



QUALITATIVE REVIEW

2012 ANNUAL REPORT

A Report by the Office of Performance Management and Accountability

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Commissioner

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INTRODUCTION

So much has been achieved since the New Jersey Legislature created the Department of Children and Families in 2006. The Department has emerged from functioning as a crisis driven system to one that planfully works with children, youth, and families across New Jersey to determine service needs and the best approach to strengthen families and communities. Our Strategic Plan, developed in 2011, continues to guide our work and focus our efforts on:

- Providing ease of access to care for children, youth, and families;
- Ensuring the integrity and quality of our system of care;
- Collaborating with stakeholder and community partners to improve outcomes;
- Ensuring the accuracy and timeliness of our communication with the public; and,
- Continually examining and preparing our organization to make sure our work force and structure are aligned with our mission and strategic priorities.

Our efforts were bolstered in 2012 when legislation was passed which reassigned additional services from the Departments of Human Services to DCF. This realignment positioned the DCF to support children and youth with developmental disabilities, behavioral health challenges and additional service needs through DCF's existing infrastructure of services and programs; to better serve children and families where child abuse and domestic violence co-exist; and to connect services for victims of sexual assault as well as displaced homemakers to the existing DCF service array. This change was a natural next step toward building a more family-centered system of care able to treat the whole child and the whole family in one place, and not as separate pieces of a whole. We are pleased to report that the work in integrating these functions into our overall strategies is well underway.

Child welfare reform is always a work in progress, but we have achieved several milestones that have helped catapult ours from a system in need of repair to one that helps set an example for other public systems to emulate. One example of how we are leading the way is through our commitment to both "manage by data" and the use of technology. Our "Managing by Data" initiative, also known as the DCF "Fellows" program, has gained considerable national attention in the child welfare realm for its ground-breaking use of data. This program, the first and only of its kind in the nation, supports close to one hundred of DCF's middle management staff in learning how to better utilize data to support improved case practice and outcomes for children and families.

Our annual Qualitative Review (QR) process is another powerful data tool we use to monitor our progress and improve our work. This process began with a pilot program in 2010, followed by the first comprehensive QR conducted in 2011. With the completion of our 2012 QR we now have two years of data to begin to assess our ongoing reform efforts and progress as well as areas where sustained focus is needed. As a learning organization, we look forward to using QR and other data to make evidence-based improvements to our practice and to help us ensure the safety, well-being and success of New Jersey's children and families.

EXECUTIVE SUMMARY

The Qualitative Review (QR) is a nationally-known process used to assess the overall performance of a child welfare system by evaluating outcomes for individual children and families. The QR is a week-long activity during which trained and certified reviewers perform a thorough review of case records and conduct in-depth interviews with children, their caregivers or parents, and supports or service providers. The QR process for the State of New Jersey Department of Children and Families (DCF) is conducted by DCF's Office of Performance Management and Accountability (PMA).

In 2012 DCF led QR reviews in 13 of the state's 21 counties, with a sample that included 1,431 interviews linked to 155 children/youth. Reviews were scheduled for 16 counties in 2012; however, due to the devastation caused by SuperStorm Sandy in October 2012 reviews had to be cancelled for three counties most heavily impacted by the storm: Hudson, Atlantic and Ocean. Please refer to Appendices A&B for a detailed overview of QR methodology, reviewer preparation and scoring.

The QR assessed DCF's performance in two main areas: Child and Family Status Indicators and Practice Performance Indicators.

Child and Family Status

Child and Family Status Indicators focus on safety, stability, permanency, well-being, and learning and development of children receiving DCF services. QR results for 2012 show that DCF continues to make progress in these core areas, validated by an average *STRENGTH* rating of 90% for Overall Child and Family Status (indicated when 70% + of all cases reviewed scored an acceptable rating). DCF's 2011 QR ranking for Child and Family Status indicators also exceeded 90%, which demonstrates consistency in the Department's outcomes in these critical areas. The specific indicators in this category included:

Safety at Home	Family Functioning & Resourcefulness
Safety in Other Settings	Progress Towards Permanency
Stability at Home	Emotional Well-Being
Stability in Other Settings	Physical Health
Living Arrangement	Learning & Development

Of the 13 Child and Family Status indicators reviewed, 12 were rated in the "Acceptable" range, with 8 indicators scoring above 85% (*Safety at Home, Safety in Other Settings, Living Arrangements, Physical Health, Emotional Health, Learning and Development of Children under age 5 and Learning and Development of Children over age 5*).

Target Improvement Area:

Along with DCF's overall success with Child and Family Status indicators, we also identified Areas in Need of Improvement (ANI). Progress Towards Permanency remains an "ANI" with an overall *STRENGTH* rating of 59%. Ensuring that children achieve permanency in a timely manner is a critically important issue for DCF, and the Department will work diligently in 2013 to develop strategies aimed at improving DCF's performance in this category. One such strategy is the development of Performance Improvement Plans. In 2013 increased collaboration from key systems partners will strengthen and refine the focus on factors contributing to improving Progress Towards Permanency. Additionally, work on case practice issues like integrating teaming processes and planning opportunities are likely to positively impact this indicator.

Practice Performance

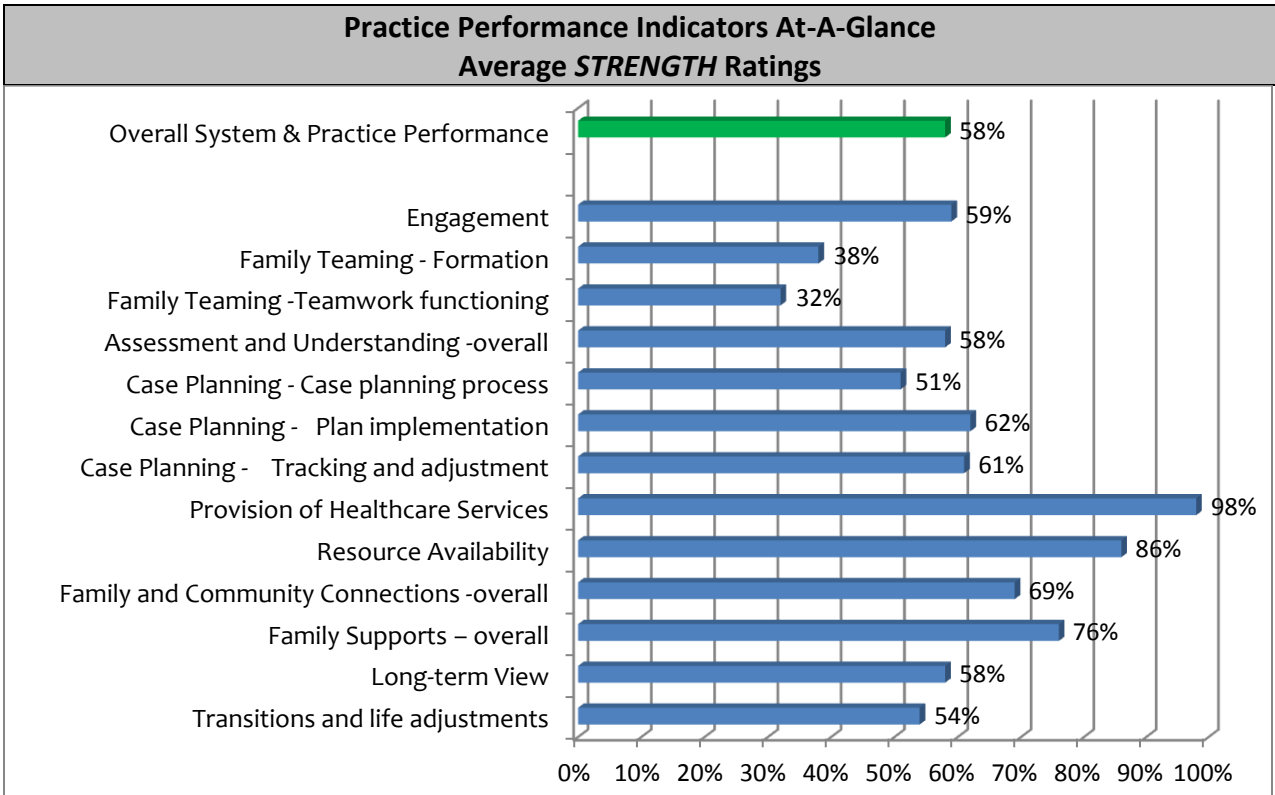
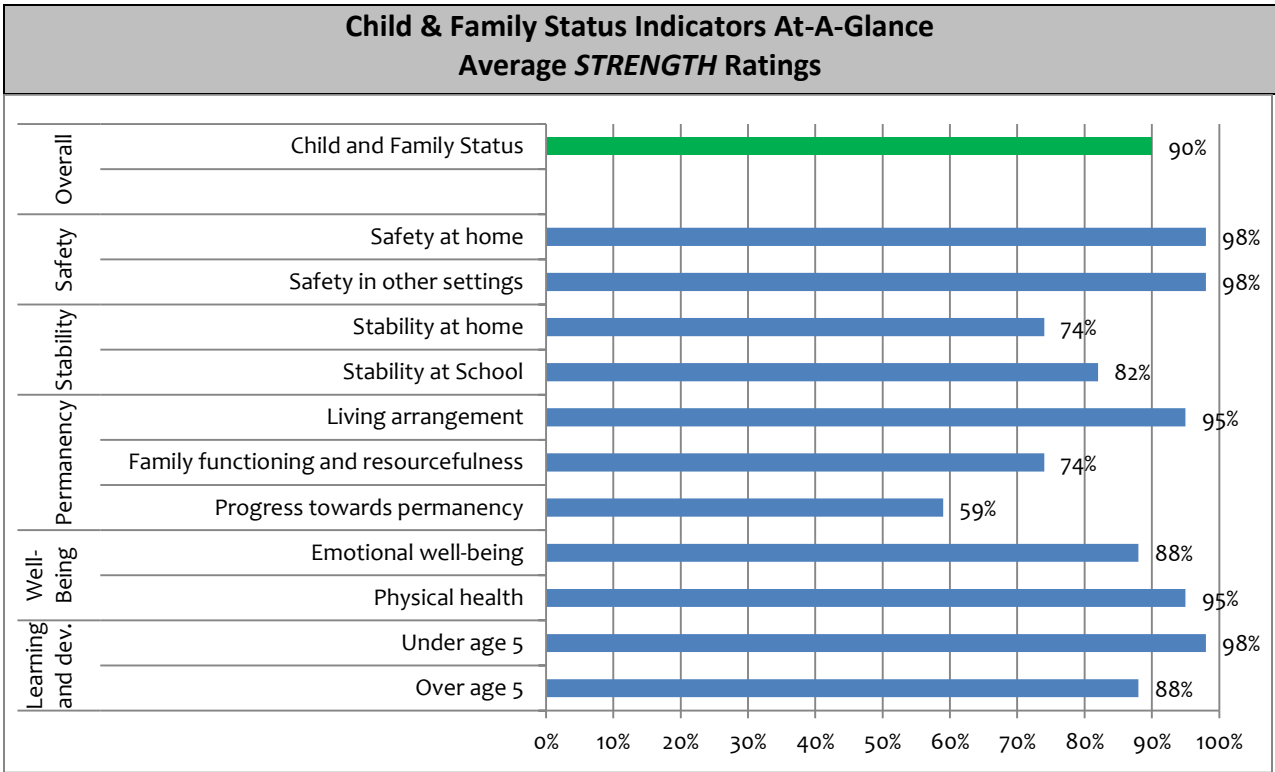
Practice Performance Indicators include:

Engagement	Resource Availability
Family Teamwork	Family & Community Connections
Assessment & Understanding	Family Supports
Case Planning Process	Long Term View
Provision of Health Care Services	Transitions & Life Adjustments

DCF's average *STRENGTH* rating for Overall Practice Performance Indicators was 59%, compared with 58% in 2011. Areas of success for DCF included *Resource Availability, Provision of Healthcare Services, and Engagement and Assessment / Understanding of Resource Caregivers*, all of which scored a *STRENGTH* rating of 70% or greater.

Target Improvement Area:

Teamwork Formation and Teamwork Functioning were the two indicators for which DCF scored the lowest. This is an area of continued challenge and plans are in place to enhance these ratings using multi-dimensional approaches to include training, scheduling, documentation, and continued development of facilitators and coaches. There is ongoing attention to ensure that key individuals and stakeholders are encouraged to attend family team meetings and support the family or youth's case planning.



SCORING

DCF commonly uses two different systems for reporting QR findings - a two category system and a three category zone approach. The two category system is utilized to report QR findings for the Modified Settlement Agreement. The two categories, “Acceptable” and “Areas Needing Improvement” (ANI) correspond to a 1-6 scoring scale:

STRENGTH

Area Needing Improvement			Acceptable		
Adverse	Poor	Marginal	Fair	Good	Optimal
1	2	3	4	5	6

NOTE:

- ✓ A case is considered a *STRENGTH* when scores fall into the “Acceptable” range.
- ✓ An indicator is seen as a *STRENGTH* when 70%+ of all cases scored receive an “Acceptable” rating.

The Office of Performance Management & Accountability (PMA) presents QR data to the Division of Child Protection and Permanency [DCP&P, formerly known as the Division of Youth and Family Services (DYFS)] staff using three pre-defined *Zones*, which correspond to a 1-6 scoring scale:

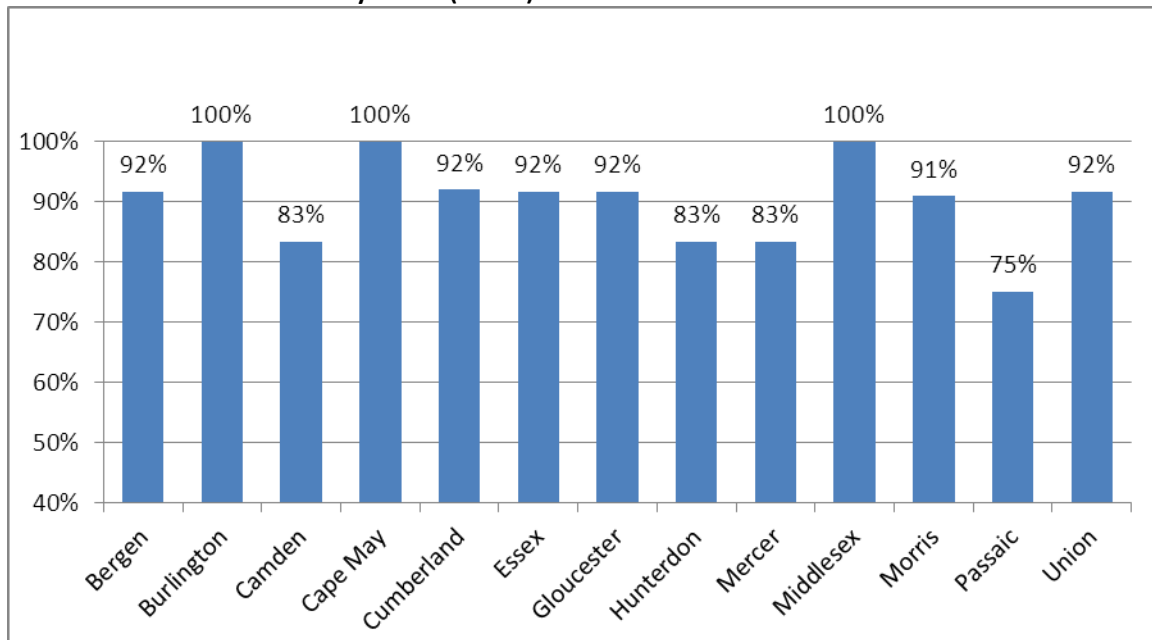
Improvement Zone (Poor or adverse)		Refinement Zone (Minimal or Marginal)		Maintenance Zone (Good or optimal)	
Adverse	Poor	Marginal	Fair	Good	Optimal
1	2	3	4	5	6

To increase transparency, the data in the QR Annual Report is available by both Zone and Category. In the fact sheets for each indicator and each county, the *STRENGTH* percentage (percentage of cases that received a 4-6 rating) for each county is displayed above a brief discussion of the results. Bar charts illustrating the same data categorized by zones can be found in the Appendices D – T.

OVERVIEW OF CHILD AND FAMILY STATUS INDICATORS

DCF has made significant progress in the core child welfare practice areas of safety, stability, well-being and permanency. This progress is reflected in an Overall Child and Family Status *STRENGTH* rating of 90%, which assessed reviewers' holistic impression of the child and family's status over the 30 days prior to QR.

Chart 1: Overall Child and Family Status (n=155)



Ten indicators were used to assess the child and family's current status. These indicators are categorized by the Department's four key child welfare outcomes:

<p><u>Safety</u></p> <ul style="list-style-type: none"> ➤ Safety at Home ➤ Safety in Other Settings 	<p><u>Stability</u></p> <ul style="list-style-type: none"> ➤ Stability at Home ➤ Stability at School
<p><u>Permanency</u></p> <ul style="list-style-type: none"> ➤ Living Arrangement ➤ Family Functioning and Resourcefulness ➤ Progress Toward Permanency 	<p><u>Well-Being</u></p> <ul style="list-style-type: none"> ➤ Physical Health ➤ Emotional Well-Being ➤ Learning and Development

Fact sheets for each of the ten Child and Family Status Indicators are presented in the following pages.

FACT SHEET: Safety at Home

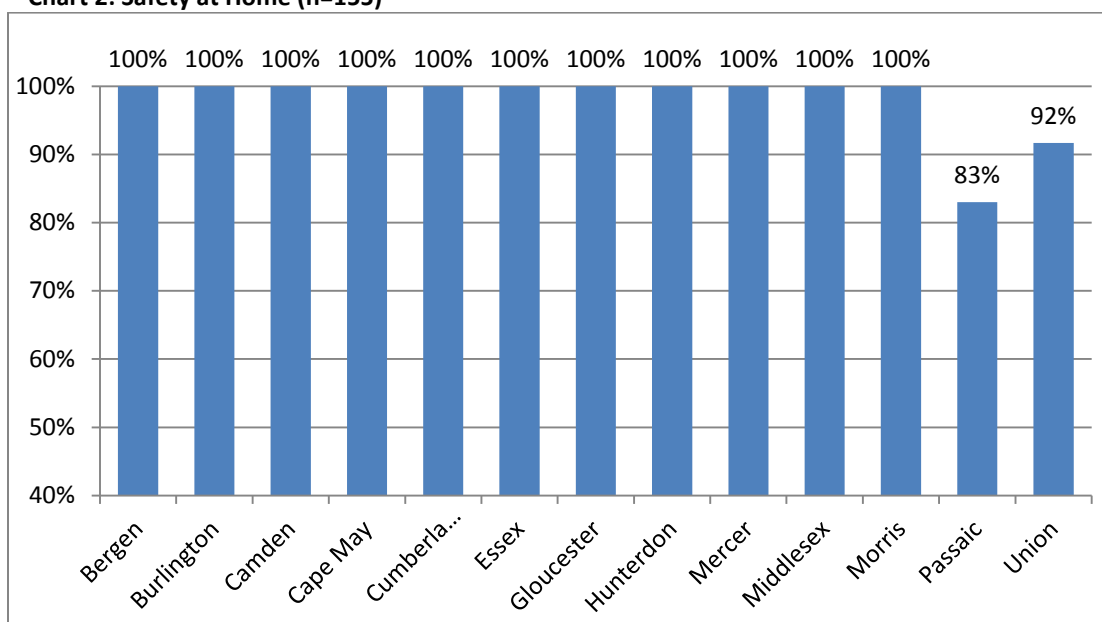
Purpose:

The Child and Family Status indicator of *Safety* examines the system's ability to ensure the safety of the child at home and in other settings, such as school or neighborhood. This indicator also evaluates whether identified needs are being met / addressed appropriately. *Safety* is assessed using two indicators: *Safety at Home* and *Safety in Other Settings*. The same criterion is applied to both indicators and information on the individually assessed indicators can be found in their respective fact sheets.

Rating:

- The average *STRENGTH* rating was 98% or 152 out of 155 cases scoring in the "Acceptable" range.
- 11 counties received a *STRENGTH* rating of 100%; all counties rated over 80%.
- 3 cases were scored as ANI.

Chart 2: Safety at Home (n=155)



Findings:

Safety is a core component of DCF's mission and continues to be a *STRENGTH* for the DCF. Safety was scored as "Good" or "Optimal" for all but 3 children in the sample. Of the 3 cases that fell below the "Acceptable" range; there were concerns that the tenuous situation in the home required additional intervention.

FACT SHEET: Safety in Other Settings

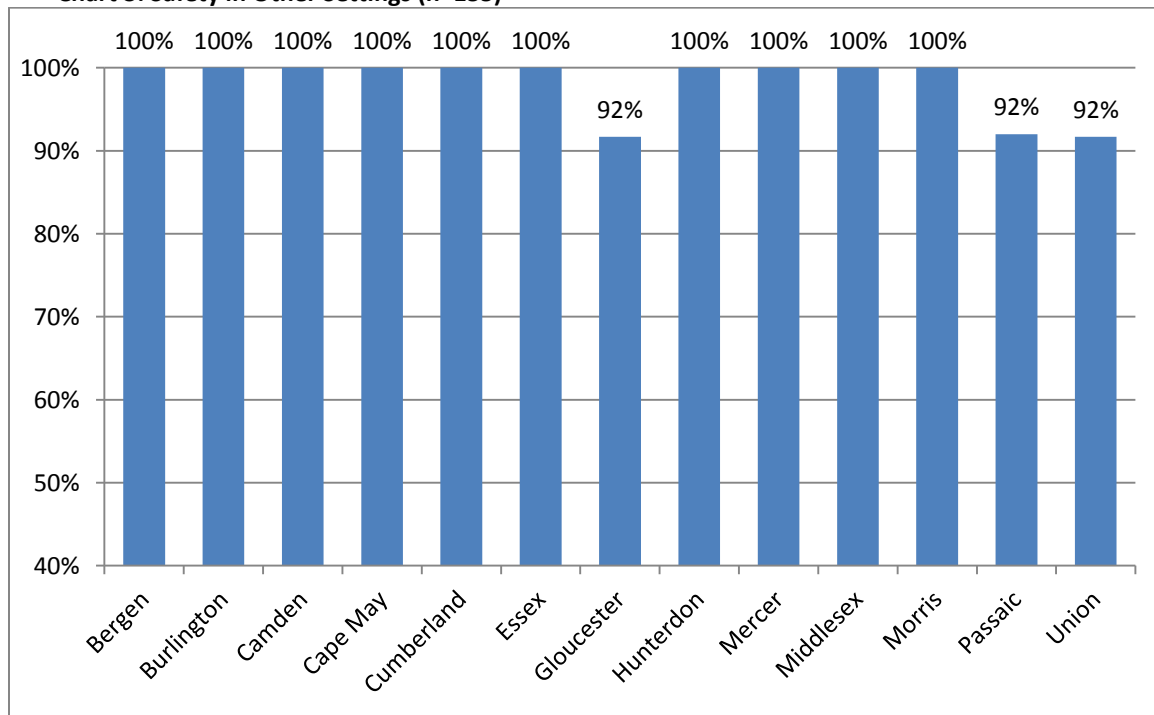
Purpose:

In *Safety in Other Settings*, reviewers considered risks to safety in the school setting and neighborhood. If safety concerns were present in the past, reviewers assessed the level to which risk was managed. Reviewers also considered the Structured Decision Making© tools casework staff use to assess safety and risk for the child and family.

Ratings:

- The average *STRENGTH* rating was 98% or 152 out of 155 cases scoring in the “Acceptable” range.
- 10 counties received a *STRENGTH* rating of 100%; all counties rated over 92%.

Chart 3: Safety in Other Settings (n=155)



Findings:

Safety was scored as a *STRENGTH* when caregivers established a solid partnership with supports in the community including education and law enforcement. *Safety in Other Settings* was rated as “Optimal” or “Good” for all but 3 children/youth; these 3 cases were rated as “ANI”, with reviewers noting a breakdown in community outreach and safety strategies that required additional attention.

FACT SHEET: Stability at Home

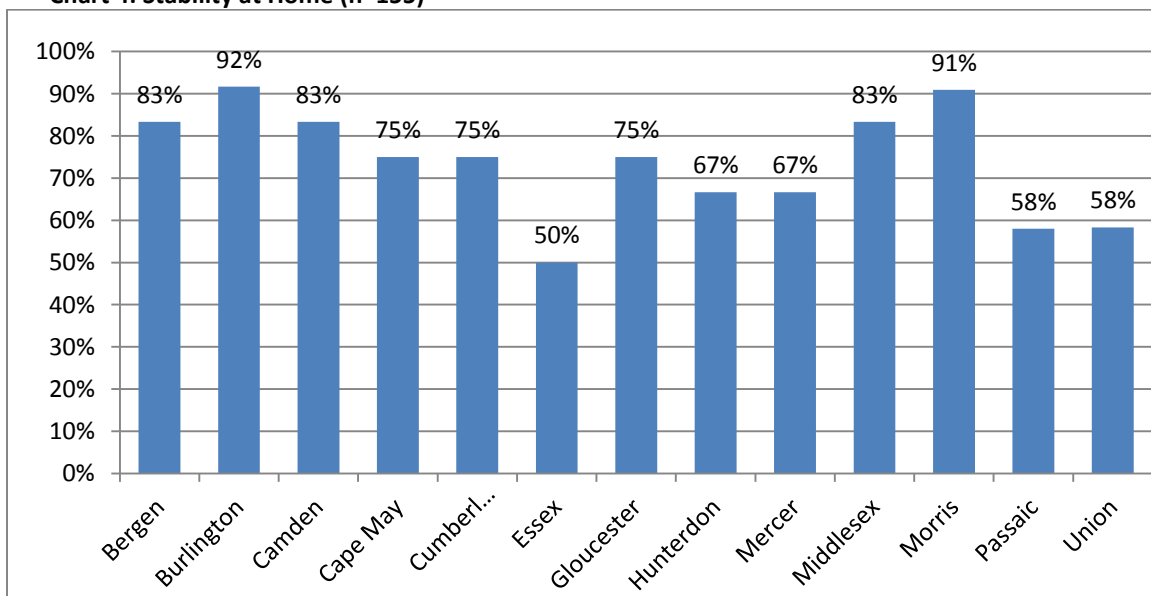
Purpose:

Stability was assessed using two indicators: *Stability at Home* and *Stability at School*. Reviewers assessed the number of changes in the home or school setting and how those changes were planned and managed. The risk of future disruptions was also considered. The same criterion is applied to both indicators and information on the two individually assessed indicators can be found in their respective fact sheets.

Rating:

- The average *STRENGTH* rating was 74%, with 114 out of 155 cases scored in the “Acceptable” range.

Chart 4: Stability at Home (n=155)



Findings:

Stability at Home was rated as a *STRENGTH* in 8 of the 13 counties reviewed, with 2 counties rating over 90%. Counties with the highest *STRENGTH* ratings were those in which children were placed in homes that were able to meet their specific needs and with caregivers willing to make a lifelong commitment to the child. Placement of children in therapeutic treatment homes, relative homes or with previous resource families was a key component in maintaining stability. Lack of stability was linked to multiple moves/placements as a result of unstable conditions, some of which may have been linked to substance abuse. Placement with unwilling caregivers was also cited as a factor in cases where stability in the home was lacking.

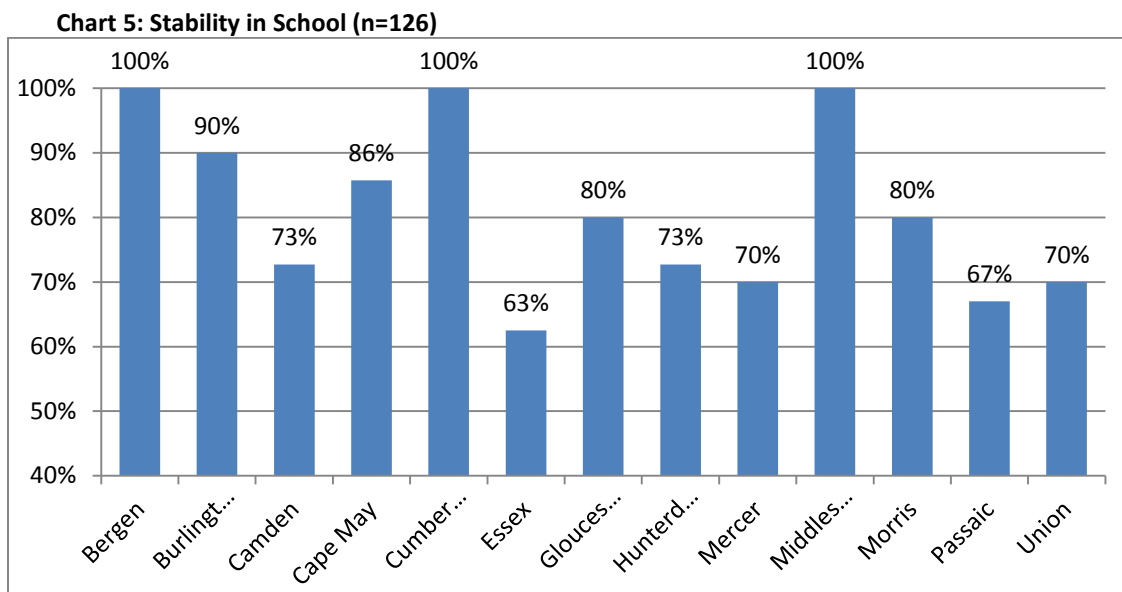
FACT SHEET: Stability in School

Purpose:

In *Stability in School* reviewers assessed the number of changes in the child's educational setting and how those changes are planned and managed. Children included in the assessment were those currently enrolled in either a school or other educational setting, including a child care setting. Twenty-nine children were not enrolled in an educational setting mostly due to age, reducing the total number of cases scored from 155 to 126.

Rating:

- The average *STRENGTH* rating was 82% or 103 out of 126 cases scored in the "Acceptable" range.
- This indicator was rated as a *STRENGTH* in 11 counties; 2 counties were designated as ANI.



Findings:

Stability in School was rated as a *STRENGTH* in 11 of the 13 counties. Counties with the highest *STRENGTH* rating were those in which children were placed in their home communities and/or with relatives, allowing the children to remain in their school. Factors that negatively affected *Stability in the Home* also impacted *Stability in School* including unstable conditions in the home linked to substance abuse or housing issues, as well as placement with caregivers unwilling to commit to a child long-term.

PERMANENCY FACT SHEET: Living Arrangement

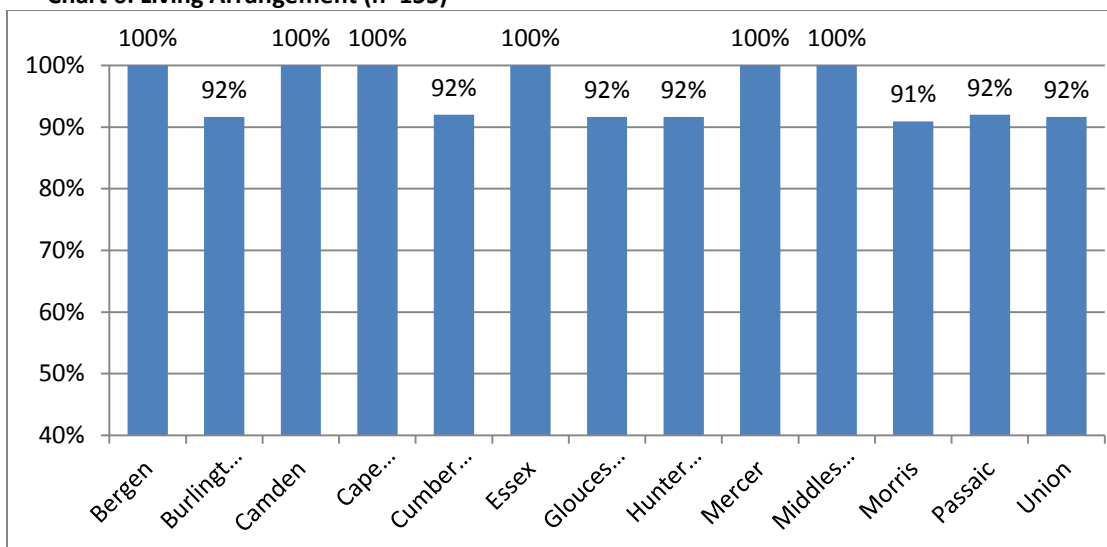
Purpose:

Permanency is assessed in three separate but related indicators: *Living Arrangement*, *Family Functioning and Resourcefulness*, and *Progress Towards Permanency*. This indicator assessed the outcomes needed for the child to have a permanent, lifelong home. For children in out-of-home placement, adherence to the Adoption and Safe Families Act (ASFA) was examined as was the relationship between current caregivers and the biological family. Appropriateness of the primary permanency plan and the concurrent permanency plan were also considered. *Living Arrangement* assessed the child's current living arrangement and whether these arrangements appropriately met the child's developmental, emotional, physical and permanency needs.

Rating:

- The average *STRENGTH* rating was 95% or 148 out of 155 cases scored as "Acceptable".
- All 13 counties scored a *STRENGTH* rating above 90%, with 6 achieving a *STRENGTH* rating of 100%.

Chart 6: Living Arrangement (n=155)



Findings:

All counties received a high *STRENGTH* rating, which confirms that caregivers are maintaining stability and providing the most appropriate setting to meet the physical, behavioral and emotional needs of children in their care. *Living Arrangement* has been a consistent *STRENGTH* for DCF as indicated by QR results in both 2011 and 2012.

PERMANENCY FACT SHEET: Family Functioning and Resourcefulness

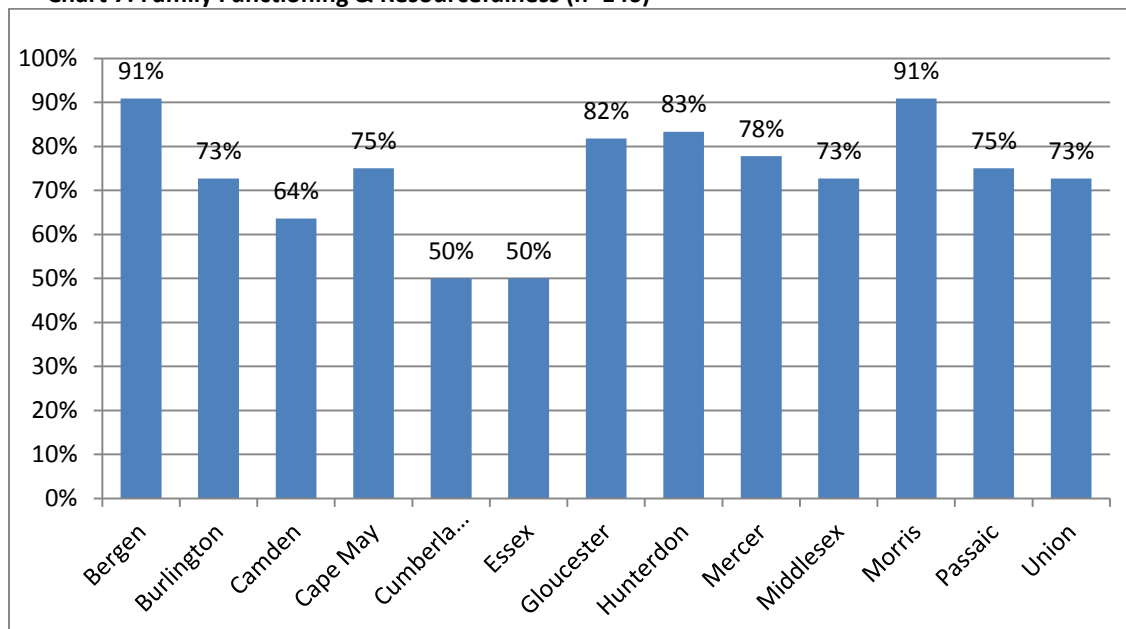
Purpose:

In *Family Functioning and Resourcefulness*, reviewers assessed the family's ability to identify and meet their own needs and to build and use a network of formal and informal supports separate from their involvement with DCF. This indicator did not apply to youth over the age of 18 with no family involvement or youth residing in a residential or congregate care setting with no family involvement. Based on this criterion, 146 cases were included in this category.

Rating:

- The average *STRENGTH* rating was 74% or 108 out of 146 cases scored as "Acceptable".
- 10 out of 13 counties achieved a *STRENGTH* rating above 70%.

Chart 7: Family Functioning & Resourcefulness (n=146)



Findings:

A *STRENGTH* rating in *Family Functioning and Resourcefulness* reflects a families' ability to identify their own needs and to secure the resources, supports and/or services needed to meet identified needs and ensure family success. The range of strength ratings may reflect the differences in real and perceived available resources to meet identified needs.

PERMANENCY FACT SHEET: Progress Towards Permanency

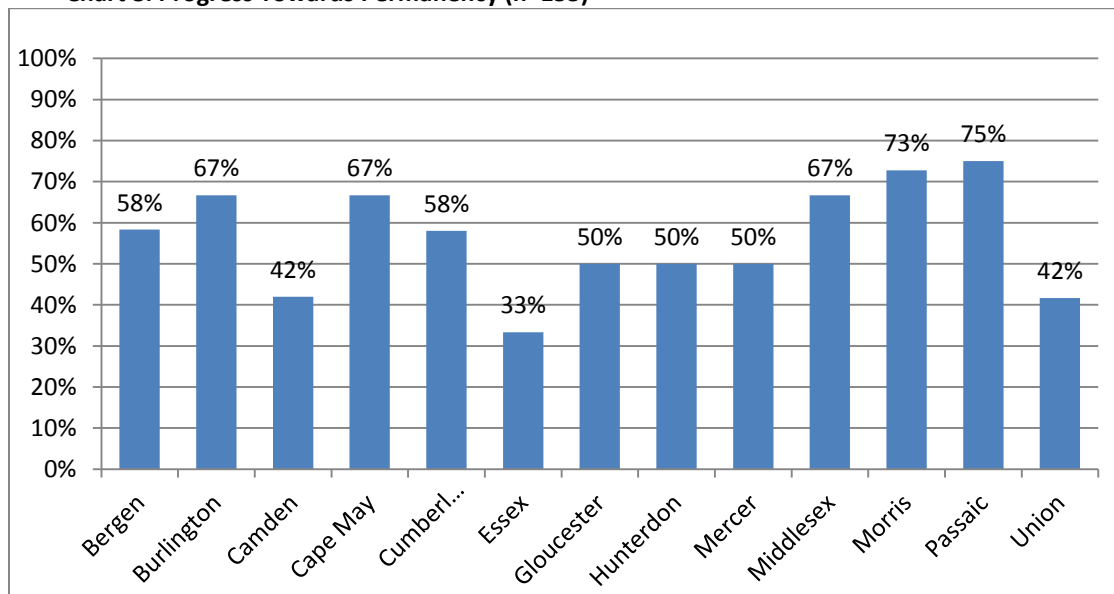
Purpose:

In *Progress Towards Permanency*, reviewers assessed primary and concurrent permanency plans, as well as the caregivers' understanding of these plans. The appropriateness of plans and the likelihood of the timely attainment of plans were also considered.

Rating:

- The average *STRENGTH* rating was 59% with 91 out of 155 cases scoring in the "Acceptable" range.
- For the second year in a row, *Progress towards Permanency* had the lowest average rating of any of the Child and Family Status indicators.

Chart 8: Progress Towards Permanency (n=155)



Findings:

The review team found significant differences in opinion among stakeholders for how permanency should be achieved, resulting in challenges to timely permanency. This indicator represents the work of the entire system including parents, youth, and the legal system; further work with each entity is needed to ensure improvement in this critical area.

WELL-BEING FACT SHEET: Physical Health of the Child

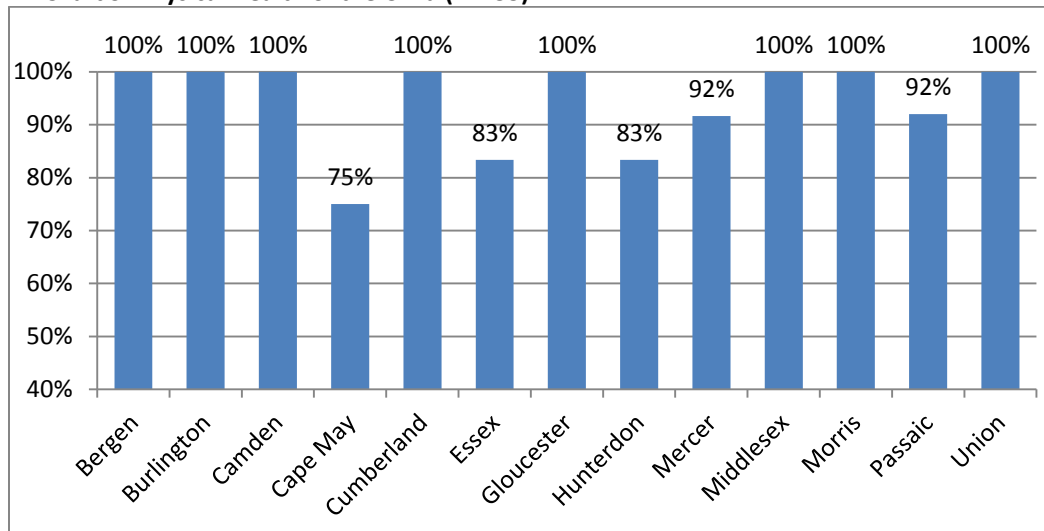
Purpose:

Well-Being is assessed through three separately scored indicators including *Physical Health of the Child*, *Emotional Well-Being of the Child* and *Learning and Development of the Child*. In *Physical Health of the Child* reviewers examined the child's current health status as well as the effectiveness of identifying needs to help the child reach the best possible health status.

Rating:

- The average *STRENGTH* rating was 95% with 147 out of 155 cases rated in the "Acceptable" range.
- 8 of 13 counties received a 100% rating, and all counties scored at or above 75%.

Chart 9: Physical Health of the Child (n=155)



Findings:

This indicator is one in which DCF continues to excel. The QR process showed that DCF has a strong understanding of the importance of routine health care needs including screenings, appointments, dental care and medication monitoring. Child Health Units located at the local office level allow direct accessibility and communication between nurses and DCF staff, which is of great benefit to children in care. Of the children assessed with medical or physical needs there was a concern that identified follow-up plans were not being fully implemented by the families. DCF will continue to partner with families to ensure that children are linked to appropriate medical services.

WELL-BEING FACT SHEET: Emotional Well-Being

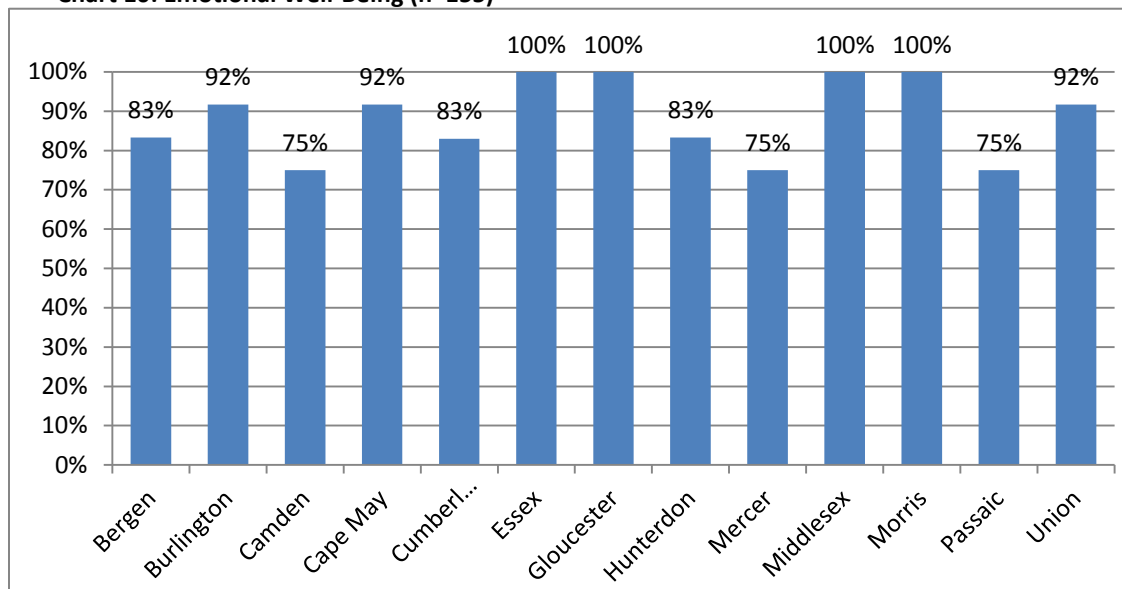
Purpose:

In *Emotional Well-Being* reviewers measured the emotional development, adjustment and resiliency of children. Risk and protective factors were also assessed. If present, emotional or behavioral difficulties were noted and the management of these challenges assessed.

Rating:

- The average *STRENGTH* rating was 88% with 137 out of 155 cases scoring in the “Acceptable” range.
- Statewide all 13 counties scored within the “Acceptable” range, with 10 of the 13 recording a *STRENGTH* rating over 80%.

Chart 10: Emotional Well-Being (n=155)



Findings:

The majority of children whose cases were reviewed demonstrated positive emotional growth appropriate with their age and capability. Children with more challenging or inconsistent behaviors tended to exhibit anxiety related to recent or multiple transitions in their lives.

WELL-BEING FACT SHEET: Learning and Development, under age 5

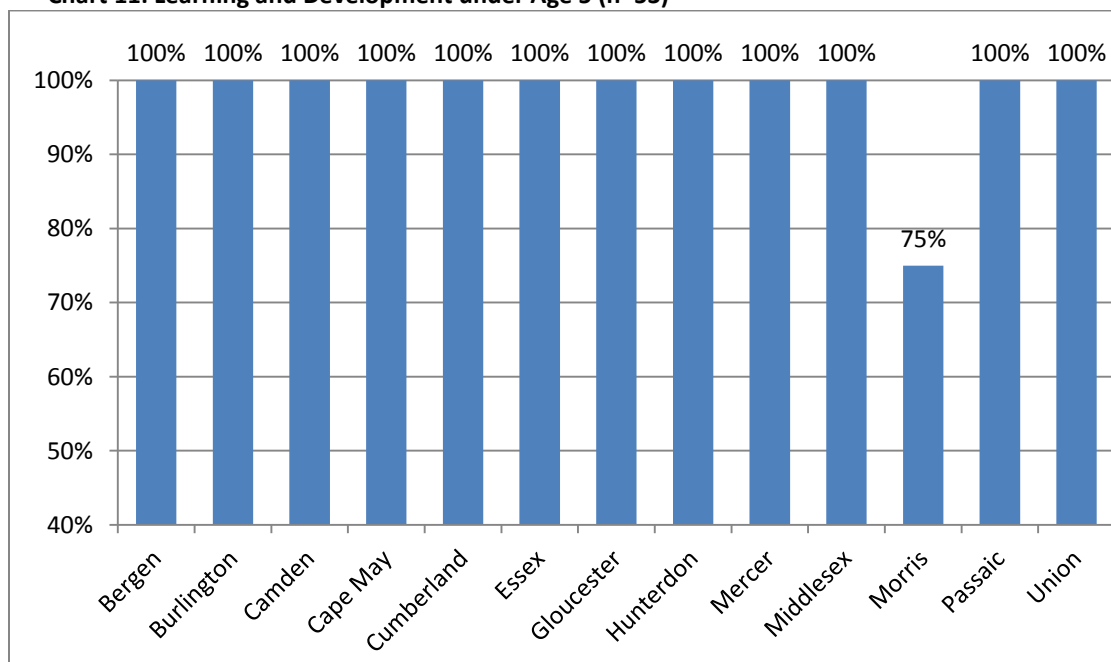
Purpose:

In *Learning and Development* reviewers assessed whether key milestones for children less than 5 years of age were being met according to age and expectations. If delays were noted, reviewers assessed the extent to which these delays were well understood and whether appropriate services were in place to address them.

Rating:

- The statewide average *STRENGTH* rating for this indicator was 98%, with 52 out of 53 applicable children scoring in the “*Acceptable*” range.
- 12 of 13 counties recorded a *STRENGTH* rating of 100%.

Chart 11: Learning and Development under Age 5 (n=53)



Findings:

Children within the sample received the necessary assistance to reach targeted, age appropriate goals and were meeting developmental milestones. The QR review clearly indicated that early intervention is a primary success factor for this indicator.

WELL-BEING FACT SHEET: Learning and Development, over age 5

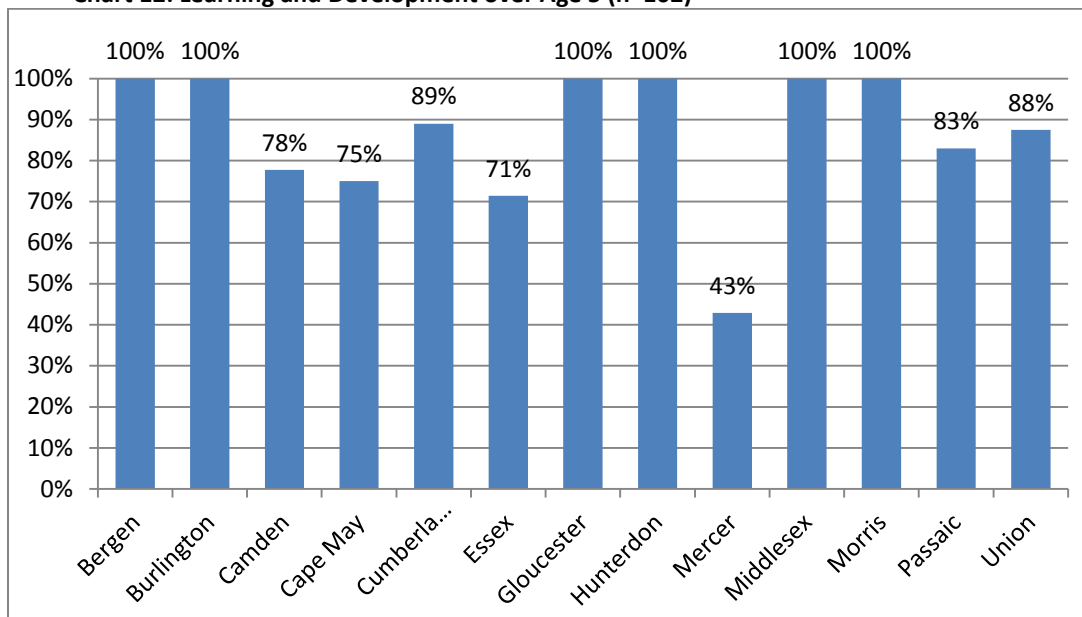
Purpose:

In *Learning and Development* reviewers assessed whether key milestones for children over 5 years of age were being met according to age and expectations. If delays were noted, reviewers assessed the extent to which these delays were well understood and whether appropriate services were in place to address the delays.

Rating:

- The statewide average *STRENGTH* rating was 88% with 90 out of 102 applicable cases scoring in the “Acceptable” range.
- 11 of the 13 counties recorded a *STRENGTH* rating over 75%.
- 1 county received a *STRENGTH* rating under 70% indicating this is an “Area Needing Improvement” for that county.

Chart 12: Learning and Development over Age 5 (n=102)



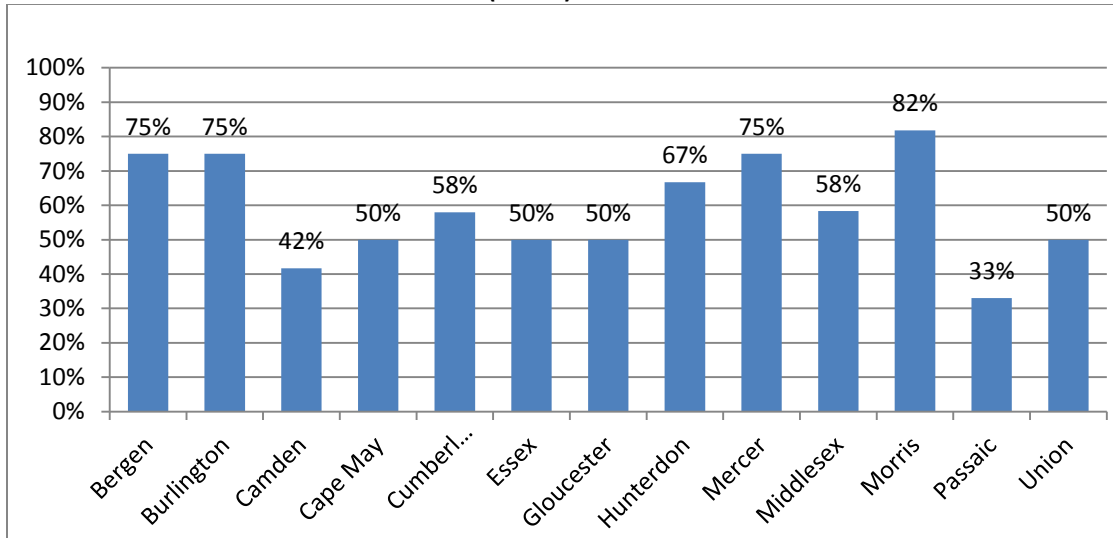
Findings:

QR results revealed that the educational needs of most of the school age children in the sample are being met. Collaboration and intervention prompted by the educational system and DCF staff were seen as factors contributing to the success of children in the sample. Challenges occurred, however, when children’s needs were unidentified and /or not communicated.

OVERVIEW OF PRACTICE PERFORMANCE INDICATORS

Practice Performance Indicators measured the reviewers' holistic impression of the execution of practice indicators and their functions, considering the diligence and fidelity with which each practice function was carried out and whether the intent of the function was being achieved. DCF's *Overall Practice Performance STRENGTH* rating was 59% with 110 of 155 cases scoring in the "Acceptable" range.

Chart 13: Overall Practice Performance (n=155)



Practice Performance Indicators included:

Engagement	Resource Availability
Family Teamwork	Family & Community Connections
Assessment and Understanding	Family Supports
Case Planning Process	Long-Term View
Provision of Health Care Services	Transitions and Life Adjustments

ENGAGEMENT FACT SHEET: Overall Engagement

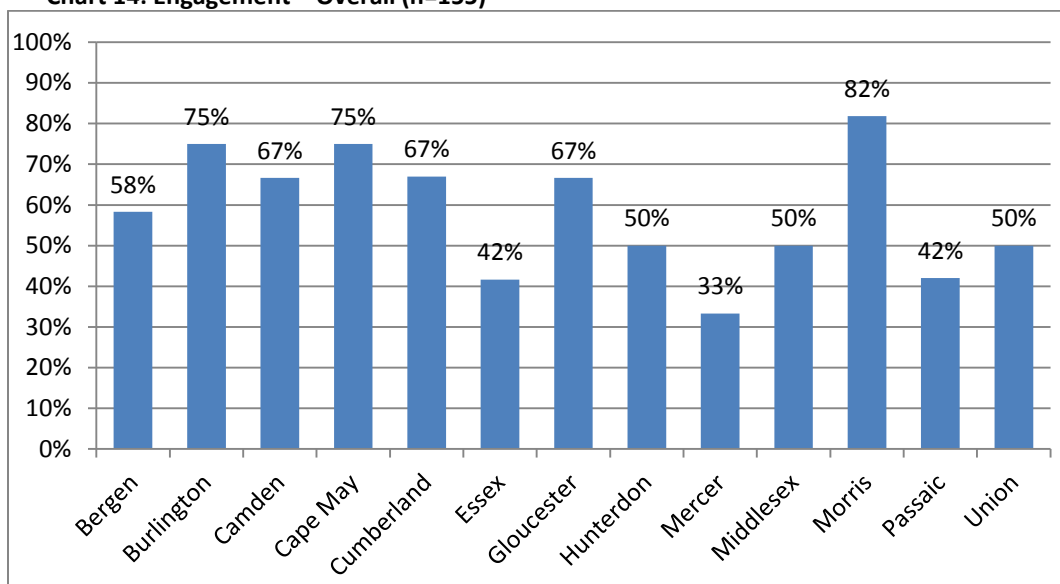
Purpose:

The *Overall Engagement* indicator assessed the development of collaborative, open and trust-based working relationships that support ongoing assessment, understanding, and service planning. This indicator assessed the areas of child/youth, parents, and resource parents. Information for the three engagement areas can be found in the respective fact sheet for each.

Rating:

- The average *STRENGTH* rating for Overall Engagement was 59% with 91 of the 155 cases scoring in the “*Acceptable*” rating.
- Only three counties achieved a *STRENGTH* rating over 70%.

Chart 14: Engagement – Overall (n=155)



Findings:

Of the three categories of engagement analyzed within this indicator, two received a *STRENGTH* rating below 70% (*Engagement with Child / Youth* and *Engagement with Parents*), while the third category (*Engagement with Resource Caregivers*) received a *STRENGTH* rating of 70%. In order for ratings in *Overall Engagement* to improve, DCF must develop stronger partnerships with parents, children and youth, and improve strategies for effectively engaging these partners.

FACT SHEET: Engagement of Child/Youth

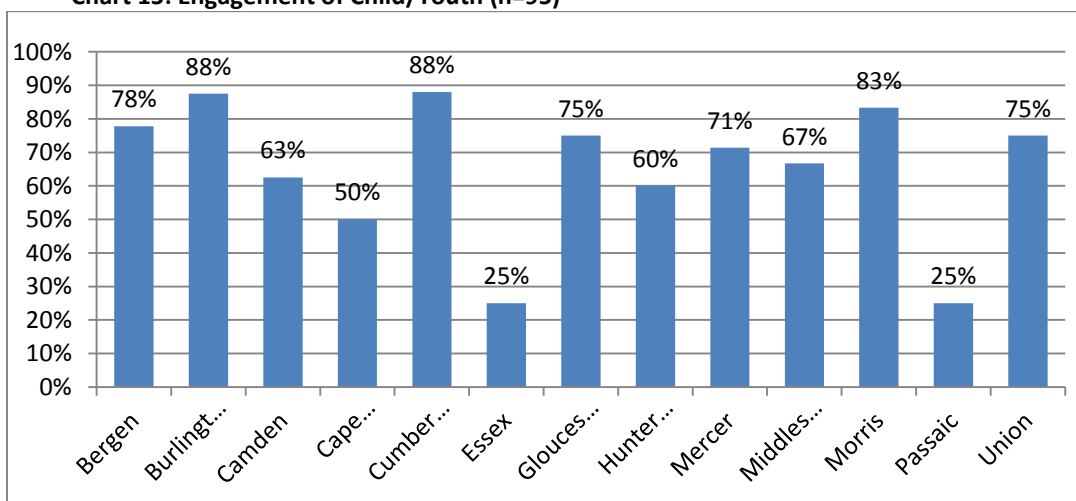
Purpose:

The *Engagement of Child / Youth* indicator assessed children above the age of 6 in the development of collaborative, open and trust-based working relationships that support ongoing assessment, understanding, and service planning. Children under the age of 6 were not assessed, as they were unlikely to be thoroughly engaged in relationships with the child welfare system or in service or permanency planning.

Rating:

- The average *STRENGTH* rating was 67% with 64 of 95 cases in the “Acceptable” range.
- There was a wide variation of *STRENGTH* ratings in the reviewed counties: 7 counties scored over 71%, 4 scored in the 50-67% range, and 2 counties received a *STRENGTH* rating of just 25%.

Chart 15: Engagement of Child/Youth (n=95)



Findings:

Cases with a positive *STRENGTH* rating were those in which a trusting relationship had been developed between the child/youth and DCF. In order to achieve more meaningful planning towards achievement of agreed upon goals, DCF will need to develop strategies to improve child / youth comprehension of their case plan and steps needed for success.

FACT SHEET: Engagement of Parents

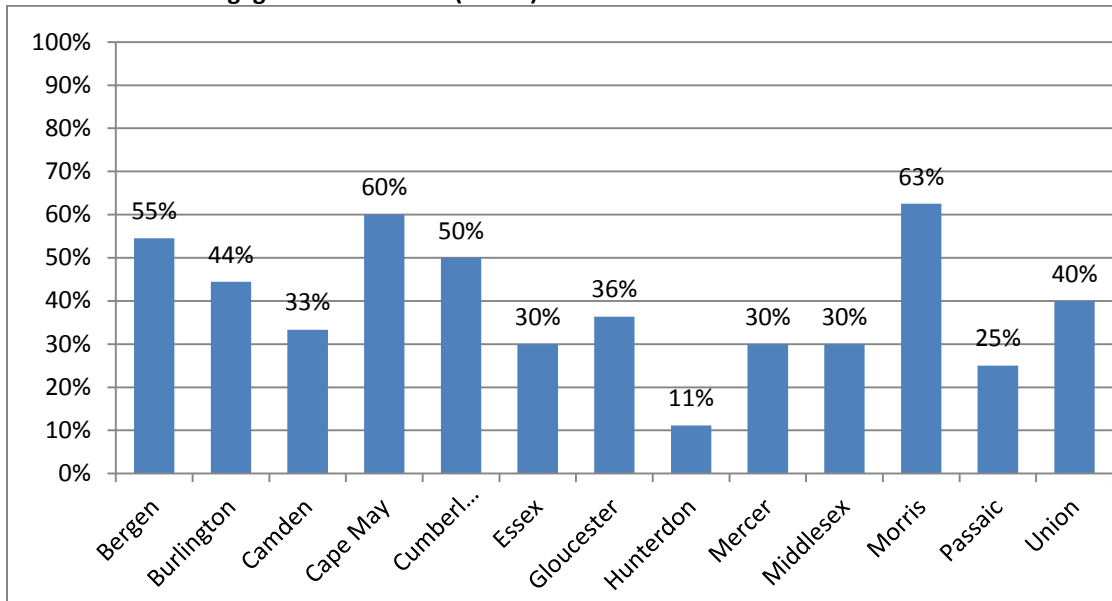
Purpose:

The *Engagement of Parents* indicator assessed parental participation in the development of collaborative, open and trust-based working relationships that support ongoing assessment, understanding, and service planning. One score was given to both parents. If a parent was available but unengaged, the score could not be “acceptable.” Parents scored as ‘not applicable’ were those whose parental rights had been terminated, or who were deceased or missing. Parents of children over the age of 18 were also not included.

Rating:

- The average *STRENGTH* rating for this indicator was 40% or 50 of the 125 cases in the “Acceptable” range.

Chart 16: Engagement – Parents (n=125)



Findings:

Engagement of Parents is an indicator where more focused efforts are clearly needed, evidenced by the fact the highest ranking for any county was just 63% and 7 counties rated at or under 36%. The involuntary nature of child protection services often provides a challenging backdrop to developing trust-based relationships with parents. Engagement is critical at all points during a families’ involvement with the child protection system and this indicator highlights additional work needed to strengthen this area.

FACT SHEET: Engagement of Resource Caregivers

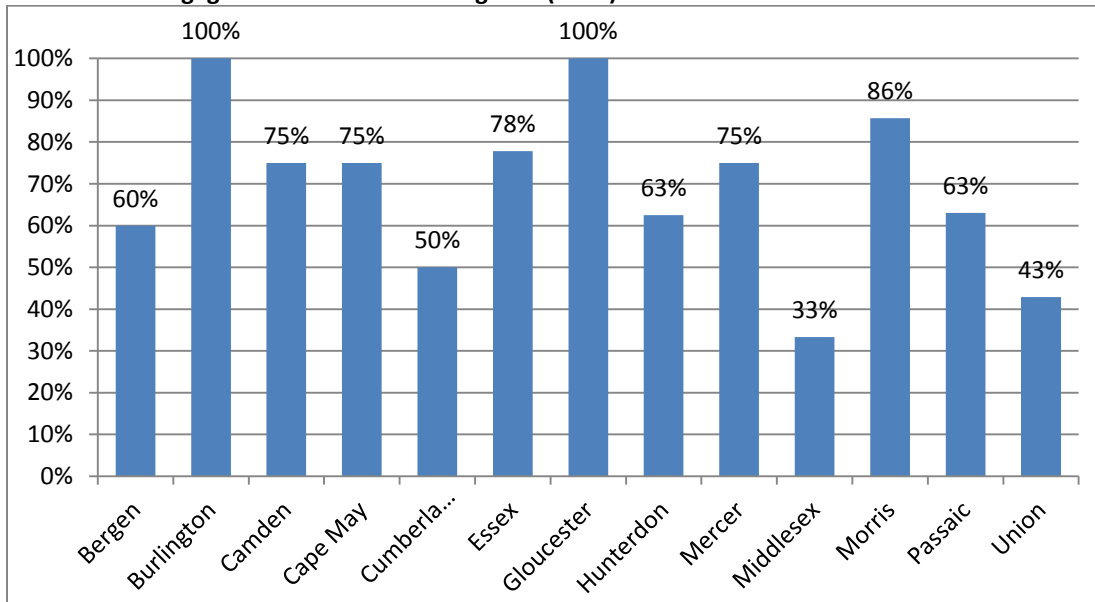
Purpose:

The *Engagement of Resource Caregivers* indicator assessed resource parents in the development of collaborative, open and trust-based working relationships that support ongoing assessment, understanding, and service planning.

Rating:

- The average *STRENGTH* rating was 70% or 68 of 97 cases in the “Acceptable” range.
- 7 of 13 counties had a *STRENGTH* rating of 75% or greater.

Chart 17: Engagement – Resource Caregivers (n=97)



Findings:

Counties with a high *STRENGTH* rating were described as those in which there was a sense of a team between the caseworker and resource caregiver. This collaboration improves the case planning process and results in enhanced outcomes for families. Further efforts may be needed to clarify the role of all team members as well as expectations with the goal of increasing communication and strengthening engagement.

FAMILY TEAMWORK FACT SHEET: Teamwork Formation

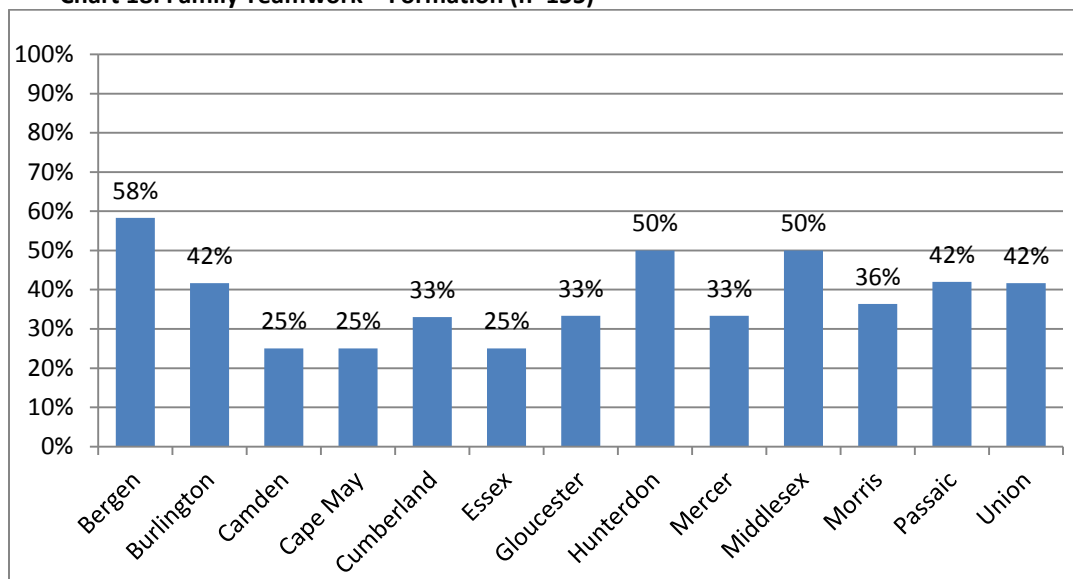
Purpose:

The *Family Teamwork* indicator has two main components: *Formation* and *Functioning*. *Family Teamwork - Formation* focuses on the structure and performance of the family team. This indicator examined whether all essential people were part of the child and family's team, and assessed the balance of formal and informal supports based on the family's individual need.

Rating:

- The average *STRENGTH* rating was 38% with 59 of 155 cases falling in the "Acceptable" range.
- All counties scored below a 70% *STRENGTH* rating.

Chart 18: Family Teamwork – Formation (n=155)



Findings:

All 13 counties fell below the "Acceptable" *STRENGTH* rating of 70%. Review results indicated the formation of teams was limited and often did not include an array of formal and informal or community supports. More focused work is needed to improve the identification and development of team members.

FAMILY TEAMWORK FACT SHEET: Teamwork Functioning

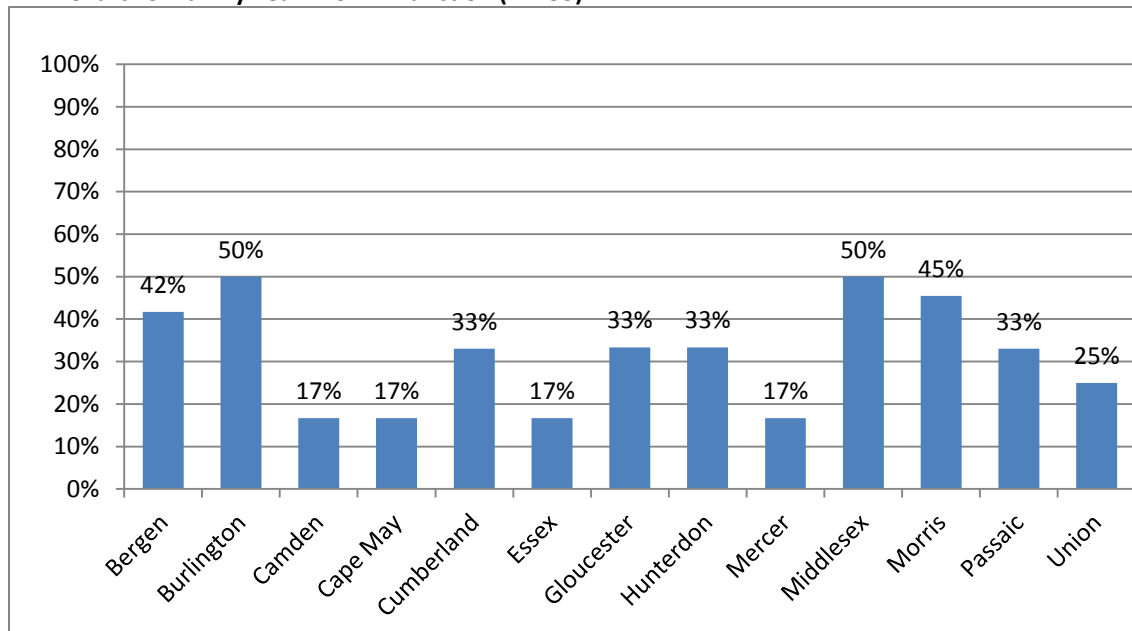
Purpose:

Family Teamwork-Functioning focused on the ability of stakeholders to collectively function as a unified team in planning services and evaluating results for the long term. The functioning of the team is directly related to the formation of the team and dependent on the family's team being composed of all essential stakeholders.

Rating:

- The average *STRENGTH* rating was 32% with only 50 of 155 cases in the "Acceptable" range.
- All counties scored below a 70% *STRENGTH* rating.

Chart 19: Family Teamwork – Function (n=155)



Findings:

Reviewers found that system partners continued to work on behalf of families yet often in isolation of each other. Formal and informal supports were often not aware of others work with the family or youth. Keeping the team informed and working towards the family/youth's goal assists in goal attainment as well as enhances on-going engagement.

ASSESSMENT AND UNDERSTANDING FACT SHEET: OVERALL

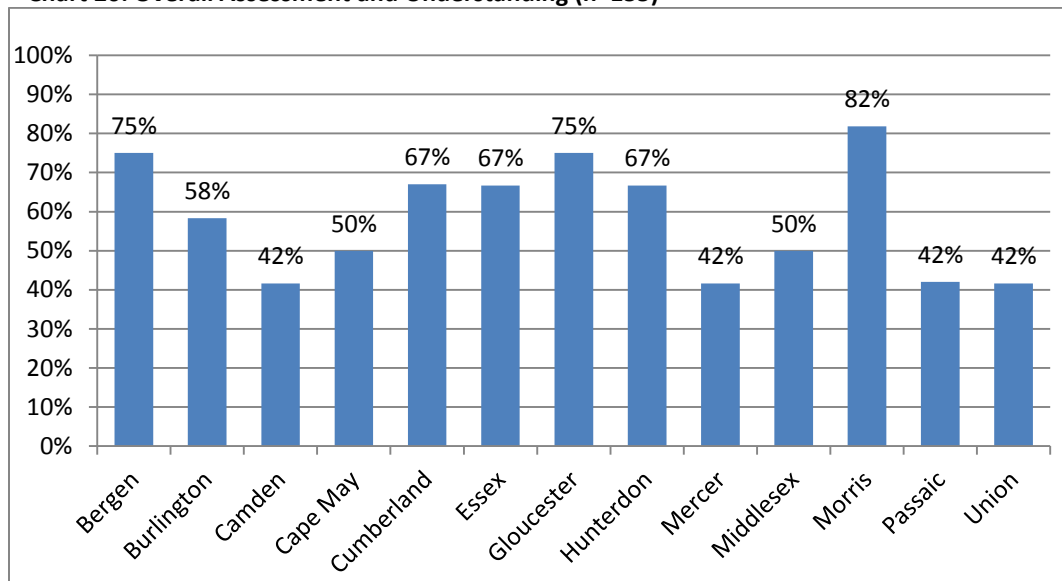
Purpose:

Assessment and Understanding measures how well the agency gathered information, including formal and informal assessments to understand the underlying needs, strengths, and risks of the child / family. This indicator was assessed in three specific areas – child / youth, parents, and resource caregivers – and an overall rating was given encompassing the all areas. Information for the three areas can be found in the respective fact sheet for each.

Rating:

- The average *STRENGTH* rating was 58% or 90 of 155 cases in the “Acceptable” range.
- *STRENGTH* ratings among the 13 counties ranged from 42% and 82%.
- Ratings in 7 of the 13 counties were significantly below 70%.

Chart 20: Overall Assessment and Understanding (n=155)



Findings:

Ratings for this indicator demonstrate the negative impact for children and families when important information about the child and/or family is not clearly understood and/or successfully integrated by DCF into engagement strategies and individualized case planning.

ASSESSMENT AND UNDERSTANDING FACT SHEET: Child / Youth

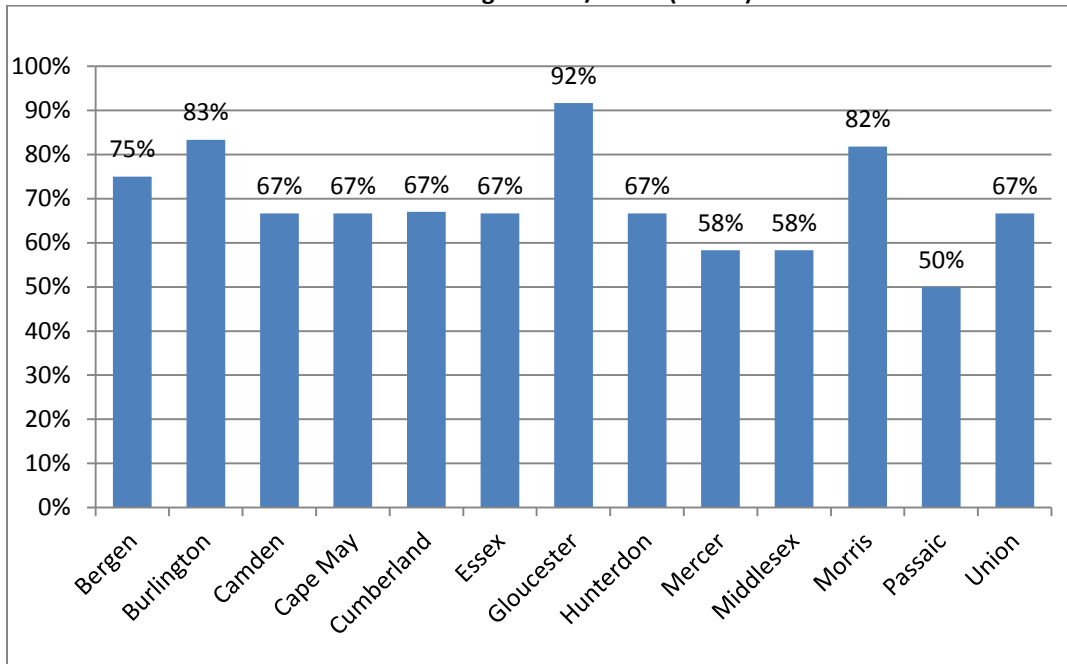
Purpose:

Assessment and Understanding of Child / Youth measured how well the agency gathered information, including formal and informal assessments, to understand the underlying needs, competencies, and risks of the child / youth.

Rating:

- The average *STRENGTH* rating was 69%, or 139 of 155 applicable cases that scored within the “Acceptable” range.

Chart 21: Assessment and Understanding of Child/Youth (n=155)



Findings:

This indicator was identified as an “ANI” for 9 of the 13 counties reviewed. Among counties with a higher *STRENGTH* rating, the presence of formal and informal assessments was noted. Along with those assessments, input from service providers was incorporated into successful engagement strategies and case planning. In counties with lower *STRENGTH* ratings a comprehensive understanding of the child’s strengths, risks, and needs was lacking.

ASSESSMENT AND UNDERSTANDING FACT SHEET: Parents

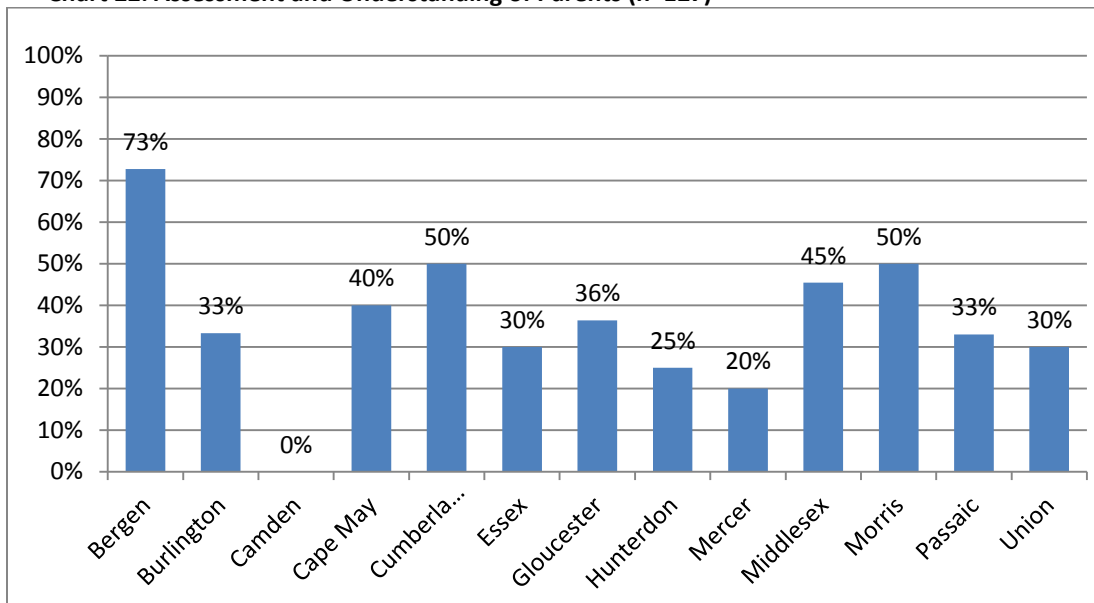
Purpose:

Assessment and Understanding of Parents measured how well the agency gathered information, including formal and informal assessments to understand the underlying needs, abilities, and risks of the parents.

Rating:

- The average *STRENGTH* rating was 36%, or 46 of 127 applicable cases that scored within the “Acceptable” range.

Chart 22: Assessment and Understanding of Parents (n=127)



Findings:

Cases with higher *STRENGTH* ratings were those in which the presence of formal and informal assessments was noted, and input from service providers was incorporated into successful engagement strategies and case planning. In counties with low *STRENGTH* ratings, opportunities to explore the strengths, competencies and functional and underlying needs of parents were missed, unidentified and/or misunderstood.

ASSESSMENT AND UNDERSTANDING FACT SHEET: Resource Caregivers

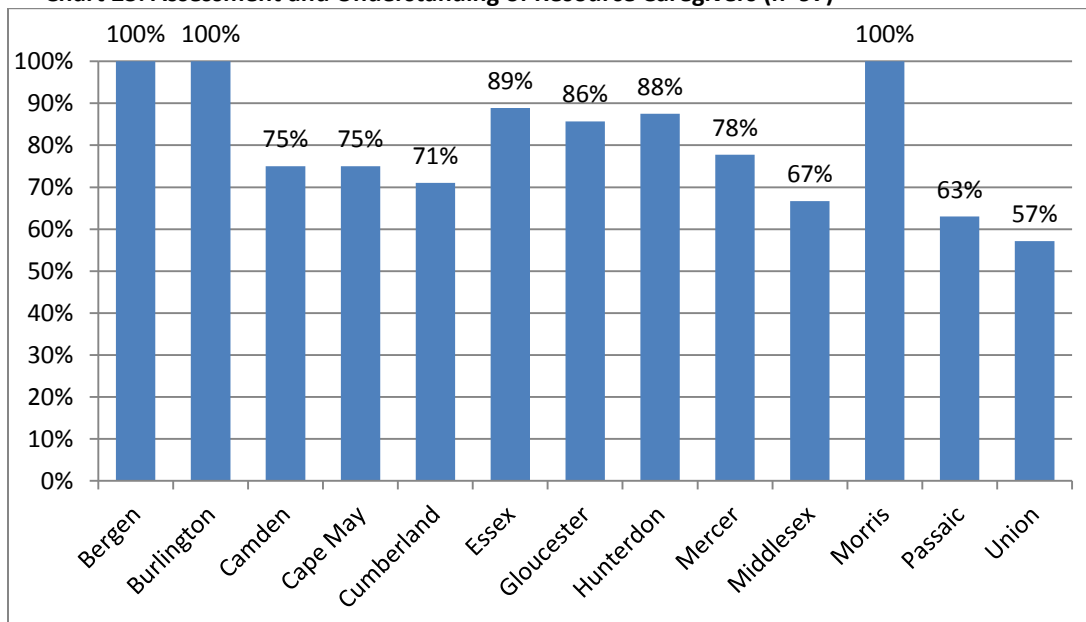
Purpose:

Assessment and Understanding of Resource Caregivers measured how well the agency gathered information, including formal and informal assessments, to understand the underlying needs, strengths, and risks of resource caregivers. There were 97 applicable cases for this indicator as children / youth placed in independent living or in residential or treatment facilities were not included in the sample.

Rating:

- The average *STRENGTH* rating was 80%, or 78 of 97 applicable cases that scored within the “Acceptable” range.
- 10 of the 13 counties had a rating of 71% or higher.

Chart 23: Assessment and Understanding of Resource Caregivers (n=97)



Findings:

QR results indicate that DCF is adept at identifying, understanding and meeting the needs of resource caregivers. As with many other indicators, the disparity between the rating with respect to resource caregivers and parents is significant, and is a factor which needs ongoing attention.

CASE PLANNING FACT SHEET: Case Planning Process

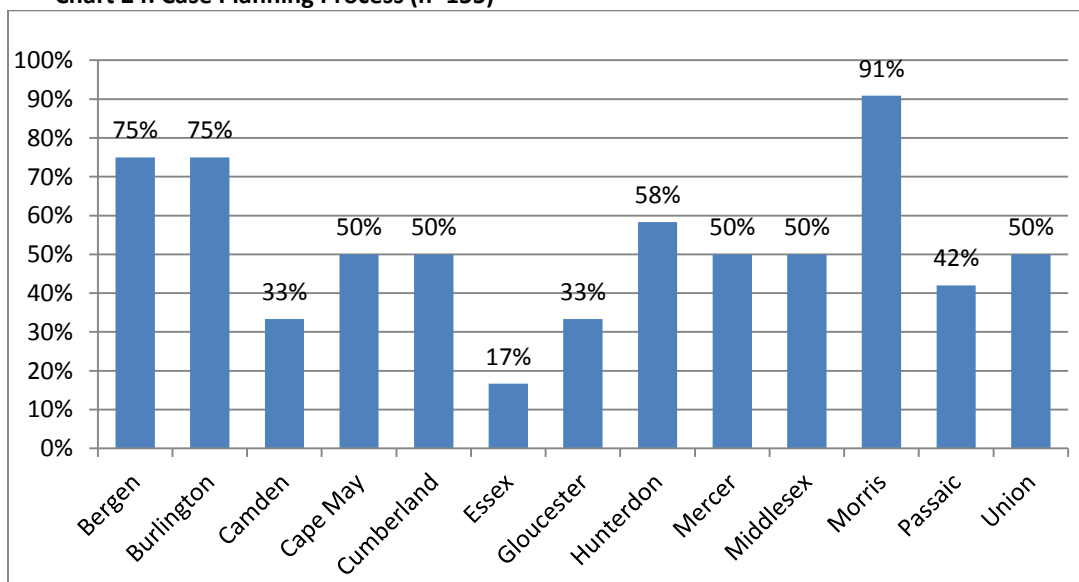
Purpose:

Case planning was assessed in three separate but related indicators: *Case Planning Process*, *Plan Implementation* and *Tracking and Adjustment*. The review of these indicators considered the formal planning process and planning documents within the case file, as well as the informal planning done with the family throughout the life of the case. The *Case Planning Process* indicator examined how well case plans were designed to assist the child and family in addressing needs and achieving identified goals.

Rating:

- The average *STRENGTH* rating was 51% with 79 of the 155 cases in the “Acceptable” range.
- Ratings ranged from a high of 91% in Morris County, to a low of 17% in Essex County. However, the majority of counties recorded a rating less than 70%.

Chart 24: Case Planning Process (n=155)



Findings:

Cases with a higher *STRENGTH* rating were characterized by involvement from key team members in the child, youth or family’s life which informed the case planning process and supported incremental steps to achieving the case goal. Additional focus is needed to create family-driven, integrated plans that encompass collaboration between DCF and its community stakeholders.

CASE PLANNING FACT SHEET: Plan Implementation

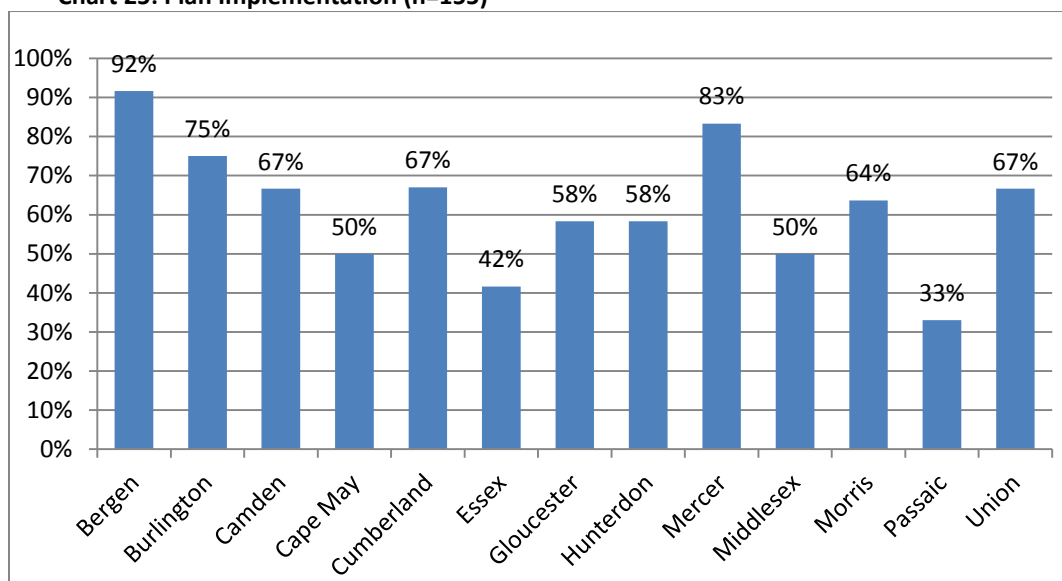
Purpose:

Plan Implementation assessed the delivery of services according to the child's or family's case plan, and was based on timeliness, competency, appropriateness of service provision, and available resources to meet individualized needs.

Rating:

- The average *STRENGTH* rating was 62% or 96 out of 155 cases scored with the "Acceptable" range.

Chart 25: Plan Implementation (n=155)



Findings:

There were inconsistencies across the State in case planning implementation and timeliness in developing the appropriate action plans or providing the indicated resources. The case planning process from planning to implementation to the flexibility to track and adjust is essential to reaching goals and outcomes. This indicator highlights that fact that case planning cannot be truly successful without timely and realistic pathways to achievement.

CASE PLANNING FACT SHEET: Tracking and Adjustment

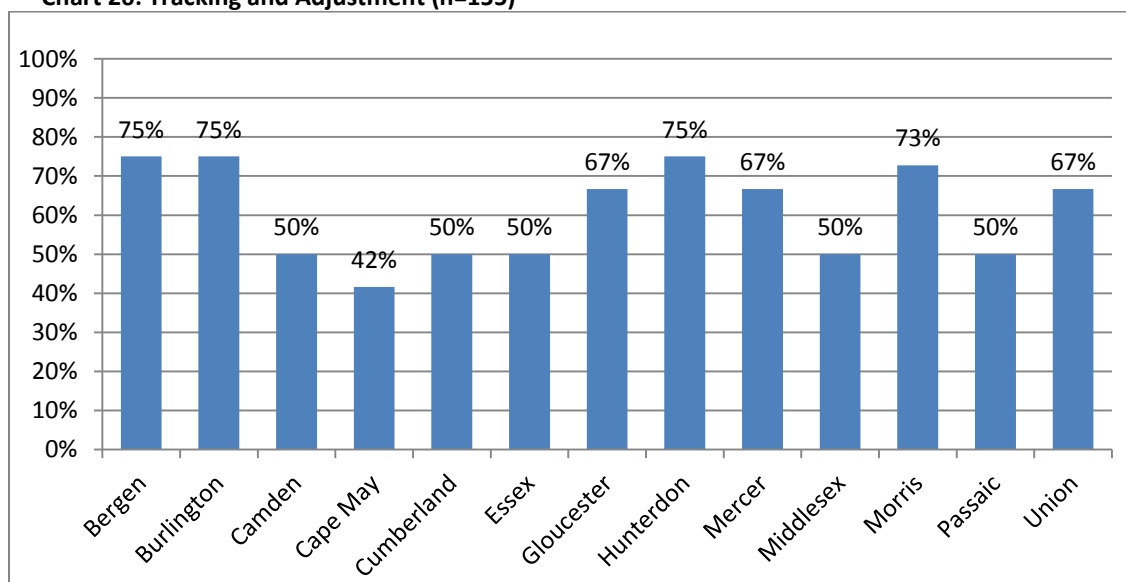
Purpose:

Tracking and Adjustment examined how progress is assessed by the team, as well as how modifications are made to the case plan as circumstances change or new needs arise.

Rating:

- The average *STRENGTH* rating in this category was 61% or 94 of 155 cases.
- Only 4 of the 13 counties rated over the 70% “Acceptable” range.

Chart 26: Tracking and Adjustment (n=155)



Findings:

As the needs of families are identified or change throughout the life of a case, the family’s plan should adjust accordingly. Reviewers noted, however, that plans often remained stagnant and/or reflective only of the initial reason for DCF involvement. As a result of this lack of adjustment to current family need, the majority of counties (9 of 13) scored in the “ANI” range. Reviewers also noted a link between this category and *Teamwork Functioning*, as critical information was sometimes not relayed to the team when planning for the family’s changing needs.

FACT SHEET: Provision of Health Care Services

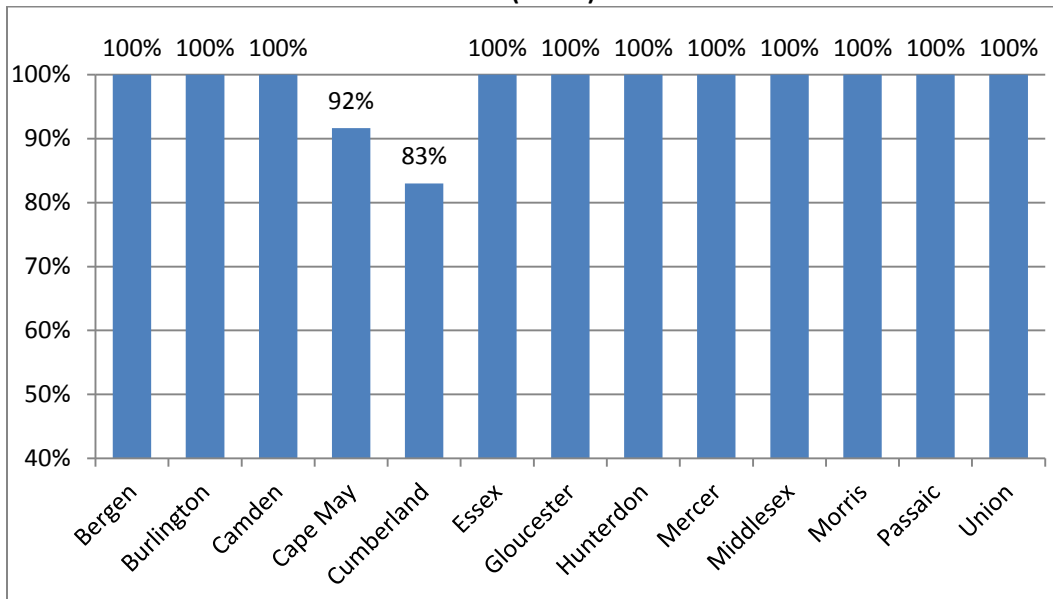
Purpose:

The *Provision of Health Care Services* assessed the degree to which the child received timely and effective health care services commensurate with services required for the child to achieve his / her best attainable health. This indicator looked at provisions for preventative health care, as well ongoing medical needs and any requirements for children with specialized medical needs. *Provision of Health Care Services* included access to required health assessments for children entering out-of-home placement, and screenings and services related to a child's mental health.

Rating:

- The average *STRENGTH* rating was 98% or 152 of the 155 cases rated in the "Acceptable" range

Chart 27: Provision of Health Care Services (n=155)



Findings:

The *Provision of Health Care Services* is a strong point for the DCF, as demonstrated by the 100% *STRENGTH* rating achieved by 11 of the 13 counties. These results indicate that children are receiving the timely routine and preventative medical care needed to achieve their best health.

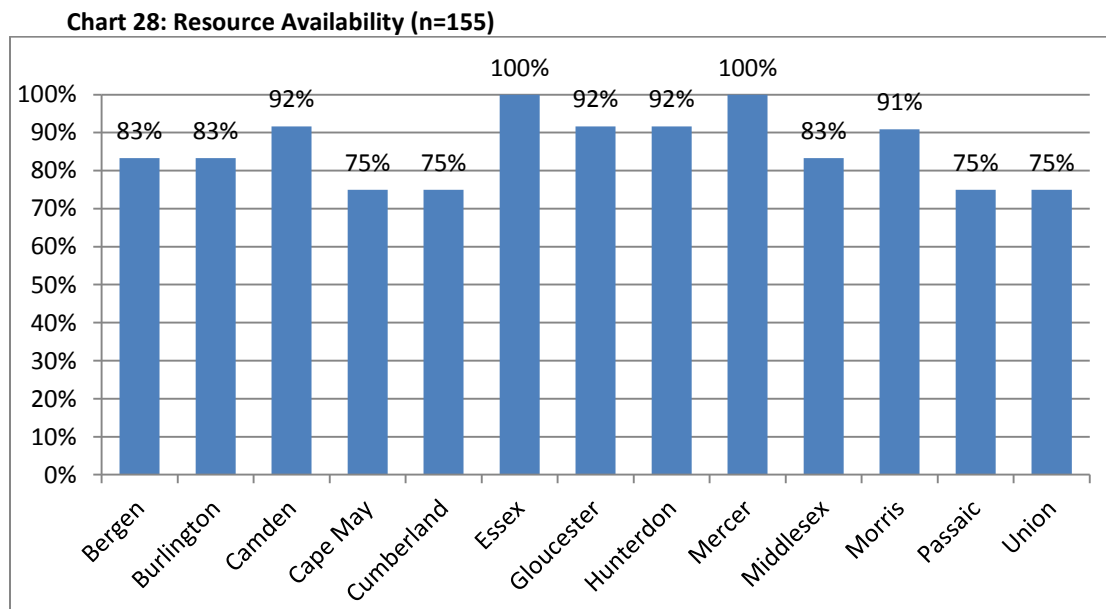
FACT SHEET: Resource Availability

Purpose:

Resource Availability was assessed by examining the array and quality of supports, services and other resources, both formal and informal. Resources were examined to determine if they were individualized and supported the implementation of the child and family plan. Other factors assessed included whether resources were culturally appropriate, and sufficient in intensity and duration.

Rating:

- The average *STRENGTH* rating was 86% or 133 of 155 in the “Acceptable” range.
- All 13 counties had a *STRENGTH* rating at or above 75%.



Findings:

Resource Availability continues to be an asset for DCF. All counties were seen as developing and utilizing creative strategies to provide services that are appropriate and supportive to the child and family.

FAMILY AND COMMUNITY CONNECTIONS FACT SHEET: Overall

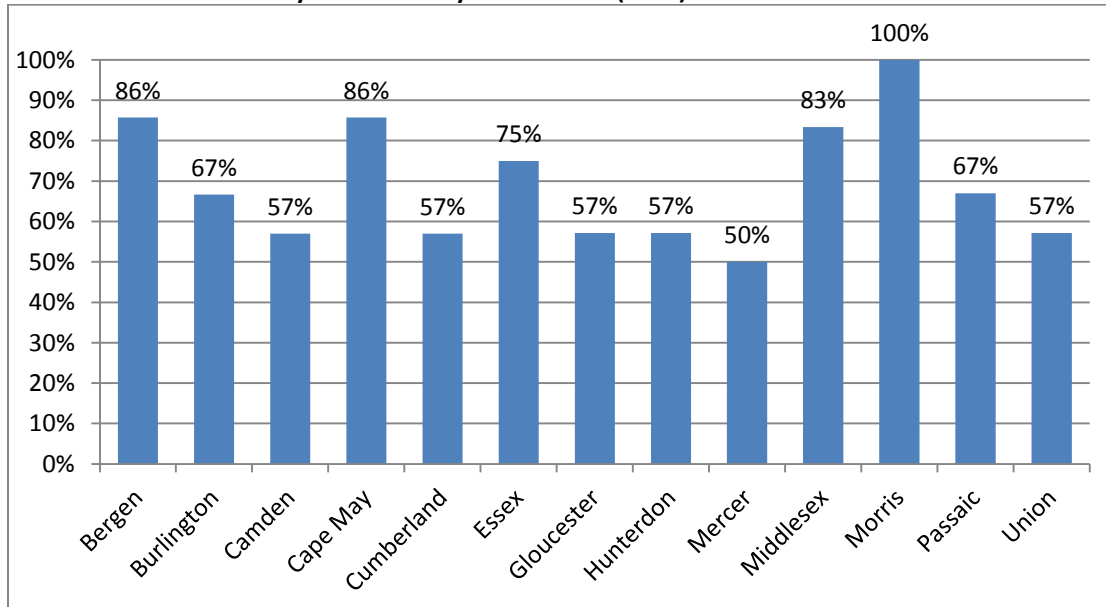
Purpose:

The *Overall Family and Community Connections* indicator assessed the strategies to maintain familial bonds when children enter out-of-home care. The same criterion for *Overall Family and Community Connections* was also applied for *Mother, Father* and *Siblings*. Information on these indicators can be found on their respective fact sheets.

Rating:

- The average *STRENGTH* rating was 69% with 61 of 89 cases scoring within the “*Acceptable*” range.
- The majority of counties, 8 of 13, scored below the 70% “*Acceptable*” range.

Chart 29: Overall Family & Community Connections (n=89)



Findings:

Counties with a high *STRENGTH* rating were those that successfully facilitated placement of children / youth with relatives and encouraged open communication between resource families and biological families to increase visitation and maintain family connection. Reviewers found that family connections were best supported and maintained when caregivers, relative and otherwise, were willing to encourage contact with family. Placement with relatives helped facilitate visitation, as did planning and coordination with congregate care settings and families.

FAMILY AND COMMUNITY CONNECTIONS FACT SHEET: Mother

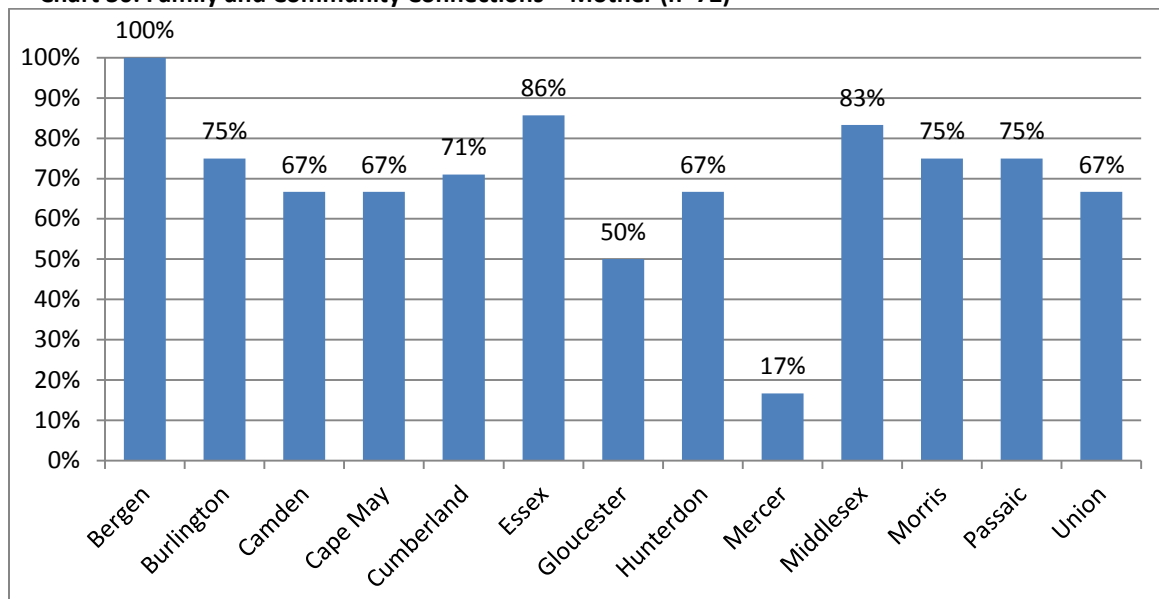
Purpose:

Family and Community Connections – Mother assessed the connecting strategies designed to maintain maternal bonds when children enter out-of-home care.

Rating:

- The average *STRENGTH* rating was 70% with 50 of 72 cases scoring within the “Acceptable” range.
- The majority of counties, 7 of 13, scored at or above 71%.

Chart 30: Family and Community Connections – Mother (n=72)



Findings:

Counties with ratings in the “ANI” range did not sufficiently strategize to address issues where mothers were noted as missing, incarcerated or lacking stable housing. Reviewers noted that strategies for maintaining connections in out-of-home cases were more prevalent with the custodial parent. Of particular interest, Mercer County with 6 applicable cases included instances where the custodial parent prior to removal was more often the father, adversely affecting the visitation with mothers. Mothers in these cases were cited as missing, incarcerated or transient.

FAMILY AND COMMUNITY CONNECTIONS FACT SHEET: Father

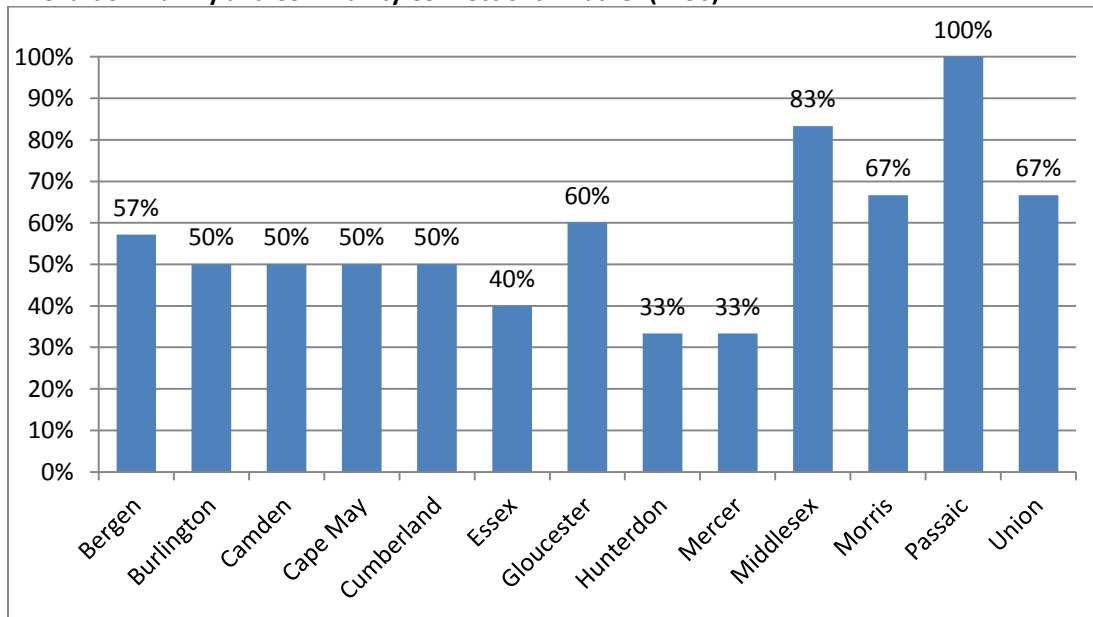
Purpose:

Family and Community Connections – Father assessed the connecting strategies in place to maintain the paternal bonds when children enter out-of-home care.

Rating:

- The average *STRENGTH* rating was 57% with 32 of 56 cases scoring within the acceptable range.
- 11 of 13 counties scored below the 70% or above “Acceptable” range.

Chart 31: Family and Community Connections – Father (n=56)



Findings:

Reviewers found that the ability to maintain connections between children and their fathers was impacted by a father being incarcerated, missing, unknown or identified as “not involved” by the custodial parent. In the two counties where *Family and Community Connections – Father* was identified as a *STRENGTH*, extended family members, placement with relatives and individualized, structured visitation schedules assisted in ensuring fathers were able to visit with their children.

FAMILY AND COMMUNITY CONNECTIONS FACT SHEET: Siblings

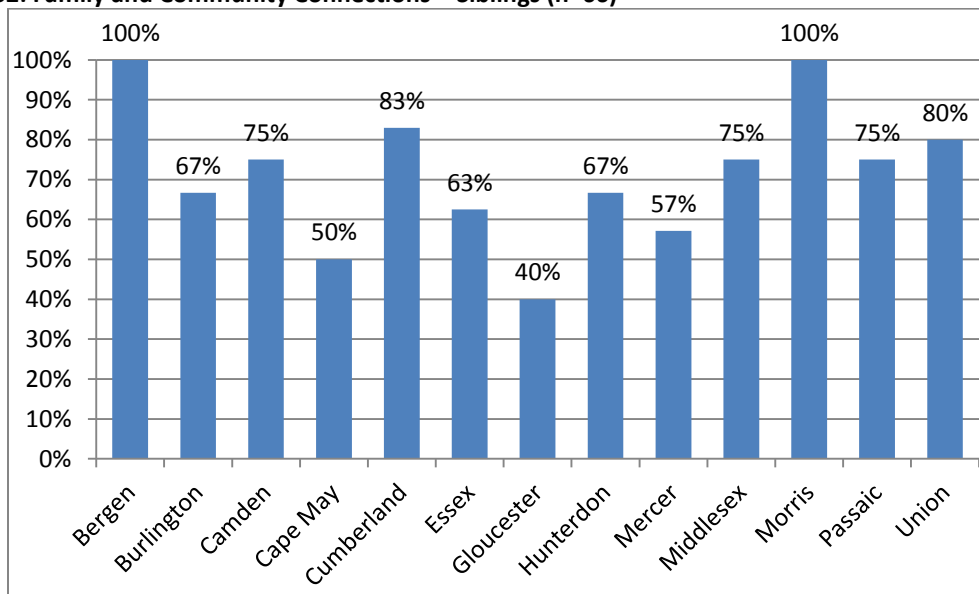
Purpose:

Family and Community Connections – Siblings assessed connecting strategies designed to maintain sibling bonds when children enter out-of-home care. This indicator was applicable only to children placed apart from one or more siblings.

Rating:

- The average *STRENGTH* rating was 71% with 47 of 66 cases scoring within the “Acceptable” range.
- 7 of the 13 counties scored above the 70% or above “Acceptable” range.

Chart 32: Family and Community Connections – Siblings (n=66)



Findings:

In counties where this indicator was a *STRENGTH*, sibling connections were best supported and maintained when caregivers, relative and otherwise, were open and willing to encourage contact with family. DCF worked diligently to ensure these connections were maintained by developing and coordinating the visitation strategies in advance with families. In counties where this indicator was identified as an area needing improvement, obstacles included the child’s distance from siblings, lack of visitation from the onset of placement and the focus on the reunification plan for one child preventing visitation with siblings.

FAMILY SUPPORTS FACT SHEET: Overall

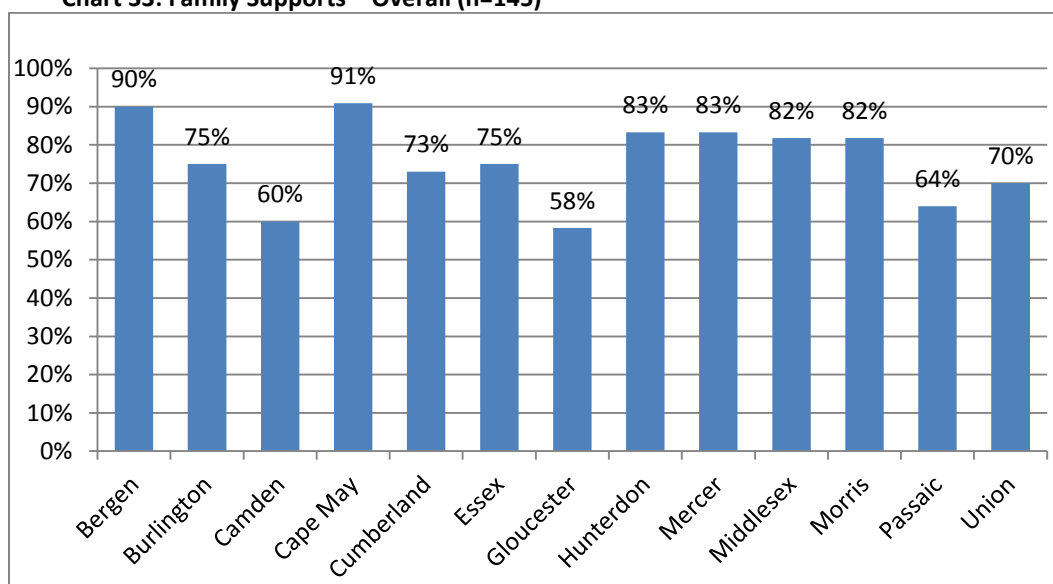
Purpose:

Overall Family Supports assessed the active efforts of providers and the service system to prepare and assist the family in their ability to provide a safe and stable living environment for the child. *Family Supports* was assessed individually for *Parents* and for *Resource Caregivers* if the goal for the child was reunification, and was then given an *Overall* rating. Information on the two individually assessed indicators can be found in their respective fact sheets.

Rating:

- The average *STRENGTH* rating was 76%, or 110 of 145 applicable cases that scored within the “Acceptable” range.
- 10 of the 13 counties had ratings of 70% or higher.

Chart 33: Family Supports – Overall (n=145)



Findings:

Reviewers observed that the establishment of extensive formal and informal support networks had a positive impact on families. This linkage is vital for the family’s success beyond their involvement with the formal child welfare system. Safety and stability outcomes are better achieved when families’ connections reflect their choices and meet their underlying need.

FAMILY SUPPORTS FACT SHEET: Parents

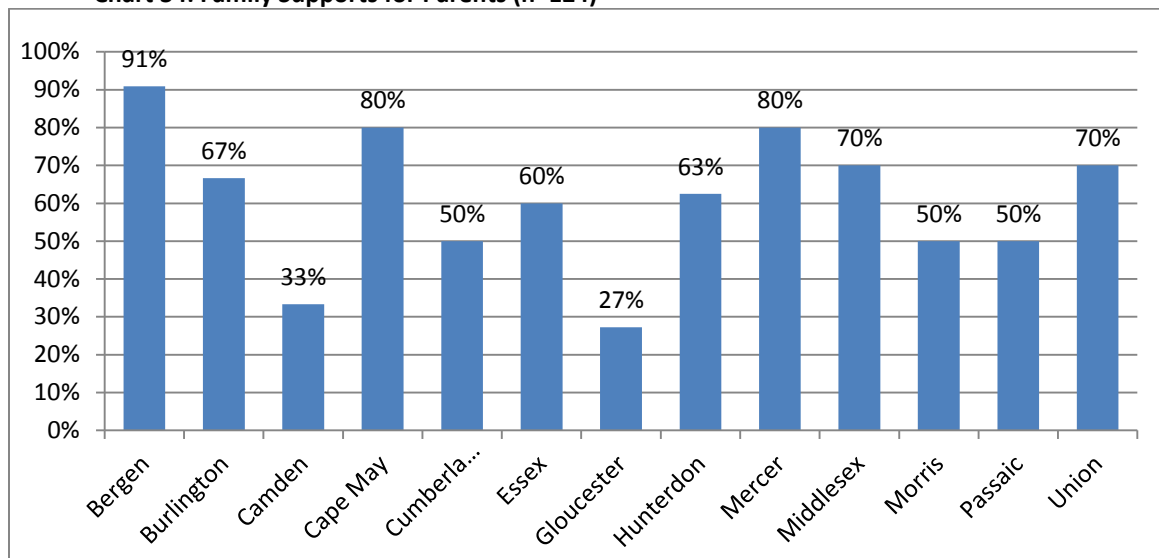
Purpose:

Family Supports for Parents assessed the active efforts of providers and the child welfare system to prepare and assist parents in their ability to provide a safe and stable living environment for the child. Only 124 cases were assessed as applicable. The balance of cases included parents whose rights had been terminated, were missing, or the youth in the sample were over 18 years old or had “Independent Living” as their case goal.

Rating:

- The average *STRENGTH* rating was 61% or 76 of 124 applicable cases in the “Acceptable” range.

Chart 34: Family Supports for Parents (n=124)



Findings:

Cases with higher ratings were those in which parents were significant contributors in the identification and development of support systems. In some instances parents were very resourceful in accessing the formal supports needed. In many of these situations, extended family (in particular, grandparents) served as caregivers and provided other the support which allowed for continued contact between parents and their children, and established supports which remained in place beyond reunification and withdrawal of DCF. In cases with lower ratings parents lacked connection to supports within the community to assist them in providing for their children and developing the self-sufficiency that would allow them to function without the assistance of DCF.

FAMILY SUPPORTS FACT SHEET: Resource Caregiver

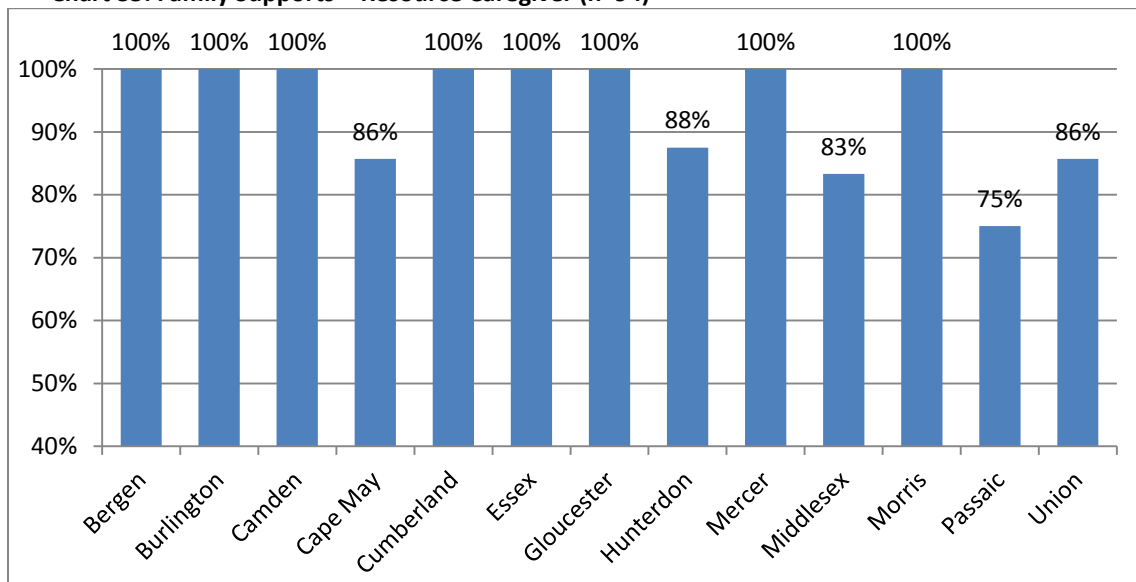
Purpose:

Family Supports for Resource Caregiver assessed the active efforts of providers and the service system to prepare and assist the resource caregivers in their ability to provide a safe and stable living environment for the child. Cases with a youth in a non-resource home setting, like residential or congregate care setting, were not included in the rating for this indicator. Youth over the age of 18 and / or who had a case goal of “Independent Living” were not included in the sample.

Rating:

- The average *STRENGTH* rating was 94% or 88 of 94 applicable cases within the “Acceptable” range.

Chart 35: Family Supports – Resource Caregiver (n=94)



Findings:

Reviewers observed that resource caregivers on the whole were connected with the formal and informal supports necessary to provide for the children in their care. Resource caregivers were very resourceful in identifying and seeking out the formal and informal supports necessary to maintain children (especially those with special needs) in their homes.

FACT SHEET: Long Term View

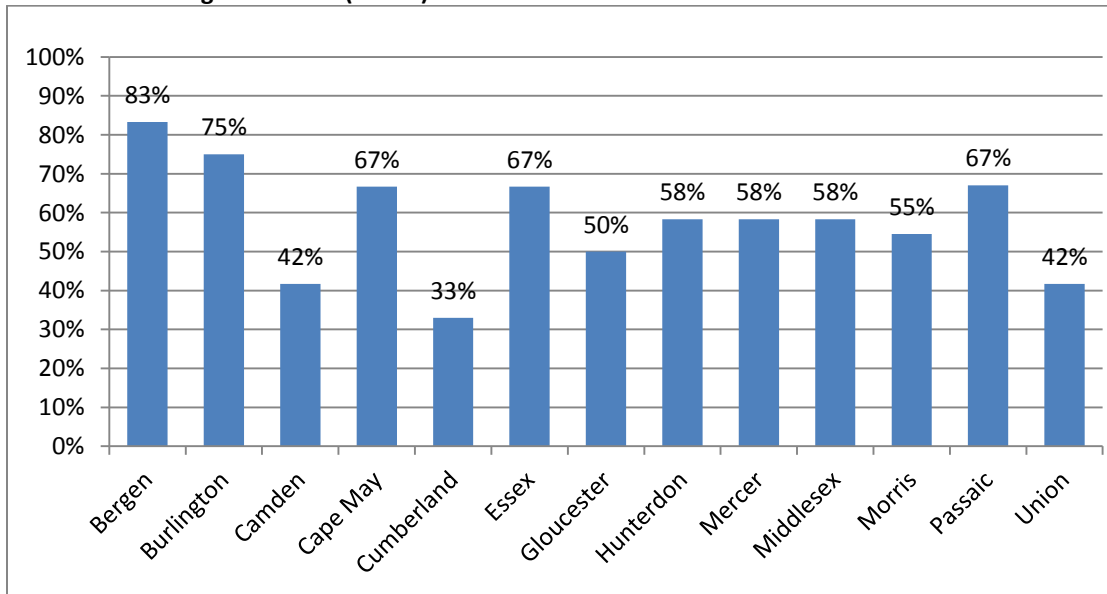
Purpose:

The *Long Term View* indicator assessed the presence of an explicit plan to ensure the family can live successfully independent from their involvement with the child welfare system. The family's ability to understand and achieve the steps needed to reach and maintain their goals was also examined.

Rating:

- The average *STRENGTH* rating was 58% with 90 of 155 cases scoring in the "Acceptable" range.
- Only 2 counties scored above 70% for this indicator.

Chart 36: Long Term View (n=155)



Findings:

Long Term View continues to be an area of considerable challenge for DCF. In counties where *Long Term View* was rated as "ANI", reviewers found that families, service providers and DCS staff were uncertain regarding the steps that needed to be achieved in order for the family to end their involvement with the child welfare system.

FACT SHEET: Transitions and Life Adjustments

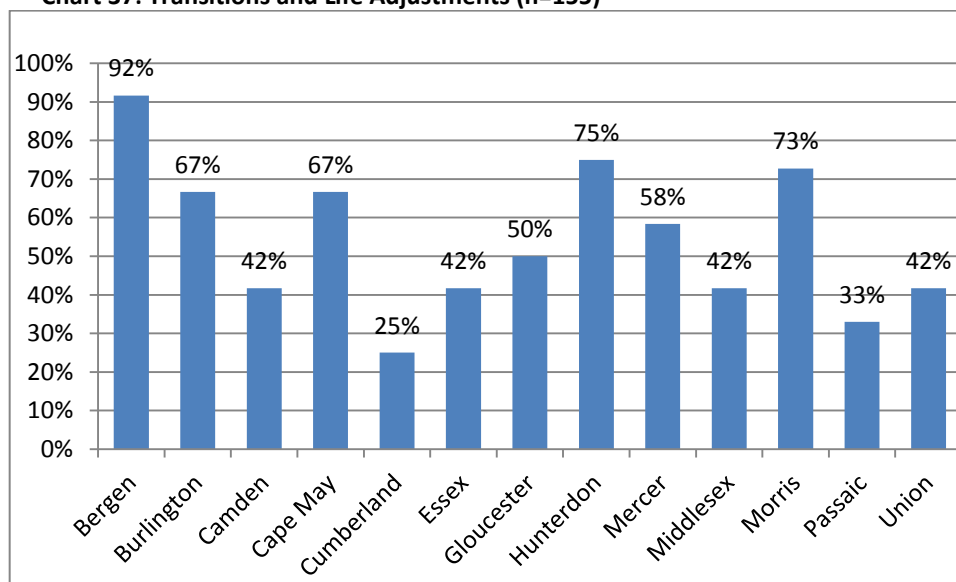
Purpose:

The *Transitions and Life Adjustments* indicator assessed whether the child and family's next transitional phase had been identified, and if so, whether planning had occurred consistent with the family's long term view.

Rating:

- The average *STRENGTH* rating was 54% with 83 out of 155 cases scoring in the "Acceptable" range.
- 3 out of 13 counties achieved a 70% *STRENGTH* rating.

Chart 37: Transitions and Life Adjustments (n=155)



Findings:

Reviewers noted inconsistencies on the planning transitions for families, including transitions known and unexpected. Thoughtful and thorough attention to the challenges inherent in transitions can deepen engagement and ensure that important gains remain intact.

PROGRAM IMPROVEMENT PLANS (PIP)

In order for results of the QR to be used to improve outcomes for children and families, each county completes a Program Improvement Plan (PIP). Guidance for PIP development includes:

- The PIPs address “big picture” issues and are intended to be a framework for identifying broad issues and overarching themes affecting all or most offices within the reviewed county.
- The PIP should be a useful document to help a county think strategically about how to focus limited resources in areas likely to have the most significant impact on staff practice and the best outcomes for families.
- Counties are given the flexibility to focus on areas of practice they feel are most salient to their specific area.
- Safety must be addressed if this issue was identified as needing improvement based on QR results.
- PIPs strategies must be identified using the SMART model so that it is easily measureable and the desired impact can be readily demonstrated.
- Counties are encouraged to gather input from key stakeholders and to partner with stakeholders for PIP implementation.
- PIPs are required to reflect an integrated approach to planning and to be consistent with the Case Practice Model and any other plans already identified for improving practice.

Program Improvement Plans for 2012 (n=13)

The following table displays *county-identified* areas of need based on QR findings. The design and flexibility of PIP development makes summary comparisons challenging, however, a review of submitted PIPs reveals that many counties have chosen to focus on improvement in the key case practice elements of *Engagement, Family Teaming* and *Case Planning*.

Progress of identified strategies will be tracked and measured using local tracking mechanisms and DCF’s data management system (Safe Measures).

QR Date	County	County Identified Area of Need For PIP Based Upon QR Findings
Jan-12	Gloucester	Progress Toward Permanency
		Engagement of Parents
		Family Teamwork: Formation and Functioning
		Case Planning Process
Feb-12	Passaic	Engagement of Parents
		Family Teamwork: Formation and Functioning
Mar-12	Burlington	Progress Toward Permanency
		Engagement of Parents
		Overall Assessment and Understanding of Underlying Needs
Apr-12	Mercer	Engagement: Overall
		Assessment and Understanding: Overall
		Family and Community Connections: Overall
Apr-12	Bergen	Progress Toward Permanency
		Family Teamwork: Formation and Functioning
		Family and Community Connections: Engaging of Non-Residential Fathers.
May-12	Cumberland	Progress Toward Permanency
		Family Teamwork: Formation and Functioning
		Case Planning Process
May-12	Union	Engagement: Overall
		Engagement with Parents
		Family Teamwork: Formation and Functioning
Jun-12	Morris	Family Teamwork: Formation and Functioning
		Plan Implementation
		Long Term View
Jun-12	Cape May	Family Teamwork: Formation and Functioning
		Assessment and Understanding: Overall

QR Date	County	County Identified Area of Need For PIP Based Upon QR Findings
Sep-12	Middlesex	Case Planning Process
		Family Teamwork: Formation and Functioning
Sep-12	Hunterdon	Engagement of Parents
		Case Planning Process
Oct-12	Camden	Progress Toward Permanency
		Family Teamwork: Formation and Functioning
		Engagement: Overall
Oct-12	Essex	Engagement with parents and youth
		Teamwork - Formation and Functioning
		Progress towards Permanency

Office of Performance Management & Accountability

The Office of Performance Management and Accountability (PMA) is the office through which QRs are managed and supported. In 2012, the PMA continued to implement strategies to enhance processes and reinforce internal capacity to implement and sustain QR.

Using Feedback for Process Improvement

Beginning in September 2011, the Office of Performance Management and Accountability (PMA) introduced two data collection instruments as part of the QR process:

- Qualitative Review Area / Local Office Staff survey
- Qualitative Review-Community Participants including teachers, medical professionals, substitute caregivers, day care providers, extended family members, parents and children.

These tools are used to solicit feedback from DCF staff and QR community participants following their involvement in a QR. Through a simple electronic link to a web-based survey program, both groups are asked to anonymously submit basic demographic information and respond to questions regarding their experience with the QR. Hard copy versions of the survey are also available.

Cumulative results of the staff survey so far have been generally positive towards the QR process as an educational and training tool for DCF casework staff. Likewise, community participants have expressed appreciation of the openness of the process and the willingness of the “system” to self-analyze while respecting the opinions of system partners. Survey results are discussed and shared with Local QR Site and will be used to continually revise and refine the QR process.

APPENDIX A

Qualitative Review Methodology

The QR process examines the current status of the child / family as well as practice performance areas through in-depth interviews and record reviews. The QR is a week-long process where 12 reviewers are paired into 6 teams and assigned the cases of two children to review over the course of the week. The review team follows the same basic process for each of the cases starting with a review of key documents in the case file and a discussion about the history and work to date with the family with the assigned caseworker and supervisor. In addition to DCF staff, key interviewees can include:

- Child, if age and developmentally appropriate;
- Biological mothers and fathers;
- Current caregivers or Resource Parents;
- Extended family supports;
- School personnel including teachers, guidance counselors or principals;
- Court Appointed Special Advocates (CASA), and;
- Community providers.

In the time period leading up to the review week, local county staff schedule interviews with key informants. These individuals are defined broadly as any person in the identified child's life who has a vested interest in seeing positive outcomes for that child. Interviews are scheduled in person with the child and caregivers and with as many others as are possible within the two day interview period. Other interviews are conducted over the phone. In 2012, there were over 1,400 separate interviews conducted related to the 155 children/youth in the sample. Counties reviewed included Gloucester, Passaic, Burlington, Mercer, Bergen, Cumberland, Union, Morris, Cape May, Middlesex, Hunterdon, Camden, and Essex.

At the conclusion of the interview process for each case, the review teams discuss their findings and scores. They highlight the strong points and areas needing improvement as part of a group debrief processes. Local leadership is silent observers to the process. On the last day of the review week, the review team gathers for a final debrief session to discuss the themes to highlight in a staff presentation that follows.

The staff presentation is an opportunity for the entire county to hear the results of their QR in real time with aggregated scores and case examples presented. Within this presentation is also an opportunity for staff in the county to identify the first elements of their Program Improvement Plan (PIP). The PIP provides the county a vehicle to identify, track and monitor areas highlighted as needing improvement.

APPENDIX B

Qualitative Review Reviewer Preparation

Training

All reviewers who participate in the QR process attend a two day training offered through the New Jersey Child Welfare Training Partnership which focuses on exposure to the QR instrument and offers an overview of the entire process. Reviewers are then paired with experienced reviewers, who serve as mentors, during their first three reviews as they continue to develop and refine their skill set. Reviewers in Training (RIT) and their mentors establish a 'working agreement' specifying how to work together over the course of the week; including the process of giving and receiving feedback. At the end of the week, both RITs and mentors complete assessments on their partner and submit those to the Office of Quality to be used in determining future review pairs.

In 2012, two training sessions were offered in order to expand the current reviewer pool. Over the course of all trainings, a total of one community stakeholders and 43 staff from across DCF were trained as QR Reviewers. The recruitment of community stakeholders as reviewers is reflective of the Department's vision of a transparent review process. It also offers a mutually beneficial learning opportunity.

Certification Process

During 2011, PMA introduced a certification process for Qualitative Reviewers in an effort to establish a standardized process for developing an experienced cadre of reviewers. Certification is a critical piece of the Qualitative Review process which creates the opportunity to assess fidelity of the tool, the scoring abilities of the Reviewer in Training, and test reliability across all reviewers. This process provides structure that bolsters the overall reviewer pool and sharpens their skills in areas of identified limitations.

The process of certification involves a two day training on the QR process, participation in a minimum of three reviews during a year accompanied by positive feedback from mentor reviewers and a final assessment involving scoring a standardized case narrative. This final assessment is made available online when PMA has identified that the reviewer has met the prerequisite criterion. The reviewer reads the narrative and scores selected QR indicators based on the information provided. The scores and the supporting information are submitted to PMA and graded against the normative score. The goal of PMA is to ensure all reviewers progress through the development and certification process in a timely manner.

Qualitative Review Leadership Seminar

In 2012, The Office of Performance Management and Accountability (PMA) conducted QR Leadership Seminars to provide an overview of the Qualitative Review process to the leadership of the Department of Children and Families. Realizing that DCF Leadership may not be able to become full QR Reviewers, this opportunity allowed for a deeper understanding of the QR process as well as fully understanding ratings for all QR Indicators. DCF Leadership is uniquely positioned to develop and implement strategic plans in response to the outcome of the QR in their various areas; an in-depth understanding of the QR process is invaluable in meeting those challenges. A total of 28 DCF Leadership attended the seminars.

The QR Leadership Seminars also afforded all who participated an opportunity to “Shadow” one case during one of the QR review week. The experience provides opportunity for firsthand observation necessary to gaining an understanding of many facets of the QR process and protocol. As a Shadow Reviewer leadership are able to review records, participate in interviews and discuss with reviewers current issues presented by the family, as well as the status of the child and system and practice performance. This experience enables leadership to assist and support their local office/areas in developing PIP’s and otherwise enhancing case practice among staff.

In 2013, the QR Leadership Seminars will be expanded to include our community stakeholders. This will enhance our partnership with our partners and offer continued learning opportunities.

APPENDIX C
QR Key Demographics

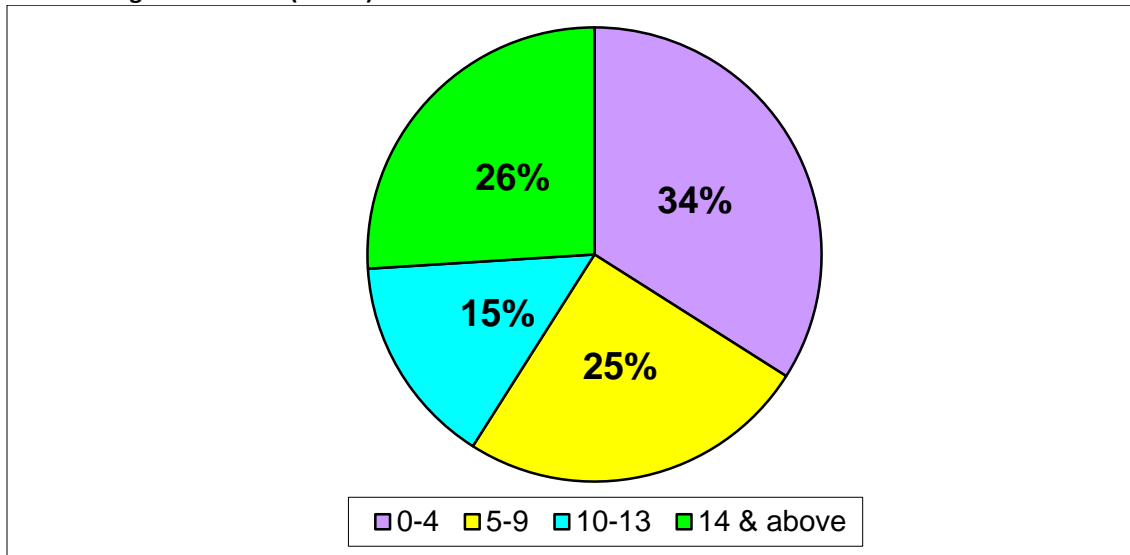
Basic demographic information is collected for each of the target children and his/her family in the sample through a form that is completed by the QR county or office and cross checked by reviewers during the course of their review.

Sample

Through a random sampling process, the DCF Office of Information Technology and Reporting (ITR) extracts two lists of children for each county prior to the review week; a list of all children in an out-of-home placement and a list of all children receiving services in their own home. The local county team reviews the lists and through a structured set of guidelines identifies the final sample of 12 children which includes 8 children in out-of-home settings and 4 children who remain in their own homes.

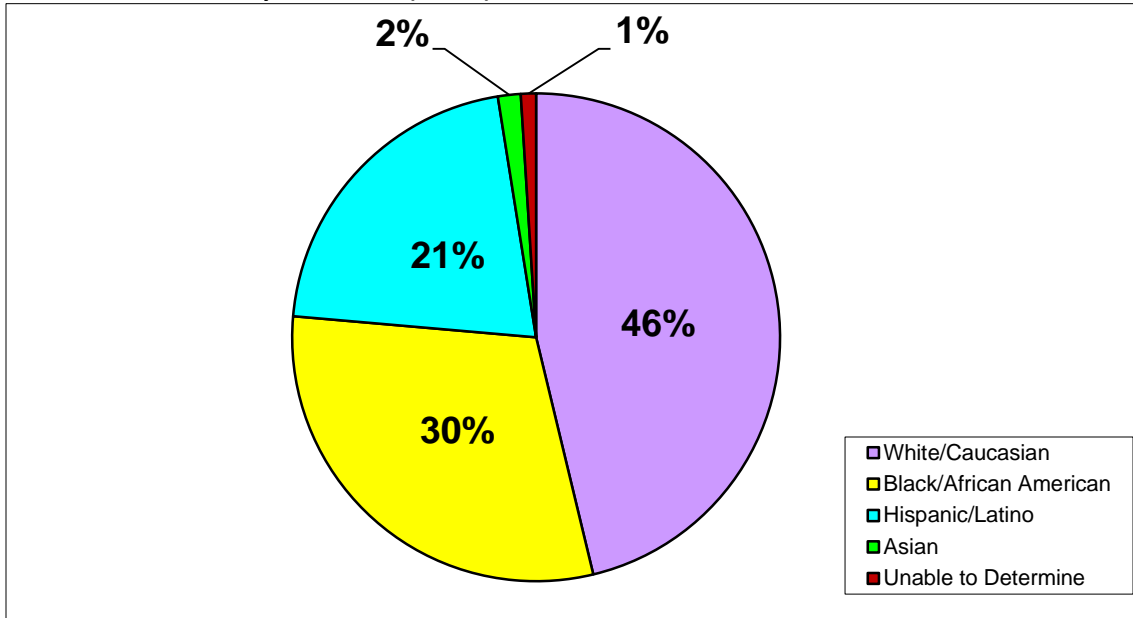
Age

Chart 38: Age of Children (n=155)



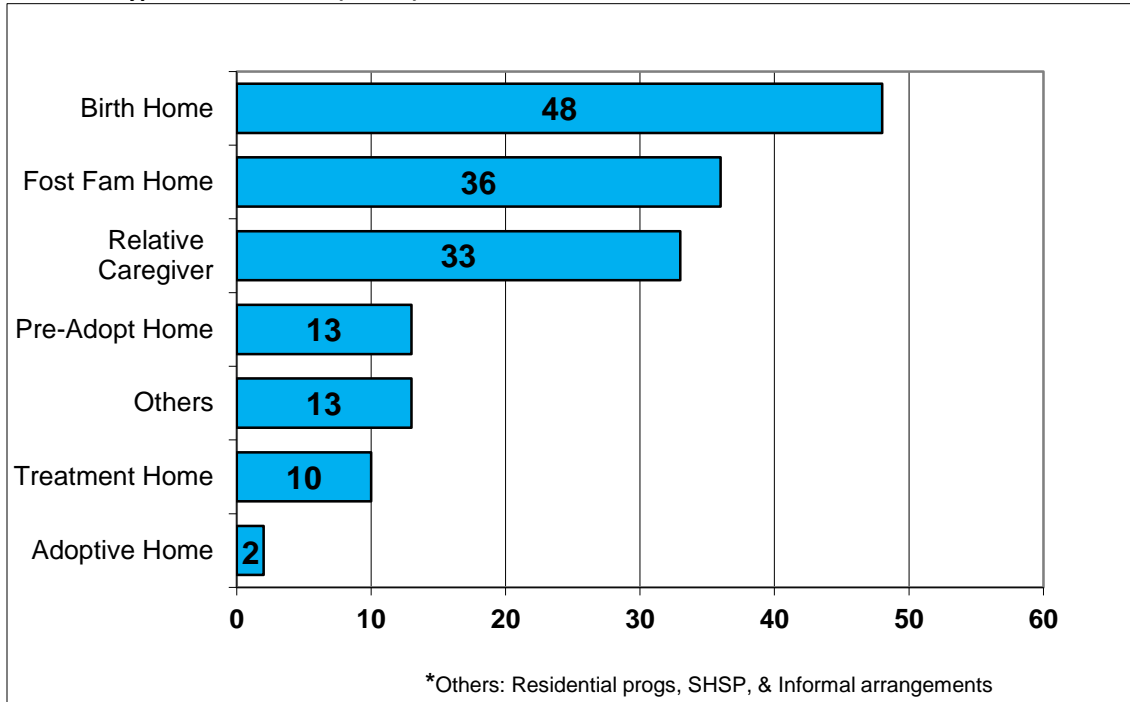
Race/Ethnicity

Chart 39: Race/Ethnicity of Children (n=155)



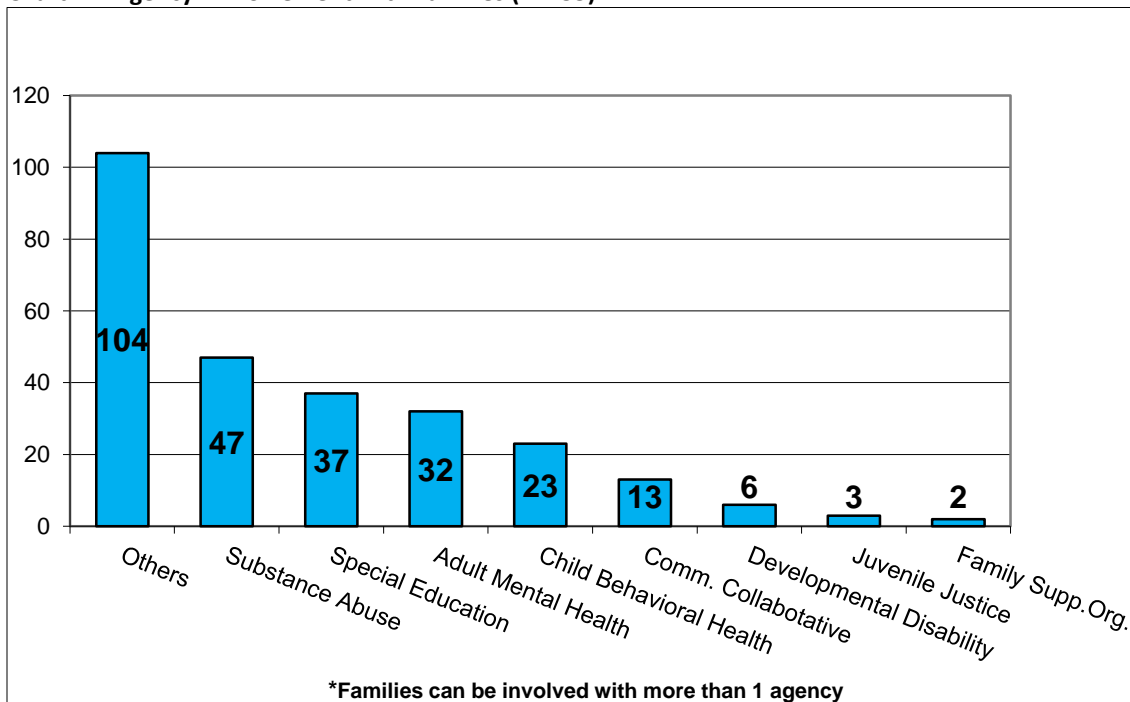
Type of Placement

Chart 40: Types of Placement (n=155)



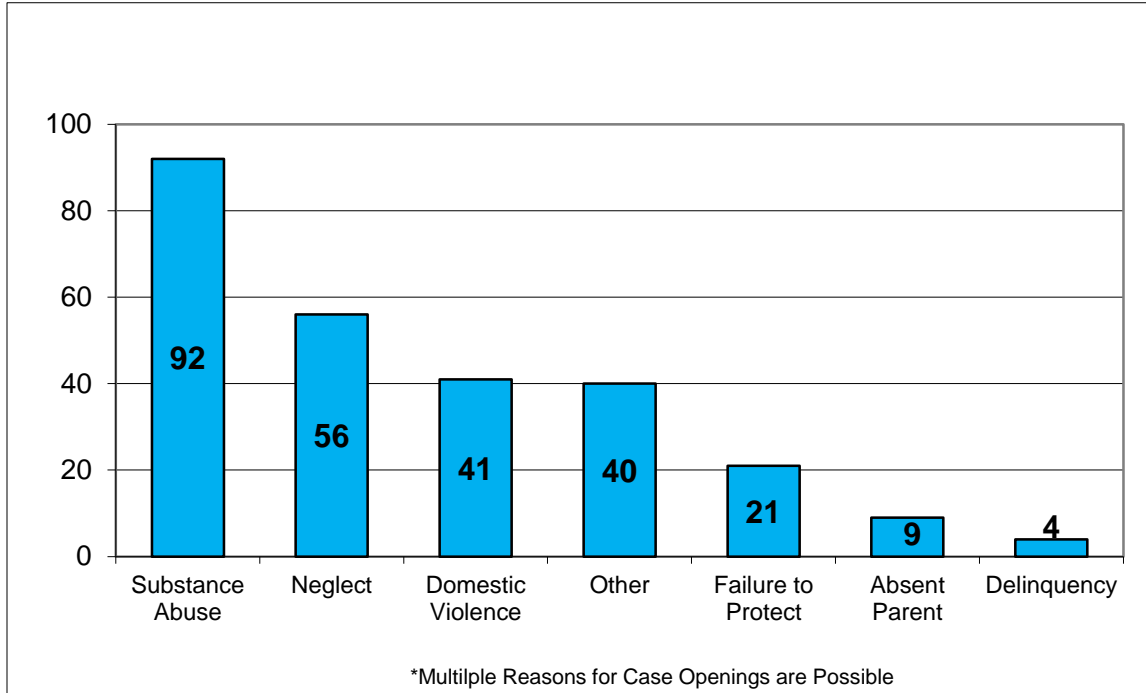
Agency Involvement

Chart 41: Agency* Involvement with Families (n=155)



Reasons Case Opened

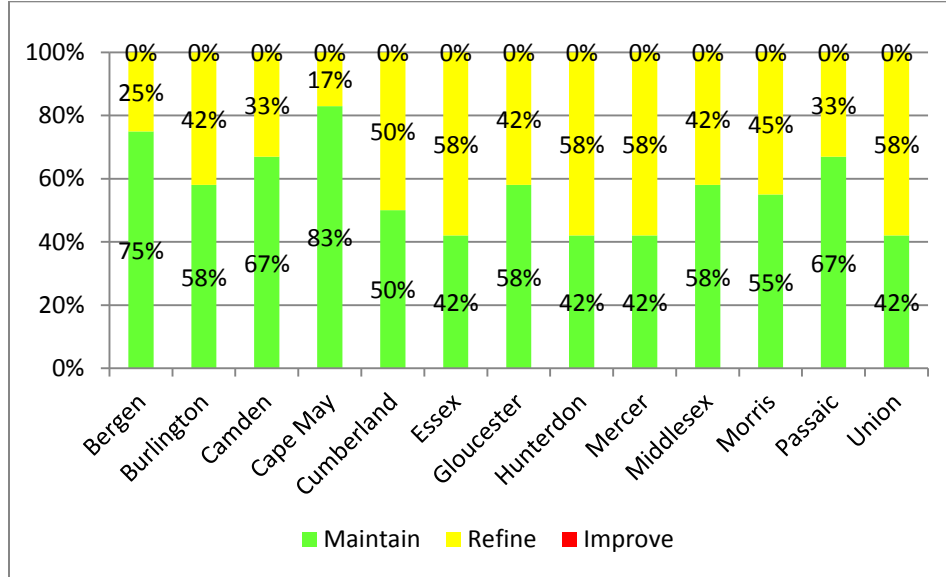
Chart 42: Reasons Case Opened* (n=155)



APPENDIX D

Data by Zone: Overall Child & Family Status

Chart 43: Overall Child & Family Status (n=155)



APPENDIX E
Data by Zone: Safety

Chart 44: Safety at Home (n=155)

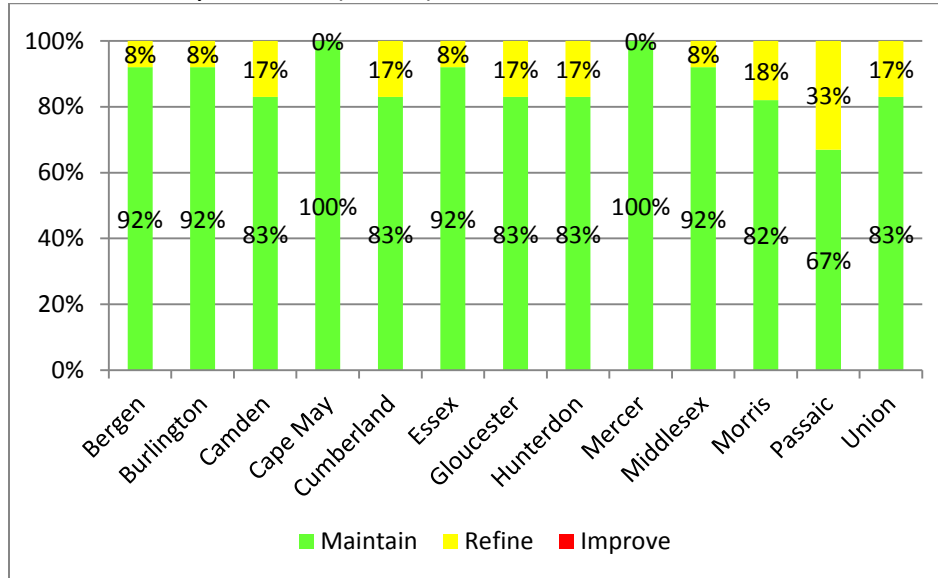
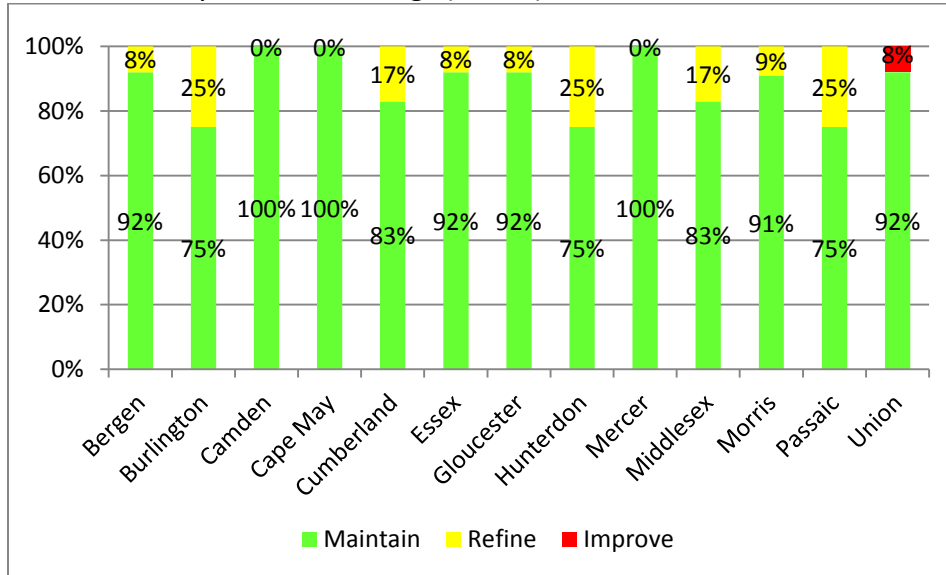


Chart 45: Safety in Other Settings (n=155)



APPENDIX F
Data by Zone: Stability

Chart 46: Stability at Home (n=155)

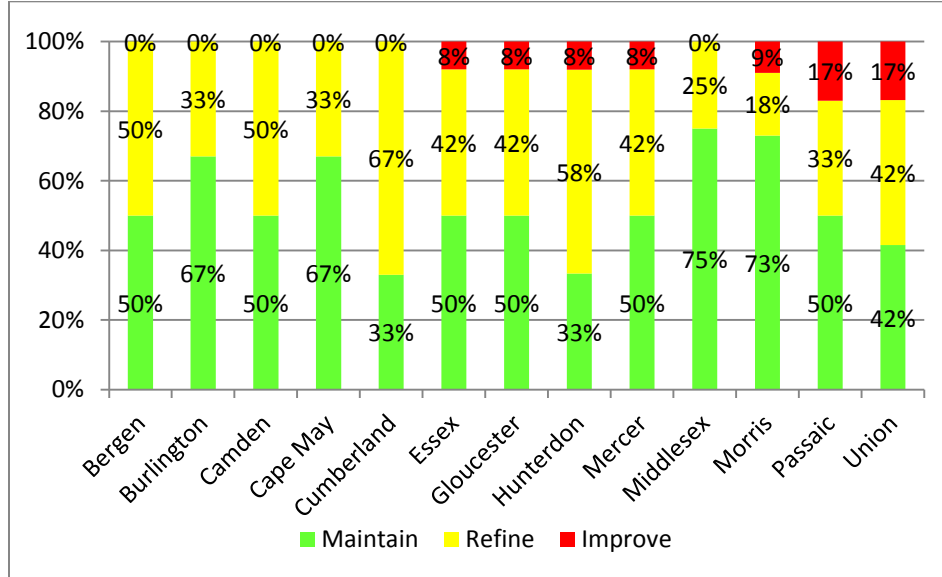
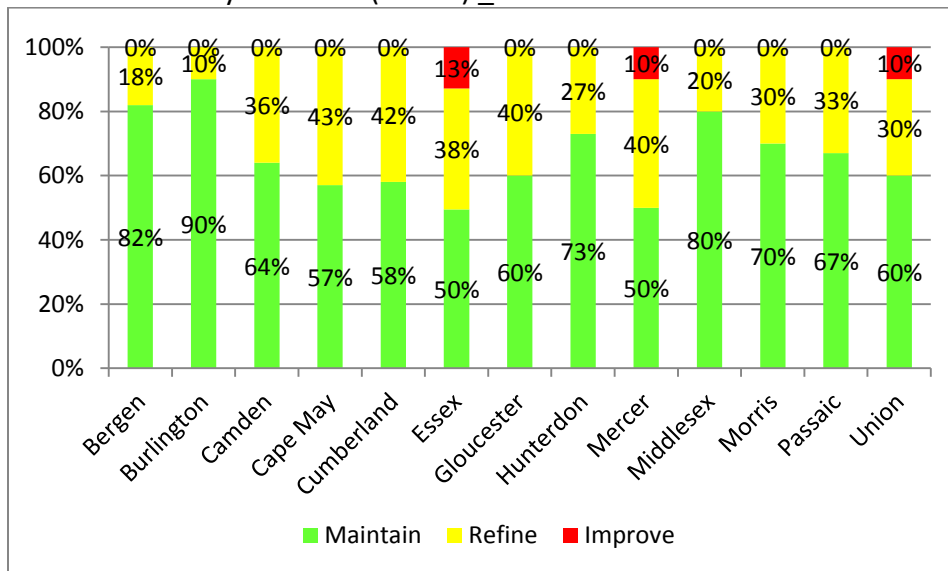


Chart 47: Stability in School (n=126)



APPENDIX G

Data by Zone: Permanency

Chart 48: Living Arrangement (n=155)

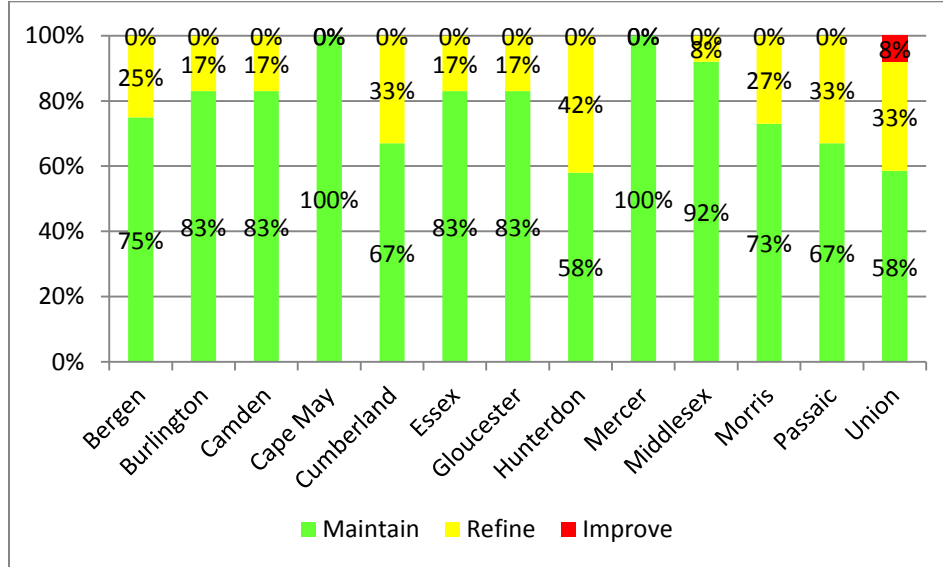


Chart 49: Family Functioning & Resourcefulness (n=146)

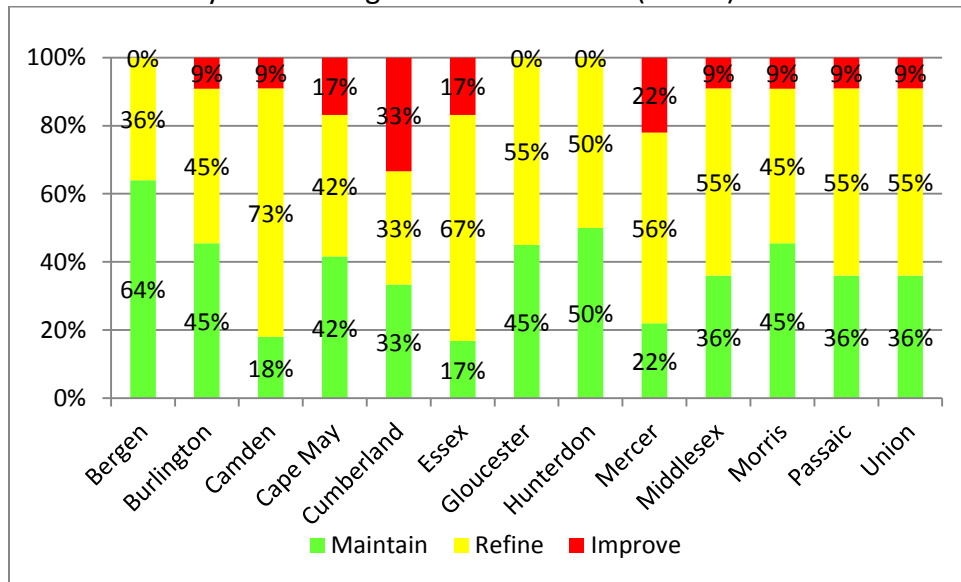
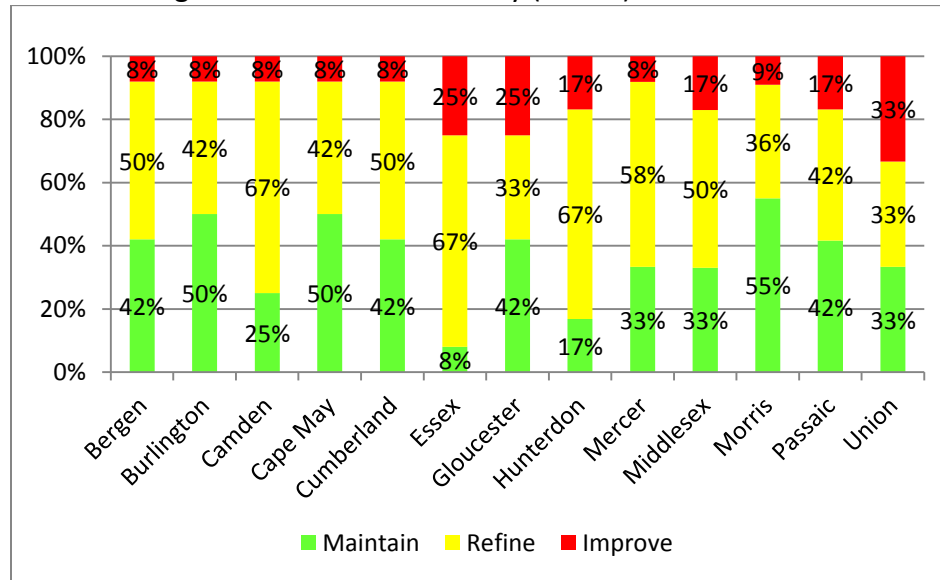


Chart 50: Progress towards Permanency (n=155)



APPENDIX H
Data by Zone: Well-Being

Chart 51: Physical Health of the Child (n=155)

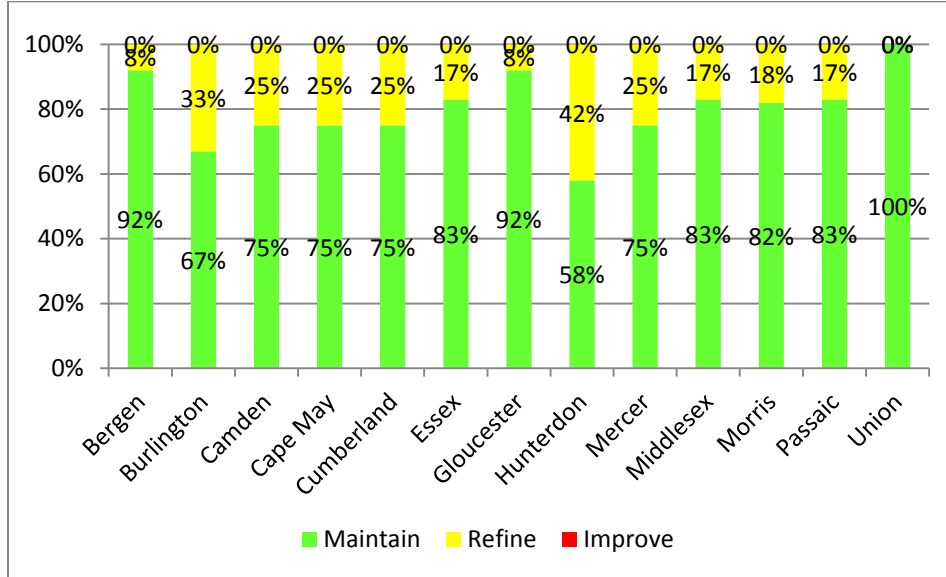
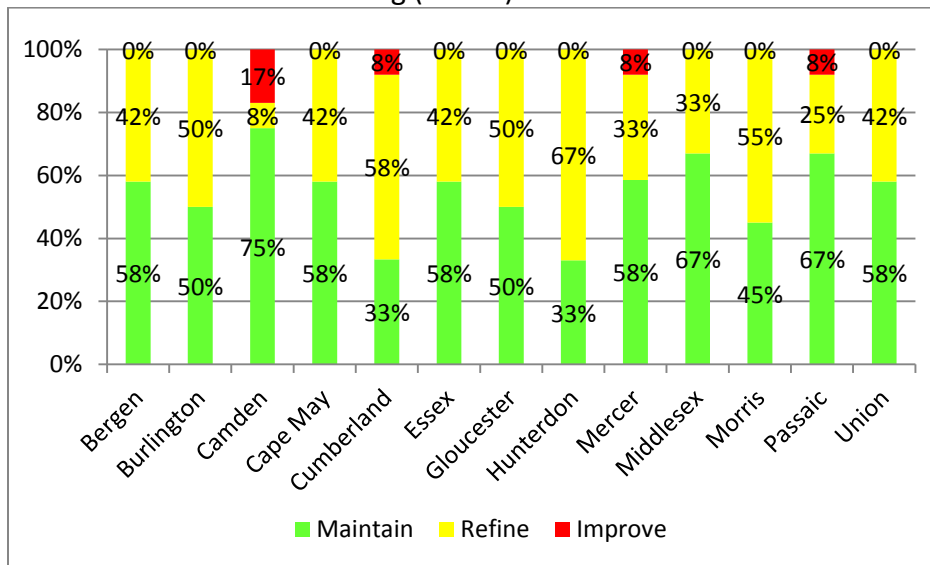


Chart 52: Emotional Well-Being (n=155)



APPENDIX I

Data by Zone: Learning and Development

Chart 53: Learning and Development under Age 5 (n=53*)

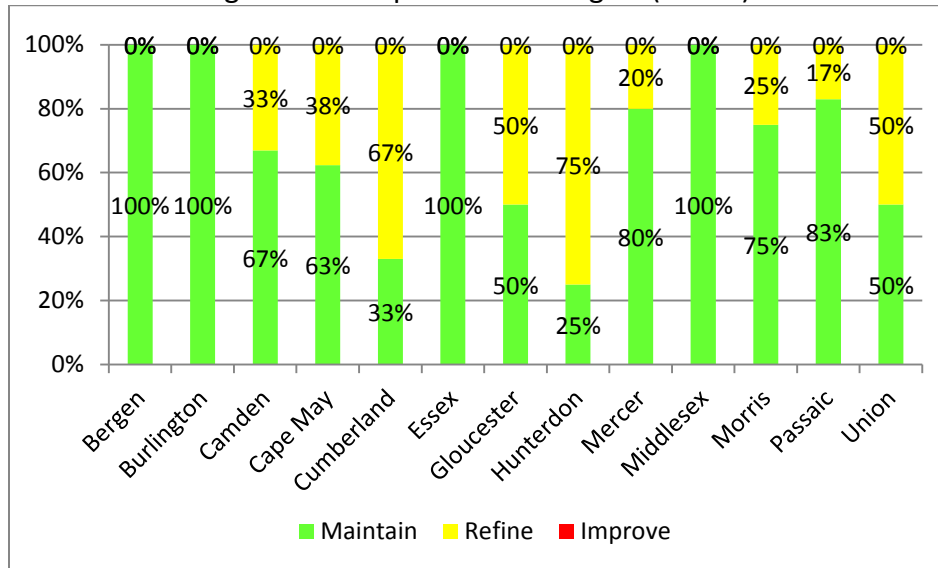
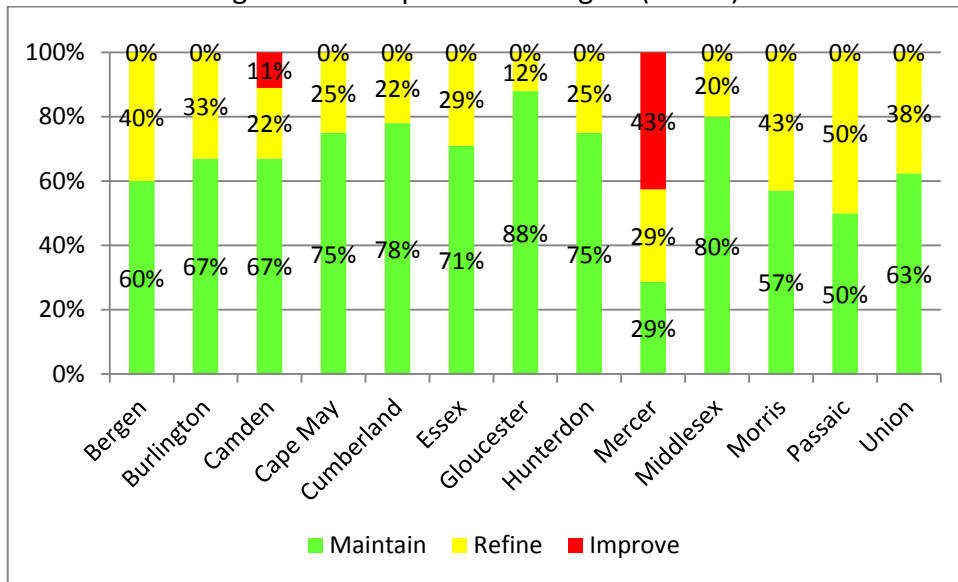


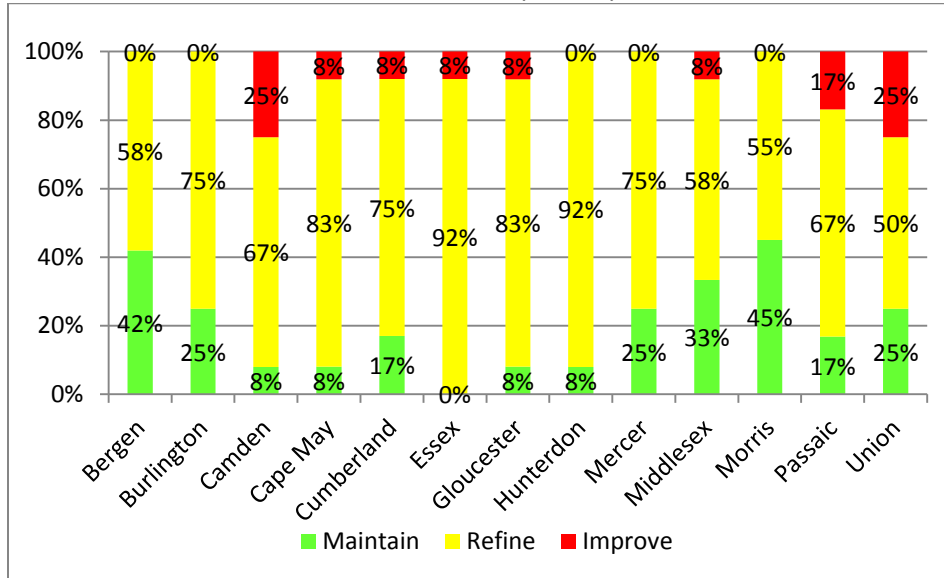
Chart 54: Learning and Development over Age 5 (n=102)



APPENDIX J

Data by Zone: Overall Practice Performance

Chart 55: Overall Practice Performance (n=155)



APPENDIX K
Data by Zone: Engagement

Chart 56: Engagement – Overall (n=155)

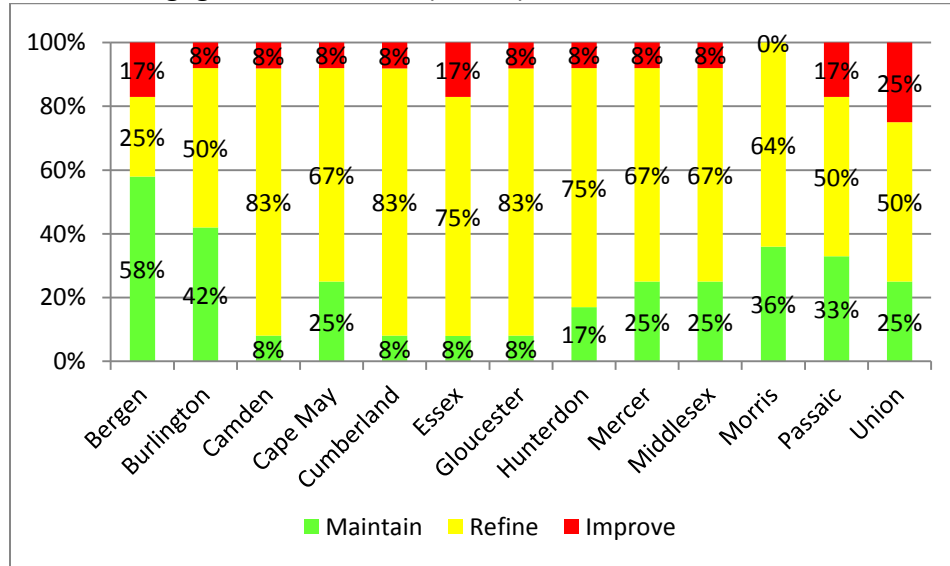


Chart 57: Engagement of Child/Youth (n=95)

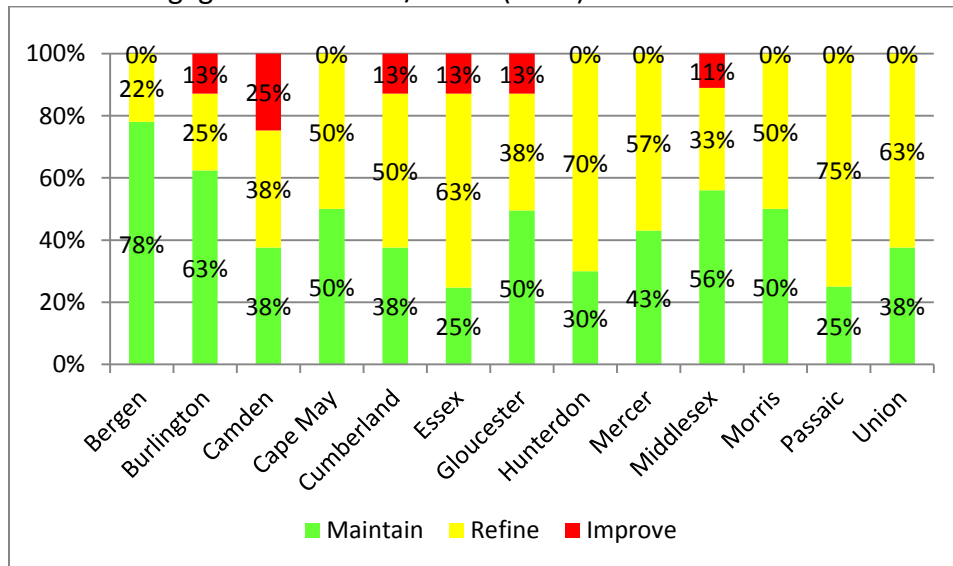


Chart 58: Engagement – Parents (n=125)

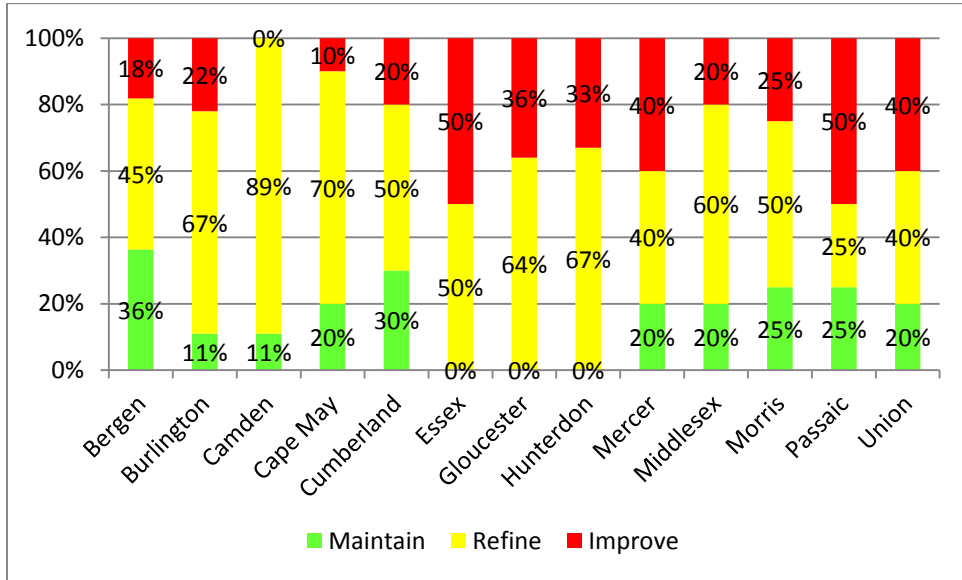
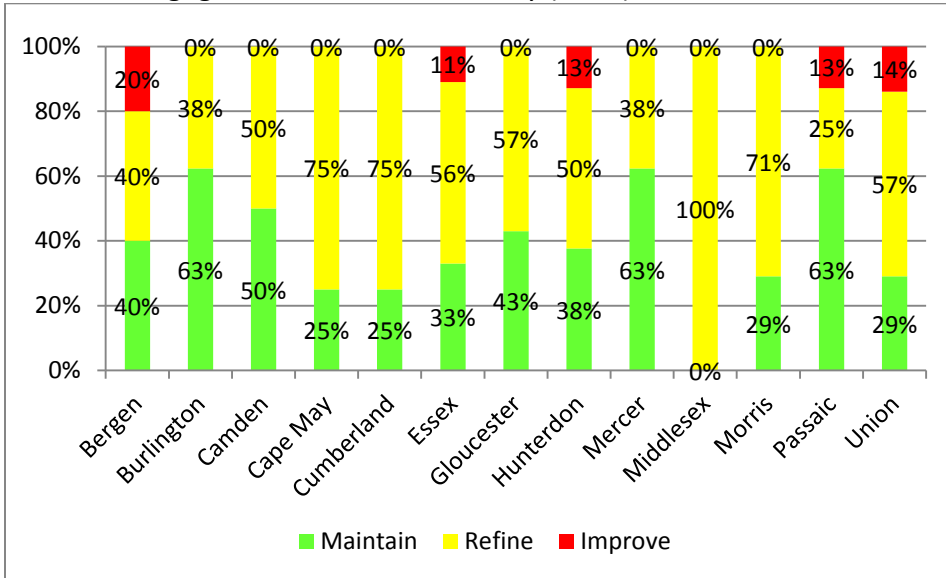


Chart 59: Engagement – Resource Family (n=97)



APPENDIX L
Data by Zone: Family Teaming

Chart 60: Family Teamwork – Formation (n=155)

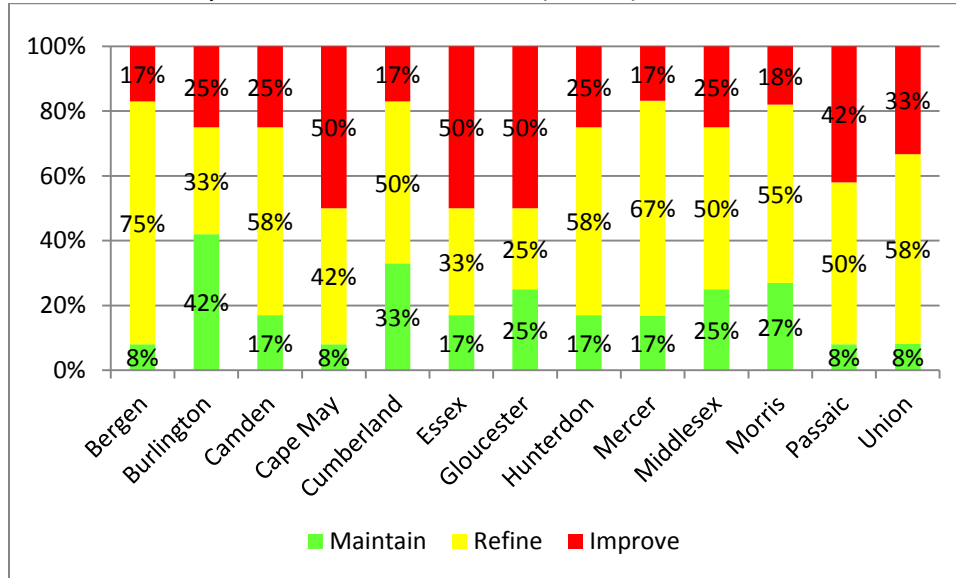
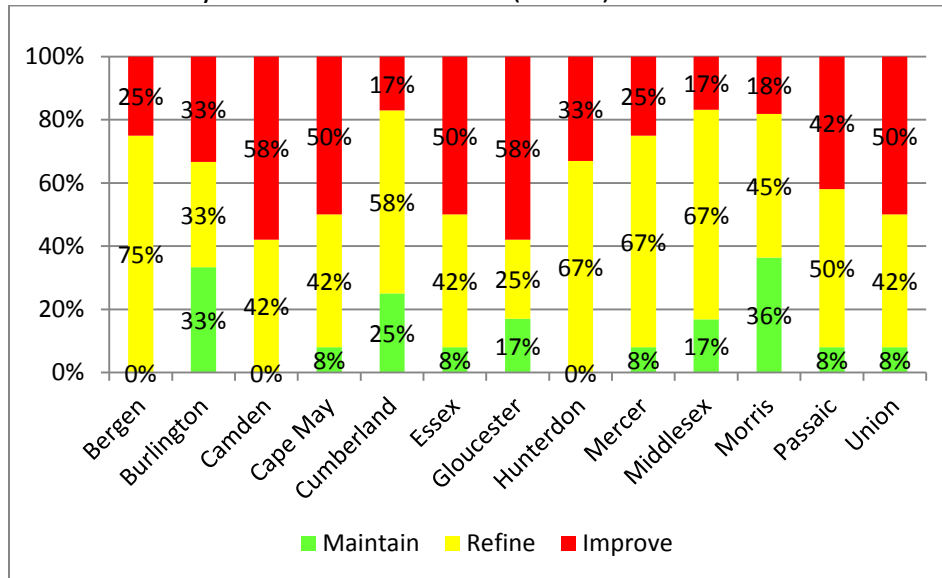


Chart 61: Family Teamwork – Function (n=155)



APPENDIX M

Data by Zone: Assessment and Understanding

Chart 62: Assessment and Understanding – Overall (n=155)

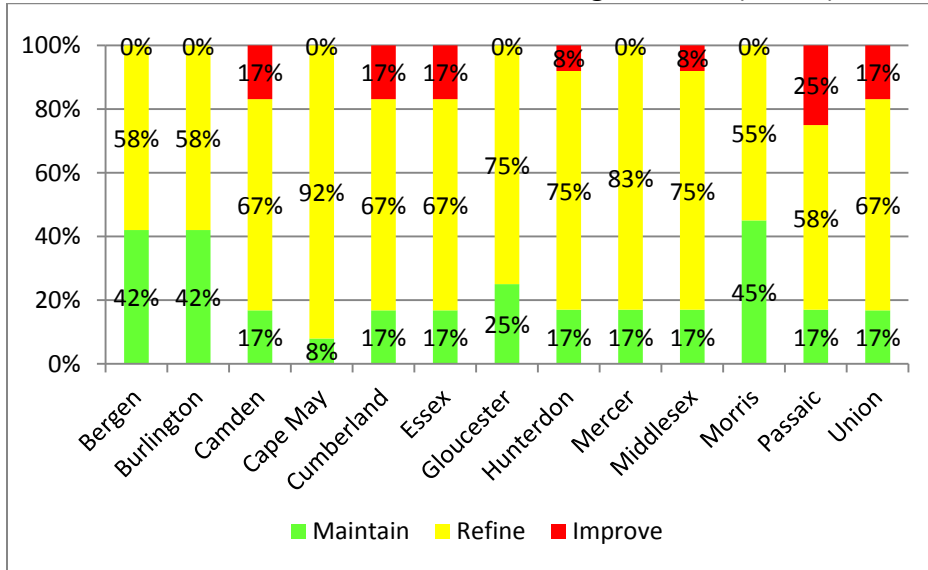


Chart 63: Assessment and Understanding of Child/Youth (n=155)

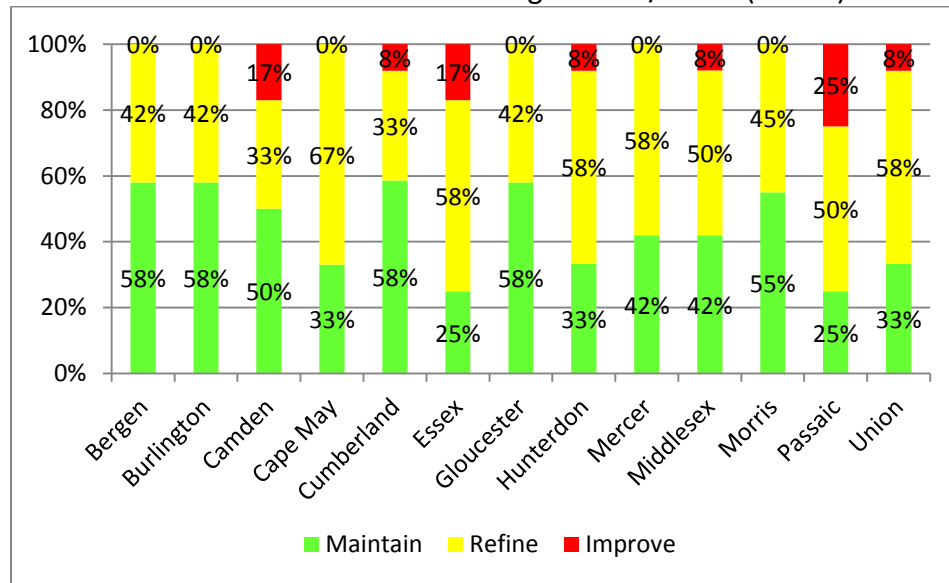


Chart 64: Assessment and Understanding of Parents (n=127)

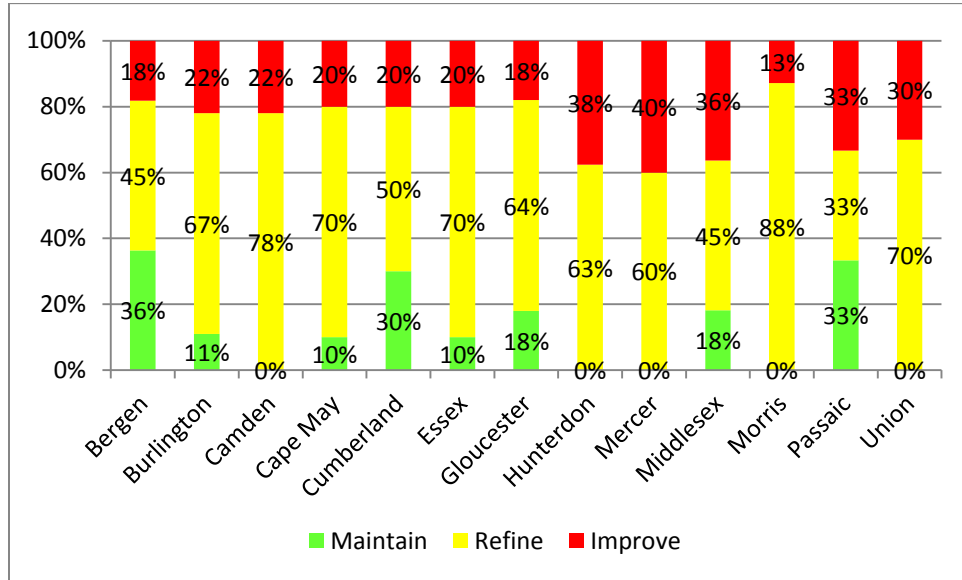
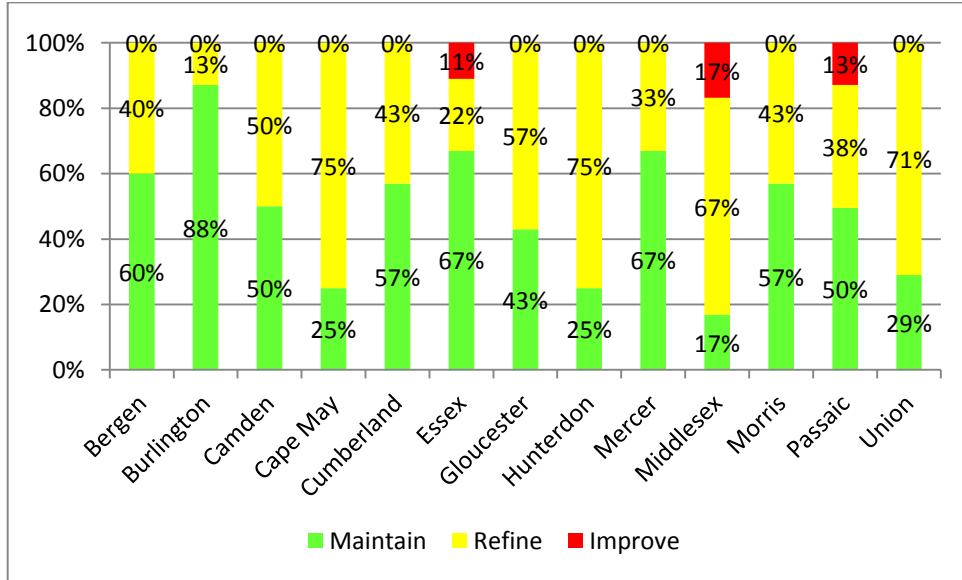


Chart 65: Assessment and Understanding of Resource Caregivers (n=97)



APPENDIX N

Data by Zone: Case Planning

Chart 66: Case Planning Process (n=155)

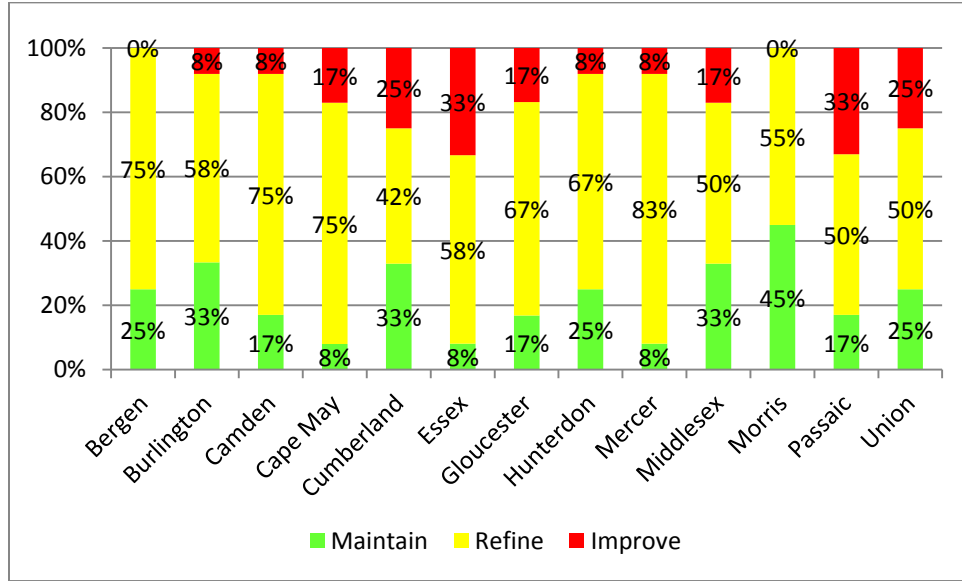


Chart 67: Plan Implementation (n=155)

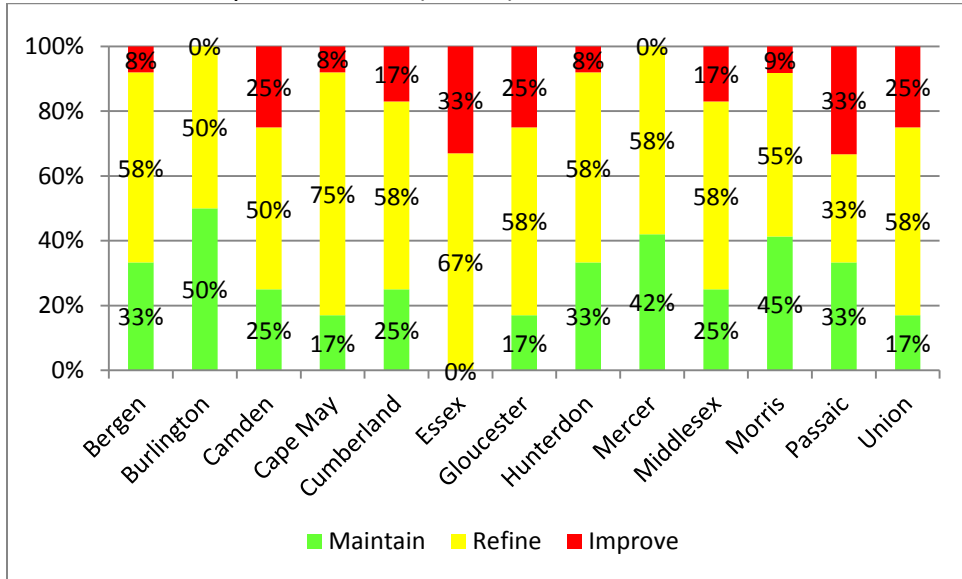
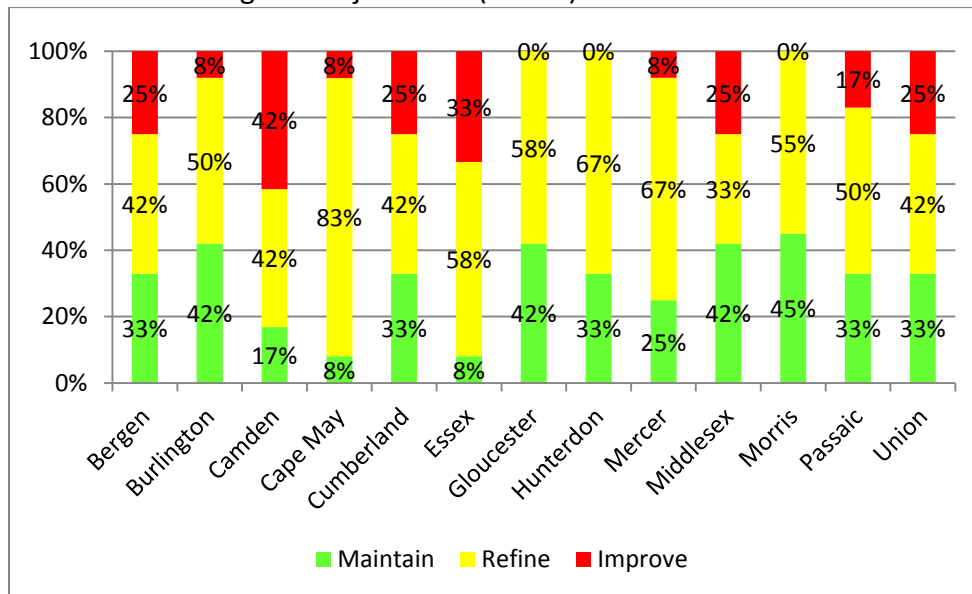


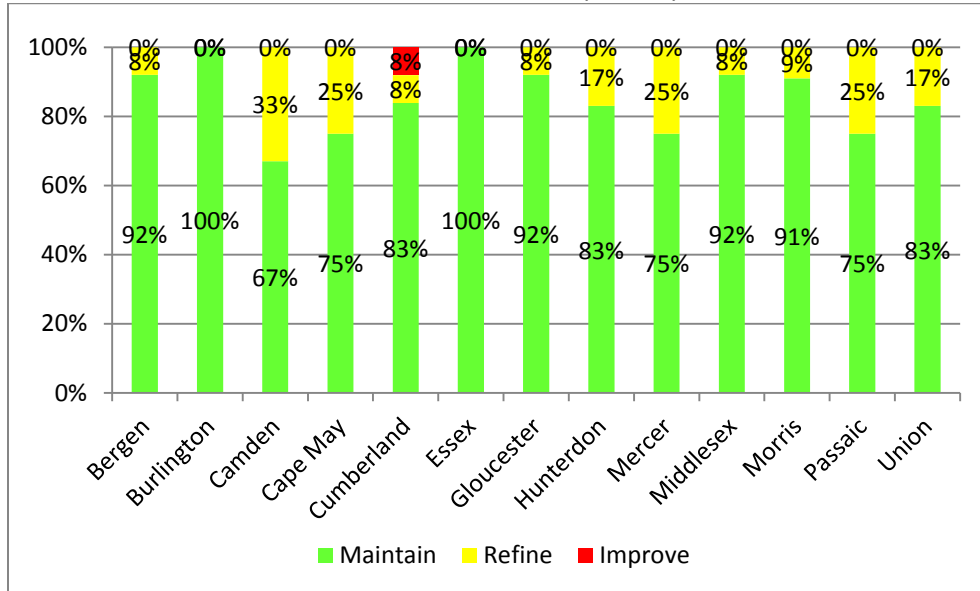
Chart 68: Tracking and Adjustment (n=155)



APPENDIX O

Data by Zone: Provision of Health Care Services

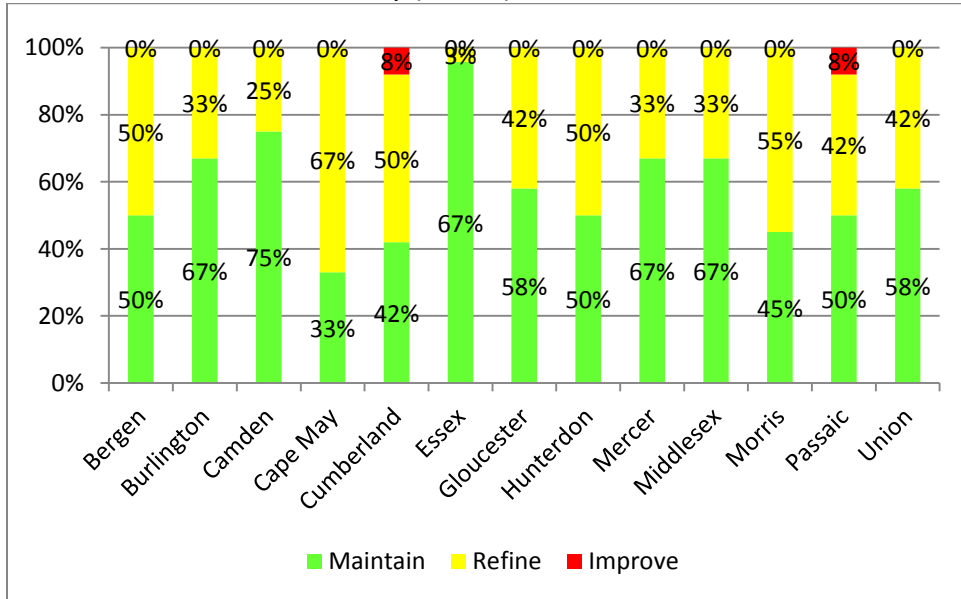
Chart 69: Provision of Health Care Services (n=155)



APPENDIX P

Data by Zone: Resource Availability

Chart 70: Resource Availability (n=155)



APPENDIX Q

Data by Zone: Family & Community Connections

Chart 71: Family & Community Connections – Overall (n=89)

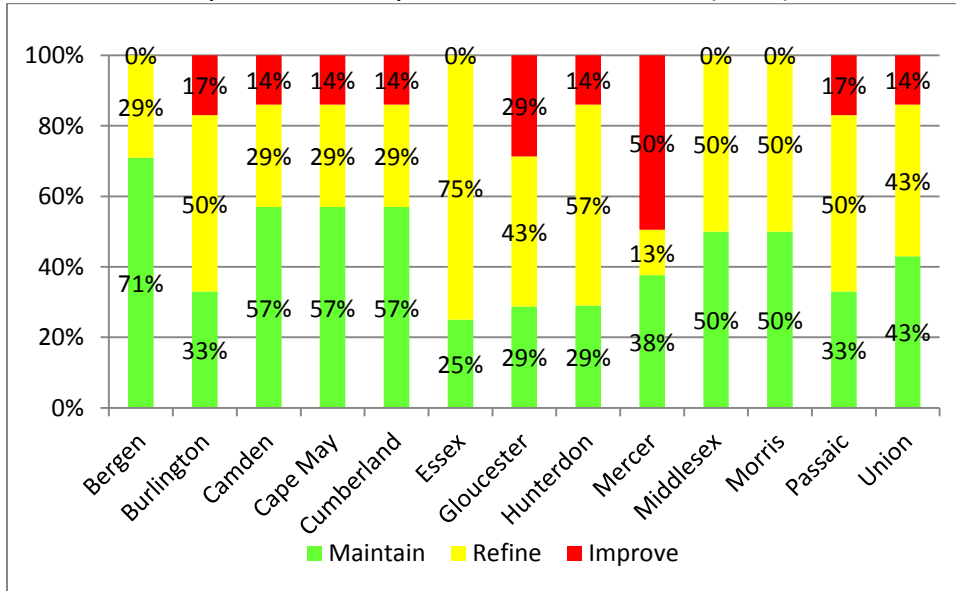


Chart 72: Family and Community Connections – Mother (n=72)

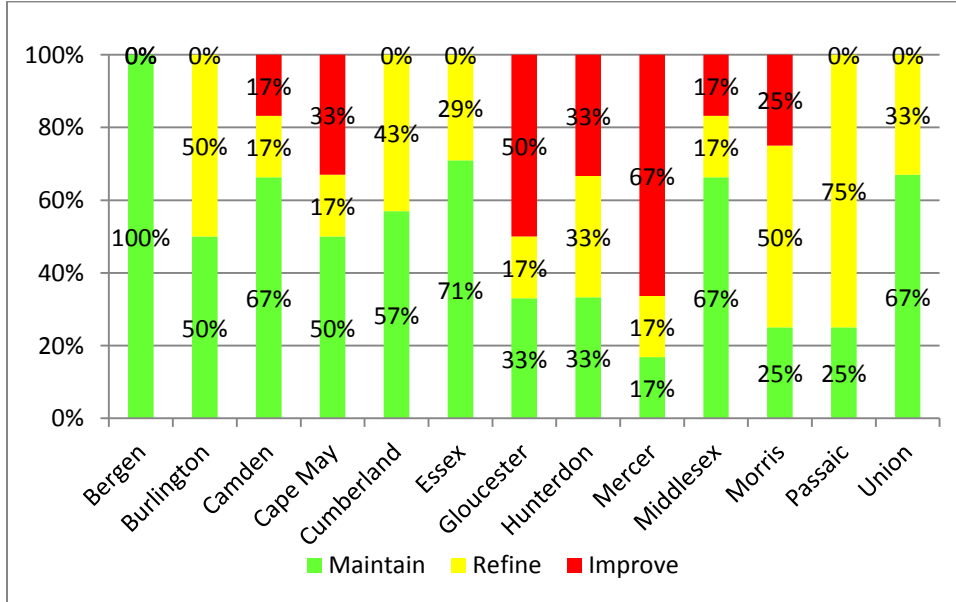


Chart 73: Family and Community Connections – Father (n=56)

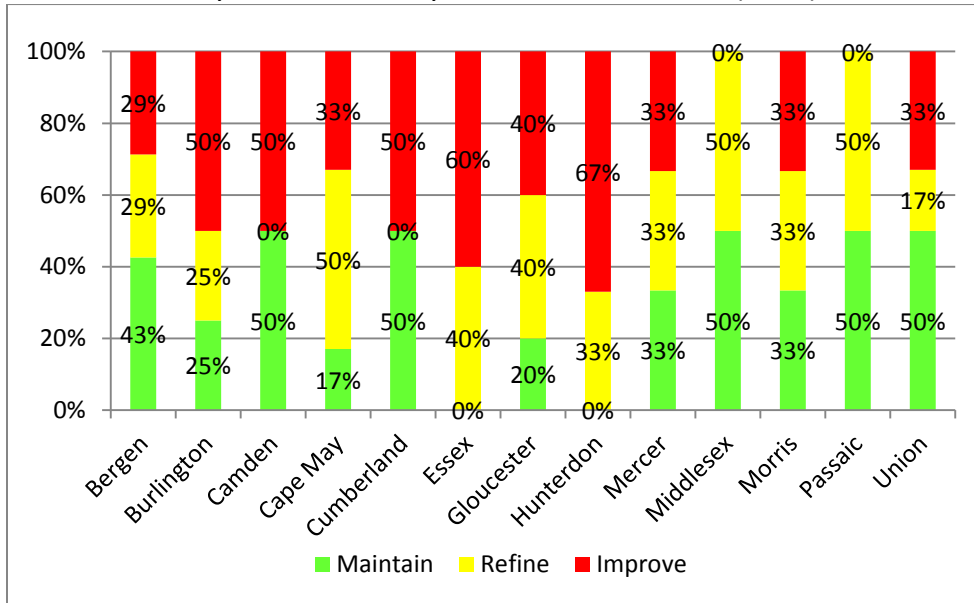
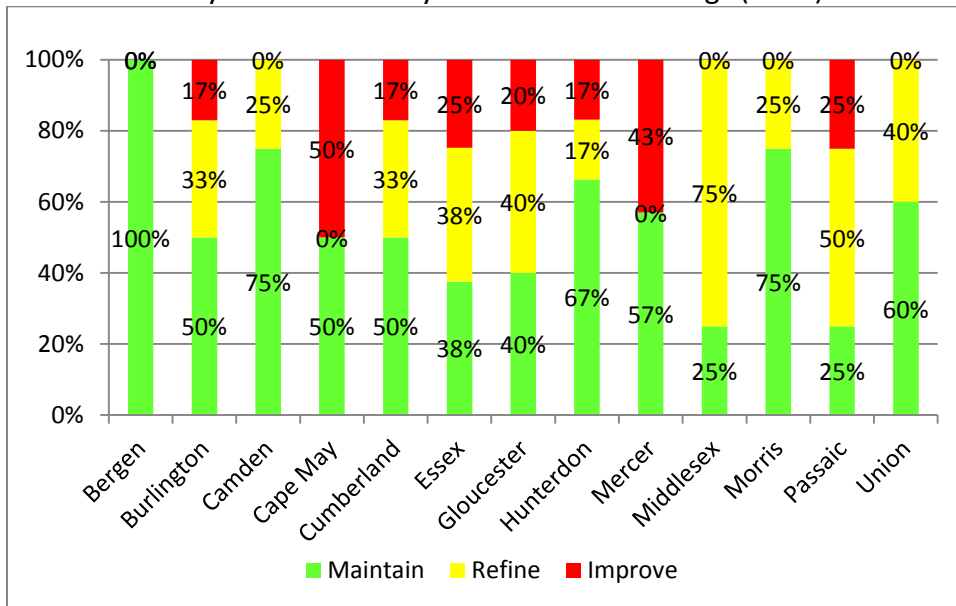


Chart 74: Family and Community Connections – Siblings (n=66)



APPENDIX R

Data by Zone: Family Supports

Chart 75: Family Supports – Overall (n=145)

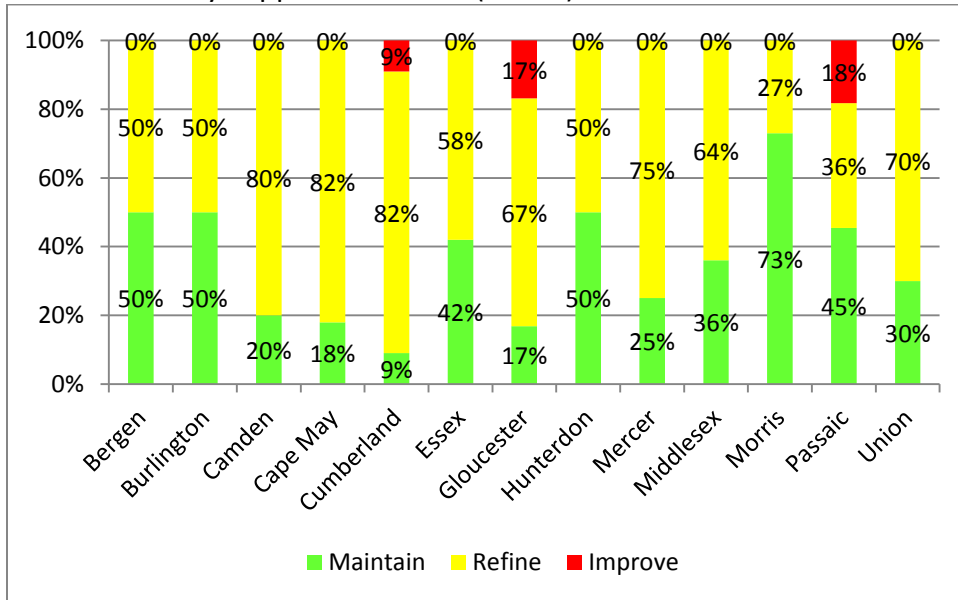


Chart 76: Family Supports for Parents (n=124)

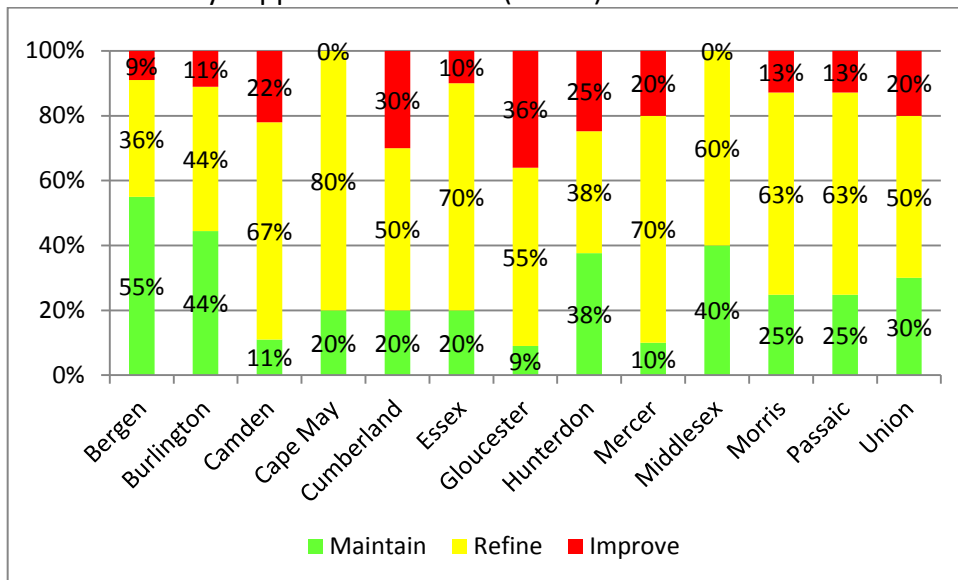
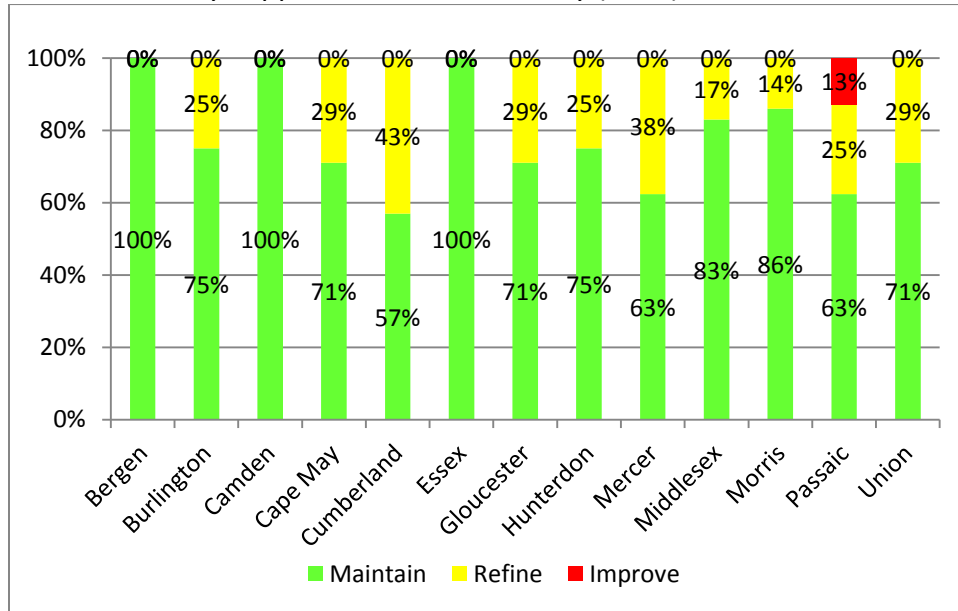


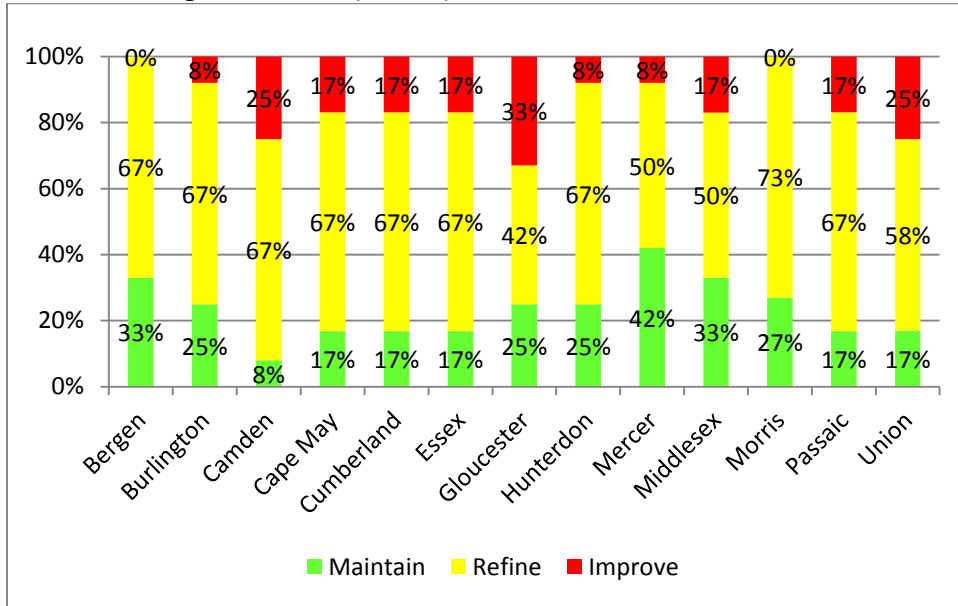
Chart 77: Family Supports – Resource Family (n=94)



APPENDIX S

Data by Zone: Long Term View

Chart 78: Long Term View (n=155)



APPENDIX T

Data by Zone: Transitions and Life Adjustments

Chart 79: Transitions and Life Adjustments (n=155)

