Onsite Review Dates: June 27 - July 1, 2011

Period Under Review: June 1, 2010 to May 31, 2011

Cases Included in Review		
Foster Care	10	
Treatment	10	
Screened-Out Intakes	10	
Unfounded Investigations	5	
Foster Home Licenses	10	
<b>Total Cases Reviewed</b>	45	

Active Human Service Cases	
(Effective June 2011)	
Total Children in Foster Care	128
Total Treatment Cases	235
Total Children in Treatment Cases	519
Total Active CPS Investigations	59
Total Foster Homes	83

<b>Human Service Staff</b>	Authorized Positions	Filled Positions	Vacant Positions	Extended Leave
Human Serv Coord.II	1	1	0	0
Human Serv Coord I	7	7	0	0
CPS Intake	2	2	0	0
CPS Invest/Assmt	10	8	2	0
CPS Treatment	10	10	0	0
Foster Care	9	7	2	1
Licensing	3	2	1	0

(Statistics as of May 31, 2011)

### **Preliminary Analysis of Outcome Performance**

Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.

The county's performance on this outcome is based on the rating of two items:

1) Timeliness of initiating investigations

**Area Needing Improvement** 

2) Repeat Maltreatment

Strength

### **Explanation of Item 1: Timeliness of initiating investigations**

This is an **Area Needing Improvement** for Lexington DSS. State law requires that an investigation of all accepted reports of abuse and neglect be initiated within 24 hours. Agency data indicates that for the 12-month period under review Lexington initiated 1,178 of its 1,204 investigations (97.8%) of alleged abuse and neglect within 24 hours. Reviewers determined that in 93% of the cases reviewed, the investigations were initiated timely, which is consistent with agency data. Regarding agency data, the agency stipulates that most of the errors are due to data entry. Risk ratings were assigned appropriately in all of the cases reviewed. One foster care case needed improvement because the risk rating's response time was listed as high risk and even though an initial contact was attempted; there were no additional documented efforts in the record until initial contact was made 24 hours later. Due to the high risk rating, additional concerted efforts should have been documented by the agency pertaining to their attempts to address locate the victim child or alleged perpetrator to ensure safety of the child. Reviewers also noted that some of the cases reviewed indicate that the times documented for acceptance of the report and the initiation of the investigation by the agency were the same.

#### **Explanation of Item 2: Repeat Maltreatment**

This is an area of **Strength** for Lexington DSS. This item measures the occurrence of maltreatment among children under agency supervision, or within a year of having their case closed by the agency. **Reviewers determined that the overall rating is 100% in the foster care and treatment cases reviewed, the children under agency supervision did not experience additional maltreatment.** 

Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.

The county's performance on this outcome is based on the rating of two items:

3) Services to family to protect children & prevent removal

**Area Needing Improvement** 

4) Risk of Harm

Area Needing Improvement

Explanation of Item 3: Services to family to protect children and prevent removal

This is an Area Needing Improvement for Lexington DSS. This item assesses whether services were adequate to protect children in their home and prevent their removal and placement into foster care. In 93% of the foster care and treatment cases reviewed, appropriate services were being offered to safely maintain the children in their home. One foster care case needed improvement because the child and their siblings came into care, July 2009 and during the Period under Review, two of the siblings returned home while the target child remained in care. The reviewer is unable to determine what post reunification services were put in place to prevent re-entry for the two siblings.

#### **Explanation of Item 4: Risk of Harm**

This is an Area Needing Improvement for Lexington DSS. This item assesses whether the agency's interventions reduced risks of harm to children. In 80% of the foster care cases reviewed and 40% of the treatment cases reviewed, risk of harm was adequately managed. The majority of the foster care and treatment cases needed improvement because the agency failed to complete criminal background checks and assessments on other adults in the home who had an active role in the children's lives. There were also a lack of consistent informal assessments and home visits completed monthly with children and their parents, foster parents, and alternative caregivers in addressing risk and safety. One foster care case needed improvement because there is no supportive documentation related to risk and safety regarding the target child's siblings who returned home.

Permanency Outcome 1: Children have permanency and stability in their living situations.

The county's performance on this outcome is based on the rating of six items:

5) Foster care re-entries Area Needing Improvement

6) Stability of foster care placement Area Needing Improvement

7) Permanency goal for child

Area Needing Improvement

8) Reunification/permanent placement with relatives Area Needing Improvement

recumined to the following the following impression of the following impression in the

9) Adoption Strength

10) Permanency goal of Another Planned Strength

Permanent Living Arrangement (APPLA)

### **Explanation of Item 5: Foster care re-entries**

This is an **Area Needing Improvement** for Lexington DSS. This item measures the frequency of children re-entering foster care within a year of discharge. To meet the objective for this item, 90.1% of children must not re-enter foster care within a year of discharge. <u>Agency data</u> shows that 88.7% of the children did not re-enter foster care within 12-months of the date of their discharge from the previous foster care episode.

Reviewers determined that none of the children in the cases reviewed had a prior episode of foster care entry.

### **Explanation of Item 6: Stability of foster care placement**

This is an Area Needing Improvement for Lexington DSS. This item measures the frequency of placement changes for children in foster care, and assesses the reasons for those changes. The objective is that at least 86% of the children in care have two or fewer placements within 12 months. Agency data shows that 75% of Lexington County children had two or fewer placements. Reviewers determined that 70% of the foster care cases reviewed were rated strength. Two cases needed improvement due to the children experiencing at least two placement changes in the last 12 months due to the their behavior and documentation is not clear as to whether or not the children's needs were addressed when identified to decrease placement changes and promote stability. In another case, the child has been in a residential care facility for more than a year and the child's plan is to return home. There is no documentation to support that the child is making any progress in his levels so that the child may be paced in a more appropriate setting that would prepare him to return to his family as outlined in his permanency goal.

### **Explanation of Item 7: Permanency goal for children**

This is an Area Needing Improvement for Lexington DSS. This item evaluates the appropriateness of permanency goals for children in foster care and the timeliness of those permanency decisions. Reviewers determined that in 70% of the foster care cases reviewed, the agency quickly identified the appropriate goal. Two cases needed improvement because even though the agency established the plan timely; the goals were not appropriate. One case the family has an extensive history with the agency which resulted in the older children being placed adoptively and the other case the parents were noncompliant with services due to their continuous drug use. The parent's noncompliance caused them to be involuntarily discharged from services required by the provider. In a third case, the agency established a plan of return home with a concurrent plan of TPR/Adoption. There are no documented efforts of the agency pursing the concurrent plan and it is not an appropriate plan based on the circumstances in the case and the goal is not in the child's best interest.

### **Explanation of Item 8: Reunification or permanent placement with relatives**

This is **Area Needing Improvement** for Lexington DSS. This item evaluates the activities and processes necessary to accomplish the goal of reunification with caregivers or placement with relatives. <u>Agency data</u> shows that 61.6% of Lexington DSS children were reunified with their parents, which is below the 75.2% federal standard. **Reviewers determined that one case needed improvement because the child's plan is to return home and he is placed in a Residential Care Facility. The agency has not made any concerted efforts to expedite therapeutic interventions to reunify the family.** 

### **Explanation of Item 9: Adoption**

This is an area of **Strength** for Lexington DSS. This item evaluates the process within the child welfare system to achieve timely adoptions for children in foster care. <u>Agency data</u> shows that Lexington DSS completed 31 adoptions in SFY2009 and SFY2010. Twelve (38.7%) of the 31 adoptions were finalized within 24 months of the child entering care which is above the national percentile of 36.6%. **Improvement was needed in the majority of the cases reviewed because the children had been in care for more than 24 months and permanency was denied due to court delays and continuances. Also in another case it was determined that the plan of adoption was identified for the child but there were no concerted efforts made by the agency to pursue this goal.** 

### Explanation of Item 10: Permanency goal of APPLA

This is area of **Strength** for Lexington DSS. This item evaluates the appropriateness and effectiveness of services provided to children with the permanency plan of APPLA. Reviewers also rate whether the agency attempted to locate and reassess relatives or non-relatives that were willing to commit to the youth's long-term care every six months. **Reviewers found that in 100% of the cases reviewed, there is documentation to support that the children with the plan of APPLA were receiving the appropriate Independent Living services and had an identified resource to help them achieve the goal of APPLA.** 

Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.

The county's performance on this outcome is based on the rating of six items:

11)	Proximity of foster care placement	Strength
12)	Placement with siblings in foster care	<b>Area Needing Improvement</b>
13)	Visiting with parents and siblings in foster care	<b>Area Needing Improvement</b>
14)	Preserving connections	<b>Area Needing Improvement</b>
15)	Relative placement	<b>Area Needing Improvement</b>
16)	Relationship of child in care with parents	<b>Area Needing Improvement</b>

#### **Explanation of Item 11: Proximity of foster care placement**

This is an area of **Strength** for Lexington County DSS. This item evaluates the agency's efforts to keep children close enough to their families so that essential relationships can be maintained. One measure used to evaluate this item is the percentage of children who are placed within the county. The objective is that at least 70% of the children in care be placed within the county. Agency data shows that 74.6% of Lexington DSS children were placed within the county, which is above the established objective. **One case needed improvement because the child not being placed in an adjacent county places a barrier for maintaining relationships with his siblings who are placed in other counties.** 

#### **Explanation of Item 12: Placement with siblings in foster care**

This is an Area Needing Improvement for Lexington DSS. This item evaluates the agency's efforts to keep siblings together when it is appropriate to do so. In 67% of the cases reviewed, siblings group were kept together when appropriate. Three cases needed improvement because there was no documented reason as to why the children were not placed with their other siblings or whether or not their placements were assessed for placing them together.

Explanation of Item 13: Visiting with siblings in foster care and with parents
This is an Area Needing Improvement for Lexington DSS. This item evaluates the agency's efforts to ensure that visits occur between children in foster care and their siblings and parents. Improvement was needed in 67% of the cases reviewed because the agency either failed to arrange visits as required between siblings and with children and their mothers and fathers or failed to assess the appropriateness of such visits. There was also a lack of diligent search for the fathers or follow-up.

of such visits. There was also a lack of diligent search for the fathers or follow-up by the agency to contact the fathers even when the agency was aware of their whereabouts.

#### **Explanation of Item 14: Preserving Connections**

This is an Area Needing Improvement for Lexington DSS. This item evaluates the agency's efforts to preserve children's connections to the people, places, community, heritage, tribe, extended family, faith and things that are important to them. Improvement was need in 86% of the cases reviewed; agency efforts were not present to help children maintain their relationships with family, friends or people who are important to them.

#### **Explanation of Item 15: Relative Placement**

This is an Area Needing Improvement for Lexington DSS. This item evaluates the agency's efforts to identify and assess relatives as potential placement resources for children in foster care. In 67% of the cases reviewed, reviewers found that the agency did not consistently assess maternal and paternal relatives as placement options.

#### **Explanation of Item 16: Relationship of child in care with parents**

This is an Area Needing Improvement for Lexington DSS. This item evaluates the agency's efforts to promote a supportive relationship between children in care and their parents, beyond the twice-minimum visitation requirement. Improvement was needed in all of the cases reviewed; reviewers found no evidence of the agency's additional efforts in supporting the parent-child relationships based on the needs of the child. Agency policy requires that child contact with parents take into consideration factors like the age of the child, issues associated with transitioning a child back into the home, etc.

Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.

The agency's performance on this outcome is based on the rating of four items:

17) Needs and services of child, parents and caregivers A

18) Child and family involvement in case planning

19) Worker visits with child

20) Worker visits with parents

**Area Needing Improvement** 

**Area Needing Improvement** 

**Area Needing Improvement** 

**Area Needing Improvement** 

### Explanation of Item 17: Needs and services of child, parents and caregivers

This is an Area Needing Improvement for Lexington DSS. This item asks two questions: 1) Were the needs of the child, parents, and caregivers assessed, and 2) Did the agency take steps to meet the identified needs? This is a weak area for both foster care and treatment cases. In 60% of the foster care cases and in 50% of the treatment cases reviewed, needs and services of the child and parents were not adequately assessed. The majority of the cases reviewed needed improvement due to the agency's lack of assessment of the parents, paramours, age appropriate children and non custodial parent's needs. Also documentation does not indicate that the agency followed up with the fathers even if they were aware of their whereabouts. One foster care case needed improvement because the father speaks limited English and even though he was seen by the agency an interpreter is needed in order for the agency to consistently assess the father's needs. This item's weakness may be attributed to the lack of thorough informal assessments, documentation and follow-up on pertinent information regarding the identification of needs by service providers and formal and informal assessments by the agency.

#### Explanation of Item 18: Child and family involvement in case planning

This is an Area Needing Improvement for Lexington DSS. This item evaluates the agency's efforts to involve parents, paramours and children in the case planning process. Reviewers found that 78% of the foster care cases and 30% of the treatment cases needed improvement because the parents, paramours and the age-appropriate children were not involved in the case planning process. This rating was affected by the agency's failure to diligently look for and engage the fathers of children in care. This rating was also affected by a lack of diligent search and consistent follow up by the agency with the parents even when they had knowledge of their whereabouts; especially when the parents were incarcerated.

#### Explanation of Item 19: Worker visits with child

This is an Area Needing Improvement for Lexington DSS. This item measures the frequency of caseworker visits with children under agency supervision, and evaluates the quality of those visits. State law and agency policy require that children under agency supervision be seen each month. Agency data is consistent with onsite review findings. Reviewers determined that 30% of the children in foster care and 40% of the children in treatment cases were seen monthly and the documentation supported that the visits by the agency addressed child safety, well-being issues,

and pertinent issues relevant to case planning. The majority of the cases reviewed needed improvement because the agency failed to conduct visits consistently as required for all of the children for the months during the PUR and document visits that supported that safety and well being issues were addressed monthly. Reviewers also noted that some of the contacts during the PUR were not conducted by a caseworker but an Intern. At least one monthly face to face contact must be made by the caseworker for each child.

### **Explanation of Item 20: Worker visits with parents**

This is an Area Needing Improvement for Lexington DSS. This item measures the frequency of caseworker visits with parents, and evaluates the quality of those visits. Improvement was needed in 67% of the foster care cases and in 60% of the treatment cases due to the agency's failure to visit both parents monthly during the period under review. Reviewers also noted that alternative caregivers were not visited monthly as required to ensure the safety of the children whom they were responsible for. The caseworkers did not consistently use their visits with parents to discuss treatment or permanency related topics or consistently follow-up on relevant information to complete diligent search for missing fathers. Also once information was obtained on the fathers by the agency, there was a lack of follow-up to utilize the information to contact the fathers.

Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.

The agency's performance on this outcome is based on the rating of one item:

21) Educational needs of the child

**Area Needing Improvement** 

### **Explanation of Item 21: Educational needs of the child**

This is an Area Needing Improvement for Lexington DSS. This item evaluates the agency's ability to assess and attend to the educational needs of children under agency supervision. In 71% of the foster care cases and in 50% of the treatment cases, reviewers found that workers assessed and attended to the educational needs of the children as required. One foster care case needed improvement because even though the child is of pre-school age, there were identified developmental delays and there is no documentation that the child's delays were addressed via an educational approach. Another foster care case needed improvement because the child was having problems in school and the foster parent withdrew the child and enrolled the child in computer courses to complete his educational goals. There is no documentation indicating that the case manager took part in assisting with the planning of the child's educational needs or school records or direct contact with the provider to track progress. One treatment case needed improvement because the agency became involved with the family due to educational neglect (lack of attendance) and even though there are attendance records on file; the agency has

not fully assessed the child's educational needs because there are no records of the child's grades or IEP on file.

Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.

The agency's performance on this outcome is based on the rating of two items:

22) Physical health of the child

**Area Needing Improvement** 

23) Mental health of the child

**Area Needing Improvement** 

#### **Explanation of Item 22: Physical health of the child**

This is an Area Needing Improvement for Lexington DSS. This item evaluates the agency's ability to assess and attend to the medical needs of children under agency supervision. In 70% of the foster care cases and in 71% of the treatment cases, reviewers determined that the physical health and dental needs of the children were assessed and the identified medical needs were attended to. In the majority of the cases reviewed, the agency did a good job of assessing medical needs but failed to assess the dental needs of the children involved. Improvement is needed in most of the foster care and treatment cases reviewed because of the agency's lack of medical records or direct contact with a medical and dental provider to verify that the children with identified medical needs were thoroughly assessed as required and attended to.

### **Explanation of Item 23: Mental health of the child**

This is an Area Needing Improvement for Lexington DSS. This item evaluates the agency's ability to assess and meet the mental health needs of children under agency supervision. In 57% of the foster care and 40% of the treatment cases reviewed, the children's mental health needs were assessed and attended to. Improvement is needed because children were not consistently assessed nor did they consistently receive services when needs were identified. There was also a lack of direct contact with service providers or follow-up by the agency to obtain medical records on the identified services that the children received.

### **Unfounded Investigations**

	Yes	No
Was the investigation initiated timely?	5	0
Was the assessment adequate?	2	3
Was the decision appropriate?	3	2

### **Explanation of Item 24: Unfounded Investigations**

This is an **Area Needing Improvement** for Lexington DSS. This item evaluates the agency's investigative process and determines if decisions were supported by the facts of the cases. All five investigations were initiated timely. In one case the assessment was inadequate because of the agency's failure to interview the mother's paramour who has a significant role in the victim child's life. However, the decision to unfound the case was appropriate because the medical documents support the case decision. In the other two cases, the assessments were inadequate because of the agency's failure to assess the allegations of substance abuse by the alleged perpetrator and the 12 years old child, especially when the agency had knowledge of marijuana being found on the child at the school as a result of a search. A referral for substance abuse assessment of the mother and child should have been made that could have supported the decision to unfound or substantiate the case. In the other case, the investigation ruled out sexual abuse but other risk issues were revealed to include the father not having stable housing. In that case, the father informed the agency that the victim child would be moving in with his step-mother until he obtained housing. However, the agency failed to follow-up with the step-mother to assess her home to ensure the child's safety prior to the decision to unfound the case.

### **Questionable Unfounded Cases:**

- 1. Megan Rogers 0001129308
- 2. Marshall Reed 0001131455
- 3. Suzanne Watson 0001130360

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Screened	()t	$I_{\bullet \bullet} + a_{\bullet}$	1-00
Screened	<b>1</b> // // /	ши	K ES

	Yes	No	Cannot Determine
Was the Intake Appropriately Screened Out?	9	1	0
			Not Applicable
Were Necessary Collaterals Contacted?	3	2	5
Were Appropriate Referrals Made?	0	0	10

#### **Explanation of Item 25: Screened Out Intakes**

This is an **Area Needing Improvement** for Lexington DSS. This item evaluates the process by which the agency screens out reports of abuse and/or neglect. Of the 10 intakes screened out, one should have been accepted for investigation. In that intake, the allegations were that the mother who is an adult punched her 10 year old child in the stomach, which meets the criteria of abuse and neglect. The mother was in loco parentis and the child was hit in an area that could have caused physical and medical problems internally.

### **Questionable Screen out:**

1 Leslie Williams--- 0001344927

### Foster Home Licenses

### **Explanation of Item 26: Foster Home Licenses**

This is an **Area Needing Improvement** for Lexington DSS. This item evaluates the process by which the agency ensures that all foster homes comply with licensing requirements. Six of the 10 foster home licenses reviewed were not valid because the Fire inspections, FBI & SLED checks and the required 28 training hours were either not completed or not located on the required household members per policy prior to the issuance of the license. Also, there were no medical records found on the foster parent's biological or adoptive children as required per policy.

CAPSS was inconsistent with information in the files. Quarterly Home visits are not being completed as required and consistently once the home is licensed. There are some quarterly visits guides on file but they are not all documented in CAPSS as required. In one case, there were no quarterly home visit guides completed during the past 12 months. Also in that case, there was no quarterly home visits documented in CAPSS since 2007. Reviewers identified the following practice issues listed below but they do not reflect the validity of the issuance of the license.

- > Sexual Offenders checks are being completed nationally but not locally for SC.
- ➤ Quarterly home visits are not consistently conducted each quarter timely per policy as required.
- ➤ Disaster Plans are not being completed annually per policy as required.

### Systemic Issues

- 1. Lack of transportation due to this being a rural area.
- 2. Limited access to parenting classes that address specific needs.

### **Review Team**

Juliet Myers Supervisor-Richland DSS

Michael Gutshall Supervisor- Region 2 Adoptions

Tiffany Marcus FC/TA State Office Cookie Grant CPS/TA State Office

Kathy Wilkins MEPA/ Review Coordinator

Letha McAllister Review Coordinator/Stakeholder Interviews

Cordelia Cooper Review Coordinator Zelda D. Kollock Review Coordinator

Treatment Case Rating Summary
Reviewers should check the nonshaded box for each performance item and
Outcome that corresponds to the rating assigned.

Outcome that corresponds to the rating assigned.				
	Performance Item Ratings			
	Performance Item or Outcome	Strength	Area Needing Improvement	N/A*
	Safety Outcome 1: Children are, first and foremost,	*	e and neglect.	
Item 1:	Timeliness of initiating investigations of reports of child maltreatment	///// /////	0	0
Item 2:	Repeat maltreatment	///// /////	0	0
,	Safety Outcome 2: Children are safely maintained in their h	omes whenever poss	sible and appropriate.	
Item 3:	Services to family to protect child(ren) in home and prevent removal	///// /////	0	0
Item 4:	Risk of harm to child(ren)	////	///////	0
Item 5:				
Item 6:				
Item 7:				
Item 8:				
Item 9:				
Item 10:				
Item 11:				
Item 12:				
Item 13:				
Item 14:				
Item 15:				
Item 16:				
	Well Being Outcome 1: Families have enhanced capacit			
Item 17:	Needs and services of child, parents, caregiver	/////	////	0
Item 18:	Child and family involvement in case planning	///// //	///	0
Item 19:	Worker visits with child	////	///// /	0
Item 20:	Worker visits with parent(s)	////	///// /	0
	Well Being Outcome 2: Children receive appropriate ser	rvices to meet their e	educational needs.	
Item 21:	Educational needs of the child	1	/	///// ///
We	Il Being Outcome 3: Children receive adequate services to			
Item 22:	Physical health of the child	/////	//	///
Item 23:	Mental health of the child	//	///	/////

Foster Care Case Rating Tally					
	Performance Item Ratings				
	Performance Item or Outcome	Strength	Area Needing Improvement	N/A*	
	Safety Outcome 1: Children are, first and foremost	, protected from abo	use and neglect.		
Item 1:	Timeliness of initiating investigations of reports of child maltreatment		/	///////	
Item 2:	Repeat maltreatment	////	0	///// /	
S	afety Outcome 2: Children are safely maintained in their	homes whenever po	ossible and appropriate.		
Item 3:	Services to family to protect child(ren) in home and prevent removal	////	/	/////	
Item 4:	Risk of harm to child (ren)	//// ///	//	0	
	Permanency Outcome 1: Children have permanency	and stability in their	living situations.	•	
Item 5:	Foster care re-entries	////	0	///// /	
Item 6:	Stability of foster care placement	///// //	///	0	
Item 7:	Permanency goal for child	///// //	///	0	
Item 8:	Reunification, guardianship, or permanent placement with relatives	//	/	///// //	
Item 9:	Adoption	///	///	////	
Item 10:	Permanency goal of Alternate Planned Permanent Living Arrangement (APPLA)	//	0	///// ///	
Per	manency Outcome 2: The continuity of family relationsh		is preserved for childre		
Item 11:	Proximity of foster care placement	///// /	/	///	
Item 12:	Placement with siblings	////	//	////	
Item 13:	Visiting with parents and siblings in foster care	///	///////	/	
Item 14:	Preserving connections	/	/////	////	
Item 15:	Relative placement	///	//////	/	
Item 16:	Relationship of child in care with parents	0	///// //	///	
	Well Being Outcome 1: Families have enhanced capac	ity to provide for the	eir children's needs.		
Item 17:	Needs and services of child, parents, caregiver	////	///////	0	
Item 18:	Child and family involvement in case planning	//	///// //	/	
Item 19:	Worker visits with child	///	//// //	0	
Item 20:	Worker visits with parent(s)	//	////	////	
	Well Being Outcome 2: Children receive appropriate s				
Item 21:	Educational needs of the child	/////	//	///	
Wel	Being Outcome 3: Children receive adequate services to				
Item 22:	Physical health of the child	///// //	///	0	
Item 23:	Mental health of the child	////	///	///	

Foster Care and Treatment Case Rating Summary						
	Performance Item Ratings					
	Performance Item or Outcome	Strength	Area Needing Improvement	N/A*		
Safety Ou	tcome 1: Children are, first and foremost, protected from	abuse and neglect.				
Item 1: *ANI	Timeliness of initiating investigations of reports of child maltreatment	13/14 =93%	1/14=7%	6		
Item 2: STR	Repeat maltreatment	14/14=100%	0	6		
	tcome 2: Children are safely maintained in their homes when		11 1			
Item 3: ANI	Services to family to protect child (ren) in home and prevent removal	14/15=93%	1/5=7%	5		
Item 4: ANI	Risk of harm to child (ren)	12/20=60%	4/20=40%	0		
Permaner	ncy Outcome 1: Children have permanency and stability in		ons.			
Item 5: *ANI	Foster care re-entries	4/4=100%	0	6		
Item 6:* ANI	Stability of foster care placement	7/10=70%	3/10=30%	0		
Item 7: ANI	Permanency goal for child	7/10=70%	3/10=30%	0		
Item 8: * ANI	Reunification, guardianship, or permanent placement with relatives	2/3=67%	1/3=33%	7		
Item 9:*STR	Adoption	3/6=50%	3/6=50%	4		
Item 10: STR	Permanency goal of Alternate Planned Permanent Living Arrangement (APPLA)	2/2=100%	0	8		
Perma	nency Outcome 2: The continuity of family relationships	and connections is	preserved for children.			
Item 11:*STR	Proximity of foster care placement	6/7= 86%	1/7=14%	3		
Item 12: ANI	Placement with siblings	4/6=67%	2/6=33%	4		
Item 13: ANI	Visiting with parents and siblings in foster care	3/9=33%	6/9=67%	1		
Item 14: ANI	Preserving connections	1/6=17%	5/6=83%	4		
Item 15: ANI	Relative placement	3/9=33%	6/9=67%	1		
Item 16: ANI	Relationship of child in care with parents	0	7/7=100%	3		
,	Well Being Outcome 1: Families have enhanced capacity	•	children's needs.			
Item 17: ANI	Needs and services of child, parents, caregiver	9/20=45%	11/20=55%	0		
Item 18: ANI	Child and family involvement in case planning	9/19=47%	10/19=53%	1		
Item 19: ANI	Worker visits with child	7/20=35%	13/20=65%	0		
Item 20: ANI	Worker visits with parent(s)	6/16=38%	10/16=62%	4		
,	Well Being Outcome 2: Children receive appropriate serv	ices to meet their ed	ducational needs.	•		
Item 21: ANI	Educational needs of the child	6/9=67%	3/9=33%	11		
	Being Outcome 3: Children receive adequate services to m	eet their physical a	nd mental health needs.			
Item 22: ANI	Physical health of the child	12/17=71%	5/17=29%	3		
Item 23: ANI	Mental health of the child	6/12=50%	6/12=50%	8		

The objective is that 95% of cases be rated "Strength."

STR = Strength

ANI = Area Needing Improvement

<sup>\* =</sup> Rating based on agency data, not onsite review findings