such as neighborhood, community, faith, family, friends, school, and sports activities a. Review and revise curricula as needed b. Begin delivery of revised curricula c. Assess training effectiveness via evaluation and/or supervisor survey.	2a. Review and revision. 2b. Training delivered. 2c Evaluation	2a. Dec, 2003 2b. Feb, 2004 & ongoing 2c. June, 2004 & ongoing	2b. Jan, 2004	2a. Dec, 2003		Data is currently unavailable. This will be provided in the 4 th quarterly report.	
Item 16: Relationship of child in care with parents	Refer to Goals for Items 13 and 17 as measures for this outcome. Item 13 goal addresses visitation and relationship with child in care and parents Item 17 address services and support to enhance relationship of child in care with parents.	1. State CPS expert consultants will provide case-specific technical assistance regarding visitation and family contact issues a. A document regarding consultant availability will be developed and sent to counties via a mass e-mail list of county staff. b. Document will be sent to e-mail list quarterly as a reminder of consultant availability. c. County use of consultants will be monitored. d. Outcomes and satisfaction results will be shared with counties.	1a. Doc and list completed. 1b. Mailing sent.	1b Dec, 2003 1c-d Jan, 2004 and ongoing	1a Sept, 2003	1. Jan, 2004	Sept 2003	The outcomes and satisfaction results report will be provided with the 4 th quarterly report.	
		2. Joint training will be provided for judges and child welfare staff to increase understanding children's developmental needs regarding visitation	2a. Curriculum developed 2b. Trainings started 2c Training completed	2a Oct, 2004 2b Oct, 2004 2c Oct 2005		2c Oct 2005		Curriculum will be provided in future report.	
		3. Caseworkers will be trained on the visitation rights of fathers. a. Coordinate efforts with Office of Self Sufficiency to provide training. b. Develop a training outline. c. Begin training delivery d. Prepare training proposal to continue training beyond June, 2004	3a. CW and CSE team formed. 3b. Outline completed. 3c. Training begins. 3d Proposal completed.	3a. Dec, 2003 3b. March, 2004 3c. June, 2004 3d Nov, 2003	3a. Dec, 2003 3d. Proposal submitted through CSE, 11/03			Proposals have not been funded. This is still planned, however, when funding comes available.	State Child Welfare is working with Annie E. Casey toward addressing the Fatherhood issue. The goals and activities of this initiative are attached.

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Outcome WB1: Families have enhanced capacity to provide for their children's needs.									
Item 17: Needs and services of child, parents, and foster parents.	<p>1a. 95% of the time, <u>mothers'</u> needs as related to the child will be addressed through services. (Baseline 93%)</p> <p>1b. 91% of the time, <u>fathers'</u> needs as related to the child will be addressed through services (Baseline 87%)</p> <p>1c. 95% of the time, <u>children's'</u> needs will be addressed through services. (Baseline 94.5%)</p>		<p>1a. Statewide county data will indicate that attainment of benchmark at 95%</p> <p>1b. Statewide county data will indicate that attainment of benchmark at 89%</p> <p>1c. Baseline maintained.</p>	Aug., 2004		Dec., 2005	<p>1a. June, 2004 – 96.8%</p> <p>1b. June, - 2004 – 95.3%</p> <p>1c. June – 96.3</p>	<p>1.a This is the third quarter that this measure has achieved the goal.</p> <p>1b. This is the third quarter that this measure has achieved the goal.</p> <p>1c. This is the first quarter that this measure has achieved the goal.</p>	
		<p>1. Core caseworker training will emphasize the link between adequate assessment and more successful outcomes for children and families; the value of the CAC instruments in use with families, in court reports, and in working with other professionals; and the importance of communication between protection, foster care, and adoption caseworkers regarding the assessment and resulting treatment plan and services.</p> <p>a. Review and revise curricula as needed</p> <p>b. Begin delivery of revised curricula</p> <p>c. Assess training effectiveness via evaluation and/or supervisor survey</p>	<p>1a. Review and revision</p> <p>1b. Training delivered</p> <p>1c. Evaluation</p>	1c. Jan, 2004 & ongoing	<p>1a July, 2003</p> <p>1b Sept 2003 & ongoing</p>	<p>1b Jan 2004</p> <p>1c Mar 2004</p>	1a. Dec 2003	Data is currently unavailable. This will be provided in the 4 th quarterly report.	
		<p>2. Counties will use the Child Protection Expert Consultants for case-specific assistance in identifying needs/services for child, parents, and foster parents.</p> <p>a. Reminder sent to counties regarding availability of consultants and process for requesting use of consultant.</p> <p>b. Monitor use of consultant by counties.</p> <p>c. Outcomes from consultant will be documented and advertised for counties.</p> <p>d. Counties will be kept informed of satisfaction rates of use of consultant.</p>	<p>2a. Reminder sent to Counties.</p> <p>2c/d Outcomes and satisfaction info sent to Counties.</p>	2c/d June, 2004	2a Sept, 2003	2. June, 2005	Sept 2003	A report of consultant usage will be provided with the 4 th quarterly report.	

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		3. County Department records will reflect the use of the Colorado Assessment Continuum in the planning and provision of services for families and children. a. State will provide t/a regarding use of the CAC upon county request.	3a T/A provided			3. June, 2005		A report on the provision of T.A. will be provided with the 4 th quarterly report.	
		4. Caseworkers will be trained on the visitation rights of fathers. a. Coordinate efforts with Office of Self Sufficiency to provide training. b. Develop a training outline. c. Begin training delivery d. Prepare training proposal to continue training beyond June, 2004	4a. CW and CSE team formed. 4b. Outline completed. 4c. Training begins. 4d Proposal completed.	4a. Dec, 2003 4b. March, 2004 4c. June, 2004 4d Nov, 2003	3a. Dec, 2003 3d. Proposal submitted through CSE, 11/03			See Item 16 #3	See Item 16 #3
		5. Develop a protocol for substance abuse screening, assessment, engagement and retention of families within CW, TANF and court systems. The protocol will become an MOU. a. Conduct needs assessment of AOD, CW and court constituents across state. b. NCSACW issues a monograph on screening, assessment, engagement, and retention. c. Convene regional meetings to share learnings. d. If second year of T/A is requested and approved, identify at least five pilot counties for implementation of protocol/MOU. e. Implementation and monitoring of pilot counties.	5a. Assessment conducted 5b. Monograph issued 5c. Regional meetings held. 5d. T/A approved and pilots identified 5e. Implementation and monitoring	5a. Jan, 2004 5b. Jan, 2004 5c. May, 2004 5d. Sept, 2004 5e. Jan, 2005		5. Jan, 2005		Pilot counties to receive the TA are being identified. The 4 th quarterly report will provide information as to which counties and a brief outline of the TA curriculum.	
		6. A measure will be developed to establish a baseline for foster parents needs being met. a. Question added to review instrument b. Baseline established c. Goal and improvement negotiated with RO	6a. Revision 6b. Baseline 6c. Goal approved	6a. Jan 2004 6b. May, 2004 6c. June 2004				In order to avoid a biased response, ARD and CW will continue to work with Steering Committee to find an impartial method of measuring this item.	
Item 18: Child and family involved in case planning.	97% of parents and children interviewed will be involved in case planning Baseline 96%.		Maintain baseline.	Aug, 2004	Mar., 2004 – 96.9%	Oct, 2005	June, 2004 99.2%	This is the first quarter that this measure has achieved the goal.	
		1. Family Involvement practices will be utilized. a. Denver and El Paso Counties will utilize TDM strategies to involve child and family in case planning. b. Strategies will be documented and shared with other counties.	1b. Report documenting strategies produced and distributed	1b. June, 2004	1a Jan, 2003			This information will be shared with expansion counties at TDM training in August, 2004. The information will be provided in the next quarterly report.	

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		2. Opportunities for training in Family Group Decision Making will be provided for County Departments statewide. a. Counties will be notified of resources available to attend FGDM conferences and trainings. b. County requests will be received and approved by State staff.	2a. Notification of county staff.		2a. Aug, 2003	2b. Jan 2005		The number of county staff and training provided will be provided with the next quarterly report.	
Item 19: Worker visits with child.	95% of monthly visits with the child will be face to face. Baseline 92% New Goal – 90% New Baseline 86.1%		94% of visits with the child will be face to face. New Benchmark 88%	Aug, 2004		Oct, 2005		The quarterly measure for this item has fallen by .05% to 5.9% below the baseline. A rule change will impact this item. More emphasis will be placed on visitation with children in home.	ARD began reviewing to face to face contact with children in their own homes in January, 2004.
		1. Volume 7 rule change that requires agency staff to have monthly face-to-face contact with the child in his/her home or in placement. a. Rule change to clarify state policy and expectation. b. Agency letter distributed advising of rule	1a. Rule approved. 1b. Agency letter sent.	1a. March, 2004 1b. April, 2004				The rule package has been shared with the Child Welfare Advisory Group and is being prepared for State Board presentation.	
		2. After rule change is implemented, CO will negotiate new baseline and goal with R.O.		2. July, 2004				Although the rule has not been officially changed, ARD has been reviewing to the proposed rule and baseline data has been established.	
		3. Statewide Caseworker Core Training will emphasize the purpose of visitation and effective strategies for workers to use in conducting visits with children. a. Review and revise curricula as needed b. Begin delivery of revised curricula c. Assess training effectiveness via evaluation and/or supervisor survey.	1a. Review and revision 1b. Training delivered 1c. Evaluation	3a. Dec, 2003 3b. April, 2004 & ongoing 3c. June, 2004 & ongoing		3a March 2004 3b. May, 2004 & ongoing 3c. July, 2004 & ongoing		Data is currently unavailable. This will be provided in the 4 th quarterly report.	
		4. State Child Welfare has added a new CPS Consultant to be available on case-specific situations to support increased effective communication and engagement with children and their parents. a. Information sent to counties regarding availability of consultant and process for requesting use of consultant. b. Monitor use of consultant by counties. c. Outcomes from consultant will be documented and advertised for counties. d. Counties will be kept informed of satisfaction rates of use of consultant.	4a. Reminder sent to Counties. 4c/d Outcomes and satisfaction info sent to Counties	4c/d Jan, 2004	4a. Sept, 2003		Sept 2003	A report of consultant usage will be provided with the 4 th quarterly report	

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Item 20: Worker visits with parent(s)	72% of the time, caseworker will meet face to face at least every other month with parent or guardian to whom the child will return. Baseline 68%		Statewide county data will indicate achievement of benchmark at 70%	Aug. 2004		Oct, 2005	June, 2004 – 83.5%	This is the third quarter that this measure has achieved the goal.	
		1. Volume 7 rule change that requires face-to-face contact by agency staff at least every other month with parents or guardian to whom child will return. Include expectations if the child is not to return to the parents or guardian. a. Rule change to clarify state policy and expectation. b. Agency letter distributed advising of rule change.	1a. Rule approved. 1b. Agency letter sent.	1a. March, 2004 1b. April, 2004				The rule package has been shared with the Child Welfare Advisory Group and is being prepared for State Board presentation.	
		2. After rule change is implemented, CO will negotiate new baseline and goal with R.O.		2. July, 2004				Although the rule has not been officially changed, ARD has been reviewing to the proposed rule and it appears that county practice continue to be much better than the current baseline and established goal.	
Outcome WB3: Children receive adequate services to meet their physical and mental health needs									
Item 22: Physical health of child	1. 86% of initial health assessments of children in foster care are done in a timely manner. Baseline 82% 2. 94% of children in foster care will have health needs identified and services provided Baseline 90%		1. 84% of initial health assessments will be done in a timely manner. 2. 94% of children in foster care will have health needs identified and services provided Baseline 90%	Aug, 2004	2. Mar., 2004 - 92.2%	Oct, 2005		1. 80.9% The quarterly measure for this item continues to be below the baseline of 82%. It has been identified that this is an area out of compliance in over half of the counties with County Specific PIPs. This will be discussed with them and action steps for improvement will be identified. 2. This item has fallen below the benchmark to 91.4%. Because of the decrease, this item will be addressed along with the above item for identification of TA needs.	

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		1. Statewide Core Training for foster parents will emphasize the importance of scheduling the child's health assessment and dental examination in a timely manner and documenting the dates which these occurred. <ul style="list-style-type: none"> a. Review and revise curricula as needed b. Begin delivery of revised curricula c. Assess training effectiveness via evaluation and/or supervisor survey. 	1a. Review and revision. 1b. Training delivered 1c. Evaluation	1b. Dec, 2003 & ongoing 1c. April 2004 & ongoing	1a. Sept 2003 1b. Dec, 2003		1a. Sept 2003 1b. Dec, 2003	Data is currently unavailable. This will be provided in the 4 th quarterly report.	
		2. State staff will develop an Agency Letter to encourage the use of an assessment continuum, reiterate the requirements regarding the initial health assessment, and timelines for on-going health and dental examinations.	2. Agency letter sent.	2. Nov, 2003	Nov, 2003		Nov, 2003	Completed	
		3. As a basis for information required in the child's case record, a state/county work group has been formed to revise the "Health Passport" to make it easier to use and understand <ul style="list-style-type: none"> a. Health Passport will be reviewed and revised. b. Passport will be sent to all counties 	3a. Passport revised. 3b. Passport sent to all counties.	3a. Dec, 2003 3b. Mar, 2004	Passport revised Passport sent to counties		Nov, 2003 Dec, 2003	Completed	
		4. Counties will receive current information on community health resources. Child Welfare, in conjunction with Health Care Policy and Finance, will work with community resources to make available to counties a list of EPSDT sites, community health agencies, and other options available to children in need of health care. <ul style="list-style-type: none"> a. List compiled. b. List distributed to all counties. 	4a. List compiled 4b. List sent to counties	4a. Oct 2004 4b. Nov, 2004				To be reported next quarter	
		5. ARD will develop a baseline of the number of children receiving in-home services who have medical needs identified in Assessment, Safety Plan, or Family Service Plan that are having their physical needs addressed through identified services. <ul style="list-style-type: none"> a. Review questions will be added to Q/A instrument b. Baseline will be established c. Goal will be negotiated with RO 	5a. Instrument modified. 5b. Baseline established 5c. Goal approval by RO	5a. Jan, 2004 5b. May, 2004 5c. June, 2004					ARD began reviewing to whether medical needs were identified and addressed for all cases, in January 2004. With the small numbers, 96.8% of the time this was happening..
Item 23: Mental health of the child	84% of children with identified mental health needs will have services provided Baseline 80%		82% of children with identified mental health needs will have services provided	Aug, 2004		Oct, 2005	June., 2004 – 96.1%	This is the third quarter that this measure has achieved the goal.	

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		1. Statewide Core training will emphasize the need for the use of NCFAS, CCAR and EPSDT in order to determine and document the need for initial and ongoing mental health services. a. Review and revise curriculum b. Deliver revised curriculum c. Assess training effectiveness via evaluation and/or supervisor survey.	1a. Review and revision. 1b. Training delivered. 1c. Evaluation	1a. Dec, 2003 1b March, 2004 & ongoing 1c. June, 2004 & ongoing	1a. Dec, 2003		1a. Dec, 2003	Data is currently unavailable. This will be provided in the 4 th quarterly report	
		2. Remind counties of the availability of the Child Protection Expert Consultant who specializes in children's mental health issues. a. A letter will be sent to county directors to inform counties of the availability and method to engage a CW consultant in regard to children's MH issues.	2a. Letter drafted and sent to all counties.	2a. Dec, 2003	Dec., 2003			A report of consultant usage will be provided with the 4 th quarterly report	
Systemic Factor 2: Case Review System									
Item 25: Provides a process that ensures that each child has a written case plan to be developed jointly with the child's parent(s) that includes the required provisions.		Refer to Item 18 to address action steps, methods of measurement, benchmarks and dates of achievement for this item.							
Item 27: Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.	88% of the 12-month permanency hearings are held in a timely manner. Baseline 84%		86% of the 12 month permanency hearings are held in a timely manner	Aug, 2004		Oct, 2005	Mar., 2004 – 89.8%	This is the second quarter that this measure has achieved the goal.	
		1. Caseworker Core and ongoing training will emphasize the timeframes of permanency planning and the Dependency and Neglect Court processes. a. Review and revise curriculum b. Deliver revised curriculum c. Assess training effectiveness via evaluation and/or supervisor survey.	1a. Review and revision 1b. Training delivered. 1c. Evaluation	1b. Nov, 2003 & ongoing 1c. March 2004 & ongoing	1a. Aug, 2003 1b. Nov, 2003		1a. Aug, 2003 1b. Nov, 2003	Data is currently unavailable. This will be provided in the 4 th quarterly report.	
		2. Judicial officers around the state will be trained regarding appropriate handling of the D&N cases (including timeframes, termination, appropriate development of treatment plans) a. Court Improvement will produce an interactive CD ROM presentation for dissemination to Court facilitators. b. This CD will be viewed under the guidance of the Court Facilitators in each judicial district	2a. CD Rom produced and disseminated. 2b Video viewing.	2a. April, 2004 2b. Dec 2004				The Court Improvement Grant position within the State Judicial Office is currently vacant and detailed information regarding this item is not available. This will be provided in the 4 th quarterly report.	

Outcomes Or Systemic Factors And Item(s) Contributing To Nonconformity	Goal/Negotiated Measure/Percent Of Improvement	Action Steps And (Agency Responsible)	Benchmarks Toward Achieving Goal	Benchmarks Dates of Achievement Goals <i>Projected</i>	Benchmarks Dates of Achievement Goals <i>Actual</i>	Date of Goal Achievement <i>Projected</i>	Date of Goal Achievement <i>Actual</i>	Barriers Or Discussion	Other PIP Related Activities
		<p>3. DYC youth will have a permanency hearing in a qualified court or administrative body no later than 12 months from the date the youth entered foster care</p> <p>a. Waiver submitted and denied b. Reconvene stakeholder group to outline options. c. Submit request for 04 legislation to legislative liaison d. Survey Judicial for workload and fiscal impact. e. Executive director provided information and makes decision on option to pursue f. Paper submitted to Fed Office for approval. g. Legislative change. h. Rule change i. Compliance with Fed requirement of separation.</p>	<p>3b. Workgroup will form and begin meeting. 3c. Request submitted 3d. Survey sent 3e Option chosen 3f Paper submitted/approved 3g. Legislative change 3h Rule change 3i Move of ARD or PH Function 3h. Move of ARD division or PH function.</p>	<p>3b. July, 2003 3c. July 2003 3e. Nov 2003 3f. Nov 2003 3g June 2004 3h June 2005 3i. Oct 2005</p>	<p>3a. May, 2003 3b Aug 2003 3c. July 2003 3d. Aug, 2003</p>				There is still no resolution to this issue. The workgroup will reconvene to discuss further recommendations.
Item 28: Provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act.	75% of children who have been in FC 15/22 will either have a TPR filed or compelling reasons documented. Baseline 25%		50% of children who have been in FC 15/22 will either have a TPR filed or compelling reasons documented.	Aug, 2004	June, . 2004 – 58.8%	Oct, 2005		This is the second quarter that this item has achieved the benchmark.	
		<p>1. Data entry requiring TPR according to ASFA guidelines is incomplete.</p> <p>a. CW will request a Trails revision to require entry of TPR-related fields. b. Required Fields Document will be amended to incorporate changes. c. Counties will be advised of requirements change. d. ARD will revise oversight process to address this issue</p>	<p>1a. Request made 1b. Doc. amended 1c. Counties advised 1d ARD monitoring</p>	<p>1a. Jan, 2004 1b Jan, 2004 1c. Feb, 2004 1d. Jan 2004 and ongoing</p>				The Trails field was made a requirement, counties were advised of the change and ARD is monitoring to whether there is a motion for TPR or compelling reason documented.	
		2.. Refer to Action Step 1 in Item 10 regarding permanency (including TPR) for adolescents.							
		3. Refer to Action Step 2 in Item 27 regarding Judicial training focused on the appropriate handling of D&N cases, including TPR).							

Outcomes Or Systemic Factors And Item(s) Contributing To Nonconformity	Goal/Negotiated Measure/Percent Of Improvement	Action Steps And (Agency Responsible)	<u>Benchmarks</u> Toward Achieving Goal	<u>Benchmarks</u> Dates of Achievement Goals <i>Projected</i>	<u>Benchmarks</u> Dates of Achievement Goals <i>Actual</i>	Date of Goal Achievement <i>Projected</i>	Date of Goal Achievement <i>Actual</i>	Barriers Or Discussion	Other PIP Related Activities
		4. Project Uplift will coordinate with the Court Improvement Project to change the Supreme Court Rule for Procedural Timeframes for Dependency and Neglect cases being heard for appeal. <ul style="list-style-type: none"> a. Language for proposed change will be written b. Meeting with Court of Appeals c. Statewide symposium to present rule change d. Present rule change to Appellate Rules Committee e. Incorporate public comment f. Supreme Ct. Approval 	4a. Language written 4b. Mt. with Appeals Ct. 4c. Symposium 4d. Rules to committee 4e. Public comment 4f. Approval	4c. Feb, 2004 4d. April, 2004 4e. April, 2004 4f. May, 2004	4a. July, 2003 4b July, 2003	4a. February 2004 (Language for the rule change cannot be completed until the symposium has occurred. It is there that stakeholder investment will be developed	4b. Frequent contact throughout the development of the symposia maintained with the Chief Judge at the COA. Physical meeting occurred December 15, 2003	The Court Improvement Grant position within the State Judicial Office is currently vacant and detailed information regarding this item is not available. This will be provided in the 4 th quarterly report.	



A Guide for Colorado Foster Parents Regarding Allegations of Child Abuse/Neglect

Colorado Department of Human Services
Foster Parent Association

1575 Sherman Street
Denver, Colorado 80203
303-866-5932

Colorado State

7651 W. 41st Avenue #90
Wheat Ridge, Colorado 80033
303-463-7989
800-426-3281



Acknowledgements

A Special Thank You to the Iowa Foster and Adoptive Parents Association and the Iowa Department of Human Services for their work in developing the Iowa Child Abuse Assessment to assist foster parents during investigations of allegations of abuse and neglect; and for allowing the Colorado Department of Human Services and the Colorado State Foster Parent Association to adapt the guide to assist Colorado's foster parents to understand the investigation/assessment process.

To learn about fostering and adopting



www.changealifeforever.com
1-866-229-7605

List your important contacts here

Name

Agency

Phone Number

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Appendix I – Colorado’s Guide for Investigating Abuse and Neglect in Out of Home Child Care Settings (Stage I and Stage II Definitions)

Appendix II - Excerpt from Colorado’s Guide....(investigations)

Appendix III - Reporting Procedures contained in 19-3-307, C.R.S.

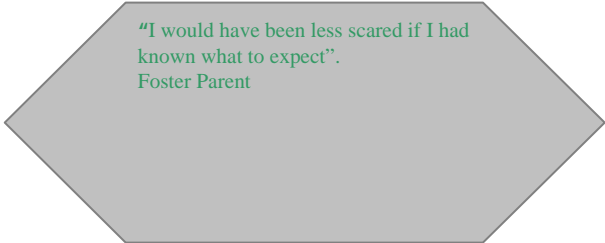
Appendix IV – Investigation rules contained in CDHS Staff Manual Volume 7

Appendix V – Colorado’s Statutory Definition of Child Abuse & Neglect

Introduction

Foster parents who have an abuse allegation made about them and an assessment/investigation completed should consider that:

- **YOU ARE NOT ALONE**



"I would have been less scared if I had known what to expect".
Foster Parent

- **Foster parent pre-service training covers the likelihood of abuse allegations, but most families think it won't happen to them**
- **Just because an allegation has been made, the county department DOES NOT assume that abuse/neglect occurred**
- **This may be a difficult time for you and may cause disruption within your family**
- **You will likely have feelings like fear, embarrassment, shock and anger**
- **You'll want to know what you should do**

Colorado

- **In 2002, there were 244 abuse investigations conducted in family foster care homes with the care provider as the alleged person responsible for the abuse. Of these, 51 cases or 20.9% were substantiated.**
- **In 2003, there were 286 abuse investigations conducted in family foster care homes. Of these, 43 cases or 15% were substantiated.**
- **In general 47.5% of all institutional abuse investigations are conducted in family foster care homes.**

Abuse does happen in foster care. Foster parents are certified (or go through a certification process), and they are at high risk for abuse allegations because:

- **Foster families are held to a higher standard than biological families**
- **Foster families are more closely monitored than the general public**
- **Foster families may have more children than they can handle or accept children who are a poor match with members of the foster family**
- **Children in placement are more likely to exhibit difficult behavior that can increase stress levels**
- **Foster parents may lack adequate training in discipline and behavior management**
- **The ability to adequately supervise children may be questioned when a foster child is physically abusive or acts out sexually**
- **Biological parents of children in placement MAY make false reports**
- **Foster children MAY make false reports**

The purpose of this guide is to:

- **Answer your questions**
- **Provide an overview of the assessment process as it affects foster parents**
- **Identify ways to protect yourself during the assessment process**
- **Tell you where to go for information, assistance, or support**

Note: foster parents are at increased risk for abuse allegations. That does not mean that abuse does not occur.

What is child abuse or neglect?

These things are considered child abuse or neglect:

- **Physical injuries, such as bruises, broken bones, and burns**
- **Children who do not get enough food, clothing, shelter, medical care or supervision**
- **Unlawful sexual behavior with a child**
- **Emotional abuse that harms a child's intellectual or psychological functioning**
- **Other actions that endanger the health or safety of a child**

What is a child abuse/neglect investigation/assessment?

When allegation of abuse or neglect is made then an investigation needs to occur.

“Investigation/Assessment”, commonly called a Stage I Investigation, means the process by which the county department of human services carries out its legal mandate to:

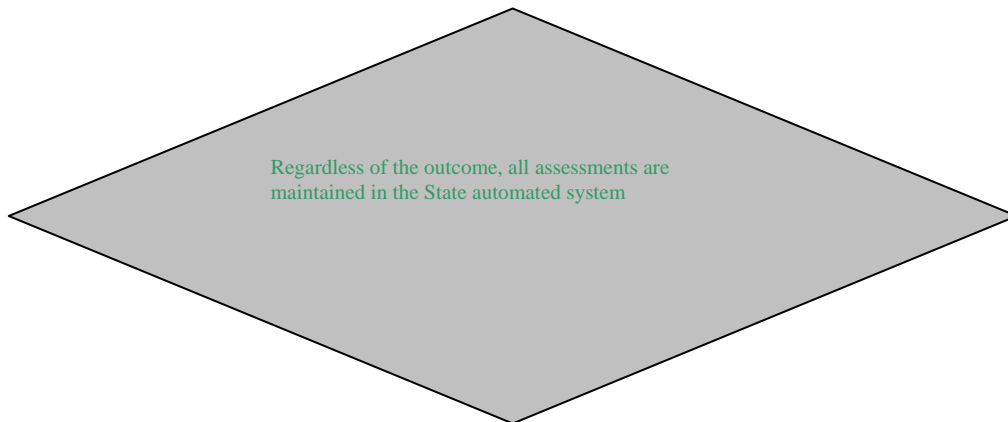
- **Address the safety of the child**
- **Determine if child abuse/neglect has occurred**
- **Evaluate the foster family functioning and engage the family in appropriate services to enhance family strengths and meet identified needs in a culturally sensitive manner**

The assessment includes:

- **An investigation of the allegations**
- **Assessing the family’s strengths and needs and the family situation**

The investigator must determine:

- **The immediate safety of the child/ren**
- **Whether the incident occurred independent of extenuating circumstances**
- **Whether the perpetrator(s) is culpable and in what manner.**
Stage I of the investigation is the responsibility of the county department of social services.



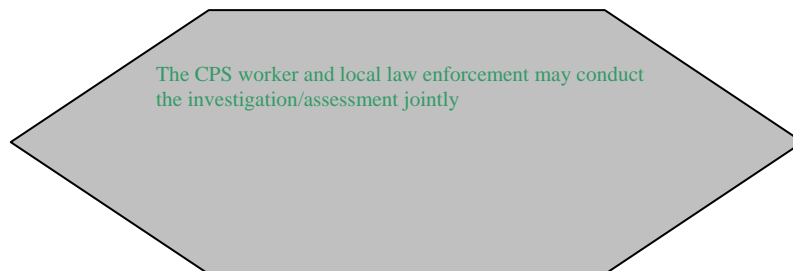
Who should I expect to see?

Through the course of the investigation/assessment, you should expect to have contact with:

- **The county department of human/social services (DHS/DSS) Child Protective Services Worker (CPS)**
- **The child's caseworker**
- **Your foster home certification/resource worker later in the process**

You might have contact with:

- **A physician or mental health practitioner**
- **Law enforcement – in some cases the investigation with DHS/DSS is conducted jointly**
- **A guardian ad litem (GAL)**
- **A CASA (Court Appointed Special Advocate). If involved, a CASA:**
 - **Has access to the information**
 - **Is an advocate for the child**



Who should I talk to?

- **It is important to remember that foster parents should not conduct their own interview or question the child (children) because it contaminates the process**
- **Cooperate with the CPS Worker to ensure that she/he has a complete understanding of the situation. Failure to cooperate may result in a presumption of culpability or an adverse licensing action.**
- **You may ask to have a support person with you when you are interviewed, but they cannot participate in this investigation/assessment**
- **The people listed on the previous page may contact you during the investigation/assessment**
- **You may wish to consult with an attorney. See the section on “Do I need an attorney?” for more information on legal representation.**

**The foster parent should not
conduct their own interview or
question the child**

What information will be collected from me?

It is the CPS Worker's responsibility to find out all she/he can about the situation. Law enforcement may conduct a joint investigation with the CPS Worker. The CPS Worker will collect the following types of information:

- **A description of the alleged incident**
- **Identification of the person responsible for the alleged incident**
- **Identification of all residents/caregivers in the home.**
- **A complete description of any injuries to the child, which may include asking a physician to help determine the severity of the injuries**
- **A description of the child and other children in the household**
- **Interview and observation of the child and other children outside of your presence in the household as appropriate**
- **An evaluation including interviews of the safety of the alleged child and other children in the household**
- **A description of the home environment**
- **A description of the social climate and environment**
- **A description of the family's strengths and needs**

Some of these, especially the descriptions, can be very in-depth. Be prepared for a lot of questions! Detailed information that is collected is used to ascertain the capacity of the care provider. This information would be collected for any care provider. This information is used to assist in confirming or refuting the allegation and may include:

- **Actions that resulted in previous reports of abuse**
- **Disciplinary techniques and strategies**
- **Ability and understanding of the need to supervise a child**
- **Emotional care and nurturing behavior**
- **Interest in protecting child from danger**
- **Mental health**

- **Physical health**
- **Criminal history**
- **Motivation**
- **Knowledge of social, emotional, and behavioral development**
- **Intellectual functioning**
- **Recognition of strengths and needs**
- **Attitude toward the assessment process**
- **Financial status**
- **Work history**
- **Family history**
- **Support systems**
- **Work with the child's therapist and/or therapist directed techniques**

Detailed information is used to ascertain the capacity of the care provider and is used to confirm or refute the allegations

The CPS Worker may need to talk to:

- **Other people who know you or the child and something about the situation (Examples include therapists and daycare providers)**
- **Doctors or other medical personnel**
- **School personnel**

Certification/resource workers and placement workers may be consulted. Their primary responsibility is to protect the child.

- **To avoid feelings of betrayal, know your certification agency's policy about staff support during investigations/assessments in foster homes. Generally the agency prohibits discussion about the alleged incident to avoid interference of the process. Support may be provided in other ways.**



What is the investigation/assessment process?

- **A verbal or written report can be made by anyone to the county department**
- **Investigation/assessment occurs if:**
 - **There is an allegation of abuse/neglect to the child**
 - **Abuse is an act, or**
 - **Failure to act (omission) of someone who is responsible for taking care of a child**
 - **The allegations meet the definition of abuse or neglect (refer to pp 8-9 for the legal definition)**
- **Time frame:**
 - **The CPS Worker must initiate an investigation within 24 hours in order to assure the safety of the child.**
 - **The assessment must be completed within 60 calendar days and sent to the Colorado Department of Human Services Institutional Abuse Team for review.**
- **The certifying agency may review your compliance with foster home certification rules even if the report is not accepted for an investigation/assessment. This may occur when children's safety and well being is impacted due to certification violations**

If a report is made but is not accepted for an assessment, the information may be forwarded to the foster care certification worker for foster care rule violations. Example – foster parents who spank foster children but there is no physical injury

What is the investigation/assessment process (continued)?

The CPS Worker will gather information to learn about your family and the child. See the section on “What information will be collected about me?”

Outcome of investigation

The CPS Worker will consider the information that is gathered and consult with her/his supervisor to make a finding/disposition. Findings will be reported to the States automated system and may be:

- **Confirmed, which means that a preponderance (at least 51%) of evidence indicates the alleged abuse occurred**
- **Reports that are not confirmed will have a finding/disposition of inconclusive, unsubstantiated, not confirmed, or unfounded**

Plan or Recommendations for Action

The CPS Worker will recommend a plan of action for the foster home and/or agency, based upon the information that was gathered, which may include:

- **A statement that no further action is recommended**
- **A referral to the certifying agency due to rule violations for the development of a corrective action plan**
 - **For CPA foster homes, a referral is made to the CDHS for a Stage II Investigation (see glossary)**
 - **For county foster homes, a referral is made to the county to conduct a Stage II follow-up investigation**
- **A recommendation that services/training be provided to the foster family**

The certifying agency receives a copy of the report. The agency will discuss the findings and recommendations with you. The foster care certification worker will make a recommendation to retain or revoke the foster home certificate.

What is Records and Reports?

- **Allegations of Child Abuse/Neglect (C/A/N)are investigated by the county department of human services where the alleged victim resides. The investigating worker will always do a records check to determine if there have been any previous contacts/allegations related to the current alleged perpetrator. If a worker reaches the conclusion that an allegation is more likely true than not true, the allegation will be "confirmed", "substantiated", or "founded". All of these terms are used by various counties/workers and they all mean the same thing.**

Note: of ALL the allegations that are made to county departments, approximately 20% are confirmed/founded/substantiated. That means that 4 out of 5 allegations are NOT.

- **If an individual wants to become a licensed child care provider, foster parent, or adoptive parent and there is a *confirmed* allegation against them in the State's automated system, that information would be released to the certifying or licensing entity. The information given would be limited to date of incident, severity and type of incident; i.e. "medium lack of supervision".**
- **Individuals who want to work in licensed facilities that provide services to children are also required to be screened against the State's automated database.**
- **There is no statute or rule that says an individual who has been "confirmed" cannot be licensed or certified, but it would be cause for further scrutiny. If an allegation is considered "unfounded", "unsubstantiated", or "unconfirmed", no information regarding that investigation would be released.**
- **Anyone who has been confirmed as being responsible for an incident of abuse/neglect has the right to appeal that finding. The county departments are required to notify individuals of confirmed findings by letter. That letter will also describe how to initiate an appeal.**

What are my rights?

- **You have the right to be informed of the allegation made against you. The county department is not authorized to disclose who made the allegation**
- **You have the right to be interviewed and provide your information about the incident being investigated**
- **You DO NOT have the right to deny the investigator(s) access to the foster child**
- **Since foster children are in the custody of the county department, the department has the right to make the determination whether or not to keep foster children in your care during the investigation/assessment**
- **You have the right to request to have another person present during the interview. The request may be denied.**
- **You have a right to have an attorney represent you**
- **If confirmed, the county department will provide notice of confirmation of report (from the State automated system)**
- **You may ask to receive a copy of the investigation/assessment from the certifying agency**
- **You have the right to appeal ANY decision to confirm you as a person responsible for abuse/neglect (PRAN)**
- **If access to the home is denied, then the investigator(s) must get a court order**
- **You have the right to due process throughout the investigation. Due process means that the CPS Worker and all others involved follow procedure during an investigation**

How can I protect myself prior to an allegation?

Preparation:

- **Develop a crisis plan with your certifying agency before the crisis**
- **Recognize your own personal limits. Learn to say no. Learn to ask for support, respite, help, etc. Know which children that you are best matched with.**
- **Assess potential risks around your home, such as environmental, appropriate supervision, etc.**
- **Avoid any activity that could put a child at risk or harm**
- **Carefully consider potential placement for their impact on other foster children and other family members. Do not accept placements that raise concerns for you.**
- **Don't wait until there is a crisis to report concerns to workers or ask for help. Be persistent!!**
- **Plan for and use respite care to prevent stress build-up**
- **Establish household expectations regarding privacy**

Document, Document,
Document!!!

Documentation

- **Documentation needs to be done regularly and consistently**
- **Documentation must be factual and use professional language. Avoid emotions and opinions. Just the Facts!!**
- **Foster parents are required to maintain monthly reports at a minimum and encouraged to maintain routine documentation**

Training:

- **Carefully select training that you will benefit from**
- **Attend as much training as you can rather than only meeting minimal requirements**
- **Ask your resource/certification worker for assistance in receiving training resources for unmet training needs that you have, such as defensive parenting**

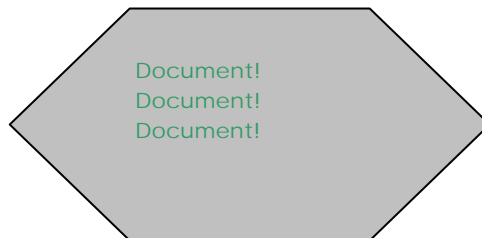
Support:

- **Join a foster parent support group, a local foster parent association, and/or the Colorado State Foster Parent Association (CSFPA). Call for support.**
- **Cultivate a good relationship with your caseworker, GAL, etc.**
- **Seek or access professional services and supports**



How can I protect myself after an allegation has been made?

- **Try to stay calm and organized**
- **Always respect confidentiality when you talk to others**
- **Know your rights**
- **Be cooperative, respectful, and courteous**
- **Give full and complete information about the situation**
- **Document interactions, including the times and dates that you talked to the CPS Worker, and what you talked about. Use this booklet to record your contacts**
- **Document what questions you ask, and the responses you receive to those questions**
- **You might want to consult/hire an attorney**
- **Call the Colorado State Foster Parent Association (CSFPA) for information. The toll free number is 800-426-3281, or locally it is 303-463-7989.**
- **Call a local foster parent association or support group**



Do I need an attorney?

- **Hiring an attorney is not required, although at any point you may choose to do so**
- **You must assume all costs for your legal representation**
- **An attorney could help you to understand the laws and your rights**
- **An attorney could help advocate for you and can be included in any proceeding at your request**
- **An attorney can help you plan during this highly emotional time**
- **Remember, the following people DO NOT represent you:**
 - **The child's guardian ad litem (GAL)**
 - **The county attorney**
 - **The CASA worker**

Will my foster children/biological children stay with me?

It is common to move the foster child during an assessment/investigation regarding safety and well being. The following considerations will have to be made by the CPS Worker and Supervisor:

- **The CPS Worker will make a determination of risk of all children in the home – foster children and your own children**
- **The law requires DHS to move foster children whenever it is in that child’s “best interests” to do so**
- **Removing the foster child does not mean there will be a finding that the alleged abuse has occurred – it is often a precautionary measure during the assessment/investigation**

Removing a child can protect the foster parent in the following way:

- **You won’t be accused of tampering with the child’s recounting the incident**
- **The time away can serve as a cooling off period**
- **It prevents retaliation against the child(ren) making the allegation**

Your biological children may be removed in extreme circumstances:

- **Where there is evidence of abuse/neglect and they are determined to be at imminent risk if they remain in your care**

You are guardian to your biological and adopted children, and have the legal rights and protections that any parents have.

Conclusion Of The Investigation/Assessment: What does this mean for me as a foster parent?

- **The certifying agency will be notified of the specific allegations and findings**
- **The child's foster care worker will be involved in decision making regarding care and placement of the child**
- **Foster children may or may not be removed (see previous section)**
- **Confirmed abuse does not necessarily mean your foster care certificate will be revoked**
- **You may receive a notice from the certifying agency regarding your certification status**
- **Certification decisions and child abuse decisions that are appealed must be done separately and within each required time frames**
- **Even if the outcome of the assessment is "not confirmed" you may still need to address issues raised by your certification worker during the investigation**

Will there be court action?

- **The CPS Worker may recommend that a D&N be filed if your biological children are determined to have been abused or neglected**
- **If law enforcement conducts a criminal investigation, then they may recommend that charges be filed**

What will be done with the assessment report?

The assessment report will remain on the State automated system. These reports are maintained to alert about reoccurrences and identify patterns of behavior that may occur over time.

Who has access to the final report?

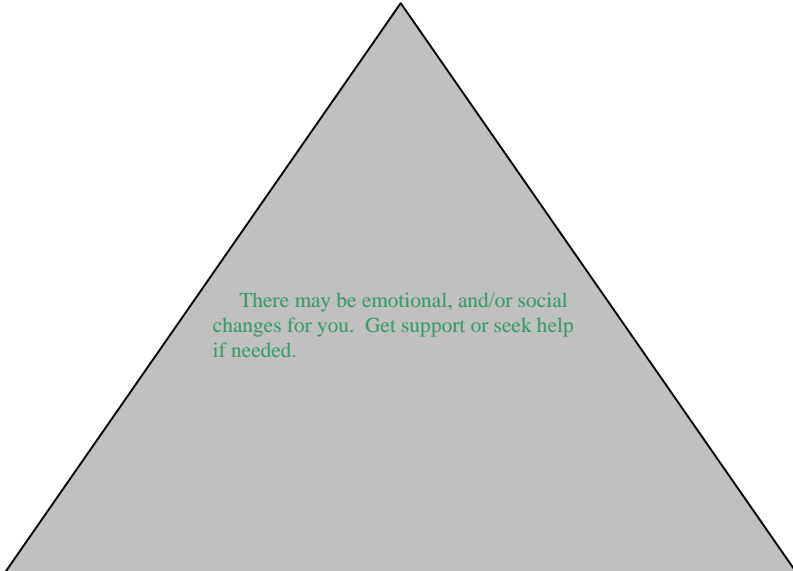
The following individuals must receive a written report by the investigating county within 60 calendar days after the initial receipt of the report (see Appendix IV):

- Custodial agencies including county departments and other states that have children placed in the foster home, and the appropriate divisions in the Colorado Department of Human Services

- **Licensing authority or certifying unit**
- **Parents/Legal Guardian(s) of alleged victims**

What other things could happen?

- **During the investigation changes may occur. There may be emotional and/or social changes. Anticipate this and seek the support of your certification agency, foster parent support group, and local/state foster parent associations.**
- **You may be required to accept a corrective action plan to maintain your foster care certificate**
- **Your certificate may be placed on probationary status for a period of time, or a decision to pursue revocation may occur**
- **The agency may decide not to place children in the home**



There may be emotional, and/or social changes for you. Get support or seek help if needed.

Where can I get support?

- **Be proactive, and know your certifying agency and county department's policies regarding support before an allegation happens**
- **The CSFPA has volunteers that provides information to foster parents in your situation. You may call 1-800-426-3281 or 303-463-7989 (locally).**
- **You can talk to your natural supports, like family members, religious officials, close friends, etc., ENSURE THAT YOU DO NOT VIOLATE CONFIDENTIALITY of the children you are serving. Be aware that if you talk to others, including other foster parents, confidential information on the foster child cannot be shared or you will be violating confidentiality laws**
 - **Remember that confidentiality includes such things as names, birthdates, place of residence, personal information, medical information**
- **An attorney can provide information about your choices and help you understand what is happening**

Sharing your feelings or talking about situations in your home is not a breach of confidentiality. Never share the child's name of specific identifying information about a child abuse assessment/investigation.

Resources:

- **Colorado State Foster Parent Association**
7651 West 41st Avenue, Suite #90
Wheat Ridge, CO 80033

- *Local foster parent association*

- *Call your certifying agency*

- Don't forget about resource/information that has been provided to you during training

Glossary:

A. Acronyms

1. **CDHS means the Colorado Department of Human Services. This agency provides oversight to the county and private agencies that provide foster care.**

2. **CSFPA means the Colorado State Foster Parent Association. This is a private agency that provides information, referral, support, and training to foster parents.**

3. **DHS/DSS/HHS**
DHS means Department of Human Services

**DSS means Department of Social Services
HHS means Health and Human Services
Each of Colorado’s county departments uses one of these titles**

- 4. PRAN means Person Responsible for Abuse/Neglect in the State automated system**

B. Terminology:

- 1. Abuse investigation/assessment (see Appendix II)**
- 2. CASA: “Court –Appointed Special Advocate” or “CASA volunteer” means a volunteer appointed by a court pursuant to statute to assist in advocacy for children**

Glossary: (continued)

- 3. “Confirmed” means any report made pursuant to statute that is found by a county department, law enforcement agency, or entity authorized to investigate institutional abuse to be supported by a preponderance of the evidence.**

4. Corrective Action Plan (see Appendix IV)

- 5. GAL: Guardian ad litem means a person appointed by a court to act in the best interests of a person whom the person appointed is representing in proceedings and who, if appointed to represent a person in a dependency and neglect proceeding shall be an attorney-at-law licensed to practice in Colorado.**

- 6. Institutional abuse: Means any case of abuse, as defined in 19-3-102 that occurs in any public or private facility in the state that provides child care out of the home, supervision, or maintenance. "Facility" includes, but is not limited to, family child care homes, foster care homes, and any other facility subject to the Colorado "Child Care Licensing Act" and described in section 26-6-102, C.R.S. "Institutional abuse" shall not include abuse that occurs in any public, private, or parochial school system, including any preschool operated in connection with said system; except that, to the extent the school system provides extended day services, abuse that occurs while such services are provided shall be institutional abuse.**

- 7. Institutional Abuse Team: Means the state team designated under 19-3-308, C.R.S. to review completed investigation/assessment reports regarding all 24 hour out of home care facilities. The team makes recommendations regarding findings and follow up of the reports.**
- 8. Mandatory Reporters of child abuse/neglect: Means that certain people including foster parents are mandated reporters per 19-3-107, C.R.S. This is also included in the foster care rules contained in 7.708.32: Where child abuse is suspected, the foster parent shall be alert for evidence of signs of abuse and report such evidence promptly to the county department of social/human services. A written report of any external signs of injury, such as bruising, scratching or swelling, shall be placed in the foster child's record. If there is any suspicion of abuse or illness, the foster child shall be seen by medical personnel immediately.**

Glossary: (continued)

- 9. Reporters of child abuse/neglect: Means any person who believes that a child has suffered abuse may make a report of the suspected abuse to the county DSS/DHS. Mandatory reporters are considered permissive reporters when they suspect abuse, but that suspicion is not based on their professional practice or work with the child or family. An example of this type of instance might be when a person who observes an infant left alone in a car with the windows closed on a very hot day. The person does not work directly with this child, but may act as a reporter and make a child abuse report.*

Appendixes

- Appendix I** **Colorado’s Guide for Investigating Abuse and Neglect in Out of Home Child Care Settings (Stage I and Stage II Definitions)**
- Appendix II** **Excerpt from Colorado’s Guide...(investigations)**
- Appendix III** **Reporting Procedures contained in 19-3-307, C.R.S.**
- Appendix IV** **Investigation rules contained in CDHS Staff Manual Volume 7**
- Appendix V** **What is child abuse or neglect**

Appendix I

Excerpt from Colorado's Guide for Investigating Abuse and Neglect...

INVESTIGATION PROCESS:

The investigation of abuse in an out-of-home child care setting is a two-stage process.

A. Stage I: The investigator must determine:

- 1. The immediate safety of the child/ren.**
- 2. Whether the incident occurred independent of extenuating circumstances.**
- 3. Whether the perpetrator(s) is culpable and in what manner.**

Stage I of the investigation is the responsibility of the county department of social services.

B. Stage II: The investigator must determine:

- 1. Whether the administrative authority is culpable.**
- 2. In what manner.**
- 3. If the problem is administratively redressable.**

Stage II is the responsibility of the licensing or certifying authority; see Appendix D, Licensing and Certifying Authority.

C. Overlap of responsibilities:

There may be an overlap in the Stage I and II investigation. Stage I investigators may make a determination that the administrative authority:

1. Is culpable.
2. That the problem is administratively redressable.
3. And, make recommendations to correct that problem.

For example, county staff might determine in the course of an investigation that the child was injured during physical restraint. Even though physical restraint is by policy utilized at the facility, the child care staff responsible for the incident had not been trained.

The worker should identify and address that issue as part of the Stage I investigation. The worker should also address any concerns regarding child care practices. Stage II investigators may further investigate to determine if there are additional problems at the facility.

Appendix II

Colorado's Guide for Investigating Abuse and Neglect in Out-of-Home Child Care Settings:

IDENTIFICATION AND REPORTING

A. Who should report known or suspected child abuse and/or neglect?

All persons responsible for and/or involved in the care and supervision of a child/ren in an out-of-home care setting are required to report abuse and/or neglect. Additional, 19-3-304 continues:

- (4) Any person who willfully violates the provisions of subsection (1) of this section:
 - a. Commits a class 3 misdemeanor and shall be punished as provided in section 1-3-501, C.R.S.;
 - b. Shall be liable for damages proximately caused thereby.

B. What should be reported to the county department of social services or law enforcement agency?

1. When will law enforcement get involved?
2. Will there be a joint investigation or will it be carried out independently. There must be a clear role differentiation between law enforcement officers and social service workers.

A LAW ENFORCEMENT INVESTIGATION REGARDING THE CRIMINAL ASPECT OF THE CASE DOES NOT RELIEVE THE DEPARTMENT OF ITS RESPONSIBILITY TO ASSESS THE SAFETY OF THE CHILD/REN

IN THE OUT-OF-HOME CARE SETTING IN WHICH THERE HAS BEEN AN ALLEGATION.

C. The investigation.

The worker must have the following essential information to make a determination:

a. Detailed description of the incident.

- (1) What were the circumstances surrounding the incident?**
- (2) What was the staffing pattern at the time of the incident?**
- (3) Who was present?**

b. Detailed description of injuries.

- (1) Medical assessment as to how they occurred.**
- (2) If the injuries were the result of physical management the worker should determine.**

a) If physical management was necessary – child danger to self, others or property; or

- (1) Could staff foreseen that the child’s reaction to a stressor might precipitate a crisis situation and taken preventive measures?**
- (2) Could professionally accepted techniques have been utilized by staff to de-escalate the situation so that physical management was not necessary?**
- (3) Was physical management used as punishment or discipline?**
- (4) Was the physical management done correctly and was the method used safe? INVESTIGATING WORKERS MUST KNOW PROPER RESTRAINT TECHNIQUES TO MAKE A DETERMINATION.**

b) If mechanical restraints were used:

- (1) Are mechanical restraints allowable in the facility on this child, are these specific devices allowable, and were the restraints utilized according to conditions set forth in regulations? The investigating worker should have access to and should thoroughly review regulations applicable to the facility. Regulations for residential child care facilities and day care are issued by the Colorado Department of Human Services.**

- (2) If psychotropic medication was used:**
- a) Who administered?**
 - b) Who authorized?**
 - c) What was the dosage?**
 - d) Was administration of the drugs allowable under conditions set forth by statute and regulations? The worker should review mental health laws and regulations regarding the use of psychotropic drugs. Children in residential care are often victims of inappropriate medication. Mental health laws should be reviewed and the worker should check with an independent psychiatric consultant (nurse or M.D.) or other knowledgeable medical professionals regarding dosage.**
- (3) If injuries occurred but were accidental, was there lack of supervision or other negligence?**
- (4) If seclusion is involved, where, how long and why was the child secluded?**

- 7. The interview with the alleged victim/s. See Appendix I, Interviewing Techniques.**
- a. The children should be interviewed in a setting which is as neutral as possible and where confidentiality can be maintained.**
 - b. The child/ren shall never be taken off the grounds for the interview unless the investigating county department of social services has court ordered custody.**
 - c. The alleged perpetrator(s) does not have the right and should never be allowed to be present during the interview with the child/ren.**
 - d. The County Department of Social Services can, if necessary, obtain a court order to access the child/ren if the facility refuses as defined in Appendix C, 19-3-308, (b),C.R.S., 2003.**
- 8. The worker should interview witnesses. The worker should determine if there are other victims not named in a report and**

assess the safety of those victims. Interviews should be conducted with those victims immediately.

- 9. Interview of the alleged perpetrator(s) should be conducted after the interview with the child/ren and witnesses. Workers should strongly consider a joint interview with law enforcement particularly if there is any possibility that criminal charges could be filed.**
 - 10. The transfer or suspension of the alleged perpetrator(s) should be assessed and discussed with the director of the facility. The director must make the final decision. Should the director decide against transfer or suspension of the alleged perpetrator(s) and the worker determines that the child(ren) are in jeopardy, removal of the child(ren) should be pursued.**
- D. Findings and determinations.**
- 1. An interview with the director or administrator of the facility should be conducted prior to leaving the site to:
 - a. Address any risk issues.**
 - b. Inform him/her regarding immediate findings.**
 - c. Inform him/her regarding the next steps in the investigation, and when he/she can expect Stage I of the investigation to be completed.****
 - 2. The Stage I investigator should make a determination whether the incident occurred independent of extenuating circumstances and whether the perpetrator is culpable and in what manner.**
 - 3. The Stage I investigator is responsible for entering the information in the State's automated system when there is credible evidence that abuse or neglect has occurred.**
 - 4. The facility director or administrator should be notified immediately by telephone and in writing of the findings of the Stage I investigation.**
 - 5. The licensing or certifying authority should be notified of the Findings of the Stage I investigation no later than five days after that investigation is completed. Any concerns regarding child care practice should be noted whether or not there is a finding of abuse and/or neglect. Appendix F, State I Investigation Summary form is to be utilized to summarize the findings. It is to be forwarded immediately to the appropriate licensing or certifying authority and the State Institutional Abuse Team.**

6. Counties notified regarding the investigation should be notified regarding the finding of the Stage I investigation.

STAGE II INVESTIGATION

The purpose of the Stage II investigation is to determine the administrative culpability of a facility where an alleged incident of abuse has occurred and to determine if problems identified through the investigation are administratively redressable and/or if negative licensing/certification action should occur.

The process utilized in Stage II is very similar to that utilized in Stage I but with a focus on the part which the facility, i.e., its administration, policies, procedures and practice, played in relation to the alleged abuse. Just as the process is similar so are the knowledge, skills and abilities required to conduct the investigation.

Stage II investigators require a heightened sense of awareness to the reactions of potentially punitive repercussions. Even though the Stage II investigation might be carried out simultaneously with Stage I, the purpose and focus of Stage II should be clearly delineated to facility administration and staff at the time the investigation is initiated.

- A. Persons who are charged with the responsibility for Stage II of the investigation must have applicable skills and knowledge. See Appendix G, Investigation Skills and Knowledge – Overview, Ohio Manual, section covering “Protection of Children in Institutional Care: A Guide for Public Health Service Workers”.
- B. Procedures.
 1. The county protective services worker should notify the licensing or certifying agency by phone immediately after a complaint has been filed.
 - a. In most cases this would be the State Department of Human Services.
 2. The Stage II investigator will receive a report from the Stage I Investigator within five days of completion of the Stage I investigation.
 3. The Stage II investigator should make a thorough review of the history and nature of any complaints involving that facility and the current written policy and procedures, program, and treatment modalities.
 4. The Stage II investigator should begin the on-site investigation promptly after the receipt of the report from the Stage I investigator.
 5. The investigator should evaluate the following:
 - a. Appropriateness of placements.
 - b. Appropriateness of treatment planning and practices.
 - c. Communication between the administrative supervisory staff

- with the child care staff and their content or method.
- d. **Communication between the child care staff and the content or method of communication.**
- e. **Interaction between the staff and the children.**
- f. **Appropriateness of disciplinary actions.**
- g. **Adequacy of the supervision of the children.**
- h. **Policies and procedures vs. actual practice.**
- i. **Hiring and screening practices.**
- j. **Orientation and training of the staff.**
- k. **Overall treatment program.**
- l. **Nutritional program.**
- m. **Physical condition of the facility as it relates to the incident. If there is a phone immediately available so that staff can call for backup; cleanliness, safety, repair and licensing violations. Investigators can make these determinations through interviews with administrators, child care and other staff, the Board if indicated, schools, mental health, agencies who have contact with the staff or residents, observation, and facility records and reports.**
- n. **Supervision of the staff.**
- 6. **The investigator should conduct an exit interview with Administrators to discuss any problems which require immediate attention and an overview of finds.**
- 7. **The investigator should prepare a corrective action plan and/or Recommend negative licensing or certification action and complete the Stage II Investigation Summary Report Sheet.**

CORRECTIVE ACTION

Corrective action planning, negotiations and monitoring will be completed by the Stage II investigator. Corrective action recommendations will be formulated and discussed with the facility administrator. A written Recommendation Agreement will be developed and signed by all parties to the agreement. The contents of the agreement are shown below:

- A. A clear statement of the problems based on the findings of the investigation and the investigator's assessment of causative factors of abuse and/or neglect of the child/ren.**
- B. Names and agency affiliation of person(s) responsible for carrying out the agreement.**
- C. Corrective action recommendations to address each identified problem area.**

- D. Problem solving objectives for each problem and corrective action recommendation.**
- E. Tasks for each problem solving objective**
- F. Tasks assignments, time frames, and resources.**
- G. A section itemizing the consequences for failure to carry out these tasks.**
- H. A plan for monitoring progress.**
 - 1. On site monitoring.**
 - 2. Progress reports for the facility**

Upon the completion of a final inspection, a letter of advisement will be sent to the facility and copies forwarded to all persons and agencies previously notified of findings of abuse or neglect investigations. The letter will indicate:

- A. The success or failure of the correction action plan.**
- B. The consequences of the investigation.**

Appendix III

Reporting Procedures Contained in 19-3-307, C.R.S.

(1) Reports of known or suspected child abuse or neglect made pursuant to this article shall be made immediately to the county department or the local law enforcement agency and shall be followed promptly by a written report prepared by those persons required to report. The county department shall submit a report of confirmed child abuse or neglect within sixty days of receipt of the report to the state department in a manner prescribed by the state department.

(2) Such reports, when possible, shall include the following information:

(a) The name, address, age, sex, and race of the child;

(b) The name and address of the person responsible for the suspected abuse or neglect;

(c) The nature and extent of the child's injuries, including any evidence of previous cases of known or suspected abuse or neglect of the child or the child's siblings;

(d) The names and addresses of the persons responsible for the suspected abuse or neglect, if known;

(e) The family composition;

(f) The source of the report and the name, address, and occupation of the person making the report;

(g) Any action taken by the reporting source;

(h) Any other information that the person making the report believes may be helpful in furthering the purposes of this part 3.

(2.5) Notwithstanding the requirements set forth in subsection (2) of this section, any officer or employee of a local department of health or state department of public health and environment who makes a report pursuant to section 25-1-122 (4) (d) or 25-4-1404 (1) (d), C.R.S., shall include only the information described in said sections.

(3) (a) A copy of the report of known or suspected child abuse or neglect shall be transmitted immediately by the county department to the district attorney's office and to the local law enforcement agency.

(b) When the county department reasonably believes a criminal act of abuse or neglect of a child in foster care has occurred, the county department shall transmit immediately a copy of the written report prepared by the county department in accordance with subsection (1) of this section to the district attorney's office and to the local law enforcement agency.

(4) A written report from persons or officials required by this part 3 to report known or suspected child abuse or neglect shall be admissible as evidence in any proceeding relating to child abuse, subject to the limitations of section 19-1-307.

Appendix IV

Investigation Rules Contained in CDHS Staff Manual Volume 7:

7.202.53 Institutional Abuse or Neglect Investigations

Institutional abuse or neglect investigations shall:

A. Include those reports of child abuse or neglect by staff in any private or public facility that provides out-of-home child care, including 24 hour care and child care homes and centers.

B. Not include abuse or neglect that occurs in public, private, and parochial schools and preschools operated in connection with those schools except when those schools provide extended day services and abuse or neglect occurs during that time. Those instances shall be considered as institutional abuse and investigated accordingly.

C. Be the responsibility of the county department of social services in which the facility named in the report is located.

D. Be conducted in those cases in which an allegation of abuse or neglect is made. A report of a minor injury resulting from physical restraint shall not, by itself, require a full investigation unless there are surrounding circumstances that would indicate abusive or neglectful behavior by the care provider. Such circumstances include those reports in which someone is specifically alleging the behavior to be abusive or those reports in which there has been a pattern of frequent injuries by the same caretaker or of similar incidents in the same facility.

E. Be conducted by a qualified and disinterested party in those situations in which the county department is the supervisory agency, such as for certified county foster and group homes. Such an investigation shall be arranged for by the responsible county department with either another county department, another agency within the community who accepts delegated responsibility, or a disinterested and qualified staff person within the county department.

F. Be initiated within 24 hours to determine the child/ren's safety. Children must be seen within 24 hours.

G. Include notification within one working day after receipt of the referral to the licensing authority or certifying unit regarding the receipt of a child maltreatment referral in an out-of-home or day care setting.

H. Include in the initial assessment as much of the following information as possible from the reporting party and records:

- 1. Name, address and present specific location of the alleged child/ren victim(s).**
- 2. Child/ren's age and the nature and extent of the injuries**
- 3. Time, date, location and witness(es) of the incident.**
- 4. Any indication that other children in the institution are or have been injured, abused, neglected, and if so, their names addresses and current location.**
- 5. Any other information which might be helpful in establishing the cause of the injury, abuse and/or neglect.**
- 6. Name, address and telephone number of the institution and whether there is an after-hours telephone number for the institution.**
- 7. Name and address of the agency holding legal custody of the child/ren.**
- 8. Name and address of the child/ren's parent(s)/guardian(s).**
- 9. Name, address and present location of the person(s) alleged to be responsible for an incident of child abuse or neglect. If the person(s) is a staff person(s), determine if the person(s) is still on duty or off duty. If the person(s) is another resident, determine where he/she is at the time you are obtaining this information.**
- 10. Determine if the institution has been apprised of the allegation and if so, what action(s) may have been taken by the institution, such as:**
 - a. Notification of the custodial county/agency.**
 - b. Notification of the parent(s) guardians.**
 - c. Separation of the victim(s) from the alleged person responsible for child abuse or neglect.**
 - d. Provision of medical treatment, and if no medical treatment has been provided whether in the reporter's opinion, an injury was sustained which would constitute a medical emergency.**
- 11. Both historical and current information regarding the child/ren, the facility and the person(s) responsible for the abuse or neglect.**

I. Be investigated in the following manner:

- 1. Interview alleged victim/s**
 - a. Child/ren shall be interviewed in a setting which is as neutral as possible and where confidentiality can be maintained.**
 - b. Child/ren shall not be taken off the grounds for the interview unless the county department of social services has court ordered custody or law enforcement has taken the child into protective custody.**

- c. Person(s) allegedly responsible for child abuse or neglect and other related parties (i.e., foster parents, spouse or other facility staff) shall not be allowed to be present during the interview with the child/ren.
 - d. The county department of social services shall, if necessary, obtain a court order to access the child/ren if the facility refuses access.
 - e. The investigating workers shall determine if there are other victims not named in the report and shall immediately assess the safety of those victims.
 - f. Names and addresses of any other alleged victims who may no longer be in the facility shall be obtained and interviewed, if appropriate.
- 2. Interview witnesses, including children and staff.
 - 3. Interview other facility staff who may have additional information.
 - 4. Interview the person(s) allegedly responsible for abuse or neglect after the child/ren and witnesses have been interviewed by either law enforcement or social services.
 - 5. Obtain a detailed description of the incident and of the injuries and an assessment of the appropriateness of physical management/restraint if this was involved.

J. Require notification of:

- 1. Custodial agencies, including county departments, other states, and appropriate divisions of the Department of Human Services.
 - a. Shall be notified immediately if there are safety issues or if an injury requires medical treatment.
 - b. Shall be notified following completion of investigation if the child in their custody was the subject of a report or if the investigation reveals concerns regarding the child care practices which could negatively impact their child.
- 2. Licensing authority/or certifying unit shall be notified the next working day if the investigation indicates there is an immediate threat to the child/ren's health, safety, or welfare.
- 3. Parents/Legal Guardians of alleged victim(s)
 - a. Shall be notified by the custodial counties when alleged abuse occurs in out-of-home care setting.
 - b. Shall be notified by the investigating county when there is no custodial county.
 - c. Shall be notified by investigating county when alleged abuse occurs in less than 24 hour child care with notification provided prior to an interview with child/ren, where possible.
 - d. Notification shall include that an investigation is being or has been conducted on a report of abuse and/or neglect, nature of the alleged abuse and the findings of the investigation.
 - e. If circumstances do not allow for direct contact, then notification of the allegations and findings shall be provided in writing.
- 4. Parents of uninvolved children in less than 24 hour licensed child care settings shall be advised in the initial stages of the investigation

by the investigating county that an investigation of abuse or neglect is being, or has been, conducted in their child/ren's child care setting and the nature of the alleged abuse. If circumstances do not allow for direct contact, then notification that an investigation was conducted shall be provided in writing.

5. Director of facility

- a. Shall be apprised of the allegation.
- b. Shall be advised regarding the results of the investigation and provided a verbal report immediately once a determination is made. If the county department is unable to make a determination regarding the person(s) allegedly responsible for child abuse or neglect, the director shall also be advised so that decisions regarding the continued employment of the employee can be made by the facility.

K. Require the submission of a written report by the investigating county within 60 calendar days after the initial receipt of the report of child abuse or neglect:

1. To the facility administrator/director and the agency with licensing/certifying authority.
2. To the Institutional Abuse Team when the incident involves a 24-hour care facility.
3. To the same custodial counties as required in Subsection J, 1, above.
4. Report shall include at a minimum the following information:
 - a. Name(s) of person(s) allegedly responsible for an incident of child abuse or neglect.
 - b. The child's name, age, and length of time he/she has been in placement.
 - c. The name of the facility and the county in which it is located.
 - d. The name of director/administrator.
 - e. The approximate number of children served.
 - f. The age range of children served and type of children served (e.g., child with developmental disabilities).
 - g. A summary of what the investigation involved, including a list of the individuals interviewed.
 - h. A summary of findings/conclusions and the information on which they are based.
 - i. A summary of the recommendations and/or need for an identified corrective or remedial action.

Appendix V

What is child abuse or neglect?

Colorado statute defines abuse/neglect in the following way:

19-1-103. Definitions. C.R.S.

"Abuse" or "child abuse or neglect" means an act or omission in one of the following categories that threatens the health or welfare of a child:

- **Any case in which a child exhibits evidence of skin bruising, bleeding, malnutrition, failure to thrive, burns, fracture of any bone, subdural hematoma, soft tissue swelling, or death and either: Such condition or death is not justifiably explained; the history given concerning such condition is at variance with the degree or type of such condition or death; or the circumstances indicate that such condition may not be the product of an accidental occurrence;**
- **Any case in which a child is subjected to unlawful sexual behavior as defined in section 16-22-102 (9), C.R.S.;**
- **Any case in which a child is a child in need of services because the child's parents, legal guardian, or custodian fails to take the same actions to provide adequate food, clothing, shelter, medical care, or supervision that a prudent parent would take.**
- **Any case in which a child is subjected to emotional abuse. "Emotional abuse" means an identifiable and substantial impairment of the child's intellectual or psychological functioning or development or a substantial risk of impairment of the child's intellectual or psychological functioning or development.**
- **Any case in which, in the presence of a child, or on the premises where a child is found, or where a child resides, a controlled substance, as defined in section 18-18-102 (5), C.R.S., is manufactured or attempted to be manufactured.**
- **In all cases, those investigating reports of child abuse shall take into account accepted child-rearing practices of the culture in which the**

child participates including, but not limited to, accepted work-related practices of agricultural communities.

What is child abuse or neglect (continued)?

**Any act or omission described in section 19-3-102 (1) (a), (1) (b), or (1) (c);
A child is neglected or dependent if:**

- **A parent, guardian, or legal custodian has abandoned the child or has subjected him or her to mistreatment or abuse or a parent, guardian, or legal custodian has suffered or allowed another to mistreat or abuse the child without taking lawful means to stop such mistreatment or abuse and prevent it from recurring;**
- **The child lacks proper parental care through the actions or omissions of the parent, guardian, or legal custodian;**
- **The child's environment is injurious to his or her welfare;**

Examples of neglect are:

- **A failure to protect a child**
- **Lack of supervision**

Notes

SAFETY, WELL-BEING AND PERMANENCY

We are all aware of the trauma that happens to children during an abuse/neglect investigation. We are also aware of the trauma that happens to the caregivers. In an attempt to alleviate that trauma during an allegation investigation, this booklet has been published.

This booklet is designed to be informative and supportive for caregivers in the care of children in out of home placement in Colorado. The situations that bring children into care set the stage for allegations of abuse and/or neglect. The children, their parents, teachers and any other concerned persons are aware of the heighten need for safety and well being. Hopefully, the information included, will assist all concerned persons that are involved in the investigation of any allegation of abuse and neglect and will help alleviate more damage that can occur to all parties during that investigation.

Bonnie McNulty
Colorado State Foster Parent Association

Chafee Program Data on Numbers Served FFY 99-03

Federal Fiscal Year	FFY 99-00	FFY 00-01	FFY 01-02	FFY 02-03	Increase/Decrease for # of Youth served 99-03
#Of Youth Eligible 14-21*****	2835	2589	4392	5550	96% increase in eligible population
# Of Youth Served by Chafee Program	862	1003	1127	1150	33% increase in #'s served by Chafee Program
# Of emancipated Youth served by Chafee Program 18-21	151	199	226	234	55% increase in emancipated youth served by Chafee Program
# Of youth closed to Chafee Program	417	441	533	642	
Educational Status at Closure	350	332	416	731	108% increase in youth participating in an Educational program at closure
Employment Status at Closure	291 employed	389 employed	260 employed	323 employed	11% increase in youth employed at closure of program
# Of Youth Employed While In the Program	484	432	204	680	40% increase of number of youth employed while in the program
# Of Youth Identifying a Support Person at Closure	348	354	458	462	33% increase in the number of youth identifying a support person at closure.

*****Include all youth with an open case for FFY's 99-03.

COLORADO CHILD WELFARE FATHERHOOD INITIATIVE

Goals:

- To better engage and support fathers and the paternal relatives of children involved in the child welfare system so they may better emotionally, socially and financially support their children.
- To increase visitation and involvement of non-custodial fathers and their side of the family
- To increase the number of fathers and paternal relatives who may become resources for children in out-of-home care and upon reunification
- To educate caseworkers, mothers, and others that family-centered practice means paying attention to moms and dads

Steering Committee Membership:

- Jude Liguori, Administrator, Denver Department of Human Services
- Dan Welch, Program Administrator, CDHS, Child Support
- Carol Wahlgern, Ongoing Child Protection, CDHS, Child Welfare
- Susan Ludwig, Child Protection Intake, CDHS, Child Welfare
- Charles Perez, Unit Manager, CDHS, Child Welfare
- Diane Skufca, Program Administrator, CDHS, Child Welfare
- Ken Sanders, Coordinator, El Paso DHS, Center on Fathering
- Ruth Glenn, Administrator, CDHS, Domestic Abuse Assistance Program
- Craig Hart, Director, Family Star Head Start Fatherhood Project
- David Powell, Program Administrator, CDHS, Office of Self-Sufficiency

Annie E. Casey Foundation Consultants:

Maurice Moore (Program Officer), Randy Jenkins, Joe Jones, Robert Johnson

Current Activities:

- ❑ October 1, 2004 Stakeholders Conference in conjunction with Fathers and Father Practitioners Conference
- ❑ Child Welfare Assessment Workgroup – to develop supplemental CW Assessment questions relevant to fathers and paternal family members
- ❑ Linkage of fatherhood practitioners and judiciary
- ❑ Linkage of fatherhood practitioners and child welfare policy makers
- ❑ Exploration of Family to Family team decision making as point of connection
- ❑ Developing collaboration with Institute for Families at the University of Denver to provide research support for the initiative
- ❑ Review of Diligent Search policy and protocols related to searching for paternal family