This summary report describes the results of the South Carolina Department of Social Services (DSS) Georgetown County Quality Assurance Review, conducted June 2-6, 2014. The period under review was June 1, 2013 to May 31, 2014.

DSS Child Welfare Quality Assurance Reviews are conducted using the Onsite Review Instrument (OSRI) finalized by the federal Administration for Children & Families (ACF) in July 2008. This instrument is used to review foster care and family preservation services cases. Twenty cases were reviewed including 10 foster care and 10 family preservation cases.

The OSRI is divided into three sections: safety, permanency, and child and family well-being. There are two safety outcomes, two permanency outcomes, and three well-being outcomes. Reviewers collect information on a number of items related to each of the outcomes through case file review, the use of the Child and Adult Protective Services System (CAPSS), and case related interviews. CAPSS is South Carolina’s SACWIS, which contains all case related information. This information is detailed on the OSRI as support for rating selection.

The ratings for each item are combined to determine the rating for the outcome. The items are rated as strength, area needing improvement, or not applicable. Outcomes are rated as being substantially achieved, partially achieved, not achieved, or not applicable. Ratings for each of the outcomes are displayed in Table 1.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Substantially Achieved</th>
<th>Partially Achieved</th>
<th>Not Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety 1 <em>Children are, first and foremost, protected from abuse and neglect</em></td>
<td>60% (6)</td>
<td>30% (3)</td>
<td>10% (1)</td>
</tr>
<tr>
<td>Safety 2 <em>Children are safely maintained in their homes whenever possible and appropriate</em></td>
<td>45% (9)</td>
<td>0% (0)</td>
<td>55% (11)</td>
</tr>
<tr>
<td>Permanency 1 <em>Children have permanancy and stability in their living situations</em></td>
<td>10% (1)</td>
<td>90% (9)</td>
<td>0% (0)</td>
</tr>
<tr>
<td>Permanency 2 <em>The continuity of family relationships and connections is preserved for children</em></td>
<td>40% (4)</td>
<td>60% (6)</td>
<td>0% (0)</td>
</tr>
<tr>
<td>Well-Being 1 <em>Families have enhanced capacity to provide for their children’s needs</em></td>
<td>15% (3)</td>
<td>50% (10)</td>
<td>35% (7)</td>
</tr>
<tr>
<td>Well-Being 2 <em>Children receive appropriate services to meet their educational needs</em></td>
<td>60% (6)</td>
<td>20% (2)</td>
<td>20% (2)</td>
</tr>
<tr>
<td>Well-Being 3 <em>Children receive adequate services to meet their physical and mental health needs</em></td>
<td>28% (5)</td>
<td>33% (6)</td>
<td>39% (7)</td>
</tr>
</tbody>
</table>

Results for outcomes and items are reported by the number of cases and the percentage of total cases given each rating. In addition, the percentage of strengths is calculated for each item. This percentage is calculated by adding the number of strengths and the number of areas needing improvement. The number of strengths is divided into this total to determine the percentage of strengths. Appendix 1 provides more detailed analysis of issues impacting the ANI ratings.
SECTION I: REVIEW FINDINGS

SAFETY OUTCOME 1: CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT
Two items are included under Safety Outcome 1. Ratings for the two items are shown in Table 2.

Item 1: Timeliness of initiating investigations
Purpose of Assessment: To determine whether responses to all accepted child maltreatment reports received during the period under review were initiated and face-to-face contact with the child made, within the timeframes established by agency policies or State statute.

Item 2: Repeat maltreatment
Purpose of Assessment: To determine if any child in the family experienced repeat maltreatment within a 6-month period.

SAFETY OUTCOME 2: CHILDREN ARE SAFELY MAINTAINED IN THEIR HOMES WHENEVER POSSIBLE AND APPROPRIATE
Two items are included under Safety Outcome 2. Ratings for the items are shown in Table 3.

Item 3: Services to family
Purpose of Assessment: To determine whether, during the period under review, the agency made concerted efforts to provide services to the family to prevent children’s entry into foster care or re-entry after a reunification.

Item 4: Risk assessment and safety management
Purpose of Assessment: To determine whether, during the period under review, the agency made concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care.

PERMANENCY OUTCOME 1: CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING SITUATIONS
Six items are included under Permanency Outcome 1. Ratings for the items are shown in Table 4.

Item 5: Foster Care reentries
Purpose of Assessment: To assess whether children who entered foster care during the period under review were re-entering within 12 months of a prior foster care episode.

Item 6: Stability of foster care placement
Purpose of Assessment: To determine if the child in foster care is in a stable placement at the time of the onsite review and that any changes in placement that occurred during the period under review were in the best interest of the child and consistent with achieving the child’s permanency goal(s).
**Item 7: Permanency goal for child**
Purpose of Assessment: To determine whether appropriate permanency goals were established for the child in a timely manner.

**Item 8: Reunification, guardianship, or permanent placement with relatives**
Purpose of Assessment: To determine whether concerted efforts were made, or are being made, during the period under review, to achieve reunification, guardianship, or permanent placement with relatives in a timely manner.

**Item 9: Adoption**
Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made, or are being made, to achieve a finalized adoption in a timely manner.

**Item 10: Other planned permanent living arrangement (OPPLA)**
Purpose of Assessment: To determine whether, during the period under review, the agency made concerted efforts to ensure:

- That the child is adequately prepared to make the transition from foster care to independent living (if it is expected that the child will remain in foster care until he or she reaches the age of majority or is emancipated).
- That the child, even though remaining in foster care, is in a “permanent” living arrangement with a foster parent or relative caregiver and that there is a commitment on the part of all parties involved that the child remain in that placement until he or she reaches the age of majority or is emancipated.
- That the child is in a long-term care facility and will remain in that facility until transition to an adult care facility.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Item 5</th>
<th>Item 6</th>
<th>Item 7</th>
<th>Item 8</th>
<th>Item 9</th>
<th>Item 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strength</td>
<td>25% (5)</td>
<td>35% (7)</td>
<td>25% (5)</td>
<td>5% (1)</td>
<td>15% (3)</td>
<td>5% (1)</td>
</tr>
<tr>
<td>Area needing improvement</td>
<td>0% (0)</td>
<td>15% (3)</td>
<td>25% (5)</td>
<td>25% (5)</td>
<td>15% (3)</td>
<td>0% (0)</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>75% (15)</td>
<td>50% (10)</td>
<td>50% (10)</td>
<td>70% (14)</td>
<td>70% (14)</td>
<td>95% (19)</td>
</tr>
<tr>
<td>Total</td>
<td>100% (20)</td>
<td>100% (20)</td>
<td>100% (20)</td>
<td>100% (20)</td>
<td>100% (20)</td>
<td>100% (20)</td>
</tr>
<tr>
<td>% Strengths</td>
<td>100% (5)</td>
<td>70% (7)</td>
<td>50% (5)</td>
<td>16.7% (1)</td>
<td>50% (3)</td>
<td>100% (1)</td>
</tr>
</tbody>
</table>

**Permanency Outcome 2: The Continuity of Family Relationships and Connections is Preserved for Children**
Six items are included under Permanency Outcome 2. Ratings for the items are shown in Table 5.

**Item 11: Proximity of Foster Care Placement**
Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made to ensure that the child’s foster care placement was close enough to the parent(s) to facilitate face-to-face contact between the child and the parent(s) while the child was in foster care.
**Item 12: Placement with siblings**
Purpose of Assessment: To determine if, during the period under review, concerted efforts were made to ensure that siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the siblings.

**Item 13: Visiting with parents & siblings in foster care**
Purpose of Assessment: To determine if, during the period under review, concerted efforts were made to ensure that visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child’s relationship with these close family members.

**Item 14: Preserving connections**
Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made to maintain the child’s connections to his or her neighborhood, community, faith, extended family, tribe, school, and friends.

**Item 15: Relative placement**
Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made to place the child with relatives when appropriate.

**Item 16: Relationship of child in care with parents**
Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation.

<table>
<thead>
<tr>
<th>Table 5.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rating</td>
</tr>
<tr>
<td>Strength</td>
</tr>
<tr>
<td>Area needing improvement</td>
</tr>
<tr>
<td>Not Applicable</td>
</tr>
<tr>
<td>Total</td>
</tr>
<tr>
<td>% Strengths</td>
</tr>
</tbody>
</table>

**Well-Being Outcome 1: Families Have Enhanced Capacity to Provide for Their Children’s Needs**
Four items are included under Well-Being Outcome 1. Ratings for the items are shown in Table 6.

**Item 17: Needs and services of child, parents, & foster parents**
Purpose of Assessment: To determine whether, during the period under review, the agency made concerted efforts to assess the needs of children, parents, and foster parents (both at the child’s entry into foster care [if the child entered during the period under review] or on an ongoing basis) to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency’s involvement with the family, and provided the appropriate services.
**Item 18: Child & family involvement in case planning**
Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made (or are being made) to involve parents and children (if developmentally appropriate) in the case planning process on an ongoing basis.

**Item 19: Caseworker visits with the child**
Purpose of Assessment: To determine whether the frequency and quality of visits between caseworkers and the child(ren) in the case are sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals.

**Item 20: Caseworker visits with parents**
Purpose of Assessment: To determine whether, during the period under review, the frequency and quality of visits between caseworkers and the mothers and fathers of the children are sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case goals.

| Table 6. |
| --- | --- | --- | --- | --- |
| Rating | Item 17 | Item 18 | Item 19 | Item 20 |
| **Strength** | 15% (3) | 20% (4) | 65% (13) | 10% (2) |
| **Area needing improvement** | 85% (17) | 80% (16) | 35% (7) | 75% (15) |
| Not Applicable | 0% (0) | 0% (0) | 0% (0) | 15% (3) |
| **Total** | 100% (20) | 100% (20) | 100% (20) | 100% (20) |
| **% Strengths** | 15% (3) | 20% (4) | 65% (13) | 11.8% (2) |

**Well-Being Outcome 2: Children receive appropriate services to meet their educational needs**
One item is included under Well-Being Outcome 2. Ratings for the item are shown in Table 7.

**Item 21: Educational needs of child**
Purpose of Assessment: To assess whether, during the period under review, the agency made concerted efforts to assess children’s educational needs at the initial contact with the child (if the case was opened during the period under review) or on an ongoing basis (if the case was opened before the period under review), and whether identified needs were appropriately addressed in case planning and case management activities.

| Table 7. |
| --- | --- |
| Rating | Item 21 |
| **Strength** | 30% (6) |
| **Area needing improvement** | 20% (4) |
| Not Applicable | 50% (10) |
| **Total** | 100% (20) |
| **% Strengths** | 60% (6) |

**Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs**
Two items are included under Well-Being Outcome 3. Ratings for the items are shown in Table 8.

**Item 22: Physical health of child**
Purpose of Assessment: To determine whether, during the period under review, the agency addressed the physical health needs of the child, including dental health needs.
Item 23: Mental/behavioral health of child
Purpose of Assessment: To determine whether, during the period under review, the agency addressed the mental/behavioral health needs of the child(ren).

Table 8.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Item 22</th>
<th>Item 23</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strength</td>
<td>30% (6)</td>
<td>30% (6)</td>
</tr>
<tr>
<td>Area needing improvement</td>
<td>50% (10)</td>
<td>35% (7)</td>
</tr>
<tr>
<td>Not Applicable</td>
<td>20% (4)</td>
<td>35% (7)</td>
</tr>
<tr>
<td>Total</td>
<td>100% (20)</td>
<td>100% (20)</td>
</tr>
<tr>
<td>% Strengths</td>
<td>37.5% (6)</td>
<td>46.2% (6)</td>
</tr>
</tbody>
</table>
SECTION II: FOSTER HOME LICENSE REVIEW

As part of the Quality Assurance Review Process in Georgetown County, ten Foster Home Licenses were randomly selected from the list of all licenses issued for the county during the period under review. These licenses are reviewed using the South Carolina Department of Social Services Quality Assurance Foster Home License Review Instruments. There is one instrument for issuance of initial licenses and another instrument for the renewal of licenses. Each instrument contains a section of deficiencies, namely agency oversight, data entry, and qualitative issues. Deficiencies noted in this section may not invalidate the license but still require attention and correction by county management. Each instrument includes the appropriate agency, state, and federal requirements.

Initial License review criteria include the following items:

- Information related to firearms and ammunition in the house
- Pet vaccination information
- Background checks
- Convictions
- Required trainings
- Medical reports
- Fire inspections/re-inspections
- DHEC/Lead inspections
- Central registry check on alternative caregiver, if applicable
- A review of any conflicts noted between file documents and CAPSS
- Completion and issuance of the 1513 prior to the license being issued
- Guidelines regarding in-ground swimming pools

Renewal License review criteria include the following items:

- Convictions
- Training hours
- Medical reports if a new household member has been added or if there is a change in foster parent’s medical status
- Fire inspections
- Quarterly home visits
- FBI checks, if applicable
- Guidelines regarding in-ground swimming pools
- 1513 completed prior to issuance of the license
- Any amendments to the license, if applicable
- Documentation regarding if there are more than five children in the home
- Annual firearms location update
- Information concerning the alternative caregivers
- Safety checks of alternative caregivers
- A review of child protective service allegations
- Pet vaccination information
- A review of any regulatory infractions
- A review of any conflicts noted between file documents and CAPSS

Possible deficiencies found in Initial and Renewal cases include:

- Updated home studies
- Discipline Agreements
- Fire drills
- Quarterly home visits
- Disaster Preparedness Plans
- Alternative caregiver forms
- Applications
- Autobiography information
- Financial information
- Child factor’s checklists
- Initial home assessment studies
- References
Areas noted as having occurred as required on the assessment are rated as strengths. Those items that were not met are rated as an area needing improvement (ANI). If the issue is not applicable, it is rated N/A.

Additionally, the percentage of strengths is also calculated for each item. This percentage is calculated by adding the number of strengths and the number of ANIs. The number of strengths is divided into this total to determine the percentage of strengths. Results of the review are noted in Table 9.

**Foster Home Licensing Findings for Georgetown County**

**Initial License Cases.** One foster care issuance for initial/standard license was reviewed. Information for ratings was obtained by reviewers through case file documentation, which includes the use of CAPSS. The one case reviewed was rated as strength because all of the licensing requirements were met prior to authorization of the license issuance.

**Renewal License Cases.** Five cases reviewed were rated as ANI because all of the licensing requirements were not met prior to authorization of the license renewal. Information for ratings was obtained by reviewers through case file documentation, which includes the use of CAPSS. Issues identified that led to the rating of ANI for five cases include:

**Background Checks:**
- There was not documentation in the case file to support that SLED, sex offender, and/or FBI checks for all individuals were completed.
- Documentation indicated that fingerprinting for all applicable individuals was not requested and completed in a timely manner.

**Medical Records:**
- Medical statement documentation for all family members was not located in the file.

**Safety Concerns:**
- Documentation failed to confirm that the agency conducted a follow-up home visit ensuring that foster parents had resolved all identified safety concerns, including, but not limited to, improperly stored firearms and medication.

**Training:**
- Documentation was not sufficient to allow for verification of the completion of all training hours.

**Deficiencies found in Renewal Cases.** Deficiencies were noted for eight of the ten files reviewed. Issues identified by the reviewers include:

**Alternative Caregiver:**
• Documentation did not include identification of an alternative caregiver/ babysitter.

**Fire Drills:**

• Documentation verifying that fire drills were conducted within 24 hours of a child’s placement was not located in the case file.
• Documentation verifying that quarterly fire drills were conducted while children were placed in foster homes was not located in the case file.

**Documentation:**

• Signed and dated documentation for the Licensing Application (1513) was not located in the case file.

**Safety:**

• Documentation did not provide verification that quarterly home visits were either timely or completed at all.
SECTION III: CHILD PROTECTIVE SERVICE NO ACTION REPORTS REVIEW

A review of ten no action reports was completed to determine whether agency policy and procedures were followed. The reports were randomly selected from the list of reports on which no action was taken by the county during the period under review. The South Carolina Department of Social Services Quality Assurance Review No Action Reports Instrument was used to conduct the review. This instrument includes a description of the allegation and fourteen questions regarding the no action decisions and processes (see Table 10).

Table 10. Summary of Item Ratings for No Action Reports Review

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>NA</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Illegal substance use alleged AND reason for safety threatened with harm</td>
<td>2</td>
<td>8</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>2. Use of CAPSS and/or other systems for prior involvement</td>
<td>9</td>
<td>1</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>3a. Did the intake worker thoroughly complete the Sufficiency tab in CAPSS</td>
<td>10</td>
<td>0</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>3b. If question 1 or 2 is answered no, did worker provide explanation</td>
<td>0</td>
<td>0</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>4a. Maltreatment tab in CAPSS completed</td>
<td>7</td>
<td>3</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>4b. If yes to maltreatment, did worker provide an explanation</td>
<td>0</td>
<td>0</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>4c. If yes to maltreatment, did supervisor provide additional information</td>
<td>0</td>
<td>1</td>
<td>9</td>
<td>10</td>
</tr>
<tr>
<td>5. Safety factors documented on Intake Assessment not discovered by intake worker</td>
<td>1</td>
<td>9</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>6. Assessment made utilizing SCDSS Risk Matrix</td>
<td>9</td>
<td>0</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>7a. Risk Matrix results included statements contradictory to allegation</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>7b. Risk Matrix results failed to include all statements that support allegation</td>
<td>7</td>
<td>2</td>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>8. Contact with necessary collaterals prior to screen-out decision</td>
<td>2</td>
<td>4</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>9. Another intake referral on same perpetrator and/or child within 12 months</td>
<td>2</td>
<td>8</td>
<td>0</td>
<td>10</td>
</tr>
<tr>
<td>10. Intake Supervisor ensured consultation with another supervisory-level authority</td>
<td>0</td>
<td>2</td>
<td>8</td>
<td>10</td>
</tr>
</tbody>
</table>

*Note: A single case may have more than one issue identified.

The percentage of strengths is also calculated for the cases reviewed. This percentage is calculated by adding the number of strengths and the number of ANIs. The number of strengths is divided into this total to determine the percentage of strengths. Findings of these reviews are noted in Table 11.

Table 11. Summary of Ratings for No Action Reports Review

<table>
<thead>
<tr>
<th>Rating</th>
<th>Were agency policy and procedures followed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strength</td>
<td>1 (10%)</td>
</tr>
<tr>
<td>Area needing improvement</td>
<td>9 (90%)</td>
</tr>
<tr>
<td>Total</td>
<td>10 (100%)</td>
</tr>
<tr>
<td>% Strengths</td>
<td>1 (10%)</td>
</tr>
</tbody>
</table>

In nine cases reviewed, pieces of agency policy and procedures were not followed. Information for ratings was obtained by reviewers through case file documentation, which includes the use of CAPSS. Issues identified that led to the rating of ANI include:

- Statements documented in the Risk Matrix were contradictory to documentation of the allegations with no reconciliation documented.
- The agency failed to include, in the Risk Matrix and/or other documentation, statements for all areas noted in the documentation of the allegations made by the reporter with no documented reconciliation.
• Statements documented in the Risk Matrix were contradictory to the documentation of the prior history of a family with no documented reconciliation.
• A family’s prior history with the agency was not accurately documented in the Risk Matrix documentation, but there was no reconciliation of facts documented.
• Information regarding prior CPS involvement did not include thorough documentation specifying which individuals involved in the case had history with the agency.
• The Records Check Tab documentation did not include information specifying on whom the documented checks were conducted.
• An evaluation of available documentation and information determined that there should have been some applicable safety factors noted that were not identified in the documentation by the agency without documented reconciliation.
• Documentation indicating a thorough completion of the Maltreatment Tab in CAPSS by the intake worker could not be located.
• Documentation did not support that all necessary law enforcement information, other than a sex offender registry check, was obtained.
• There was no documentation to support that the agency made, or attempted to make, any direct contact with all indicated and appropriate collateral contacts.
• There was no documentation to support that the agency followed up with all appropriate collateral contacts.
• Information documented during the decision for no action was not consistent with the information documented during the intake process with no reconciliation documented.
• Based upon the documentation of the allegation made, the allegation should have met the legal definition of maltreatment, but the agency failed to accept the report with no documented reasoning to reconcile.
SECTION IV: CHILD PROTECTIVE SERVICES UNFOUNDED REPORTS REVIEW

Five unfounded reports were reviewed to determine whether agency policy and procedures were followed. The five unfounded reports were randomly selected from the list of all reports unfounded by the county during the period under review. The reviews were conducted using the South Carolina Department of Social Services Quality Assurance Review Unfounded Report Instrument. This instrument includes a description of the allegation and items regarding three primary areas (see Table 12):

- Timeliness of initiating investigations of reports of child maltreatment,
- Repeat maltreatment, and
- Risk assessment and safety management.

Table 12. Summary of Item Ratings for Unfounded Review

<table>
<thead>
<tr>
<th>Rating</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1A. Investigation not initiated in accordance with timeframes and requirements</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>1B. Face-to-face contact not made in accordance with timeframes and requirements</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>1C. Delays in investigation initiation or face-to-face contact beyond control of agency</td>
<td>0</td>
<td>3</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>2A. At least one substantiated or indicated maltreatment report</td>
<td>0</td>
<td>5</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>2B. One substantiated or indicated maltreatment report within six months before or after</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>2C. Repeat maltreatment involving the same or similar circumstances</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>3A. Initial assessment of risk to the children and family in the home</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>3B. Ongoing assessment(s) of risk to the children and family in the home</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>3C. Safety concerns that were not adequately or appropriately addressed by the agency</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>5</td>
</tr>
</tbody>
</table>

*Note: A single case may have more than one issue identified.

The percentage of strengths is calculated for each case reviewed. This percentage is calculated by adding the number of strengths and the number of ANIs. The number of strengths is divided into this total to determine the percentage of strengths. Findings of these reviews are noted in Table 13.

Information for ratings was obtained by reviewers through case file documentation, which includes the use of CAPSS. Reasons that one unfounded case reviewed violated agency policy and procedures include:

- Documentation did not verify sufficient initial, ongoing, and final risk and safety assessments with children in their home.
- There was no documentation to verify that the agency assessed the physical environment of a mother’s home prior to the decision to unfound the case.
- Documentation regarding a home visit did not include information specific to the physical environment of the home as it related to the risk and safety of the child.
- There was no documentation in the case file supporting that a child received a forensic examination.
• Documentation did not verify that all appropriate referrals for services were made.
• Case file documentation and CAPSS did not verify that recommendations of a Multi-Disciplinary Team meeting were followed.
SECTION V: FAMILY SUPPORT SERVICES REVIEW

A review of five allegations was completed to determine whether agency policy and procedures were followed for reports referred to Family Support Services (FSS). The reports were randomly selected from the list of reports referred to a Community-Based Prevention Services Provider by the county during the period under review. The South Carolina Department of Social Services Quality Assurance Review Community-Based Prevention Services Assessment Instrument was used to conduct the review. This instrument includes a description of the allegation and sixteen questions regarding the referral to the (FSS) Community-Based Prevention Services Provider and processes (see Table 14).

Table 14. Summary of Item Ratings for Assessment

<table>
<thead>
<tr>
<th>Number</th>
<th>Question Description</th>
<th>Yes</th>
<th>No</th>
<th>NA</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Illegal substance use alleged AND reason for safety threatened with harm</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>2.</td>
<td>Use of CAPSS and/or other systems for prior involvement</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>3a.</td>
<td>Did the intake worker thoroughly complete the Sufficiency tab in CAPSS</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>3b.</td>
<td>If question 1 or 2 is answered no, did worker provide explanation</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>4a.</td>
<td>Maltreatment tab in CAPSS completed</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>4b.</td>
<td>If yes to maltreatment, did worker provide an explanation</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>4c.</td>
<td>If yes to maltreatment, did supervisor provide additional information</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>5.</td>
<td>Existing Safety Factors not seen by intake worker or documented</td>
<td>2</td>
<td>3</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>6.</td>
<td>Assessment made utilizing SCDSS Risk Matrix</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>7a.</td>
<td>Results of SCDSS Risk Matrix contradicted allegation made by reporter</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>7b.</td>
<td>Did results fail to include statements to support allegations made by reporter</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>8.</td>
<td>Agency contacted collaterals for Community-Based Prevention Services</td>
<td>0</td>
<td>4</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>9.</td>
<td>Additional intake referral made on same perpetrator AND/OR child</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>10.</td>
<td>Family received community-based prevention services</td>
<td>0</td>
<td>1</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>11.</td>
<td>Community-based provider entered an account in CAPSS</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>12.</td>
<td>Family accepted services from Community-Based Prevention Services Provider</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>5</td>
</tr>
</tbody>
</table>

*Note: A single case may have more than one issue identified.

The percentage of strengths is also calculated for the cases reviewed. This percentage is calculated by adding the number of strengths and the number of ANIs. The number of strengths is divided into this total to determine the percentage of strengths. Findings of these reviews are noted in Table 15.

Table 15. Summary of Ratings for FSS Review

<table>
<thead>
<tr>
<th>Rating</th>
<th>Were agency policy and procedures followed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strength</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Area needing improvement</td>
<td>5 (100%)</td>
</tr>
<tr>
<td>Total</td>
<td>5 (100%)</td>
</tr>
<tr>
<td>% Strengths</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

Information for ratings was obtained by reviewers through case file documentation, which includes the use of CAPSS. In five cases reviewed, pieces of agency policy and procedures were not followed. Issues identified that led to the rating of ANI include:
- Documentation did not verify that all indicated and appropriate collateral contacts were made.
- The Maltreatment Tab documentation was not accurately completed.
- Case documentation did not support that all applicable safety factors were documented and/or identified by the intake worker.
- Statements documented in the Risk Matrix were contradictory to the documentation of the allegations.
- The Risk Matrix documentation did not include statements concerning some of the areas of the documentation of the allegations without reconciliation documented to support that information obtained later in the process made this unnecessary.
**SECTION VI: VOLUNTARY CASE MANAGEMENT REVIEW**

A review of five allegations was completed to determine whether agency policy and procedures were followed for reports referred to Voluntary Case Management (VCM). The reports were randomly selected from the list of reports referred to a Community-Based Prevention Services Provider by the county during the period under review. The *South Carolina Department of Social Services Quality Assurance Review Community-Based Prevention Services Assessment Instrument* was used to conduct the review. This instrument includes a description of the allegation and sixteen questions regarding the referral to the VCM Community-Based Prevention Services Provider and processes (see Table 16).

<table>
<thead>
<tr>
<th>Table 16. Summary of Item Ratings for Assessment</th>
<th>Yes</th>
<th>No</th>
<th>NA</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Illegal substance use alleged AND reason for safety threatened with harm</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>2. Use of CAPSS and/or other systems for prior involvement</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>3a. Did the intake worker thoroughly complete the Sufficiency tab in CAPSS</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>3b. If question 1 or 2 is answered no, did worker provide explanation</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>4a. Maltreatment tab in CAPSS completed</td>
<td>2</td>
<td>3</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>4b. If yes to maltreatment, did worker provide an explanation</td>
<td>1</td>
<td>0</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>4c. If yes to maltreatment, did supervisor provide additional information</td>
<td>0</td>
<td>1</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>5. Existing Safety Factors not seen by intake worker or documented</td>
<td>2</td>
<td>3</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>6. Assessment made utilizing SCDSS Risk Matrix</td>
<td>4</td>
<td>0</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>7a. Results of SCDSS Risk Matrix contradicted allegation made by reporter</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>7b. Did results fail to include statements to support allegations made by reporter</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>8. Agency contacted collaterals for Community-Based Prevention Services</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>9. Additional intake referral made on same perpetrator AND/OR child</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>10. Family received community-based prevention services</td>
<td>1</td>
<td>0</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>11. Community-based provider entered an account in CAPSS</td>
<td>5</td>
<td>0</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>12. Family accepted services from Community-Based Prevention Services Provider</td>
<td>4</td>
<td>0</td>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>

*Note: A single case may have more than one issue identified.*

The percentage of *strengths* is also calculated for the cases reviewed. This percentage is calculated by adding the number of *strengths* and the number of ANIs. The number of *strengths* is divided into this total to determine the percentage of *strengths*. Findings of these reviews are noted in Table 17.

<table>
<thead>
<tr>
<th>Table 17. Summary of Ratings for VCM Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rating</td>
</tr>
<tr>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>Strength</td>
</tr>
<tr>
<td><em>Area needing improvement</em></td>
</tr>
<tr>
<td>Total</td>
</tr>
<tr>
<td>% <em>Strengths</em></td>
</tr>
</tbody>
</table>

Information for ratings was obtained by reviewers through case file documentation, which includes the use of CAPSS. In five cases reviewed, pieces of agency policy and procedures were not followed. Issues identified that led to the rating of ANI include:
• Documentation did not verify that all indicated and appropriate collateral contacts were made.
• There was no documentation confirming that attempts were made to contact a mother’s prior state of residence in order to verify allegations that the mother had prior agency involvement in another state.
• The Maltreatment Tab documentation was not thoroughly and accurately completed by the agency.
• Per an evaluation of available documentation and information, all applicable safety factors were not documented and/or identified by the agency.
• A review of the documented allegation should have met the definition of maltreatment. According to the assessment, however, the allegation did not meet the legal definition of maltreatment, yet there was no reconciliation of facts documented for making this determination.
• Statements documented in the Risk Matrix were contradictory to the documentation of the allegations with no documentation of reconciliation.
• The Risk Matrix documentation failed to include statements for some of the areas that were noted in the documentation of the allegations with no documentation of reconciliation and/or reasoning for the variance later in the process based upon further information obtained.
• Documented information and rationale regarding the decision was inconsistent with the information documented at intake without written clarification/reconciliation of the conflicts in the decision making.
APPENDIX 1. SUMMARY OF ISSUES CAUSING AN AREA NEEDING IMPROVEMENT (ANI) RATING FOR APPLICABLE CASES

The following is an overview of strengths and weaknesses that were found in the cases for Georgetown County during the review conducted June 2-6, 2014. The period under review was June 1, 2013 to May 31, 2014.

Positives:

*Items 5 (Foster Care reentries), 10 (Other planned permanent living arrangement), 11 (Proximity of Foster Care Placement), and 12 (Placement with siblings) were identified as strengths of the agency; all applicable cases reviewed were rated as strength with no area needing improvement (ANI).*

Concerns:

The following examines the items that had the highest ANI ratings.

- **Item 3 (Services to family)** - 11 of 15 (73.3%) applicable cases rated as ANI
  - The agency did not make concerted efforts to provide appropriate services to the family to prevent the child(ren) from entering foster care. (11 cases)
  - Initial assessments were not conducted in order to recommend appropriate safety related services. (5 cases)
  - The agency failed to seek court intervention when appropriate. (2 cases)

- **Item 4 (Risk assessment and safety management)** - 11 of 20 (55%) applicable cases rated as ANI
  - The agency did not make concerted efforts to conduct ongoing assessments of risk and safety for the following individuals: (9 cases)
    - Children (6 cases)
    - Mother (2 cases)
    - Father(s) (2 cases)
    - Relative alternative caregivers (2 cases)
    - Adoptive mother (1 case)
    - Extended family (1 case)
    - Paramour (1 case)
  - Appropriate services were not provided for the following individuals: (5 cases)
    - Mother (2 cases)
    - Father (1 case)
    - Stepfather (1 case)
- Child (1 case)
  - The agency failed to complete background checks, including central registry and sex offender checks, for the following individuals prior to the target child entering foster care even though the relatives were serving as alternative caregivers prior to the time of Foster Care: (4 cases)
    - Relative alternative caregivers (4 cases)
  - Safety concerns known to be present in the home were not appropriately addressed. (3 cases) Cases that detailed concerns noted:
    - The agency was aware of domestic violence issues in the home, but failed to appropriately assess the safety of all individuals or to address the concern. (2 cases)

- Item 7 (Permanency goal for child) – 5 of 10 (50%) applicable cases rated as ANI
  - The permanency goal was not appropriate for the target child. (4 cases) The following goals were determined to be inappropriate:
    - Reunification (3 cases)
    - Adoption (1 case)
    - Relative placement (1 case)
  - The permanency goal was not established in a timely manner. (2 cases) The following goals were determined to be established in an untimely manner:
    - Adoption (1 case)
    - Relative placement (1 case)

- Item 8 (Reunification, guardianship, or permanent placement with relatives) – 5 of 6 (83.3%) applicable cases rated as ANI
  - The agency did not achieve the goal of reunification in a timely manner. (3 cases)
  - The goal of reunification was not appropriate to meet the needs of the target child. (2 cases) A case that detailed concerns noted:
    - The agency was aware that the parents refused treatment services and expressed their lack of desire to be reunited with the target child. (1 case)
  - The goal of relative placement was not appropriate to meet the needs of the target child. (1 case)
  - Concerted efforts to place the target child with a fit and willing relative were not made. (1 case)

- Item 9 (Adoption) – 3 of 6 (50%) applicable cases rated as ANI
The agency did not make concerted efforts to achieve adoption in a timely manner. (3 cases) Cases that provided specific reasoning noted the following issues:

- The agency failed to address a child's behavioral issues in order to facilitate and maintain potential adoptive resources. (1 case)
- The adoption line was not opened until the adoption plan had been established for 20 months and the child had been in care for 36 months. (1 case)
- Termination of Parental Rights was not filed in a timely manner causing unnecessary delays to the achievement of adoption. (1 case)

**Item 13 (Visiting with parents and siblings in foster care) – 6 of 10 (60%) applicable cases rated as ANI**

- According to agency policy requirements, the frequency of visits between the child and family was insufficient for the following people: (6 cases)
  - Mother (4 cases)
  - Father(s) (3 cases)
  - Sibling(s) (1 case)
  - Stepfather (1 case)
  - Adoptive mother (1 case)

**Item 16 (Relationship of child in care with parents) – 7 of 9 (77.8%) applicable cases rated as ANI**

- The agency did not make concerted efforts to promote, support, and maintain positive relationships between the child and family by involving individuals in events outside of visitation including, but not limited to, doctor’s appointments, school events, and mental health counseling. (6 cases)
  - Specific relationships affected include:
    - Child and father (4 cases)
    - Child and mother (3 cases)
    - Child and adoptive mother (1 case)
    - Child and stepfather (1 case)
- Diligent searches were not conducted to locate a mother. (1 case)
- Diligent searches were not conducted to locate a father. (1 case)

**Item 17 (Needs and services of child, parents, & foster parents) – 17 of 20 (85%) applicable cases rated as ANI**

- Assessments were not conducted for the following individuals: (16 cases)
- Mother (11 cases)
- Father (8 cases)
- Child(ren) (4 cases)
- Foster parent (1 case)
- Paramour (1 case)
- Adoptive mother (1 case)

  o Services were not provided to the following individuals: (3 cases)
    - Mother (3 cases)
    - Father (1 case)
    - Child (1 case)
    - Foster parent (1 case)

  o Diligent searches were not conducted to locate a mother. (1 case)
  o Diligent searches were not conducted to locate a father. (1 case)
  o The agency did not make concerted efforts to address the needs and provide services in a timely manner to a mother. (1 case)

- **Item 18 (Child & family involvement in case planning)** – 16 of 20 (80%) applicable cases rated as ANI
  
  o The agency failed to make concerted efforts to involve the following people in the case planning process: (14 cases)
    - Mother (12 cases)
    - Father(s) (9 cases)
    - Target child(ren) (2 cases)
    - Paramour (1 case)
    - Stepfather (1 case)
    - Adoptive mother (1 case)

  o The agency failed to involve all applicable individuals in treatment services related to case planning, including: (1 case)
    - Father (1 case)

  o Diligent searches were not conducted to locate a mother. (1 case)
  o Diligent searches were not conducted to locate a father. (1 case)

- **Item 20 (Caseworker visits with parents)** – 15 of 17 (88.2%) applicable cases rated as ANI
  
  o The frequency of the visits was insufficient for the following people: (14 cases)
    - Father(s) (10 cases)
    - Mother (10 cases)
    - Paramour (1 case)
- Stepfather (1 case)
- Adoptive mother (1 case)
  - The quality of the visits was insufficient for the following people: (13 cases)
    - Mother (8 cases)
    - Father(s) (6 cases)
  - Diligent searches were not conducted to locate a father. (3 cases)
  - Diligent searches were not conducted to locate a mother. (2 cases)

- **Item 22 (Physical health of child)** – 10 of 16 (62.5%) applicable cases rated as ANI
  - Records were not located in the case file with no direct contact with the providers documented in lieu of the specific records (policy driven). (6 cases)
    - Dental (5 cases)
    - Medical (4 cases)
  - Children were not assessed for the following needs: (5 cases)
    - Dental (4 cases)
    - Physical health (2 cases)
  - The agency did not ensure that appropriate services, such as Babynet, were provided to address all identified physical health needs. (2 cases)

- **Item 23 (Mental/behavioral health of child)** – 7 of 13 (53.8%) applicable cases rated as ANI
  - The agency failed to provide the appropriate and indicated mental health services. (5 cases)
  - The agency failed to conduct appropriate and indicated mental health assessments. (4 cases)