

# **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**

**July 1, 2005 through September 30, 2005  
Submitted November 21, 2005**

**PIP Report of Progress**  
**July 1 – September 30, 2005**

This is Colorado's eighth quarterly report of progress on the State Program Improvement Plan (PIP). This report will address the action steps and percentage goals that were out of compliance in the seventh quarterly report. The items and action steps where the goal has been attained or action step completed have been eliminated from this report.

**GOALS AND ACTION STEPS**

**Item 5, action step 3d - NCFAS Integrated into Trails:** Colorado requested that this action step be dropped. More information was requested of how caseworkers are currently using NCFAS data without having to enter it in TRAILS.

The North Carolina Family Assessment Scale (NCFAS) is one of three assessment tools in the Colorado Assessment Continuum (CAC) The other two assessment tools are the Colorado Safety Assessment/Plan and the Colorado Family Risk Assessment. Administering of the CAC is in rule and is required for all program area 5 cases accepted by the county department for ongoing services for which the permanency goal is reunification or maintenance of the child in his/her own home and where the department or its agent is working with the family system. It is optional for program area 4 and 6 (Youth in Conflict and special needs children).

In practice, a caseworker fills out the intake ratings during the first week to ten days of involvement with a family and puts it into Trails. The information needed to make the ratings is typically available within this timeframe because of the intense nature of the worker's involvement with the family. The caseworker then completes closure ratings within a few days of case closure while the memory of the family is still fresh, and closure ratings are most likely to be reliable and valid.

Action step 3d proposed to have the NCFAS-R scales - Caregiver/Child Ambivalence, Readiness for Reunification - incorporated into Trails. As was stated, this has not had a high priority with other "fixes" needed in the SACWIS system. The additions were intended to provide caseworkers with additional information about the family to support reunification. These scales are available to caseworkers to use voluntarily, and in about 25% of the cases, they are being used. Other Time-limited Reunification Services provided by the Promoting Safe and Stable Families Projects also assists caseworkers in making reunification decisions.

**Item 6 – Stability of Foster Care:** This item attempts to assure that the placement change children experience while in foster care is in line with their case plan. Colorado's goal is 76%. This has been consistently out of compliance for the past 2 years. The statewide performance for this item as of 9/30/05 is 64.6%. This represents performance from 4/1/05 through 9/30/05. The performance has held steady around 67% for the past 9 months.

The following new action steps were proposed and completed:

1. By September 1, 2005, the State Child Welfare Division Director will send to the County Directors of Human Services a letter of corrective action identifying county performance on items out of compliance by the county. The letter will request the county to identify the problem with regard to the specific item and ask that they propose action step(s) that will improve their performance on the specific items.
2. The county corrective action plans will be returned to the State by September 16, 2005.
3. By September 30, State Child Welfare Management will review the plans and provide feedback as to how the County's actions plans will have an impact on the item identified.

The 21 counties that were initially required to submit County Program Improvement Plans were provided with their county specific data regarding moves of children in foster care. The counties that were out of compliance on this item submitted a plan to be implemented immediately to address this issue locally.

- **Action step 5 – Best practices for recruitment, retention and support Shared statewide:** With the formation of the workgroups regarding receiving homes and the Structured Analysis Family Evaluation (SAFE) being formed, Colorado was requested to provide more information as to how the actual changes in practice have occurred as a result.

The meetings and trainings have resulted in receiving home rules, which were promulgated, that (1) decreased the number of children that are allowed in the homes and (2) increased requirements regarding provider training and competencies. As a result of feedback regarding inconsistent assessments and delays in time in receiving comprehensive assessments from within and outside of Colorado, (3) a workgroup was organized which recommended that SAFE be piloted for six months. Following the pilot, rules were promulgated which requires statewide implementation effective January 2006.

The groups provide an opportunity to discuss retention, recruitment strategies, training issues, local/regional concerns, and agency initiatives. This provides opportunity for replication. The groups engage in discussions about kin/foster parent and adoptive parent satisfaction and some approaches that are used ranging from simple courtesies to high-level events. The groups identify trends and issues. For example, the kin/foster care coordinator group identified a change in the profile of foster parents entering the system. More foster parents enter with the plan of adoption and short term fostering. Counties and private agencies must adjust their recruitment and training to incorporate the foster to adoption transition. Rural counties identified concerns regarding proximity and availability of training for foster parents to meet re-certification requirements. As a result, the State has purchased training for these counties in order to provide assistance.

- **Action step 6 – Technical Assistance Trainings from the National Resource Center for Family Centered Practice:** Colorado was requested to provide some information on what part of the curriculum of each of the “Visitation” and “Reunification with Substance Abusing Families” trainings actually addressed placement stability.

The overall purpose for both of these trainings is enhancing the likelihood of successful reunification – successful reunification with a child’s family being the most stable placement one could hope for as a case outcome.

Visitation Training – Children having permanency and stability in their living situations is one of the ASFA outcomes related to visitation. A decrease in the number of placements is one of the ASFA indicators related to visitation. Visitation was selected as a focus for several major trainings in 2005 because of the research-based findings that effective visitations are positively correlated with successful reunification. The entire visitation curriculum is thus geared toward how to create and maintain effective visitation in many types of child welfare cases that leads to the greatest likelihood for successful reunification. Successful reunification increases placement stability.

Reunification with Substance Abusing Families – The focus on reunification with substance abusing families was chosen because a high percentage of child welfare cases involve substance abuse as the primary or secondary reason children are in foster care. Again, as children are successfully reunified with their previously substance abusing parents, placement stability is increased.

**Item 9, action step 4 – ARD will establish a measure to determine effectiveness of county adoption efforts:**

This action step attempts to assure that an adoptive family has been identified for any child who is legally free for adoption. The goal is 81% and currently Colorado is performing at 79.1%. The 21 counties that were initially required to submit County Program Improvement Plans were provided with their county specific data regarding this item. The counties that were out of compliance on this item submitted a plan to be implemented immediately to address this issue locally.

**Item 10 – Other Planned Permanent Living Arrangement:** This item attempts to assure that diligent efforts are made to prepare youth for emancipation. Colorado’s goal is 93%. For the past several quarters the actual performance has hovered around 89%. An analysis of how this percentage is calculated has revealed why this continues to be out of compliance. State rule requires that any youth 16 and older must have an Independent Living (IL) Plan as part of their Case Plan no matter what their permanency goal. In some situations when a youth does not have Emancipation as a permanency goal, IL plans are not done. The counties that were out of compliance on this item submitted a plan to be implemented immediately to address this issue locally.

- **Action step 1e – A written document outlining the DCHS policy regarding permanency and use of OPPLA...will be drafted and shared:** Colorado was requested to provide information about the document re: Diligent Search/OPPLA Recommendations.

This document was formally shared with the Child Welfare Advisory Group. All counties present received the document that included representatives from the 10 largest counties and a few mid-sized counties. The best practices developed were the result of the work of the Child Placement Advisory Group that was composed of county staff, out-of-home placement providers, magistrates, representatives of education, CASA, and mental health. The workgroup was addressing several areas that could have peripheral impact on the Other Planned Permanent Living Arrangement Option. The document was provided only as recommendation to county departments.

- **Additional activities to support youth transitioning to independent living:**

The Speaking Out Video was used at the Educational Summit in June 2005 to raise awareness of youth in foster care and their needs (educational/support) as they emancipate from care. Those in attendance at the Summit included state staff, county staff and educators. On October 7, 2005, the Video was referenced at the Colorado State Foster Parent conference in a workshop on Youth Permanency. It will be shared at other events with foster and adoptive parents. Copies of the CD are also being distributed to county staff.

The Chafee Aftercare Youth Survey was completed to ensure that Chafee services are being provided to youth and to get information on the best way to direct services since IL had been an issue on the PIP.

Based on the results of the survey, the plan is to continue to raise awareness of the services available to youth who will emancipate from foster care and to continue to promote the fact that youth benefit more when services are started earlier than 16 years old. In order to achieve these goals, Chafee workers will receive the survey to share with their counties, foster parents and providers. Training on IL planning is also in the process of being scheduled (January-February 2006.)

**Item 14 – Preserving Connections:** This item attempts to assure that the Family Services Plan, and services provided, including foster placements, take into account the unique characteristics of the child and family. Colorado’s goal is 96%. For the past year, the state’s performance has been approximately 93%. The extensive statewide Technical Assistance provided by the National Resource Center for Family Centered Practice, emphasized an increased effort to preserve children’s connections to family, neighborhood, community, faith, and friends in the provision of services and when considering foster placement.

**Item 16, action step 3 – Visitation rights fathers:** Colorado was requested to provide more rationale for the new action steps to address fatherhood issues in Child Welfare.

Colorado’s CFSR Final Report (August 2002) reported “A key concern was a lack of agency effort to promote children's relationships with their fathers.”

The rationale for the expanded focus and training on fatherhood has many components:

1. The current Core Training for caseworkers is neither strong enough nor specific enough to address the importance of fathers in a child’s life.
2. The expanded training will not only address the importance of fathers to children, but address fathers needs to assist them to meet the responsibilities of fatherhood.
3. The training will address how the outreach to fathers expands the number of resources for the child.
4. The training will provide county personnel with information of community-based partners that focus on father support systems.
5. Another objective of the training is to coordinate the fatherhood initiatives across the Divisions of Colorado Works (TANF) and Child Support Enforcement. By taking a Departmental approach, the funding streams and services available to children can be coordinated.

Although Colorado continues to work on this issue, when data regarding the work with fathers was analyzed, the following was found:

1. For the past 12 months, approximately 98% of the time, the frequency of visitation with fathers adequately addresses the needs of the child to achieve the permanency goal. This measure evaluates the county department’s efforts to assure that this occurs.
2. For the past 12 months, approximately 94% of the time, the father’s needs, as related to the child, have been addressed through services.
3. For the past 12 months, approximately 95% of the time, the county made efforts to involve fathers in the case planning.

**Item 19 – Worker visits with the child:** This item attempts to assure that when the County Department has an open case, monthly face to face contacts occur with children in foster care as well as with children living in their homes. Colorado’s goal is 90%. For the past four quarters the actual performance has declined from 84.9% to 81.6%. An analysis of how this percentage is calculated has revealed why this continues to be out of compliance. The revision of the State rule now requires monthly face-to-face contact with children who live in their homes. The counties that were out of compliance on this item submitted a plan to be implemented immediately to address this issue locally.

**Item 22 – Physical health of the child:** This item attempts to assure children with open cases receive timely initial health and dental assessments and that their health needs are identified and services provided. Regarding initial assessments, an analysis of the data has found that 98.7% of the time, children not in foster care have their health and dental needs identified and services are provided. For children in foster care, the initial assessments hover around 80% (6% short of the state goal) and 90.3% of the time children in foster care have their health and dental needs identified and services are provided. This appears to be more of a systemic issue in that it appears many health professionals across the state have made it more difficult for children on Medicaid to receive timely assessments and on-going services. Getting the dental needs met is another area needing

improvement. Again, the identification of dentists who accept Medicaid will be an issue to be addressed systemically.

**Item 27 action step 3 – Permanency Hearings:** This action step assures that Division of Youth Correction (DYC) youth will have a permanency hearing in a qualified court or administrative body no longer than 12 months from the date the youth entered foster care. As of 10/24/05, DYC permanency hearings for DYC youth will occur before an Administrative Law Judge. The ALJs are housed in the Department of Personnel and Administration, Office of Administrative Courts.

## **AREAS FOR CONTINUED ANALYSIS**

**Training:** Through Colorado’s Program Improvement Plan the training curriculum for caseworkers as well as foster parent training was reviewed, and in some situations changed. Currently the State Child Welfare is working with the county departments and the State Training Division to assess the impact of the revised curriculum.

**Family to Family:** For many of the items out of compliance it was believed that the implementation of a Family-to-Family model would change practice and have a positive impact on outcomes. There has been much interest on the part of County Directors on the outcomes within the counties who have implemented the strategies of Community Partnerships; Recruitment, Training and Support of Foster Families; and Team Decision Making. A number of statewide outcomes with regard to Family-to-Family practice are being tracked. The State will analyze these outcomes to assess the impact of this practice.

**Foster Parent Survey:** The State has analyzed the data from the survey and will continue to make efforts to address these gaps both statewide and at the local level. Results of the survey will continue to be assessed on a yearly basis.

Colorado has completed the agreed upon and negotiated action steps for this Program Improvement Plan. The items above that continue to be out of compliance are currently being addressed. Further cause and effect analysis must be done to establish what practice will significantly impact the outcomes. The manner by which these items are being measured must also be examined to assure that what is being evaluated accurately depicts the practice.

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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 <u>Projected</u>	<u>Benchmarks</u> Dates of Achievement Goals <u>Actual</u>	Date of Goal Achievement <u>Projected</u>	Date of Goal Achievement <u>Actual</u>	Barriers Or Discussion	Other PIP Related Activities
Outcomes S1 Children are first and foremost protected from abuse and neglect									
Outcome S2 Children are safely maintained in their homes whenever possible and appropriate									
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		Re-entry rate will decrease to 18%	Aug, 2004		Oct, 2005	This Goal was achieved 9/31/04 and is currently at 16.4%		
		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 a. use of NCFAS-R will be expanded beyond the three	3a. Additional counties identified	3a. Jan, 2004			3a Completed		See Narrative on page 2.

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		pilot counties (Denver, Mesa, and Morgan) to assist with determining when it is safe/appropriate to return children/youth home. b. State will provide technical assistance with counties re: effective use of NCFAS-R. c. State will submit a request for the two new reunification domains to be integrated into Trails. d. NCFAS-R integrated into Trails.	3b. T/A started and ongoing  3c. Request submitted.  3d. NCFAS-R in trails	3b. Jan-2004		3b Nov, 2004	Dec 2004  3b Completed.. Nov 2004 3c Completed Oct 2003  3d.		
<b>Item 6: Stability of Foster Care</b>	<b>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.</b>		<b>Increase to 74%</b>	<b>Aug, 2004</b>		<b>Oct, 2005</b>	<b>Mar 2005 70.0% Jun 2005 67.1% Sep 2005 64.6%</b>	<b>9/30/05 This measure continues out of compliance</b>	<b>Three new actions steps proposed were completed 9/30/05.</b>
		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		Completed June 2004		See narrative on page 3
		6. Five TA trainings from the National Resource Center for Family Centered Practice and Permanency Planning are				September 2005	September, 2005 and ongoing		See narrative on page 3



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		scheduled for county staff as well as judicial staff to address visitation issues as well as how to assure that moves are in line with the case plan..							
<b>Item 9: Adoption</b>		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	4c Benchmark 78%, Goal 81% Approved by RO Jan 2005	Oct 2005	Mar, 2005 81.9% Jun, 2005 80.3% Sep 2005 79.1%	The measure has fallen below the goal, but remains above the benchmark.	See narrative on page 3.
<b>Item 10: Permanency goal of other planned permanent living arrangement.</b>	<b>2. 93% of the IL cases will reflect diligent efforts to prepare youth for emancipation</b>		<b>2. ARD report will indicate achievement of benchmark at 91%</b>	<b>Aug, 2004</b>		<b>Oct, 2005</b>	<b>Mar 2005 89.5% Jun 2005 90.4% Sep 2005 89.2%</b>	<b>2. 9/30/05 This measure continues out of compliance</b>	<b>See Narrative on Page 4.</b>
		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			1a Completed Jun 2004  1b Not needed		

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		c. State policies that have been identified as barriers will be reviewed and if possible revised to meet the outcome of maintaining permanency d. TA 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) 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	1c. State policy review.  1d. Training provided  1e. Doc produced and distributed. If appropriate, policy change initiated	1c. March, 2004  1d June, 2004  1e. July, 2004			1c Completed Dec 2004  1d Completed May 2004  1e	1e Policy change has not been initiated	1e. See narrative on page 4
<b>Outcome P2: The continuity of family relationships and connections is preserved for children.</b>									
<b>Item 14: Preserving connections</b>	<b>96% of case records address maintaining familial and cultural connections.</b>		<b>Maintain baseline</b>	<b>Aug, 2004</b>		<b>Oct, 2005</b>	<b>Mar 2005 93.9% Jun 2005 94.2% Sep 2005 93.2T</b>	<b>9/30/05 This measure continues out of compliance</b>	<b>See narrative on Page 4.</b>
<b>Item 16: Relationship of child in care with parents</b>	<b>Refer to Goals for Items 13 and 17 as measures for this outcome.</b>  <b>Item 13 goal addresses visitation and relationship</b>	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	3a Establish a Steering Committee to address Fatherhood Issues. The Committee will include participation from Child Welfare, Self Sufficiency, Child				3a Completed July 2004		See Narrative on beginning on Page 4. The actions steps were approved on 10/14/05

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	with child in care and parents  Item 17 address services and support to enhance relationship of child in care with parents.	d. Prepare training proposal to continue training beyond June, 2004	Support Enforcement, County Department, Local Fatherhood Service providers, Domestic Abuse and community partners 3b Convene a Fatherhood Summit to identify issues and create awareness of fatherhood assets. 3c Utilize Annie E. Casey Fatherhood Initiative to provide technical assistance across systems on fatherhood issues. 3d Utilize the Steering Comm. to identify funding for statewide training from the National Family Preservation Network.			3c Sep 2005  3d Sep 2005	3b Completed Oct 2004  3c Comp. May 2005  3d Comp. June 2005		
<b>Outcome WB1:</b> Families have enhanced capacity to provide for their children's needs.									
Item 19: Worker visits with child.	90% of monthly visits with the child will be face to face.		94% of visits with the child will be face to face	Aug, 2004		Oct, 2005	Mar 2005 83.9% June 2005 83.2% Sep 2005 81.6%	This measure continues to be out of compliance	See narrative on page 5.
<b>Outcome WB3:</b> Children receive adequate services to meet their physical and mental health needs									

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Item 22: Physical health of child	1. 86% of initial health assessments of children in foster care are done in a timely manner. 2. 94% of children in foster care will have health needs identified and services provided		1. 84% of initial health assessments will be done in a timely manner.  2. 92% of children in foster care will have health needs identified and services provided	Aug, 2004	2. Dec., 2003 - 92.3%	Oct, 2005	Mar 2005 80% June 2005 79.2% Sept 2005 79.2%  Mar 2005 89.6% June 2005 90.4% Sep 2005 90.3%	This measure continues to be out of compliance  This measure continues to be out of compliance	See narrative on page 5.
		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. 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		Completed June, 2004 Training is ongoing		
		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		Completed Nov, 2003		
		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 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		Completed Nov, 2003  Dec, 2003		

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		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. a. List compiled. b. List distributed to all counties.	4a. List compiled 4b. List sent to counties	4a. Oct 2004 4b. Nov, 2004			Completed August 2005		
		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. 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			Mar 2005 96.7% June 2005 96.4%  This is the 5 <sup>th</sup> quarter this measure is above 95%		
		6. Identify counties that are continuing to do well in this area and develop a process by which they can provide technical assistance for the rest of the state.				Counties identified by Sep 2005	Completed Sep 2005		Mesa and Montrose counties were identified and discussion was held in a Child Welfare Administrators Workgroup
		7. A new State Staff will be working with other program staff, divisions, and departments to consider strategies that will continue to improve upon medical services for children.				New staff will be hired by Sept. 2005			This program staff began working on 10/31/05

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Systemic Factor 2: Case Review System									
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 2005 88.9% June 2005 88.7 Sep 2005 88%	This is the sixth out of the past 7 quarters that this measure has been above the goal.	
		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 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.	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.	3b. July, 2003 3c. July 2003 3e. Nov 2003 3f. Nov 2003 3g June 2004 3h June 2005 3i. Oct 2005	3a. May, 2003 3b Aug 2003 3c. July 2003 3d. Aug, 2003		Completed 10/21/05	See Narrative on page 5.	

