Quarterly Results for Administrative Reviews Administrative Review Division

7/1/2012 - 6/30/2013

This report presents data collected by the Administrative Review Division (ARD) through the Out-of-Home Review process. The results are grouped by CFSR Outcome and Item.

There are several key components to fully understanding the report. First, any item which is Compliance related will have the question number displayed in **BOLD** font, while those that are Data oriented (i.e., collected in order to gather more systemic information) will be displayed in normal font.

Also, as the compliance level for achieving Substantial Conformity during the CFSR is now set at 95%, any item falling below this level will be highlighted by the following symbol:

After the end of each quarter, a new report containing the most recent quarter's data will be made available for all stakeholders on the Colorado Department of Human Services Portal.

First Quarter = July - September Second Quarter = October - December Third Quarter = January - March Fourth Quarter = April - June

Report created on: 7/18/2013

Quarterly Results for Administrative Reviews

Administrative Review Division

7/1/2012 - 6/30/2013

		1st Qu	uarter	SFY 20	<u>13</u>	2	2nd Q	uarter	SFY 20	<u>)13</u>	<u>3rc</u>	l Quart	er SF	Y 2013	<u>4t</u>	h Qua	rter SI	Y 2013	
		<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Y</u>	<u>′es</u>	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	<u>No</u>	N.	<u>A</u> %	Ye	s <u>No</u>	<u>N</u>	<u>4</u> %	
8558	If the youth is 16 years and older has the youth received a copy of all consumer credit reports annually?	0	0	2	0.0 %		0	0	46)	0	81		0	0 8	34	
8559	If the youth is 16 years and older and has a credit report with evidence of inaccuracies, has the Division of Youth Corrections referred the youth to ar approved agency to resolve the inaccuracies?	0	0	2	0.0 %		0	0	46)	0	81		1	0	33 100.0%	,]
8560	If the youth is 16 years and older and has a credit report with evidence of inaccuracies, is the Division of Youth Corrections making efforts to resolve the inaccuracies, or have the inaccuracies been addressed?	0	0	2	0.0 %		0	0	46)	0	81		1	0 8	33 100.0%	,]
Item 4:	utcome 2 Risk of Harm fety																		
8506	If any new allegations/incidents of abuse or neglect identified during the review period, were all of these reported/documented in Trails as new referrals?	16	2	70	88.9 % 🔥		22	0	74 10	00.0%		3	0	73 100.0%	1	9	1	95.0%	, <u> </u>
8507	If any new safety concerns were received regarding this client, were the safety needs of the client adequately addressed during the review period?	22	0	66	100.0 %		26	0	70 10	00.0%	20	6	0	55 100.0%	2	6	0	58 100.0%	3

(Check all No responses that apply)

Quarterly Results for Administrative Reviews

Administrative Review Division

		 -				2nd (Quarte	SFY 2	<u> 2013</u>	3rd	<u>Quarte</u>	r SFY	2013	4th C	<u>uarte</u>	SFY	2013
		Yes	No	<u>NA</u>	<u>%</u>	Yes	No	NA	<u>%</u>	Yes	No	NA	<u>%</u>	Yes	No	<u>NA</u>	<u>%</u>
Permane	ncy Outcome 1				_				_		' <u></u> '		_				_
Item 6: S	Stability of Foster Care Placements																
Cas	se Planning/Services																
8518	At the time of the review, is the client placed in the most appropriate setting to meet his/her individual needs? (Check all No responses that apply)	74	0	14	100.0 %	88	0	8	100.0%	69	0	12	2100.0%	78	0	6	100.0%
Per	rmanency																
8538	If the client experienced one or more moves during the review period, were all of the placement changes planned by the Division in an effort to achieve the client's case goals or to meet the needs of the client? (Check "Yes, in	20	17	51	54.1 %	16	13	67	55.2% 🕂	18	6	57	7 75.0% 🥂	12	19	53	38.7%
	line with case goal + planned" if both "Yes" answers are appropriate) Yes, in line with case goal and planned Yes, to meet client's specific needs and planned		1	9 1			15 1				18 0				11 1		
8539	If the client experienced one or more moves that were not planned by the Division in an effort to achieve the client's case goals or to meet the needs of the client, what was/were the reason(s) for the move(s) during the review period? (Check all that apply)																
	Escape		;	8			6				2				10		
	More than one move			1			6				0				6		
	Provider quit or closed		:	2			4				0				0		
	Provider request		(0			2				0				0		
	Temporary setting		1	1			8				4				12		
	Youth's behavior			8			5				4				11		
<u> Item 7: I</u>	Permanency Goal for Child																
Per	rmanency																
8542	In the reviewer's opinion, is the primary permanency goal, at the time of the review, appropriate for this client?	87	0	1	100.0 %	96	0	0	100.0%	81	0	(0100.0%	82	2	0	97.6%
8543	If, in the reviewer's opinion, the permanency goal is not appropriate at the time of the review, what should the appropriate permanency goal be?																
	All options have not been sufficiently explored			0			0				0				1		
	OPPLA - Emancipation			0			0				0				1		
	OPPLA - LTFC			1			0				0				0		

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		1st Q	<u>uarter</u>	SFY 20	<u>13</u>	<u>2nc</u>	l Quar	er SF	FY 20	<u>13</u>	<u>3rd</u>	Quarte	r SFY	<u> 2013</u>	4th C	Quarter	SFY 2013
		<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	No	<u>N</u>	NA	<u>%</u>	<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u> %
Permaner	ncy Outcome 1																
Per	manency																
8540	For clients with a permanency goal of return home, is progress being made toward achieving the goal? (Check all No responses that apply) No, client lack of progress No, inadequate monthly parent contact No, other No, parent lack of progress	40	16		71.4 %	47	13 11 3 0	;	36 7	8.3%	39	7 2 1	33	81.3%	30	14 11 4 1 2	40 68.2%
	For clients with a permanency goal of permanent placement with a relative/non-relative through legal guardianship/permanent custody, is progress being made toward achieving the goal? (Check all No responses that apply)	2	1	85	66.7 %	6	5		85 5	4.5%	5	3	73	62.5%	1	3	80 25.0%
	No, client lack of progress No, other No, other potential caregiver lack of progress			1 0 0			5 0 1					2 1 0				3 0 0	
	Other Planned Living Arrangement			J			•										
	se Planning/Services																
	Is the client, age 16 years + 60 days or older, receiving all the services identified in the assessment and the ILP? (Check all No responses that apply)	81	1	6	98.8 %	87	0		9 10	0.0%	73	0	8	100.0%	77	0	7 100.0%
	No, client refused services			1			0					0				0	
	Is there a comprehensive, client-driven Emancipation Transition Plan (ETP) that was developed 90 business days before the end of the client's commitment? (Check all No responses that apply) (Use only "No Plan" if there is no ETP)	6	6	76	50.0 %	1	3		92 2	5.0% 🕂	1	4	76	20.0%	4	2	78 66.7%
	No plan			6			3					4				2	
8525	Have all vital documents been obtained for clients with an OPPLA goal 90 business days before the end of the client's commitment? No Social Security card	8	0	80	100.0 %	1	0	,	95 10	0.0%	5	0	76	100.0%	4	1	79 80.0%

Quarterly Results for Administrative Reviews

Administrative Review Division

		1st Quarter SFY 2013			2nd 0	Quarter	SFY 2	<u>2013</u>	<u>3re</u>	l Qua	rter	SFY 2	<u>2013</u>	4	th Qı	uarter	SFY 2	<u> 2013</u>	
		Yes	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	N	<u> </u>	<u>NA</u>	<u>%</u>	Ye	s	<u>No</u>	<u>NA</u>	<u>%</u>
Permane	ncy Outcome 2																		
	: Proximity of Placement se Planning/Services																		
8516	Is the client placed within close proximity to his/her parents or other potential permanent caregiver's home?	50	1	37	98.0 %	60	4	32	93.8% 🧘	4	6	0	35	100.0%		42	2	40	95.5%
	: <u>Visiting with Parents and Siblings in Foster Care</u> rmanency																		
8552	Does the frequency of visitation with the mother/guardian/kin adequately address the needs of the client to maintain or promote continuity of the relationship? (Check all No responses that apply)	69	2	17	97.2 %	75	1	20	98.7%	7)	0	11	100.0%		68	1	15	98.6%
	No, mother/guardian/kin			2			1					0					1		
8553	Does the frequency of visitation with the father/guardian/kin adequately address the needs of the client to maintain or promote continuity of the	32	1	55	97.0 %	35	1	60	97.2%	3		2	48	93.9%	<u>.</u>	34	3	47	91.9%
	relationship? (Check all No responses that apply) No, father/guardian/kin No, other			1			1 0					1					3		
Mis	scellaneous			O			O					•							
8554	Does the frequency of visitation with the sibling(s) adequately address the needs of the client to maintain or promote continuity of the relationship(s)? (Check all No reponses that apply)	35	0	53	100.0 %	29	0	67 1	00.0%	3	7	0	44	100.0%		39	0	45 1	00.0%
	: Relationship of Child in Care with Parents se Planning/Services																		
8517	If the client is not placed in close proximity to his/her parents or other potential permanent caregiver's home, were reasonable efforts made to support or facilitate face-to-face contact with the parents or potential permanent caregivers?	1	0	87	100.0 %	5	0	91 1	00.0%)	0	81			2	0	82 1	00.0%

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		<u>1st Q</u>	<u>uarter</u>	SFY 20	<u>13</u>	2nd (Quarter	SFY 2	<u>2013</u>	<u>3rd</u> (Quarte	r SFY	<u> 2013</u>	<u>4th C</u>	Quarte	SFY	<u>2013</u>
		<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>
Well Bei	ng Outcome 1																
Item 17	: Needs/Services of Child, Parents, and Foster Parents ase Planning/Services																
8520	Does the DCP/Parole Plan document services directed at the areas of need identified through assessment? No DCP developed	81	7	0	92.0 % 🚹	82	14	0	85.4% 🔥	69	12	0	85.2%	73	11	0	86.9%
	No, IL not addressed No, all task time frames expired			2			4				9				8		
_	No, some task time frames expired			3 2			5 4			·	1			<u> </u>	2		
8521	Does the DCP/Parole Plan include clear expectations of all parties in order to achieve the permanency goal? (Check all No responses that apply) No DCP/Parole Plan developed	82	6	0 0	93.2 % Å	87	9 1	0	90.6%	76	5 0	0	93.8%	81	3 1	0	96.4%
	No, Division			2			2				2				0		
	No, all task time frames expired			3			5				2				0		
	No, client			1			1				0				0		
	No, father/guardian			2			1				0				0		
	No, mother/guardian			1			1				1				0		
	No, provider			3			3				2				1		
	No, some task time frames expired			0			0				0				1		
He	ealth			•			· ·										
8536	If substance abuse issues have been identified during the review period for the client, what are the substances of use? (Check all that apply)																
	Alcohol		2	7			37				35				26		
	CNS Depressants			, 1			2				0				0		
	CNS Stimulants/Amphetamine			O			1				0				1		
	Cocaine/Crack			1			10				5				2		
	Heroin			O			10				3				1		
	Marijuana		5	1			63				47				44		
	Methamphetamine		J	ו כ			2				1				2		
	Other			<u> </u>			3 E				3				6		
	Other Opiates			<i>1</i> 1			ე 1				3				2		
8537	If substance abuse issues have been identified during the review period for the client, were substance abuse treatment services provided to the client?	54	2	32	96.4 %	66	0	30 ′	100.0%	51	0	30	100.0%	47	0	37	100.0%
	(Check all No responses that apply)			•			•				•				0		
	No, client refused services			2			0				0				0		

Quarterly Results for Administrative Reviews

Administrative Review Division

					2nd (Quarte	r SFY 2	<u>013</u>	3rd (Quarte	SFY 2	<u> 2013</u>	4th C	<u>uarte</u>	r SFY	<u> 2013</u>	
		Yes	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	No	<u>NA</u>	<u>%</u>
Well Bei	ng Outcome 1																
	: Child/Family Involvement in Case Planning se Planning/Services																
8508	Was the out-of-home provider engaged in case planning during the review period?	88	0	0	100.0 %	95	0	1 1	00.0%	81	0	0	100.0%	84	0	0	100.0%
8510	Was the client engaged in case planning during the review period?	88	0	0	100.0 %	95	0	1 1	00.0%	81	0	0	100.0%	84	0	0	100.0%
8512	Was the mother/guardian/kin engaged in case planning during the review period?	67	8	13	89.3 % 🔥	73	7	16	91.3% 🔥	66	6	9	91.7%	60	11	13	84.5%
	No No, efforts made but refused			4 4			1 6				1 5				4 7		
8514	Was the father/guardian/kin engaged in case planning during the review period?	29	7	52	80.6 % 🔥	27	11	58	71.1% 🔥	27	6	48	81.8%	27	11	46	71.1% 🔥
	No			3			6				1				6		
	No, efforts made but refused			4			5				5				5		

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		1st Q	<u>uarter</u>	SFY 20	<u>)13</u>	<u>2nd</u>	Quarte	r SFY 2	<u>2013</u>	3rd	Quarte	r SFY 2	<u>2013</u>	<u>4th (</u>	Quarte	r SFY	<u> 2013</u>
		<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	No	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u>	<u>%</u>
Well Bei	ng Outcome 1																
	: Worker Visits with Child rmanency																
8544	How many months should the assigned client manager have made face-to-face contact with the client during the review period? 1			0			0				2				5		
	2 3 4 5			3 1 9			2 4 5 35				2 5 6 36				5 1 7 31		
8545	6 7 How many months did the assigned client manager make face-to-face		4	8 3 4			35 37 11				24 6				30 5		
	contact with the client during the review period? 0 1 2 3 4 5 6 7 Of all the months requiring contact, in what percent did agency personnel have contact with the child?		1 2 4		98.9%		0 0 2 7 5 36 33		98.0%		0 2 2 6 8 35 22 6]	98.5%		1 4 5 1 9 30 29 5		%99.0
8546	For a client placed outside the state, is there documentation that the client is visited at least monthly by a professional of either the sending or receiving state??	0	0	88	0.0 %	0	0	96		0	0	81		0	0	84	
8547	Was the quality of contacts made with the client sufficient to address issues pertaining to the safety, permanency, and well-being of the client and to promote achievement of case goals? (Check all No responses that apply)	84	4	0	95.5 %	86	8	2	91.5% 🦺	72	9	0	88.9%	78	5	1	94.0%
	No assessment of safety No time alone with client No, content insufficient			2 3 0			5 7 1				6 9 0				4 5 0		

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		<u>1st Quarter SFY 2013</u> <u>Yes</u> <u>No</u> <u>NA</u> <u>%</u>					Quarte	r SFY 2	<u>013</u>	<u>3rd</u>	Quarte	r SFY 2	<u>2013</u>	4th C	<u>Quarter</u>	SFY 2	<u>2013</u>
		<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u>	<u>%</u>
Vell Bei	ng Outcome 1																
	: Worker Visits with Parents																
Pe	rmanency																
8548	If the client's goal is to return home, did contact with the mother/guardian/kin occur on a monthly basis?	25	25	38	50.0 % 🚹	28	24	44	53.8%	33	12	36	73.3% 🚹	18	18	48	50.0% <u> </u>
8549	If the client's goal is to return home, was the quality of contacts made with the mother/guardian/kin sufficient to address isses pertaining to the safety, permanency, and well-being of the client and to promote achievement of case goals?	46	0	42	100.0 %	50	0	46 1	00.0%	44	0	37	100.0%	34	0	50 1	00.0%
8550	If the client's goal is to return home, did contact with the father/guardian/kin occur on a monthly basis?	7	12	69	36.8 % 🚹	11	13	72	45.8%	9	6	66	60.0% 🔥	9	10	65	47.4% <u> 1</u>
8551	If the client's goal is to return home, was the quality of contacts made with the father/guardian/kin sufficient to address issues pertaining to the safety, permanency, and well being of the client and to promote achievement of case goals? (Check all No responses)	16	0	72	100.0 %	20	0	76 1	00.0%	15	0	66	100.0%	17	0	67 1	00.0%

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						2nd (Quarte	SFY 2	<u>2013</u>	<u>3rd</u> (Quarter	SFY 2	<u> 2013</u>	4th (Quarte	r SFY	<u> 2013</u>
		<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>
Well Bei	ng Outcome 2																
Item 21	: Educational Needs of Child																
	lucation																
8526	Is the client's education/school record in the case file? (During the review period) (Check all No responses that apply)	66	9	13	88.0 % 🔥	70	6	20	92.1% 🧘	55	11	15	83.3%	64	5	15	92.8% 🔥
	No GED/Diploma			3			1				2				2		
	No credit count			1			0				0				0		
	No current IEP			3			5				9				3		
	No current grade reports		_	2			0				1				1		<u>-</u>
8527	Were the client's educational needs adequately addressed through appropriate educational services during the review period?	73	1	14	98.6 %	79	0	17 1	00.0%	67	0	14	100.0%	71	0	13	100.0%
8528	Is the client, age 16 or older, on track to graduate from and/or complete high school?	82	0	6	100.0 %	86	1	9	98.9%	73	1	7	98.6%	79	0	5	100.0%
	Ğ GED		1	4			10				22				18		
	GED earned		2	27			25				16				22		
	Graduated			6			4				6				7		
	No, graduate			0			1				1				0		
8529	Was educational stability provided for the client during the review period? (Check all No responses that apply)	69	4	15	94.5 % Å	72	6	18	92.3% 🧘	62	2	17	96.9%	66	2	16	97.1%
	No, changed schools during review period			4			6				2				2		
Mi	scellaneous																
8556	Were the child/youth's educational needs assessed?	74	0	14	100.0 %	80	0	16 1	00.0%	69	0	12	100.0%	70	0	14	100.0%
-		, -	<u> </u>	17	100.0 /0	00	V	10 1	00.070	55	U	12	. 55.576	, 5	J	17	. 55.676

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		1st Q	<u>uarter</u>	SFY 20	13	2nd (Quarter	SFY 2	<u> 2013</u>	<u>3rd</u> (Quarter	SFY 2	<u> 2013</u>	4th C	uarter	SFY	2013
		<u>Yes</u>	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u>	<u>%</u>	Yes	<u>No</u>	<u>NA</u>	<u>%</u>
Well Bein	ng Outcome 3																
Item 22:	Physical Health of Child																
	alth																
8530	Is health information in the case file, including name and address of current health care provider(s), known medical problems and current medications? (Check all No responses that apply) No provider address/phone number	82	0	6	100.0 %	93	0	3	100.0%	77	1	3	98.7%	81	0	3	100.0%
	No provider name			0			0				1				0		
8531	Did the client receive a medical exam or medical screening within 30 days of commitment? (Check all No responses that apply) (Initial Review Only)	37	0	51	100.0 %	46	0	50	100.0%	47	0	34	100.0%	44	1	39	97.8%
8532	Did the client receive a full dental examination within 30 days of	37	0	51	100.0 %	44	2	50	95.7%	47	0	34	100.0%	42	3	39	93.3% 🔥
	commitment? (Check all No responses that apply) (Initial Review Only) No, not timely	_		0		-	2		_		0				1		
	_																
8533	Has the client received regular health care, including immunizations and/or treatment for identified health needs, during the review period? (Services	77	9	2	89.5 % 🚹	91	4	1	95.8%	77	4	0	95.1%	83	1	0	98.8%
	delivered) (Check all No responses that apply) No treatment for identified needs No, Medicaid		1	0 1			0 0				0				1		
	No, delay in services, systemic No, lack of timely referral or follow through No, other			0 8 1			1 3 0				0 4 0				0 0 0		
8534	Has the client received regular dental care and treatment for identified dental needs during the review period? (Services delivered) (Check all No responses that apply)	77	9	2	89.5 % 🔥	90	5	1	94.7% 🥂	69	12	0	85.2% 🥂	78	6	0	92.9%
	No treatment for identified needs			0			0				0				1		
	No, lack of timely referral or follow through			8			5				10				3		
Itom 22	No, other Mental Health of Child			1			0				2				2		
	alth																
8535	Were mental health services provided to meet the client's needs during the review period? (Check all No responses that apply) No, changed mental health provider	36	7	45 7	83.7 % 🔥	51	7	38	87.9% 🧘	37	9	35	80.4%	45	10	29	81.8%
				•			•				ū				-		
	Scellaneous	I			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-1	. 1	100.05.	1	ا ہے	ا ج	100.00		- 1		400 001
8557	Were the child/youth's mental health needs assessed?	88	0	0	100.0 %	95	0	1	100.0%	81	0	0	100.0%	84	0	0	100.0%

Quarterly Results for Administrative Reviews

Administrative Review Division

							Quarter	SFY 2	<u>2013</u>	3rd (Quarter	SFY	<u> 2013</u>	4th Q	<u>uarter</u>	SFY 20	<u>)13</u>
		Yes No NA % Yes				No	NA	<u>%</u>	Yes	No	NA	<u>%</u>	Yes	No	<u>NA</u>	<u>%</u>	
Systemic	Factors				_				_								_
Item 25	: Process to Ensure Each Child Has a Written Case Plan Developed Join	tlv with	Parer	nts													
	ase Planning/Services																
8519	Does the DCP contain a description of the type and appropriateness of the homes or facilities in which the client was placed during the review period?	69	18	1	79.3 % 🚹	80	14	2	85.1% 🔥	64	16	1	80.0% 🔥	71	13	0 8	34.5% <u> </u>
Miscella	· · · · · · · · · · · · · · · · · · ·																
_	aneous																
	ourt																
8501	Is there a mittimus that contains best interest or welfare of the child	30	8	50	78.9 % 🔥	39	7	50	84.8% 🔥	41	6	34	87.2% 🔥	36	9	39 8	0.0% 🔥
	language, and determines if reasonable efforts were made or an	•		•		•	•			•				•			
	emergency justified lack of reasonable efforts, and does not contain "nunc pro tunc" language? (Check all No responses that apply) (Initial Review																
	Only)																
	No best interest			5			4				4				7		
	No reasonable efforts/emergency		-	7			6				5				9		
	No, contains "nunc pro tunc" language		()			1				0				0		
	No, dual reasonable efforts		()			0				1				0		
8502	Is this a combined 6-month period review and Permanency Hearing with the ALJ?	22	66	0	25.0 %	15	80	1	15.8%	13	68	0	16.0%	20	64	0 2	23.8%
IV-																	
8503	Has IV-E Eligibility been determined within 45 days of removal?	26	2	60	92.9 % 🚹	33	1	62	97.1%	32	2	47	94.1% 🗘	28	0	56 10	0.0%
8504	Has a timely IV-E redetermination been completed during the review period? (Re-Review Only)	3	0	85	100.0 %	7	0	89	100.0%	3	0	78	100.0%	5	0	79 10	0.0%
Dι	ue Process																
8505	Were all required parties invited to the review and given at least	79	9	0	89.8 % 🔥	87	9	0	90.6% 🔥	76	5	0	93.8% 🔥	78	6	0 9	2.9% 🔥
	two-weeks' notice? (Check all No responses that apply)					•		•		•				•	0		
	No, client No, father/guardian		() -			1				0				<i>0</i>		
	No, mother/guardian		;) 1			6				ა ვ				2		
	No, not timely			+ 1			0				0				0		
Mi	scellaneous			•			U				Ŭ				-		
8555	Were the previous compliance issues addressed?	14	15	59	48.3 % 🔥	8	12	76	40.0% 🔥	6	7	68	46.2% 🔥	6	6	72 5	0.0% 🔥
	·		-					- 1		-	-			-	-		