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

| | | 1st Qı | uarter | SFY 20 ⁻ | <u>13</u> | <u>2nd Q</u> | uarter | SFY 20 | <u>)13</u> | <u>3r</u> | d Quar | ter S | FY 2013 | <u>4t</u> | h Qu | arter S | FY 2013 | |
|---------|---|------------|-----------|---------------------|-----------|--------------|-----------|-----------|------------|-----------|-----------|----------|--------------------|-----------|------------|------------|-------------|--|
| | | <u>Yes</u> | <u>No</u> | <u>NA</u> | <u>%</u> | <u>Yes</u> | <u>No</u> | <u>NA</u> | <u>%</u> | Yes | <u>No</u> | <u>N</u> | <u>NA</u> <u>%</u> | Ye | <u>s N</u> | <u> 10</u> | <u>IA</u> % | |
| 8558 | If the youth is 16 years and older has the youth received a copy of all consumer credit reports annually? | 0 | 0 | 0 | | 0 | 0 | 3 | | | 0 | 0 | 15 | | 0 | 0 | 6 | |
| 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 an approved agency to resolve the inaccuracies? | 0 | 0 | 0 | | 0 | 0 | 3 | | | 0 | 0 | 15 | | 0 | 0 | 6 | |
| 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 | 0 | | 0 | 0 | 3 | | | 0 | 0 | 15 | | 0 | 0 | 6 | |
| 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? | 1 | 0 | 13 1 | 100.0 % | 0 | 0 | 7 | | | 0 | 0 | 15 | | 0 | 0 | 6 | |
| 8507 | If any new safety concerns were received regarding this client, were the safety needs of the client adequately addressed during the review period? (Check all No responses that apply) | 3 | 0 | 11 1 | 100.0 % | 2 | 0 | 5 10 | 00.0% | | 4 | 0 | 11 100.0% | | 2 | 0 | 4 100.0% | |

Quarterly Results for Administrative Reviews

Administrative Review Division

| | | 1st Quarter SFY 2013 | | | | | 2nd C | uarte | r SFY | <u> 2013</u> | 3 | rd Q | uarter | SFY | 2013 | 4th (| Quart | er SFY | 2013 |
|---------|---|----------------------|-----------|-----------|------------|---|------------|-----------|-----------|--------------|----------|----------|-----------|-----------|-----------|------------|-----------|-----------|----------|
| | | <u>Yes</u> | <u>No</u> | <u>NA</u> | <u>%</u> | | <u>Yes</u> | <u>No</u> | <u>NA</u> | <u>%</u> | Yes | <u>s</u> | <u>No</u> | <u>NA</u> | <u>%</u> | <u>Yes</u> | <u>No</u> | <u>NA</u> | <u>%</u> |
| Permane | ency Outcome 1 | | | | | | | | | | | | | | | | | | |
| | Stability of Foster Care Placements | | | | | | | | | | | | | | | | | | |
| | ase 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) | 13 | 0 | , | 1 100.0 % | | 7 | 0 | 0 | 100.0% | | 14 | 0 | 1 | 100.0% | 6 | C |) (| 100.0% |
| Pe | ermanency | | | | | | | | | | | | | | | | | | |
| 8538 | If the client experienced one or more moves during the review period, were | 3 | 2 | (| 9 60.0 % 🕺 | 7 | 1 | 1 | 5 | 50.0% 🧘 | <u> </u> | 1 | 6 | 3 | 3 14.3% 🗘 | 1 | C |) 5 | 100.0% |
| | 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 | | | | | | | | | | | | | | | | | | |
| | line with case goal + planned" if both "Yes" answers are appropriate) Yes, in line with case goal and planned | | | 2 | | | | 4 | | | | | 4 | | | | ٥ | | |
| | Yes, to meet client's specific needs and planned | | | 3 0 | | | | 0 | | | | | 0 | | | | 1 | | |
| 8539 | If the client experienced one or more moves that were not planned by the | | | U | | | | U | | | | | U | | | | • | | |
| 0000 | 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 | | | 0 | | | | 0 | | | | | 1 | | | | 0 | | |
| | More than one move | | | 0 | | | | 0 | | | | | 1 | | | | 0 | | |
| | Other | | | 0 | | | | 0 | | | | | 1 | | | | 0 | | |
| | Provider request | | | 0 | | | | 0 | | | | | 2 | | | | 0 | | |
| | Youth's behavior | | | 2 | | | | 1 | | | | | 4 | | | | 0 | | |
| Item 7: | Permanency Goal for Child | | | | | | | | | | | | | | | | | | |
| Pe | ermanency | | | | | | | | | | | | | | | | | | |
| 8542 | In the reviewer's opinion, is the primary permanency goal, at the time of the | 14 | 0 | (| 0 100.0 % | | 7 | 0 | 0 | 100.0% | | 14 | 1 | (| 93.3% | 6 | С |) (| 100.0% |
| | review, appropriate for this client? | | | | | | <u>1</u> | | | | | - | | | | | | | · |
| 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? | | | | | | | | | | | | | | | | _ | | |
| | OPPLA - Emancipation | | | 0 | | | | 0 | | | | | 1 | | | | 0 | | |
| | | | | | | | | | | | | | | | | | | | |

Quarterly Results for Administrative Reviews Administrative Review Division

| | | .,.,. | | 0,00 | ,,_0.0 | | | | | | | | | | | |
|---------|---|------------|-----------|-----------|------------|--------------|---------|-------|----------|-------|--------|-------------|------------|---------|-------------|-----------|
| | | 1st Q | uarter | SFY 20 | <u>)13</u> | <u>2nd (</u> | Quarter | SFY 2 | 013 | 3rd (| Quarte | SFY 2013 | <u>4th</u> | Quarter | SFY 201 | <u> 3</u> |
| | | <u>Yes</u> | <u>No</u> | <u>NA</u> | <u>%</u> | Yes | No | NA | <u>%</u> | Yes | No | <u>NA %</u> | Yes | No | <u>NA</u> 9 | <u>6</u> |
| Permane | ency Outcome 1 | | | | | | | | | | | | | | | |
| Pe | ermanency | | | | | | | | | | | | | | | |
| 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 | 7 | 2 | 5 2 | 77.8 % | 3 | 2 | 2 | 60.0% | 7 | 1 | 5 70.0% | 2 | 3 | 1 40 | .0% |
| 8541 | No, parent lack of progress 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) | 0 | 1 | 13 | 0.0 % | 0 | 0 | 7 | | 1 | 0 | 14 100.0% | 0 | 0 | 6 | |
| | No, client lack of progress | | | 1 | | | 0 | | | | 0 | | | 0 | | |
| | : Other Planned Living Arrangement ase Planning/Services | | | | | | | | | | | | | | | |
| 8522 | 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) | 12 | 1 | 1 | 92.3 % 🚹 | 7 | 0 | 0 1 | 00.0% | 13 | 1 | 1 92.9% | <u>^</u> 6 | 0 | 0 100 | .0% |
| | No, provider issues | | | 1 | | | 0 | | | | 1 | | | 0 | | |
| 8524 | 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 | 0 | 1 | 13 | 0.0 % 🔥 | 0 | 2 | 5 | 0.0% | 0 | 2 | 13 0.0% | <u>•</u> 0 | 0 | 6 | |
| | there is no ETP) No plan | | | 1 | | | 2 | | | | 2 | | | 0 | | |
| 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 State ID/driver's license | 0 | 1 | 13 1 | 0.0 % | 2 | 0 | 5 1 | 00.0% | 1 | 1 | 13 50.0% | 0 | 0 | 6 | |

Quarterly Results for Administrative Reviews

Administrative Review Division

7/1/2012 - 6/30/2013

| | | 1st Quarter SFY 2013 | | | 2nd (| Quarter | SFY 2 | <u>2013</u> | <u>3rd (</u> | Quarte | r SFY | <u> 2013</u> | 4th C | Quarte | SFY 201 | <u>13</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> | Yes | <u>No</u> | <u>NA</u> 9 | <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? | 3 | 6 | 5 | 33.3 % | 2 | 3 | 2 | 40.0% | 2 | 8 | 5 | 20.0% | 1 | 4 | 1 20 | 0.0% |
| | Visiting with Parents and Siblings in Foster Care 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) | 7 | 5 | 2 | 58.3 % 🚹 | 3 | 2 | 2 | 60.0% 🔥 | 12 | 2 | 1 | 85.7% | 2 | 3 | 1 40 |).0% 🔥 |
| | No, mother/guardian/kin | | | 5 | | | 2 | | | | 2 | | | | 3 | | |
| 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 | 3 | 9 | 2 | 25.0 % 🚹 | 6 | 0 | 1 1 | 100.0% | 3 | 5 | 7 | 37.5% 🔥 | 4 | 1 | 1 80 |).0% <u> </u> |
| | relationship? (Check all No responses that apply) No, father/guardian/kin | | | 9 | | | 0 | | | | 5 | | | | 1 | | |
| Mis | scellaneous | | | | | | | | | | | | | | | | |
| 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) | 5 | 3 | 6 | 62.5 % 🚹 | 5 | 0 | 2 1 | 100.0% | 5 | 2 | 8 | 71.4% | 2 | 2 | 2 50 |).0% Å |
| | No, other | | | 1 | | | 0 | | | | 1 | | | | 0 | | |
| | No, parent/guardian/kin | | | 2 | | | 0 | | | | 1 | | | | 2 | | |
| | No, sibling | | | 1 | | | 0 | | | | 0 | | | | 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 | 6 | 0 | 8 | 100.0 % | 3 | 0 | 4 1 | 100.0% | 8 | 0 | 7 | 100.0% | 4 | 0 | 2 100 | 0.0% |

permanent caregivers?

Quarterly Results for Administrative Reviews

Administrative Review Division

| | | <u>1st Q</u> | 1st Quarter SFY 2013 | | | | Quarte | r SFY 2 | <u>2013</u> | <u>3rd</u> (| <u>Quarte</u> | r SFY | <u> 2013</u> | <u>4th (</u> | Quarte | SFY 20 | <u>13</u> |
|----------|---|--------------|----------------------|-----------|----------|-----|--------|-----------|-------------|--------------|---------------|-----------|---------------|--------------|-----------|-----------|-----------|
| | | <u>Yes</u> | <u>No</u> | <u>NA</u> | <u>%</u> | Yes | No | <u>NA</u> | <u>%</u> | Yes | No | <u>NA</u> | <u>%</u> | Yes | <u>No</u> | <u>NA</u> | <u>%</u> |
| Well Bei | ng Outcome 1 | | | | | | | | | | | | | | | | |
| | : Needs/Services of Child, Parents, and Foster Parents | | | | | | | | | | | | | | | | |
| | se Planning/Services | | | | | | | | | | | | | | | | |
| 8520 | Does the DCP/Parole Plan document services directed at the areas of | 12 | 2 | 0 | 85.7 % 🔥 | 6 | 1 | 0 | 85.7% | 10 | 5 | 0 | 66.7% 🔥 | 6 | 0 | 0 10 | 0.0% |
| | need identified through assessment? | I | | | | I | | | | | | 1 | | | | - | |
| | No, IL not addressed | | : | 2 | | | 1 | | | | 5 | | | | 0 | | |
| 8521 | Does the DCP/Parole Plan include clear expectations of all parties in order | 14 | 0 | 0 | 100.0 % | 7 | 0 | ر م | 100.0% | 13 | 2 | 1 0 | 86.7% | 6 | 0 | 010 | 0.0% |
| 0321 | to achieve the permanency goal? (Check all No responses that apply) | 14 | U | U | 100.0 % | / | U | U | 100.0% | 13 | | . 0 | 00.7% | 0 | U | UITU | 0.0% |
| | No, Division | | | 0 | | | 0 | | | | 2 | | | | 0 | | |
| | No, father/guardian | | | 0 | | | 0 | | | | 1 | | | | 0 | | |
| | No, mother/guardian | | (| 0 | | | 0 | | | | 2 | | | | 0 | | |
| | No, provider | | (| 0 | | | 0 | | | | 2 | | | | 0 | | |
| | alth | | | | | | | | | | | | | | | | |
| 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 | | (| 6 | | | 2 | | | | 9 | | | | 2 | | |
| | CNS Depressants | | | 4 | | | 0 | | | | 6 | | | | 1 | | |
| | CNS Stimulants/Amphetamine | | | 4 | | | 0 | | | | 6 | | | | 1 | | |
| | Cocaine/Crack | | ; | 3 | | | 1 | | | | 5 | | | | 2 | | |
| | Heroin | | : | 2 | | | 0 | | | | 2 | | | | 2 | | |
| | Marijuana | | | 8 | | | 3 | | | | 10 | | | | 2 | | |
| | Methamphetamine | | • | 4 | | | 0 | | | | 4 | | | | 1 | | |
| | Other Orietae | | • | 4 | | | 0 | | | | 6 | | | | 1 | | |
| 0507 | Other Opiates | | | 1 | | | 0 | | | | 2 | ī | / | | <u> </u> | .1 | |
| 8537 | If substance abuse issues have been identified during the review period for the client, were substance abuse treatment services provided to the client? | 8 | 0 | 6 | 100.0 % | 4 | 0 | 3 ′ | 100.0% | 9 | 1 | 5 | 90.0% | 2 | 0 | 4 100 | 0.0% |
| | (Check all No responses that apply) | | | | | | | | | | | | | | | | |
| | No referral made | | | Λ | | | 0 | | | | 1 | | | | 0 | | |
| | | | , | • | | | J | | | | • | | | | - | | |

Quarterly Results for Administrative Reviews Administrative Review Division

| | | 1st Quarter SFY 2013 | | | 2nd (| Quarte | r SFY | <u> 2013</u> | <u>3rd (</u> | Quarte | r SFY | 2013 | 4th C | Quarte | r SF | <u> </u> | |
|----------|---|----------------------|-----------|-----------|------------|--------|-------|--------------|--------------|--------|-----------|------|-----------|--------|------|----------|----------|
| | | Yes | <u>No</u> | <u>NA</u> | <u>%</u> | Yes | No | NA | <u>%</u> | Yes | <u>No</u> | NA | <u>%</u> | Yes | No | NA | <u>%</u> |
| Well Bei | ng Outcome 1 | | | | | | | | | | | | | | | | |
| Item 18 | : Child/Family Involvement in Case Planning | | | | | | | | | | | | | | | | |
| Ca | se Planning/Services | | | | | | | | | | | | | | | | |
| 8508 | Was the out-of-home provider engaged in case planning during the review period? | 13 | 0 | , | 1 100.0 % | 7 | 0 | C | 100.0% | 15 | 0 |) (| 0100.0% | 6 | 0 | (| 0100.0% |
| 8510 | Was the client engaged in case planning during the review period? | 14 | 0 | (| 0 100.0 % | 7 | 0 | C | 100.0% | 15 | 0 | | 0100.0% | 6 | 0 | (| 0100.0% |
| 8512 | Was the mother/guardian/kin engaged in case planning during the review | 10 | 1 | (| 3 90.9 % | 4 | 1 | 2 | 80.0% | 13 | 1 | 1 | 1 92.9% 🔥 | 5 | 0 | | 1 100.0% |
| | period? No | | | 1 | | | 1 | | | | 1 | | , | | 0 | | |
| 8514 | Was the father/guardian/kin engaged in case planning during the review period? | 8 | 3 | (| 3 72.7 % 🔥 | 5 | 1 | 1 | 83.3% | 3 | 7 | 5 | 30.0% | 3 | 2 | | 1 60.0% |
| | . No | | ; | 3 | | | 0 | | | | 7 | | | | 2 | | |
| | No, efforts made but refused | | (| 0 | | | 1 | | | | 0 | | | | 0 | | |
| | : 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? | | | | | | | | | | | | | | | | |
| | 2 | | | 1 | | | 0 | | | | 1 | | | | 0 | | |
| | 3 | | (| 0 | | | 0 | | | | 2 | | | | 1 | | |
| | 4 | | | 1 | | | 1 | | | | 1 | | | | 0 | | |
| | 5 | | | 4 | | | 2 | | | | 6 | | | | 3 | | |
| | 6 | | | 7 | | | 4 | | | | 4 | | | | 2 | | |
| | 7 | | | 1 | | | 0 | | | | 1 | | | | 0 | | |
| 8545 | How many months did the assigned client manager make face-to-face contact with the client during the review period? | | | | | | | | | | | | | | | | |
| | 2 | | | 1 | | | 0 | | | | 1 | | | | 0 | | |
| | 3 | | (| 0 | | | 0 | | | | 2 | | | | 1 | | |
| | 4 | | | 1 | | | 1 | | | | 2 | | | | 0 | | |
| | 5 | | (| 6 | | | 3 | | | | 5 | | | | 3 | | |
| | 6 | | : | 5 | | | 3 | | | | 4 | | | | 2 | | |
| | 7 | | | 1 | | | 0 | | | | 1 | | | | 0 | | |
| | Of all the months requiring contact, in what percent did agency personnel have contact with the child? | | | | 98.5% | | | | 98.7% | | | | 99.0% | | | | %100.0 |

Quarterly Results for Administrative Reviews

Administrative Review Division

| | | 1st Quarter SFY 2013 2 | | | 2nd (| Quarter | SFY 2 | <u>013</u> | 3rd C | <u>Quarte</u> | SFY 2 | <u>2013</u> | 4th Q | uarter | SFY 2013 | |
|----------|--|------------------------|-----------|-----------|----------|------------|-----------|------------|----------|---------------|-----------|-------------|----------|------------|-----------|-------------|
| | | <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> % |
| Well Bei | ng Outcome 1 | | | | | | | | | | | | | | | |
| Item 19 | : Worker Visits with Child | | | | | | | | | | | | | | | |
| | rmanency | | | | | | | | | | | | | | | |
| 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?? | 1 | 0 | 13 | 100.0 % | 0 | 0 | 7 | | 0 | 0 | 15 | | 1 | 0 | 5 100.0% |
| 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) | 8 | 6 | 0 | 57.1 % 🔥 | 5 | 2 | 0 | 71.4% 🔥 | 5 | 9 | 1 | 35.7% | 5 | 1 | 0 83.3% |
| | No assessment of safety | | • | 3 | | | 1 | | | | 7 | | | | 0 | |
| | No time alone with client | | | 4 | | | 2 | | | | 6 | | | | 1 | |
| | No, content insufficient | | |) | | | 0 | | | | 2 | | | | 0 | |
| Item 20 | : Worker Visits with Parents | | | | | | ŭ | | | | | | | | | |
| | rmanency | | | | | | | | | | | | | | | |
| 8548 | If the client's goal is to return home, did contact with the mother/guardian/kin occur on a monthly basis? | 5 | 3 | 6 | 62.5 % 🔥 | 2 | 1 | 4 | 66.7% 🔥 | 8 | 2 | 5 | 80.0% | 5 | 0 | 1 100.0% |
| 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? | 8 | 0 | 6 | 100.0 % | 3 | 0 | 4 1 | 00.0% | 10 | 0 | 5 | 100.0% | 5 | 0 | 1 100.0% |
| 8550 | If the client's goal is to return home, did contact with the father/guardian/kin occur on a monthly basis? | 0 | 4 | 10 | 0.0 % 🔥 | 1 | 2 | 4 | 33.3% 🚹 | 1 | 0 | 14 | 100.0% | 0 | 2 | 4 0.0% |
| 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) | 4 | 0 | 10 | 100.0 % | 2 | 0 | 5 1 | 00.0% | 1 | 0 | 14 | 100.0% | 0 | 0 | 6 |

Quarterly Results for Administrative Reviews Administrative Review Division

| | | 1st Quarter SFY 2013 | | | | 2nd (| Quarte | r SFY 2 | <u>2013</u> | 3rd | Quarte | r SFY | 2013 | 4th C | Quarte | r SFY | <u> 2013</u> |
|----------|---|----------------------|-----------|-----------|----------|------------|-----------|-----------|-------------|----------|-----------|-----------|-----------|------------|-----------|-----------|--------------|
| Wall Dai | ng Outgama 2 | <u>Yes</u> | <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> | <u>Yes</u> | <u>No</u> | <u>NA</u> | <u>%</u> |
| | ng Outcome 2 | | | | | | | | | | | | | | | | |
| | <u>: Educational Needs of Child</u> lucation | | | | | | | | | | | | | | | | |
| 8526 | Is the client's education/school record in the case file? (During the review period) (Check all No responses that apply) | 7 | 3 | 4 | 70.0 % | 5 | 1 | 1 | 83.3% | 12 | 2 | 1 | 1 85.7% 🔥 | 5 | 1 | 0 | 83.3% 🔥 |
| | No GED/Diploma | | | 1 | | | 1 | | | | 0 | | | | 1 | | |
| | No credit count | | | 1 | | | 0 | | | | 0 | | | | 0 | | |
| | No current IEP | | | 0 | | | 0 | | | | 2 | | | | 0 | | |
| | No current grade reports | | | 1 | | | 0 | | | | 1 | | | | 0 | | |
| 8527 | Were the client's educational needs adequately addressed through appropriate educational services during the review period? | 10 | 0 | 4 | 100.0 % | 6 | 0 | 1 1 | 100.0% | 14 | 0 | 1 | 1 100.0% | 6 | 0 | 0 | 100.0% |
| 8528 | Is the client, age 16 or older, on track to graduate from and/or complete high school? | 8 | 1 | 5 | 88.9 % | 6 | 0 | 1 1 | 100.0% | 13 | 0 | 2 | 2100.0% | 6 | 0 | 0 | 100.0% |
| | GED | | | 2 | | | 0 | | | | 2 | | | | 0 | | |
| | GED earned | | | 1 | | | 2 | | | | 1 | | | | 1 | | |
| | Graduated | | | 0 | | | 0 | | | | 1 | | | | 0 | | |
| | No, graduate | | | 1 | | | 0 | | | | 0 | | | | 0 | | |
| 8529 | Was educational stability provided for the client during the review period? (Check all No responses that apply) | 6 | 0 | 8 | 100.0 % | 4 | 1 | 2 | 80.0% | 12 | 2 | 1 | 1 85.7% 🚹 | 4 | 1 | 1 | 80.0% |
| | No, changed schools during review period | | | 0 | | | 1 | | | | 2 | | | | 1 | | |
| Mi | scellaneous | | | | | | | | | | | | | | | | |
| 8556 | Were the child/youth's educational needs assessed? | 10 | 0 | 4 | 100.0 % | 6 | 0 | 111 | 100.0% | 14 | 0 | 1 | 1100.0% | 6 | 0 | 0 | 100.0% |
| | | | Ŭ | • | .00.0 70 | | | • • | . 00.070 | <u> </u> | | L ' | | | Ŭ | U | . 00.070 |

Quarterly Results for Administrative Reviews

Administrative Review Division

| | | 1st Quarter SFY 2013 | | | <u>2nd Q</u> | uarter | SFY 2013 | | 3rd Q | uarter | SFY | <u> 2013</u> | 4th | Quar | ter SF | Y 2013 | | |
|------------|---|----------------------|-----------|------------|--------------|----------|------------|-----------|-------------|------------|------------|--------------|-----------|----------|------------|--------|-----------|------------|
| | | <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> | No | <u>N/</u> | <u>4</u> % |
| Well Beir | ng Outcome 3 | | | | | | | | | | | | | | | | | |
| | Physical Health of Child alth | | | | | | | | | | | | | | | | | |
| не 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) | 14 | 0 | 0 | 100.0 % | | 6 | 0 | 1 100.0% | | 15 | 0 | 0 | 100.0% | 6 | | 0 | 0 100.0% |
| 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) | 6 | 0 | | 100.0 % | | 4 | 0 | 3 100.0% | | 11 | 0 | | 100.0% | 4 | ı | 0 | 2100.0% |
| 8532 | Did the client receive a full dental examination within 30 days of commitment? (Check all No responses that apply) (Initial Review Only) | 6 | 0 | 8 | 100.0 % | | 4 | 0 | 3 100.0% | | 11 | 0 | 4 | 100.0% | 4 | ı | 0 | 2 100.0% |
| 8533 | Has the client received regular health care, including immunizations and/or treatment for identified health needs, during the review period? (Services delivered) (Check all No responses that apply) | 14 | 0 | 0 | 100.0 % | | 6 | 0 | 1 100.0% | | 15 | 0 | 0 | 100.0% | 6 | ı | 0 | 0100.0% |
| 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) | 14 | 0 | 0 | 100.0 % | | 6 | 0 | 1 100.0% | | 15 | 0 | 0 | 100.0% | 6 | | 0 | 0 100.0% |
| | Mental Health of Child | | | | | | | | | | | | | | | | | |
| He 8535 | alth Were mental health services provided to meet the client's needs during the | 12 | 0 | 2 | 100.0 % | | 2 | 2 | 3 50.0% | <u>.</u> – | 11 | 1 | 2 | 91.7% | 2 | | ٥ | 4100.0% |
| 0000 | review period? (Check all No responses that apply) | 12 | U I | | 100.0 /6 | | | | 3 30.0 % | <u></u> | 111 | '\] | 3 | 91.770 | | | <u>U</u> | 4[100.076] |
| | No, changed mental health provider No, delays of 2 + weeks | | | 0 0 | | | | 2 0 | | | | 0 1 | | | | C | • | |
| | scellaneous | 44 | | | 40000 | | ما | | 4400 00/ | _ | 4.51 | ام | | 100.00/ | | | ما | 0400 004 |
| 8557 | Were the child/youth's mental health needs assessed? | 14 | 0 | 0 | 100.0 % | <u> </u> | 6 | 0 | 1 100.0% | L | 15 | 0 | 0 | 100.0% | 6 | | 0 | 0 100.0% |
| | Process to Ensure Each Child Has a Written Case Plan Developed Join se Planning/Services | tly with | n Parer | <u>nts</u> | | | | | | | | | | | | | | |
| 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? | 14 | 0 | 0 | 100.0 % | | 4 | 3 | 0 57.1% | <u>.</u> | 4 | 11 | 0 | 26.7% | 6 | | 0 | 0100.0% |

Quarterly Results for Administrative Reviews

Administrative Review Division

| | | | | | 2nd 0 | Quarter | SFY 2 | <u>013</u> | <u>3rd (</u> | <u>Quarte</u> | r SFY | <u> 2013</u> | 4th (| Quarter | SFY 2 | <u> 2013</u> | |
|----------------|---|------------|-----------|-----------|----------|------------|------------|------------|--------------|---------------|-----------|--------------|----------|------------|-----------|--------------|----------|
| Miscellar | neous | <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> |
| Miscella Co | aneous urt | | | | | | | | | | | | | | | | |
| 8501 | Is there a mittimus that contains best interest or welfare of the child 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) | 5 | 1 | 8 | 83.3 % 🛕 | 4 | 0 | 3 1 | 00.0% | 9 | 2 | 4 | 81.8% | 4 | 0 | 21 | 00.0% |
| | No best interest No reasonable efforts/emergency | | | 1 | | | 0 0 | | | | 2 2 | | | | 0 0 | | |
| 8502 | Is this a combined 6-month period review and Permanency Hearing with the ALJ? | 2 | 12 | 0 | 14.3 % | 1 | 6 | 0 | 14.3% | 1 | 12 | 2 | 7.7% | 0 | 6 | 0 | 0.0% |
| IV- | E | | | | | | | | | | | | | | | | |
| 8503 | Has IV-E Eligibility been determined within 45 days of removal? | 6 | 0 | 8 | 100.0 % | 4 | 0 | 3 1 | 00.0% | 11 | 0 | 4 | 100.0% | 4 | 0 | 21 | 00.0% |
| 8504 | Has a timely IV-E redetermination been completed during the review period? (Re-Review Only) | 0 | 0 | 14 | 0.0 % | 0 | 0 | 7 | | 0 | 0 | 15 | | 0 | 0 | 6 | |
| | e Process | 1 | | | | | | | | | | 1 | | | | | |
| 8505 | Were all required parties invited to the review and given at least two-weeks' notice? (Check all No responses that apply) No, father/guardian | 12 | 2 | 0 | 85.7 % | 6 | 1 <u> </u> | 0 | 85.7% | 9 | 6 5 | 0 | 60.0% | 6 | <u> </u> | 0 1 | 00.0% |
| | No, mother/guardian | | | 1 | | | 1 | | | | 1 | | | | 0 | | |
| Mis | scellaneous | | | | | | - | | | | | | | | | | |
| 8555 | Were the previous compliance issues addressed? | 3 | 2 | 9 | 60.0 % 🔥 | 2 | 1 | 4 | 66.7% 🔥 | 0 | 3 | 12 | 0.0% 🔥 | 2 | 0 | 41 | 00.0% |