

**Children's Bureau
Child and Family Services Reviews
IV. Program Improvement Plan Matrix (PIP Matrix)**

State: Missouri

ACF Regional Office:

State contact and telephone: Lee Temmen, 573-526-3735 ___ Region I ___ Region IV X Region VII ___ Region X

ACF Contact and telephone: Ann Burds, 816 426-2260 ___ Region II ___ Region V ___ Region VIII

Date and quarter submitted: August 30, 2005 Second Quarter ___ Region III ___ Region VI ___ Region IX

A = Achieved
N/A = Not Achieved

Program Improvement Implementation								
1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
	A	N/A						
Safety Outcome S1: .								
Item 1: Timeliness of initiating investigations of reports of child maltreatment		X	Baseline 76.6% (derived from average of 8 quarters in FY 2003 and 2004) 2nd Quarter performance = 77.4% Goal 80.4% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement. Progress to be tracked quarterly over two year period		Monitored through CD Outcomes Report Outcome #1: Improve timeliness of initial child contact.			Projected-Dec 2006 Actual-

Program Improvement Implementation

1		2		3	4	5	6	7	
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement		
							Benchmark	Goal	
A	N/A								
			from CD Outcomes Report).						
				S1.1.1 Clarify policy regarding timeliness of initiating reports of child maltreatment. Kathryn Sapp		S1.1.1.a Refined definition of “initiating” reports.	P-Mar 05 Actual-Mar 05		
							S1.1.1.b Policy clarified regarding multi disciplinary team contact.	P- Mar 05 A-Mar 05	
							S1.1.1.c Policy clarified regarding face-to-face contact and determining safety of the child.	P-Mar 05 A-Mar 05	
						Policy issuance	S1.1.1.d Policy disseminated to all CD staff.	P-Mar 05 A-May 05	
				S1.1.2 Increase accuracy of data regarding initial contact. Kathryn Sapp Susan Savage		S1.1.2.a Data system entry guidelines clarified for “initial contact”.	P-Aug 05 A-		
							S1.1.2.b As determined, if needed by policy clarification, additional systems entry codes developed to capture accurate data.	P-Feb 06 A-	
						PRR revised	S1.1.2.c Revised Peer Record review questions to assess accuracy of coding.	P-Sept 05 A-	
						Quarterly PRR results	S1.1.2.d Circuit Managers and the assisting QA specialists monitor quarterly Peer Record results and make recommendations for improvements.	P-Ongoing A-Ongoing quarterly	
				S1.1.3 Study feasibility for alternative protocols for managing non CA/N referrals Virginia Lewis-Brunk	Demographic data	S1.1.3.a CD/FSD assessed demographics for non CA/N referrals.	P-Apr 04 A-Apr 04		
						Protocol written	S1.1.3.b Protocol written for screening and assigning non CA/N referrals for test sites in Jackson, Clay and Platte Counties.	P-May 04 A-May 04	
						Training agenda	S1.1.3.c Training provided to CD/FSD workers and supervisors regarding new protocol for testing.	P-May 04 A-May 04	

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
						S1.1.3.d Launched a non CA/N referral alternate response process in Jackson, Clay and Platte Counties.	P-Jul 04 A-Jul 04	
					Pilot data	S1.1.3.e Convened workgroup to evaluate CD/FSD pilot for non CA/N referrals.	P-Jan 05 A-Jan 05	
					Recommendations report	S1.1.3.f Workgroup to provide recommendations for modifications of non CA/N referral protocol and test sites continuations.	P-Apr 05 A-Apr 05	
					Recommendation Plan	S1.1.3.g Recommendation plans finalized.	P-Jun 05 A-Jun 05	
					Implementation plan	S1.1.3.h Implementation plans finalized to implement in target areas.	P-Aug 05 A- Pending	
				S1.1.4 Develop improvement plan to respond timely to reports of maltreatment	Circuit self-assessments	S1.1.4.a Circuit level assessment to evaluate CA/N response completed.	P-Oct 04 A-Aug 04	
				Kathryn Sapp	Established protocol	S1.1.4.b Local protocol for CA/N response established.	P-Mar 05 A-Mar 05	
					Implemented protocol	S1.1.4.c Implemented local protocol for improvement of maltreatment.	P-Apr 05 A-Apr 05	
						S1.1.4.d Monitored the improved timeliness of initial child contact.	P-Jul 05 A-Jul 05	
				S1.1.5 Call Management and Structured Decision Making (SDM) Protocols Implemented at the Child Abuse and Neglect Hotline Unit (CA/N HU) to provide consistent screening and classification of calls received.	Protocols developed	S1.1.5.a Began development of SDM and Call Management protocols for CA/N HU.	P-Dec 03 A- Dec 03	
				Charlotte Gooch		S1.1.5.b Incorporated SDM and Call management protocols into CA/N HU process.	P-Apr 04 A-Apr 04	
					Training agenda	S1.1.5.c Remaining CA/N HU staff trained on protocols and using call management system.	P-Aug 04 A-Aug 04	
					CA/N HU Supervisory Review Tool developed	S1.1.5.d CA/N HU Supervisory Review tool developed to assess quality.	P-Sept 05 A-	
						S1.1.5.e CA/N Hotline protocols automated.	P-Sept 05 A-	

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
					PRR revision	S1.1.5.f Added CA/N HU section to the Peer Record Review tool.	P-Sept 05	A-
					PRR tool analysis. On going data collected and reviewed quarterly.	S1.1.5.g Collected and analyzed PRR tool results for practice enhancements. Analysis.	P-Jan 2006	Ongoing Quarterly A-
Item 2: Repeat maltreatment		X	CA/N Recidivism Nat'l Standard 6.1 % or less MO FFY 2003 NCANDS Baseline 8.3% NCANDS Goal 7.4% (Based on Federal formula for goal setting 2 nd quarter performance based on quarterly Outcome Report 5.8% not NCANDS. NCANDS data not available quarterly.					P-Dec 2006 A-
Of all children who were victims of a substantiated or indicated maltreatment report in the first six months of the fiscal year, what percent were victims of another substantiated or indicated report within a 6 month period				S1.2.1 Ensure consistent and accurate completion of SDM safety and risk assessment. Kathryn Sapp Cindy Wilkinson	PRR revision	S1.2.1.a Incorporated SDM safety and risk assessment questions into Peer Record Review Tool.	P-Jan 04 A-Feb 04	
					Training curriculum	S1.2.1.b Modified BASIC training curriculum and ongoing training curriculum based on PRR results.	P-Feb 04 A-Mar 04	
					Training agenda	S1.2.1.c Conducted initial in-service training with CD and court staff.	P-Jun 04 A-Jun 04	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
					Evaluation Report	S1.2.1.d Evaluated SDM Peer Record Review Outcomes.	P & A-On-going & quarterly	
					In-service training agenda	S1.2.1.e Convene workgroup to finalize SDM review tool and instruction to field.	P-Feb 05 A-Dec 04	
						S1.2.1.f Instruct field staff to review 10% of cases using SDM review tool.	P-Apr 05 A-Apr 05	
						S1.2.1.g Evaluate results of review, identify circuits whose needs are more imminent for the training.	P-Jul 05 A-Jul 05	
						S1.2.1.h As needed, provided training to circuits identified with imminent need.	P-Sep 05 ongoing A-	
Incidence of Child Abuse and/or Neglect in Foster Care:			CA/N in AC Nat'l Standard 0.57% or less MO FFY 2003 NCANDS Baseline 0.37% Goal Achieved					P-Dec 2006 A-
Of all children who were in foster care during the reporting period of the fiscal year, what percent experienced maltreatment from foster parents or facility staff members?				S1.2.2 Implementation of "Confirming Safe Environments" (CSE) process.	Training agenda	S1.2.2.a All staff trained in CSE process in test sites of Pettis, Cooper, and Greene.	P-Jul 04 A-Jul 04	
					Training agenda	S1.2.2.b Trained one Out-of-Home Unit on CSE in St. Louis City.	P-Jul 04 A-Jul 04	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				Susan Savage		S1.2.2.c In-house expertise developed for training	P-Dec 04 A-Dec 04	
					Evaluation report	S1.2.2.d Central Office staff summarized test site implementation in Pettis, Cooper and Greene for Child Protection	P-Mar 05 A-Mar 05	
					Modified curriculum	S1.2.2.e Strengths in summary and CSE curriculum identified by statewide committee.	P-Aug 05 A-	
					Submission of expansion and training plan	S1.2.2.f Strengths in summary and CSE curriculum incorporated into policy and practice through policy memo and localized training.	P-Jan 06 A-	
				S1.2.3 Strengthen policy regarding assessment of safety at and throughout placement. Cindy Wilkinson	Policy developed	S1.2.3.a Developed policy regarding assessment of safety at and throughout placement.	P-May 05 A-Pending	
					Policy disseminated	S1.2.3.b Disseminate policy and monitor through on going circuit self-assessments, PRR and supervisory oversight.	P-June 05 A-Pending	
				S1.2.4 Practice Enhancement Teams (PET) assist Circuit Managers in development of improvement strategies to reduce repeat maltreatment and CA/N in foster care. Bonnie Washeck		S1.2.4.a Developed PET roles and responsibilities.	P-Feb 05 A-Feb 05	
					Organizational Chart	S1.2.4.b PET teams developed.	P-Mar 05 A-Mar 05	
					Current data on repeat maltreatment	S1.2.4.c Convened PET teams to review Circuit Self-Assessments in the areas of repeat maltreatment and CA/N in foster care.	P-Apr 05 A-Apr 05	
					List of strategies –	S1.2.4.d PET teams and Circuit Managers developed improvement strategies.	P-May 05 A-Jul 05	
					Program improvement plans developed	S1.2.4.e Program improvement plans implemented by Circuit Managers and staff.	P-Aug 05 A-	

Program Improvement Implementation

1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				S1.2.5. Strengthen policy and practice relating to chronic neglect and accumulation of harm. Kathryn Sapp	Analysis report	S1.2.5.a Statewide analysis of families with multiple reports completed by CD and Institute of Applied Research (IAR).	P-June 04 A-Feb 04	
					Waiver application	S1.2.5.b Submit revised Title IV-E waiver application for Chronic Neglect pilot.	P-Jan 05 A-May 05	
					Training curriculum	S1.2.5.c Training Curriculum for pilot sites developed regardless of waiver outcome.	P-July 05 A-Jun 05	
						S1.2.5.d System enhancements for tracking/monitoring developed.	P-Jul 05 A-Pending	
						S1.2.5.e Three pilot sites selected (Jasper, Jefferson and Randolph counties) based on negotiations with Federal partners.	P-July 05 A-Jun 05	
					Training agenda	S1.2.5.f Pilot sites trained by FCS consultants.	P-Jul 05 A-Jun 05	
						S1.2.5.g Initiated pilots.	P-Aug 05 A-	
					Evaluation report	S1.2.5.h University of Missouri evaluated effectiveness of pilot sites based on waiver approval.	P-Feb 06 A-	
					Outcome data	S1.2.5.i Based on results determined statewide applicability.	P-Mar 06 A-	
					Expansion plan developed	S1.2.5.j Developed state expansion plan.	P-Apr 06 A-	
					S1.2.5.k Expansion sites initiated.	P-Sept 06 A-		
				S1.2.6 Develop performance-based contract for foster parents Bonnie Washeck	Licensing rules	S1.2.6.a Incorporated HB 1453 legislation regarding the Professional Family Development Plan (PFDP) into Licensing rules.	P-May 05 A-May 05	
						S1.2.6.b Identified the performance based criteria required for the PFDP.	P-Aug 05 ongoing A-	

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
						S1.2.6.c Informed foster parents of PFDP criteria at assessment and reassessment	P-Aug 05 ongoing A-	
					Memo	S1.2.6.d Identify plan to inform CD staff of new requirements for foster parents.	P-Nov 05 A-	
					Training agenda	S1.2.6.e Trained CD staff on PFDP and how to assist family in developing and implementing the plan.	P-Feb 06 A-	
						S1.2.6.f Identified resources for foster families to use to successfully implement PFDP.	P-Mar 06 A-	
						S1.2.6.g Initiated PFDP for all new and reassessed foster parents.	P-May 06 A-	
Safety Outcome S2:								
Item 3: Services to family to protect child(ren) in home and prevent removal			X	Baseline 80.4% 2nd quarter PRR results = 81.3% Goal 84.4% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement.)		Peer Record Review (PRR) IV-15 Rating of the overall quality of the service plan and service delivery		P-Dec 2006 A-
				S2.3.1 Improve family assessment and case plan tools to better link service provision to the needs of the family identified in the initial	Draft of CD-14	S2.3.1.a CD-14 family assessment tool field test initiated in Circuit 2.	P-Sep 04 A-Sep 04	
						S2.3.1.b CD-14 family assessment tool field test expanded to other sites.	P-May 05 A-Feb 05	
					Evaluation report	S2.3.1.c Results of field test evaluated and analyzed by staff and work group.	P-Jun 05 A-Mar 05	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				and ongoing assessments; include a mechanism for family self-assessment and identified areas specifically related to child safety and risk concerns (to be completed concurrently with S2.3.2) Kathryn Sapp	Revised CD-14	S2.3.1.d Revised CD-14 as needed.	P-Jul 05 A-Apr 05	
						S2.3.1.e Recommendations regarding changes made.	P & A On-going	
					Policy issuance	S2.3.1.f Policy issued with new documents and instructions.	P-Oct 05 A-	
					Training	S2.3.1.g Training of existing staff completed.	P-Jan 06 A-	
						S2.3.1.h Incorporated changes into BASIC training.	P-Jan 06 A-	
				S2.3.2 Strengthen worker/supervisor skills in engaging families in the assessment, case planning and case plan review process to increase parent, caregiver (alternative care provider) and child involvement in case assessment, plan development and reassessment. Bonnie Washeck		S2.3.2.a Conducted focus groups (workers, supervisors, circuit managers and consumers) in four circuits (circuits 1, 2, 10, 41) to identify clinical support needs.	P-Aug 04 A-Aug 04	
					Supplemental Supervisory Training	S2.3.2.b Focus group results compiled and used for supplemental supervisory training.	P-Oct 04 A-Oct 04	
					Training curriculum developed and began	S2.3.2.c Training curriculum developed and supplemental FST training began.	P-Feb 05 A-Feb 05	
						S2.3.2.d Up to twenty sessions of Supplemental Supervisory training for all Supervisor I's began.	P-Feb 05 A-Mar 05	
					Training agenda and summary of feedback	S2.3.2.e Training provided for existing staff and feedback solicited from trainees on training.	P-Oct 05 A-	
					Survey results and circuit improvement plans	S2.3.2.f PET teams annually analyzed family satisfaction survey data and PDR results for improvement with the expectation that circuits develop methods to improve.	P-Nov 05 annually A-	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				S2.3.3 Improve supervisory capacity to monitor enhanced practice relating to case planning. Susan Savage		S2.3.3.a Reviewed existing supervisory case review tools.	P-May 05 A-May 05	
					Draft of tool	S2.3.3.b Created draft standardized supervisory case review tool.	P-June 05 A-Pending	
						S2.3.3.c Supervisory case review tool field tested by selected supervisors.	P-Sept 05 A-	
					Feedback summary	S2.3.3.d Feedback from field testing reviewed by review team.	P-Jan 06 A-	
					Tool revision	S2.3.3.e Supervisory case review tool revised as needed.	P-Jan 06 A-	
					Protocol established and manual revision	S2.3.3.f Protocol for supervisory case review established and manual revisions made.	P-Jan 06 A-	
						S2.3.3.g System automation completed for supervisory case review tool.	P-Feb 06 A-	
					Policy disseminated and implemented	S2.3.3.h Supervisory case review tool and protocols approved and distributed for statewide use.	P-Feb 06 A-	
				S2.3.4 Establish procedures to access various service funding streams. Bonnie Washeck		S2.3.4.a Developed service access funding grid and guidelines.	P-Aug 05 A-	
					Guidelines distributed	S2.3.4.b Distributed service access funding grid and guidelines to all staff.	P-Sept 05 A-	
				S2.3.5. Per new legislation, develop state comprehensive children's mental health plan to increase level of cooperation between court, mental health, child welfare and families. Jim Harrison		S2.3.5.a Barriers identified for children needing mental health services.	P-Jan 05 A-Jan 05	
						S2.3.5.b Funding mechanisms established for providing mental health services.	P-Jan 05 A-Jan 05	
					Coordination plan	S2.3.5.c Plan developed for coordination of resources from multiple agencies.	P-Jan 05 A-Jan 05	
						S2.3.5.d Evaluation methodology established.	P-Jan 05 A-Jan 05	
					Report submission	S2.3.5.e Report with recommendations submitted to legislators and governor.	P-Jan 05 A-Jan 05	

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
Item 4: Risk of harm to child(ren)		X	Baseline 89.4% 2nd quarter PRR results = 90.9 % exceeds goal. Goal 90.3% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement.)		PRR IV-13 Services being provided to the family are adequate to meet their needs as identified in the assessment.		P-Dec 2006 A-
			S2.4.1 Ensure consistent and accurate completion of SDM safety and risk assessment. Cindy Wilkinson	SDM Review Tool	S2.4.1.a See S1.2.1.a S2.4.1.b See S1.2.1.b S2.4.1.c See S1.2.1.c S2.4.1.d See S1.2.1.d S2.4.1.e See S1.2.1.e S2.4.1.f See S1.2.1.f S2.4.1.g See S1.2.1.g		
			S2.4.2 Implementation of "Confirming Safe Environments" process. Susan Savage		S2.4.2.a See to S1.2.2.a S2.4.2.b See to S1.2.2.b S2.4.2.c See to S1.2.2.c S2.4.2.d See to S1.2.2.d S2.4.2.e See to S1.2.2.e S2.4.2.f See to S1.2.2.f S2.4.2.g See to S1.2.2.g		
			S2.4.3 Implement enhanced background screening for	Policy disseminated	S2.4.3.a Policy for enhanced background screening implemented statewide.	P-Aug 04 A-Aug 04	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				foster/kinship and court ordered providers. Cindy Wilkinson		S2.4.3.b Policy updates and supervisory consultations with existing staff.	P-Aug 04 ongoing A-Aug 04 ongoing	
						S2.4.3.c Incorporated enhanced background screening into on-going STARS and BASIC training.	P-Nov 04 A-Nov 04	
				S2.4.4 Development of "Culture of Care Initiative" for improving safety and nurturance of children in a residential care setting. Fred Proebsting	Committee member list	S2.4.4.a Work committees formed with volunteers from residential sites to develop curriculum.	P-Jan 04 A-Jan 04	
					Curriculum	S2.4.4.b Curriculum Drafted.	P-Mar 04 A-Mar 04	
						S2.4.4.c Curriculum approved by CD administration.	P-May 04 A-May 04	
						S2.4.4.d Roundtables held with CEO's to discuss curriculum.	P-Jul 04 A-Jul 04	
					Training agenda	S2.4.4.e NRC Train-the-Trainers session held/2 days in KC and St. Louis for residential licensed providers.	P-Aug 04 A-Aug 04	
						S2.4.4.f Measured through a reduction of the number of preponderance of evidence reports received by the residential treatment facilities.	P-Ongoing A-Ongoing	
				S2.4.5 Improve family assessment and case plan tools to better link service provision to the needs of the family identified in the initial and ongoing assessments; include a mechanism for family self-assessment and identified areas		S2.4.5.a See S2.3.1.a		
						S2.4.5.b See S2.3.1.b		
						S2.4.5.c See S2.3.1.c		
						S2.4.5.d See S2.3.1.d		
						S2.4.5.e See S2.3.1.e		
						S2.4.5.f See S2.3.1.f		
						S2.4.5.g See S2.3.1.g		

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
			specifically related to child safety and risk concerns.		S2.4.5.h See S2.3.1.h		
Permanency Outcome 1		X					
Item 5	X		Passed CFSR On-site review and 2002 AFCARS				
Item 6: Stability of foster care placement		X	Stability in foster care. Nat'l Standard 86.7% or more 2nd quarter performance based on quarterly outcomes report = 74.3 not AFCARS formula. AFCARS data not available. MO FFY 2003 78.6% AFCARS Goal 80.5% (Based on Federal formula for goal setting)				P-Dec 2006 A-
			P1.6.1 Increase system capacity to accurately track placement kinship vendor types. Lesley Pettit		P1.6.1.a Logic created to track additional placement types 1) Kin, Related, Not licensed 2) Kin, Non-related, Not licensed 3) Kin, Non-related, Licensed.	P-Mar 05 A-Feb 05	
					P1.6.1.b Coding changes in Legacy completed.	P-May 05 A-May 05	
				Policy disseminated	P1.6.1.c Policy updated and distributed to CD staff.	P-Aug 05 A-	
				Data converted	P1.6.1.d Staff will convert existing data to reflect accurate placement types.	P-Dec 05 A-	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
					Quarterly Outcome Report	P1.6.1.e Coding changes to be reflected in Quarterly Outcome Report.	P-Apr 06 A-	
				P1.6.2 Improve diligent search for relatives/missing parents. Bonnie Washeck		P1.6.2.a Potential explored for CD staff to access existing diligent search mechanisms.	P-Jul 04 A-Jul 04	
					Procedure disseminated	P1.6.2.b Diligent search procedure developed, distributed, and monitored through supervisory oversight.	P-Aug 04 A-Aug 04	
						P1.6.2.c Established agreements, as necessary, with other state agencies (possibly through Family Support Division and OSCA) to enhance access to state databases as mechanisms for diligent search.	P-Mar 05 A-Apr 05	
					Quarterly outcome reports	P1.6.2.d CD staff utilize enhanced diligent search mechanism and monitored through supervisory oversight.	P-Apr 05 A-Apr 05	
				P1.6.3 Expand use of family support team meetings to promote stability in alternative care placements Kathryn Sapp Cindy Wilkinson	Plan disseminated	P1.6.3.a Plan written and disseminated for HB 1453 requirement of a FST prior to or immediately after an impending move.	P-Aug 04 A-Aug 04	
						P1.6.3.b Made ACTS system changes to track FSTs held prior to or immediately after a move.	P-Aug 04 A-Aug 04	
						P1.6.3.c Central Office staff provided training to regional staff on HB 1453 requirements	P-Aug 04 A-Aug 04	
						P1.6.3.d Regional staff provided localized training to existing staff on HB 1453 requirement	P-Sep 04 A-Sep 04	
						P1.6.3.e Policy incorporated into BASIC training.	P-Dec 04 A-Dec 04	
					PRR	P1.6.3.f Updated PRR to assure pre-placement FSTs.	P-Feb 05 A-Mar 05	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				P1.6.4 Identify resource family types and shortages	Circuit data	P1.6.4.a Resource and recruitment contractors worked with circuits to determine resource family needs.	P-Mar 05	
				Cindy Wilkinson	Circuit management plan	P1.6.4.b Recruitment plan targeting resource families written into a circuit management plan to address identified need.	A-Apr 05	
							P-May 05	
							A-Jul 05	
				P1.6.5 Increase number of resource families	Recruitment and retention plan developed	P1.6.5.a Recruitment and retention plan for foster home serving older youth implemented through Chafee program.	P-Jun 04	
				Cindy Wilkinson	Adopt US Kids campaign	P1.6.5.b Implemented Adopt US Kids campaign.	A-Jun 04	
					Request for Proposal	P1.6.5.c RFP written for performance based resource development contracts included the need for recruitment of resource homes to match our special needs population.	P-Jul 04	
							A-Jul 04	
					Award letters	P1.6.5.d Awarded recruitment and resource development contracts.	P-Dec 04	
					Circuit data	P1.6.5.e Resource and recruitment contractors worked with circuits to determine resource family needs.	A-Sept 04	
							P-Mar 05	
							A-Jun 05	
							P-Apr 05	
							A-Apr 05	
				P1.6.6 Increase placement stability by improving matching capabilities for children in out-of-home settings.		P1.6.6.a Consulted with the National Resource Center for Family Centered Practice and Permanency Planning regarding "critical" factors in placement stability.	P-Mar 06	
				Cindy Wilkinson	Survey results	P1.6.6.b Surveyed resource families to gather information regarding placement stability.	A-	
						P1.6.6.c Developed a placement matching tool designed for use in team decision making.	P-May 06	
							A-	
					Matching tool developed disseminated	P1.6.6.d Tool disseminated with instructions.	P-Oct 06	
							A-	

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
					P1.6.6.e Tool incorporated into BASIC training and supervisory oversight provided to existing staff.	P-Dec 06 A-	
			P1.6.7 Evaluate support and training provided for relative/kinship resource families Cindy Wilkinson Jeff Adams	Survey	P1.6.7.a Surveyed current relative caregivers on the adequacy of the Caregiver who Knows the Child training curriculum.	P-Dec 05 A-	
				Analysis report	P1.6.7.b Data Collected and analyzed.	P-Feb 06 A-	
				Curriculum revision	P1.6.7.c Based on curriculum modifications, training to began to be delivered to newly licensed relative/kinship providers.	P-Sep 06 A-	
Item 7: Permanency goal for child	X	Baseline 85.9% 2nd quarter PRR results = 85.4% Goal 90.2% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement.)		PRR V-12 The permanency plan was developed and it includes options for concurrent planning.			P-Dec 2006 A-
			P1.7.1 Ensure the frequency and timeliness of Family Support Team Meetings occurs per policy Kathryn Sapp Cindy Wilkinson	Circuit Self Assessment	P1.7.1.a Circuit Managers analyzed FST frequency data through circuit self assessment.	P-Aug 04 A-Aug 04	
				Corrective action plans	P1.7.1.b Initiated corrective action when data falls below goal set in strategic plan.	P-Feb 05 A-Apr 05	
				Quarterly data reports	P1.7.1.c Circuit Managers assisted by PET monitored frequency data	P & A- Ongoing quarterly	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				P1.7.2 Improve quality of Family Support Teams (FSTs) to ensure permanency goal is reviewed and established Kathryn Sapp Cindy Wilkinson		P1.7.2.a Made ACTS systems changes to track permanency reviews separately from FSTs.	P-Aug 04 A-Aug 04	
					Policy developed	P1.7.2.b Policy written on ACTS systems changes and elements necessary for permanency reviews.	P-Sep 04 A-Aug 04	
					Policy disseminated	P1.7.2.c Policy disseminated to all staff.	P-Sep 04 A-Aug 04	
					Training agenda	P1.7.2.d Incorporated ACTS system changes and policy into BASIC and computer systems training.	P-Jan 05 A-Oct 04	
					List of facilitators	P1.7.2.e Identified individuals who will serve as expert facilitators for more difficult FSTs.	P-Mar 05 A-May 05	
					Protocol developed	P1.7.2.f Protocol developed for accessing expert facilitators.	P-Apr 05 A-May 05	
					Training agenda	P1.7.2.g Trained expert facilitators.	P-Apr 05 A-Sep 05	
					Memo disseminated	P1.7.2.h Memo describing expert facilitator access protocol and expert facilitator duties distributed to all staff.	P-Apr 05 A-Sep 05	
				P1.7.3 Strengthen policy and practice relating to concurrent planning. Cindy Wilkinson		P1.7.3.a Circuit Managers monitored outcomes through PRR tool.	P-Mar 05 A-Mar 05	
					Improvement plans	P1.7.3.b Circuit Managers assisted by the PET to develop improvement plans.	P-May 05 A-Jul 05	
					Training curriculum and revised child welfare manual	P1.7.3.c Integrated concurrent planning into Advanced FCOOHC In-Service Module training and child welfare manual.	P-May 06 A-	
				P1.7.4 Increase collaboration with courts by providing cross training to judiciary, court staff, GALs and Children's	Training curriculum	P1.7.4.a CD partnered with OSCA to develop training curriculum.	P-Jan 04 A-Jan 04	
						P1.7.4.b Developed draft plan to address logistics of proposed training.	P-Jan 04 A-Jan 04	
						P1.7.4.c Submitted draft to management of CD/OSCA.	P-Feb 04 A-Feb 04	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				Division staff on ASFA & Permanency hearings consistent with state and federal regulations. Cindy Wilkinson	Contract developed	P1.7.4.d Developed a contract to provide cross training to judiciary, court staff, GAL's and CD staff.	P-Mar 04 A-Mar 04	
						P1.7.4.e Management approved draft.	P-Apr 04 A-Apr 04	
					Training agenda and curriculum	P1.7.4.f Training implemented by CD/OSCA to include concurrent planning training.	P-Jun 04 A- Sept 04 ongoing twice per year	
Item 8: Reunification, guardianship, or permanent placement with relatives.		X	Reunification Nat'l Standard 76.2% or more MO FFY 2003 AFCARS Baseline 59.8% AFCARS Goal 62.2% (Based on Federal formula for goal setting). 2nd quarter performance based on quarterly outcomes report = 69.7% not AFCARS. AFCARS data not available.					P-Dec 2006 A-
				P1.8.1 Address permanency and services needs of children in Legal Status 2, 3, and 4	Data reports	P1.8.1.a Prepared data on legal status 2, 3, and 4 children.	P-Dec 04 A-Feb 05	
					Workgroup member list	P1.8.1.b Developed workgroup to examine legal status 2, 3, and 4 children (include in workgroup OSCA, CD, and metro sites).	P-Feb 05 A-Apr 05	

Program Improvement Implementation

1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				Bonnie Washeck	Case review results report	P1.8.1.c Conducted special case reviews on legal status 2, 3, and 4 cases.	P-Apr 05	
					Summary of meeting decisions	P1.8.1.d CD met with DLS and OSCA to determine legal obligations related to legal status 2, 3, and 4 children.	A-May 05	
						P1.8.1.e Revise AFCARS population if necessary.	P-Apr 05	
					Protocol developed	P1.8.1.f Developed policy and protocol on worker duties related to legal status 2, 3, and 4 cases.	A-Jul 05	
					Comparison data	P1.8.1.g Caseload analysis (comparison to LS1) completed Legal status 2, 3, and 4.	P-Sept 05	
					PRR	P1.8.1.h Incorporated Legal status 2, 3, and 4 cases into established Peer Record Review process.	A-	
				P1.8.2 Establish procedures to access various service funding streams.		P1.8.2.a See S2.3.4.a.		
				Bonnie Washeck		P1.8.2.b See S2.3.4.b.		
				P1.8.3 Ensure frequency and timeliness of Family Support Team Meetings occurs per policy.		P1.8.3.a See P1.7.1.a		
						P1.8.3.b See P1.7.1.b		
						P1.8.3.c See P1.7.1.c		
				Kathryn Sapp Cindy Wilkinson				
				P1.8.4 Improve quality of Family Support Teams to assure the review of permanency goal.		P1.8.4.a See P1.7.2.a		
						P1.8.4.b See P1.7.2.b		
						P1.8.4.c See P1.7.2.c		
						P1.8.4.d See P1.7.2.d		
						P1.8.4.e See P1.7.2.e		

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				Kathryn Sapp Cindy Wilkinson		P1.8.4.f See P1.7.2.f P1.8.4.g See P1.7.2.g P1.8.4.h See P1.7.2.h		
				P1.8.5 Increase collaboration with courts by providing cross training to new judiciary, court staff, Children's Division staff and GAL's on ASFA & Permanency hearings consistent with state and federal regulations Cindy Wilkinson		P1.8.5.a See P1.7.4.a P1.8.5.b See P1.7.4.b P1.8.5.c See P1.7.4.c P1.8.5.d See P1.7.4.d P1.8.5.e See P1.7.4.e P1.8.5.f See P1.7.4.f		
				P1.8.6 Increase collaboration with courts by providing cross training to judiciary, court staff, GAL's and Children's Division staff regarding roles and responsibilities. Cindy Wilkinson	Contract developed	P1.8.6.a Contract developed to provide training.	P-Apr 04 A-Apr 04	
					Meeting minutes	P1.8.6.b Meeting held to discuss roles and responsibilities of CD and Juvenile Officers.	P-Dec 04 A-Oct 04	
					Training agenda	P1.8.6.c Training provided to judiciary, court staff, GAL's and CD staff	P-May 05 A-May 05	
				P1.8.7 Collaborate with OSCA to explore barriers that would allow Juvenile Courts to enter temporary custody orders and transfer jurisdiction to Probate & Circuit Courts to expedite guardianship.	Meeting Minutes	P1.8.7.a Meeting held (with OSCA, CD, and DLS) to look at existing data and practices to identify problem areas and barrier to expeditious guardianship, including legislative and policy change.	P-Mar 05 A-Oct 04	
					Proposal drafted	P1.8.7.b Proposal drafted for legislative change.	P-Mar 05 A-Oct 04	
						P1.8.7.c Written proposal reviewed by OSCA, CD and DLS.	P-Mar 05 A-Sept 04	

Program Improvement Implementation

Program Improvement Implementation									
1			2	3	4	5	6	7	
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement		
							Benchmark	Goal	
	A	N/A							
				Jim Harrison		P1.8.7.d Proposal finalized and presented to Department for legislative change.	P-Mar 05 A-Jan 05		
			P1.8.8 Determined policy remedy to be used in addition or in lieu of any legislative change referred in P1.8.7. Jim Harrison Lesley Pettit			P1.8.8a Each circuit determined strategies with their court to expedite guardianship for children placed with relatives in CD custody.	P-Oct 05 A-		
							P1.8.8.b See P1.6.1a		
							P1.8.8.c See P1.6.1b		
							P1.8.8.d See P1.6.1c		
							P1.8.8.e See P1.6.1d		
							P1.8.8.f See P1.6.1e		
Item 9: Adoption	X		Adoption Nat'l Standard 32% or more MO FFY 2003 AFCARS Baseline 38.5% Goal achieved					P- Dec 2006 A-	
			P1.9.1 Termination of Parental Rights will be filed in a timely manner, except when compelling reasons are documented. Cindy Wilkinson Kathryn Sapp	Data report		P1.9.1.a.Examine TPR data from current information system.	P-Feb 05 A-Feb 05		
					Circuit reports on outcomes of meetings with courts.		P1.9.1.b Initiated local circuit meetings with Judicial Courts to address local procedures for filing of TPR petitions.	P-Jun 05 A-Jul 05	
					Policy developed		P1.9.1.c Developed policy for supervisor and staff responsibilities in documenting compelling reasons for not filing TPR.	P-Jun 05 A-Jul 05	
							P1.9.1.d Incorporated into BASIC training.	P-Jun 05 A-Pending	
					Policy disseminated		P1.9.1.e Policy disseminated to staff and supervisory oversight	P-Aug 05 A-	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
					PRR monitoring	P1.9.1.f Quarterly monitoring by PRR.	P&A ongoing quarterly	
						P1.9.1.g Incorporated into Advanced FCOOHC In-service module training.	P-May 06 A-	
				P1.9.2 Increase number of resource families. Cindy Wilkinson	Performance based contracts and outcome reports	P1.9.2.a See P1.6.5.a P1.9.2.b See P1.6.5.b P1.9.2.c See P1.6.5.c P1.9.2.d See P1.6.5.d P1.9.2.e See P1.6.5.e		
				P1.9.3 Increase capacity to conduct home studies and finalize adoptions. Cindy Wilkinson	Request for Proposal	P1.9.3.a RFP written for performance based development contracts.	P-Sep 04 A-Sep 04	
					Workload staffing analysis	P1.9.3.b Conducted a workload staffing analysis to determine staffing need for completing home studies and finalized adoptions.	P-Mar 05 A-Mar 05	
					Award letters	P1.9.3.c Awarded performance based permanency and resource development contracts.	P-Mar 05 A-Jun 05	
					Staffing report	P1.9.3.d Committed additional staff (private or public) as needed per available resources.	P-Jul 05 A-Aug 05	
				P1.9.4 Improve access to legal representation for CD staff Jim Harrison		P1.9.4.a DLS identified plan to fill vacant FTE's or contract for attorneys.	P-Jul 04 A-Jul 04	
						P1.9.4.b Additional attorneys hired and placed.	P-Sep 04 A-Sep 04	
						P1.9.4.c DLS & Law Schools identified funding sources for expansion of law school cooperative program.	P-Mar 05 A- Aug 05	
						P1.9.4.d DLS & Law schools requested funding program.	P-Mar 05 A-Aug 05	
					Establish workgroup	P1.9.4.e CD/DLS established a work group to develop a protocol for CD staff to access DLS attorneys or contractors.	P-Mar 05 A-Apr 05	

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
						P1.9.4.f CD/DLS contacted law schools in St. Louis to assess interest in expanding the existing cooperative program.	P-Apr 05 A-Aug 05	
					Develop draft protocol	P1.9.4.g Draft Protocol developed.	P-Apr 05 A-Apr 05	
						P1.9.4.h Protocols adopted.	P-May 05 A-Pending	
					Committee monitoring report	P1.9.4.i CD legal representation at court hearings monitored by CD/DLS joint committee for improvement.	P-July 05 A-Jul 05	
Item 10: Other planned living arrangement		X	Baseline 63.6% 2nd quarter results for PRR V-22 = 51.1% Goal = 66.4% Baseline 63.3% Goal = 66.4% 2nd quarter results for PRR V-21 = 70.6% Goal established is calculated by taking the average of 8 quarters performance (in 2003 and 2004 and adding 5% of the average to measure improvement.)		PRR V-22 Youth 16 or older have an ILP plan documented in the case record (CS-1 Att.) PRR V-21 Youth 16 or over, are participating in or have completed ILP classes			P-Dec 2006 A-
				P1.10.1 Increase number and quality of		P1.10.1.a See P1.6.5.a P1.10.1.b See P1.6.5.b		

Program Improvement Implementation

1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				resource families for older youth Cindy Wilkinson		P1.10.1.c See P1.6.5.c P1.10.1.d See P1.6.5.d P1.10.1.e See P1.6.5.e		
					Discuss recruitment activities	P1.10.1.f Met with IL Specialists to discuss strategies on recruitment activities for locating homes for older youth.	P-Mar 05 A-Mar 05	
					Recruitment activities report	P1.10.1.g Met with IL Specialists to report on community recruitment activities.	P-Jun 05 A-Jun 05	
						P1.10.1.h Incorporated Ready, Set, Fly curriculum and Chafee video into foster parent training.	P-Sep 05 A-	
				P1.10.2 Increase awareness of Chafee program services to staff and community members Cindy Wilkinson	Distribute ETV material	P.1.10.2.a Increased awareness of Education and Training Voucher Program through distributing information material to secondary and higher education programs	P-Jan 2004 A-Jan 2004	
					Youth conference	P1.10.2.b State Youth Advisory Board (SYAB) designed and hosted annual youth empowerment conference	P-July 04 annually A-July 04 Annually	
					Provide information meetings	P1.10.2.c ILP staff provided Chafee informational meetings, seminars, workshops to CD staff, foster parents, juvenile court, and youth serving agencies.	P- Mar 04 Ongoing A-Mar 04 Ongoing	
					Write and disseminated memo	P1.10.2.d CD memo written and disseminated to staff involving ILP staff in the case planning process for older youth and referring age appropriate youth for Chafee services.	P-May 05 A-Sep 05	
					Distributed ETV poster	P1.10.2.e Designed and distributed ETV poster to schools and youth serving agencies	P-May 05 A-Aug 05	
				P1.10.3 Increase program accessibility to	Implement Pre-ILP Training	P1.10.3.a Designed and Implemented Pre-ILP Life Skills training curriculum	P-June 04	

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
	A	N/A						
				provide life skills training services for older youth Cindy Wilkinson	curriculum Youth conference	for youth 14-15. P1.10.3.b State Youth Advisory Board (SYAB) designed and hosted annual youth empowerment conference	A- June 04 P-July 04 annually A-July 04 Annually	
					Consult with SYAB	P1.10.3.c Consulted with SYAB members on needs of older youth.	P-Dec 04 Ongoing A- Dec 04 Ongoing	
					Convene workgroup and address recommendations	P1.10.3.d Convened workgroup to address recommendations from Chafee stakeholder and transitional living meetings on designating positions and training plan for adolescent workers	P-Feb 05 A-Feb 05	
					Provide training to selected staff in designed areas	P1.10.3.e Training provided in designate areas to selected staff interested in adolescent worker positions	P-Feb 05 A-Feb 05	
					CD memo	P1.10.3.f CD memo written and disseminated to staff involving ILP staff in the case planning process for older youth and referring age appropriate youth for Chafee services	P-May 05 A-Sep 05	
Permanency Outcome P2:								
Item 11: Proximity of foster care placement	X							
Item 12: Placement with siblings		X	Baseline 85.6 2nd quarter PRR results = 86.8% Goal 89.9% (Goal established is calculated by taking		Monitored through Peer Record Review Question V-4: Siblings are placed together or there is ongoing visitation			P-Dec 2006 A-

Program Improvement Implementation

Program Improvement Implementation									
1			2	3	4	5	6	7	
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement		
							Benchmark	Goal	
A	N/A								
			the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement).						
				P2.12.1 Increase the number of siblings placed together	Policy developed	P2.12.1.a Policy developed for FST to be required prior to separating siblings at any time during placement episode.	P-Aug 04		
				Kathryn Sapp	Policy enhancement	P2.12.1.b Enhanced policy addressing the continual need for maintaining sibling relationship.	A-Aug 04		
				PRR results & Improvement plans	P2.12.1.c Circuit Managers monitored quarterly PRR results and improvement plans developed.	P-Feb 05 Ongoing Quarterly A-Ongoing			
				Administrative review developed	P2.12.1.d Developed administrative process to review cases after siblings are separated after 30 days.	P-Nov 05			
				P2.12.2 Develop an ongoing training module regarding sibling placements for staff, foster parents, and juvenile court staff.		P2.12.2.a Emphasis on the importance of sibling bonds, long term effects of separation, and importance of visitation, parentified child and sibling rivalries incorporated into foster parent training.	P-Nov 05		
						Jeff Adams	P2.12.2.b See P1.7.4.a		
						P2.12.2.c See P1.7.4.b			
						P2.12.2.d See P1.7.4.c			
						P2.12.2.e See P1.7.4.d			
						P2.12.2.f See P1.7.4.e			
			P2.12.2.g See P1.7.4.f						

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
					Training module	P2.12.2.h Emphasis on the importance of sibling bonds, long term effects of separation, and importance of visitation, parentified child and sibling rivalries incorporated into BASIC and advanced FCOOHC In-Service training module.	P-May 06	
				P2.12.3 Increase capacity for resource families that accept sibling groups. Cindy Wilkinson		P2.12.3.a See P1.6.5.a P2.12.3.b See P1.6.5.b P2.12.3.c See P1.6.5.c P2.12.3.d See P1.6.5.d P2.12.3.e See P1.6.5.e		
Item 13: Visiting with parents and siblings in foster care.		X	Baseline 89.4 % 2nd quarter PRR results = 84.5% Goal 90.3% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement). Baseline 85.6% 1st quarter PRR results = 85.8% Goal 89.9% (Goal established is calculated by taking		Parents' visits monitored through PRR Question V-13. There is a current visitation plan in place to facilitate reunification. Sibling visits monitored through Peer Record Review question V-4: Siblings are placed together or there is ongoing visitation.			P-Dec 2006 A-

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
		the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement).					
		Cindy Wilkinson	P2.13.1 Increase frequency and quality of parent/child and sibling visits.	Policy revision	P2.13.1.a Revised policy to improve qualitative and quantitative visitation plan requirements.	P-Aug 05	
					P2.13.1.b Incorporated policy revision into BASIC training and supervisory oversight provided to existing staff.	P-Sept 05	
			PRR		P2.13.1.c Incorporated revisions into PRR tool.	P-Sept 05	
			Quarterly data reports		P2.13.1.d Circuit Managers monitor data regarding frequency of parent/child/sibling visits.	P-Oct 05	
			Practice improvement plans developed		P2.13.1.e Circuit Managers assisted by the PET teams developed practice improvement plans using all available data for guidance.	P-Oct 05	
			Revised policy and training module		P2.13.1.f Policy revision incorporated and staff training began: Advanced FCOOHC In-Service training module.	P-May 06	
Item 14: Preserving connections	X	Baseline 23.3% 2nd quarter performance = 24.1% Goal 25.6% Baseline 83%		Relative Placement CD-Outcomes #17. Increase the number of children placed with relative provider			P-Dec 2006 A-

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
			<p>2nd quarter results for PRR = 85.4%</p> <p>Goal 87.2% Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement.</p>		PRR V-1 Consideration was given to relatives or kin for placement.			
				P2.14.1 Increase emphasis on preserving familial and community connections for children in out of home care. Kathryn Sapp	Evaluation report	P2.14.1.a Evaluated Family-to-Family program regarding applicability for statewide implementation.	P-May 05 A-Pending	
						P2.14.1.b Submitted evaluation recommendations to administration.	P-July 05 A-Pending	
						P2.14.1.c Based on results of Family to Family evaluation and review of other state's best practices determined statewide applicability.	P-Aug 05 A-	
					State plan developed	P2.14.1.d Develop state plan to address preserving connections.	P-Oct 05 A-	
				P2.14.2 Improve diligent search for relatives/missing parents Bonnie Washeck		P2.14.2.a See P1.6.2.a P2.14.2.b See P1.6.2.b P2.14.2.c See P1.6.2.c P2.14.2.d See P1.6.2.d		
				P2.14.3 Revise ICWA policy Cindy Wilkinson Kathryn Sapp	Policy revision	P2.14.3.a Revised ICWA policy to reflect best practice standards.	P-Aug 04 A-Aug 04	
					CPS-1 CD-14	P2.14.3.b ICWA questions incorporated into intake (CPS-1) and family assessment (CD-14) tools.	P-May 05 A-Apr 05	
					Policy disseminated	P2.14.3.c Newly revised intake & assessment disseminated to all CD staff.	P-Aug 05 A-	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
					PRR	P2.14.3.d Add ICWA question to Peer Record Review tool.	P-Sept 05	A-
					PRR quarterly data reports	P2.14.3.e Establish a baseline for ICWA for Peer Record.	P-Sept 05	A-
Item 15: Relative placement		X	Baseline 25.9% 2nd quarter Outcome Reports results = 26.9% Goal 27.2% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement). Progress to be tracked quarterly over two year period from CD Outcomes Report Baseline 83.0% 2nd quarter PRR results = 85.4% Goal 87.2% (Goal established is calculated by taking the average of 8 quarters performance		Relative Placement monitored through the number of children placed with relative provider in legal status 1-4 Monitored through Peer Record Review question V-1: Consideration was given to relatives or kin for placement			P-Dec 2006 A-

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
		adding 5% of the average to measure improvement).					
			P2.15.1 Increase system capacity to accurately track placement kinship vendor types. Lesley Pettit		P2.15.1.a See P1.6.1.a P2.15.1.b See P1.6.1.b P2.15.1.c See P1.6.1.c P2.15.1.d See P1.6.1.d P2.15.1.e See P1.6.1.e		
			P2.15.2 Improve diligent search for relatives/missing parents. Cindy Wilkinson		P2.15.2.a See P1.6.2 a P2.15.2.b See P1.6.2.b P2.15.2.c See P1.6.2.c P2.15.2.d See P1.6.2.d		
			P2.15.3 Evaluate support and training provided for relative/kinship resource families Cindy Wilkinson Jeff Adams		P2.15.3.a See P1.6.7.a P2.15.3.b See P1.6.7.b P2.15.3.c See P1.6.7.c		
Item 16: Relationship of child in care with parents	X	Baseline 91.0% 2nd quarter PRR results = 90.3% Goal 91.9% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the		Parent Visits monitored through Peer Record Review question V-3: The child is placed in close proximity to his/her family.			P-Dec 2006 A-

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
			average to measure improvement).					
				P2.16.1 Improve diligent search for non-custodial parent. Bonnie Washeck		P2.16.1.a See P1.6.2.a P2.16.1.b See P1.6.2.b P2.16.1.c See P1.6.2.c P2.16.1.d See P1.6.2.d		
				P2.16.2 Improve engagement of non-custodial parents in case planning by strengthening worker/supervisor skills in engaging families in the assessment, case planning and case plan review process. Increase parent, caregiver (alternative care provider) and child involvement in case assessment, plan development and reassessment. Kathryn Sapp	PRR Outcomes	P16.16.2.a See S2.3.2.a P16.16.2.b See S2.3.2.b P16.16.2.c See S2.3.2.c P16.16.2.d See S2.3.2.d P16.16.2.e See S2.3.2.e P16.16.2.f See S2.3.2.f		
Well Being Outcome 1 Families have enhanced capacity to provide for children's needs								

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
Item 17: Needs and services of child, parents, foster parents		X	Baseline 82.1% 2nd quarter PRR results = 83.5% Goal 86.2%		PRR III-10 Rating for the overall quality of the comprehensive assessment.		P-Dec 2006 A-
			Baseline 91.0% 2nd quarter PRR results = 91.6% Goal 95.6% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement).		PRR III-3 The needs of the family/child are identified.		
			WB1.17.1 Improve family assessment and case plan tools to better link service provision to the needs of the bio family identified in the initial and ongoing assessments. Kathryn Sapp		WB1.17.1.a See S2.3.1.a WB1.17.1.b See S2.3.1.b WB1.17.1.c See S2.3.1.c WB1.17.1.d See S2.3.1.d WB1.17.1.e See S2.3.1.e WB1.17.1.f See S2.3.1.f WB1.17.1.g See S2.3.1.g WB1.17.1.h See S2.3.1.h		

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
			Baseline 80.4% 2nd quarter PRR results = 81.3% Goal 84.4% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement).		PRR IV-15 Rating for the overall quality of the service plan and service delivery process.			
				WB1.17.2 Strengthen workers skills in engaging families in the assessment, case planning and case plan review processes to increase parent, caregiver (alternative care provider) and child involvement in case assessment, plan development and reassessment. Kathryn Sapp		WB1.17.2.a See S2.3.2.a WB1.17.2.b See S2.3.2.b WB1.17.2.c See S2.3.2.c WB1.17.2.d See S2.3.2.d WB1.17.2.e See S2.3.2.e WB1.17.2.f See S2.3.2.f		
				WB1.17.3 Implementation of "Confirming Safe Environments" to reduce the risk for children in		WB1.17.3.a See S1.2.2.a WB1.17.3.b See S1.2.2.b WB1.17.3.c See S1.2.2.c WB1.17.3.d See S1.2.2.d WB1.17.3.e See S1.2.2.e WB1.17.3.f See S1.2.2.f		

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
			foster/kinship care to identify needs of child and providers. Cindy Wilkinson				
Item 18: Child and family involvement in case planning.	X	Baseline 74.1% 2nd quarter PRR results = 77.8 % Goal 77.8% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement).		Monitored through Peer Record Review question IV-8: The family participated in the development of and signed the service plan.			P-Dec 2006 A-
			WB1.18.1 Maximize parental/family participation in Family Support Team Meetings. Bonnie Washeck		WB1.18.1.a See S2.3.2 a WB1.18.1.b See S2.3.2 b WB1.18.1.c See S2.3.2 c WB1.18.1.d See S2.3.2 d WB1.18.1.e See S2.3.2 e WB1.18.1.f See S2.3.2 f		
				Protocol established	WB1.18.1.g Established a protocol for accessing division staff outside of regular working hours.	P-Aug 05 A-	
			WB1.18.2 Improve the quality of Family Support Team Meetings. Kathryn Sapp Cindy Wilkinson		WB1.18.2.a See P1.7.2a WB1.18.2.b See P1.7.2b WB1.18.2.c See P1.7.2c WB1.18.2.d See P1.7.2d WB1.18.2.e See P1.7.2e WB1.18.2.f See P1.7.2f WB1.18.2.g See P1.7.2g WB1.18.2.h See P1.7.2h		

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				WB1.18.3 Review and further develop a handbook, to be distributed at the point of removal, to educate parents on their rights and responsibilities, court procedures, etc. Cindy Wilkinson		WB1.18.3.a Collected parent handbooks used by various circuits.	P-Aug 05 A-	
					Workgroup list	WB1.18.3.b Convened a work group to evaluate parent handbooks.	P-Oct 05 A-	
					Parent handbook	WB1.18.3.c Developed a universal parent handbook.	P-Jan 06 A-	
					Survey results	WB1.18.3.d Solicited consumer feedback on parent handbook	P-Apr 06 A-	
					Policy developed	WB1.18.3.e Developed policy on use of parent handbook.	P-July 06 A-	
					Policy disseminated	WB1.18.3.f Policy distributed to all staff and supervisory oversight.	P-Sept 06 A-	
					Training curriculum	WB1.18.3.g Policy Incorporated into BASIC training	P-Oct 06 A-	
Item 19: Worker visits with child – improve quantity and quality		X	Baseline 72.8% 2nd quarter PRR results = 76.3% Goal 76.4% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement).		Foster Care cases monitored through Peer Record Review question V-16: The worker visits the child twice every month.			
			.	WB1.19.1 Develop policy addressing the quality of visits to incorporate case planning, service delivery and goal attainment.	Team appointments	WB1.19.1a Appointed visitation policy and practice team.	P-Jan 05 A-Feb 05	
					Convene meeting	WB1.19.1.b Convened first policy and practice team meeting.	P-Feb 05 A-May 05	
					Policy developed	WB1.19.1.c Team developed policy on visitation and draft protocol regarding quality of visits.	P-May 05 A-Pending	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				Bonnie Washeck	Recommendations reviewed	WB1.19.1.d Recommendation reviewed by policy review team and executive staff.	P-Jun 05 A-Pending	
						WB1.19.1.e Policy disseminated to staff.	P-Aug 05 A-	
						WB1.19.1.f Utilize Practice Enhancement Teams (PET) to support protocols.	P-Aug 05 A-	
				WB1.19.2 Increase policy compliance for frequency of worker visits for intact and out-of-home cases.	Quarterly workload report	WB1.19.2.a Achieved progress in caseload equalization by developing quarterly circuit workload reports.	P-Aug 05 quarterly ongoing A-	
				Cindy Wilkinson Kathryn Sapp	PRR	WB1.19.2.b Circuit Managers monitored the frequency of worker visits through the PRR.	P-Aug 05 A-	
					Practice Improvement plans	WB1.19.2.c Circuit Managers assisted by PET to develop practice improvement plans.	P-Sep 05 A-	
				WB1.19.3 Tracking system to track worker visits (date/site).		WB1.19.3.1.a Enhancements made to the existing ACTS and FCS system.	P-Feb 06 A-	
				Jim Harrison		WB1.19.3.1.b SACWIS began to be available to track visitation in Case Management System.	P-May 06 A-	
Item 20: Worker Visit with parent(s).		X	Baseline 85.3% 2nd quarter PRR results = 86.6% Goal 89.5% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement).		Intact and Foster Care Cases monitored through Peer Record Review question IV-14: The worker visits family (caretakers) at least one time per month.			P-Dec 2006 A-

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				WB1.20.1 Strengthen worker relationships with biological or adoptive parents. Bonnie Washeck	Protocols established Revise PRR	WB1.20.1.a Protocols established in WB1.19.1.c included in adoptive parent training WB1.20.1.b Revised PRR to reflect collateral contacts required per family risk assessment/reassessment	P-May 05 A-Pending P-Jun 05 A-Jun 05	
						WB1.20.1.c See S2.3.2.a WB1.20.1.d See S2.3.2.b WB1.20.1.e See S.2.3.2.c WB1.20.1.f See S.2.3.2.d WB1.20.1.g See S.2.3.2.e WB1.20.1.h See S2.3.2.f		
				WB1.20.2 – Refer to: WB1.19.1, WB1.19.2 and WB1.19.3 a. WB1.19.1 Develop policy addressing the quality of visits to incorporate case planning, service delivery and goal attainment. b. WB1.19.2 Increase policy compliance for frequency of worker visits for intact and out-of-home cases. c. WB1.19.3 Tracking system to track worker visits (date/site).		WB1.20.2.a See WB1.19.1.a-f WB1.20.2.b See WB1.19.2 a-c WB1.20.2.c See WB1.19.3 a-b		
Well Being Outcome 2 Children receive services to meet								

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
their educational needs							
Item 21: Children receive appropriate services to meet their educational needs		X	Baseline 95.6% 2nd quarter PRR results = 95.6%	PRR V-18 The child is at grade level and receiving appropriate educational services.			P-Dec 2006 A-
			Goal 96.6% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement.)				
			WB2.21.1 Improve working relationship among Children's Division, Department of Elementary and Secondary Education (DESE) and local school districts. Kathryn Sapp	Protocol developed	WB.2.21.1.a Protocol developed regarding inclusion of educational personnel in FST's.	P-Mar 05 A-Apr 05	
				Education liaisons	WB2.21.1.b Designated an education liaison at the state level.	P-May 05 A-May 05	
				Circuit Self Assessment	WB2.21.1.c Local level barriers identified regarding working with schools and educational disruptions of children in foster care.	P-May 05 A-Jul 05	
				Written local plans	WB2.21.1.d Developed a plan to alleviate barriers and address educational disruptions of children in foster care as applicable.	P-May 05 A-Jul 05	
				Written State plan	WB2.21.1.e Children's Division Administration partnered with DESE to address identified barriers at State level.	P-Aug 05 A-	

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				WB2.21.2 Improve the flow of educational records and reports when children transfer schools.	Protocols developed	WB2.21.2.a Local protocols developed for alternative care children regarding permission of custodian to access records needed for enrollment.	P-Jun 05 A-Jun 05	
				Kathryn Sapp Cindy Wilkinson	Residential Facility contracts	WB2.21.2.b. Incorporated accountability measures for transfer of educational records into Residential Facility contracts.	P-Jun 05 A-Pending	
				WB2.21.3 Decrease the incidence of educational neglect, truancy and suspension of children in care.		WB2.21.3.a Consult with National Resource Centers and other national education resources regarding early identification of educational neglect, truancy and suspension of children in care.	P-Apr 05 A-Apr 05	
				Cindy Wilkinson Kathryn Sapp	Revised CD-14 and CS-1	WB2.21.3.b Identification of risk factors for educational neglect, truancy or school suspension incorporated into the CD-14 and CS-1.	P-Jul 05 A-Jul 05	
					Distribute youth training video	WB2.21.4.c Distribute Youth Training Video for teacher in-service training.	P-Sep 05 A-	
					Protocol developed	WB2.21.3.d Protocol developed for accessing early interventions for students at risk for educational neglect, truancy and suspension.	P-Oct 05 A-	
					Protocol developed	WB2.21.3.e Protocol developed for children expelled due to the Safe School Act.	P-Oct 05 A-	
					Protocol disseminated	WB2.21.3.f Protocols distributed to staff and shared with local school districts.	P-Nov 05 A-	
						WB2.21.3.g Protocols incorporated into BASIC and foster parent training.	P-Dec 05 A-	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				WB2.21.4 Decrease the incidence of educational neglect, truancy and suspension of children for intact families. Kathryn Sapp		WB2.21.4.a Consulted with National Resource Center on Child Maltreatment and other national education resources regarding early identification of educational neglect, truancy and suspension of intact families.	P-Apr 05 A- Apr 05	
					CD-14 revision	WB2.21.4.b Identification of risk factors for educational neglect, truancy or school suspension incorporated into the CD-14.	P-July 05 A-Jul 05	
					Distribute youth training video	WB2.21.4.c Distribute Youth Training Video for teacher in-service training.	P-Sep 05 A-	
					Protocol developed	WB2.21.4.d Protocol developed for accessing early interventions for students at risk for educational neglect, truancy and suspension.	P-Oct 05 A-	
					Protocol developed	WB2.21.4.e Protocol developed for children expelled due to the Safe School Act.	P-Oct 05 A-	
					Protocols disseminated	WB2.21.4.f Protocols distributed.	P-Nov 05 A-	
						WB2.21.4.g Protocols incorporated into BASIC training.	P-Dec 05 A-	
Well-Being 3 (WB3): Children receive adequate services to meet their physical and mental health needs.								

Program Improvement Implementation

1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
Item 22: Physical health of the child		X	Baseline 96.9% 2nd quarter PRR results = 97.3% Goal 97.8% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement.		PRR V-17: The physical needs of the child are being met.			P-Dec 2006 A-
				WB3.22.1 Increase ability of Children's Division staff and families to access available dental resources. Bonnie Washeck	Circuit Self Assessment	WB3.22.1.a Circuits identified available local dental resources.	P-Mar 05 A-Aug 04	
					Dental coordinator list	WB3.22.1.b Dental coordinator assigned to each region (local level) to identify barriers and facilitate access to dental providers.	P-May 05 A-Jul 05	
					Notification letter	WB3.22.1.c Notified dental providers of regional dental coordinators.	P-Aug 05 A-	
					Written plan	WB3.22.1.d In partnership with Division of Medical Services (DMS) assessed and developed plan to reduce administrative burden on Medicaid providers.	P-Aug 05 A-	
					Assessment report	WB3.22.1.e Completed assessment regarding Dental Van program expansion.	P-Aug 05 A-	
				WB3.22.2 Increase capacity of staff to assess medical needs of children in intact families.	CD-14 revision	WB3.22.2.a Revised CD-14 to include assessment of medical needs of children in intact families.	P-July 05 A-Apr 05	
					Policy disseminated	WB3.22.2.b Issued revised form and policy.	P-Sep 05 A-	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				Bonnie Washeck	Training curriculum	WB3.22.c Existing staff trained in Assessment and Service Planning using CD-14 as tool statewide.	P-Oct 05	
						WB3.22.2.d Integrated CD-14 into Advanced Family-Centered In-service training module.	P-Jan 06	
Item 23: Mental health needs of the child		X	Baseline 96.4% 2nd quarter PRR results = 96.5% Goal 97.3% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 1% of the average to measure improvement.		PRR V-19: The mental health needs of the child are being met.			P-Dec 2006 A-
				WB3.23.1 Increase the ability of Children's Division staff and families to access available mental health resources.	Circuit Self Assessment	WB3.23.1.a Available mental health resources identified through Circuit Self Assessment.	P-Aug 04	
					Mental Health Coordinator list	WB3.23.1.b Five Regional Mental Health Coordinators designated.	P-Jan 05 A-Jan 05	
						WB3.23.1.c See S2.3.5		
				Jim Harrison	Written plan	WB3.23.1.d Mental Health Coordinators convened teams to identify local barriers, develop a plan to alleviate barriers and create partnerships to improve service delivery.	P-May 05 A-May 05	
					Plan developed	WB3.23.1.e In partnership with Division of Medical Services (DMS) assessed and developed plan to reduce administrative burden on Medicaid providers.	P-Aug 05 A-	

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
			WB.3.23.2 Increase awareness of staff and foster parents regarding attachment and mental health issues. Cindy Wilkinson		WB3.23.2.a See P1.6.3.a		
					WB3.23.2.b Increased the number of staff and foster parents trained on Working with the Explosive Child (See Training Matrix).	P & A- Ongoing semi-annually	
					WB3.23.2.c Increased the number of staff and foster parents trained on Grief and Loss (See Training Matrix).	P-Sep 04 A-Sep 04 ongoing semi-annual	
				Curriculum developed	WB3.23.2.d Developed Reactive Attachment Disorder curriculum.	P-Mar 05 A-Mar 05	
				Training agenda	WB3.23.2.e Incorporated attachment issues training into on-going training.	P-Sep 06 A-	
			WB3.23.3 Increase capacity of staff to assess mental health needs of children in intact families. Kathryn Sapp	CD-14 revision	WB3.23.3.a Incorporated assessment of mental health needs of children in intact families in CD-14 revision (See S2.3.1.b-h).	P-July 05 A-Apr 05	
				Practice improvement plans	WB3.23.3.b Circuit Managers evaluated SCRT results and developed practice improvement strategies as needed.(See S2.3.3 a-f)	P-Apr 06 ongoing quarterly A-	
Systemic Factors							
Item 24: System can identify the status, demographic characteristics, location and goals of children in foster care.	X						

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
	A	N/A						
Item 25: Provides a process that ensures that each child has a written case plan to be developed jointly with the child's parent(s) that includes the required provisions.			Baseline 80.4% 2nd quarter PRR results = 81.3% Goal 84.4% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement.		Monitored through Peer Record Review question IV-15 Rating for the overall quality of the service plan and service delivery process.			
				25.1 Improve family assessment and case plan tools to better link service provision to the needs of the family identified in the initial and ongoing assessments. Kathryn Sapp		25.1.a See S2.3.1.a 25.1.b See S2.3.1.b 25.1.c See S2.3.1.c 25.1.d See S2.3.1.d 25.1.e See S2.3.1.e 25.1.f See S2.3.1.f 25.1.g See S2.3.1.g 25.1.h See S2.3.1.h		
				25.2 Strengthen worker/supervisor skills in engaging families in the assessment, case planning and case plan review process to increase parent, caregiver (alternative care provider) and child involvement in case assessment, plan development and reassessment. Kathryn Sapp		25.2.a See S2.3.2.a 25.2.b See S2.3.2.b 25.2.c See S2.3.2.c 25.2.d See S2.3.2.d 25.2.e See S2.3.2.e 25.2.f See S2.3.2.f		

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
	A	N/A						
				25.3 Improve supervisory capacity to monitor practice linking the assessment with the overall plan. Bonnie Washeck		25.3.a See S2.3.3.a 25.3.b See S2.3.3.b 25.3.c See S2.3.3.c 25.3.d See S2.3.3.d 25.3.e See S2.3.3.e 25.3.f See S2.3.3.f 25.3.g See S2.3.3.g 25.3.h See S2.3.3.h		
				25.4 Maximize parental/family involvement in Family Support Team Meetings. Bonnie Washeck		25.4.a See P1.6.2.a 25.4.b See P1.6.2.b 25.4.c See P1.6.2.c 25.4.d See P1.6.2.d 25.4.e See S2.3.2 a 25.4.f See S2.3.2 b 25.4.g See S2.3.2 c 25.4.h See S2.3.2 d 25.4.i See S2.3.2 e 25.4.j See S2.3.2 f		
				25.5 Improve staff facilitation skills for Family Support Team Meetings. Jeff Adams	Training curriculum	25.5.a Began offering 25 supplemental FST trainings to selected staff throughout state. 25.5.b Enhanced/Improved FST skill application for BASIC. 25.5.c Advanced FST skill application integrated into advanced Family-Centered Out-of-Home Service In-Service module. 25.5.d Advanced FST skill application integrated into Advanced Family-Centered Service In-Service module.	P-Feb 05 A-Feb 05 P-Feb 05 A-Feb 05 P-May 06 A- P-Sep 06 A-	

Program Improvement Implementation

1		2	3	4	5	6	7	
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement		
						Benchmark	Goal	
A	N/A							
Item 26: Process for 6-month case reviews		X	Baseline 62.8% (derived from average of 8 quarters in FY 2003 and 2004) 2nd Quarter performance = 62.8% Goal 69% (Goal established through method described in Item 15 using Outcomes Report data).		Monitored through CD Outcomes Report Outcome #12: Children with Timely Completion of Permanency Planning Review within 30 Days and 6 Months.		P-Dec 2006 A-	
			26.1 Revised current policy to clarify an Administrative Review and requirements Susan Savage	Draft policy	26.1.a Developed draft policy clarifying administrative review requirements and procedures.	P-Feb 05 A-Jul 04		
						26.1.b Draft policy sent to policy review team and management.	P-Mar 05 A-Aug 04	
					Policy revision	26.1.c Feedback received and revisions made.	P-Apr 05 A-Aug 04	
					Policy disseminated	26.1.d New policy distributed to CD staff.	P-Jun 05 A-Aug 04	
			26.2 Recruit 3 rd party participants for Administrative Reviews Cindy Wilkinson	Volunteer list	26.2.a Circuit Managers recruited and trained a pool of qualified volunteers to participate in six month administrative reviews.	P-May 05 A-Pending		
						26.2.b Circuit Managers scheduled and assigned individual reviewers to cases.	P-May 05 A-Pending	
			26.3 Increase ability to track 6 month Administrative Reviews separately from FSTs	System logic	26.3.a Met with MIS and developed system logic needed to add fields to SS-61.	P-Aug 04 A-Aug 04		
					CS-1 revision	26.3.b Revised the SS-61 to denote Administrative Review.	P-Jan 05 A-Aug 04	

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
			Cindy Wilkinson	Revised form disseminated	26.3.c Revised form and instructions distributed to all CD staff.	P-Jan 05 A-Aug 04	
Item 27: Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.	X	Will extract data on most recent court date from ACTS system. <i>Baseline established on March 31, 2005</i> Baseline for LS 1-3 children on 7/31/05 = 88.6% Goal 88.0% with a 2% increase					P-Dec 2006 A-
			27.1 Improve access to legal representation for CD. Fred Simmens		27.1.a See P1.9.4.a 27.1.b See P1.9.4.b 27.1.c See P1.9.4.c 27.1.d See P1.9.4.d 27.1.e See P1.9.4.e 27.1.f See P1.9.4.f 27.1.g See P1.9.4.g 27.1.h See P1.9.4.h 27.1.i See P1.9.4.i		
			27.2 Implement training to develop testifying skills for CD staff. Jeff Adams	Curriculum modified	27.2.a Current curriculum evaluated by Division of Legal Services. 27.2.b Obtained technical assistance from DLS, NRC and OSCA. 27.2.c Based on evaluation and technical assistance curriculum modified.	P-Apr 05 A-Dec 04 P-Jun 05 A-Jul 05 P-Oct 05 A-	

Program Improvement Implementation

Program Improvement Implementation									
1			2	3	4	5	6	7	
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement		
							Benchmark	Goal	
A		N/A							
						27.2.d Modified curriculum approved.	P-Dec 05 A-		
					Training curriculum	27.2.e Modified curriculum incorporated into Basic and OJT for existing staff.	P-Mar 06 A-		
			27.3 Increase the timeliness of 12 month Permanency Hearings Cindy Wilkinson Kathryn Sapp			27.3.a See 27.2.a			
							27.3.b See 27.2.b		
							27.3.c See 27.2.c		
							27.3.d See 27.2.d		
							27.3.e See 27.2.e		
					Report on circuits where issues need to be addressed	27.3.f Collaborated with OSCA at the state level to ensure joint accountability for timely court hearings and identify circuits where CD and court issues needed to be addressed.	P-May 05 A-Jun 05		
					Workgroup participant list	27.3.g Developed on-going Court Issues workgroup to monitor timeliness of hearings.	P-June 05 A-Aug 05		
						27.3.h Developed local protocols between the court and CD offices to ensure timely hearings.	P-July 05 A-Aug 05		
					FST policy revision	27.3.i Revised Family Support Team policy to assure 12 month Permanency Hearing date is discussed and documented during team meeting.	P-Jul 05 A-Jul 05		
						27.3.j Incorporated new FST policy into BASIC and OJT training for existing staff.	P-Aug 05 A-		
			27.4 Provide cross training to judiciary, court staff, GALs and Children's Division staff on ASFA &			27.4.a See P1.7.4.a			
							27.4.b See P1.7.4.b		
							27.4.c See P1.7.4.c		
							27.4.d See P1.7.4.d		
							27.4.e See P1.7.4.e		

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				Permanency hearings consistent with state and federal regulations. Jeff Adams		27.4.f See P1.7.4.f		
	X	Baseline 83.4% 2nd Quarter PRR results = 85.8% Goal 87.5% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the average to measure improvement.)			Monitored through PRR V-14: TPR has occurred or been filed when the child has been in Out-of-Home Care for 15 of the most recent 22 months, or compelling reasons are documented.			P-Dec 2006 A-
				28.1 Improve access to legal representation for CD. Jim Harrison		28.1.a See P1.9.4.a 28.1.b See P1.9.4.b 28.1.c See P1.9.4.c 28.1.d See P1.9.4.d 28.1.e See P1.9.4.e 28.1.f See P1.9.4.f 28.1.g See P1.9.4.g 28.1.h See P1.9.4.h 28.1.i See P1.9.4.i		
				28.2 Strengthen worker/supervisor skills in engaging families in the assessment, case planning and case plan		28.2.a See S2.3.2.a 28.2.b See S2.3.2.b 28.2.c See S2.3.2.c 28.2.d See S2.3.2.d 28.2.e See S2.3.2.e		

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				review process to increase parent, caregiver (alternative care provider) and child involvement in case assessment, plan development and reassessment. Kathryn Sapp		28.2.f See S2.3.2.f		
				28.3 Termination of Parental Rights will be filed in a timely manner, except when compelling reasons are documented. Cindy Wilkinson		28.3.a See P1.9.1a 28.3.b See P1.9.1.b 28.3.c See P1.9.1.c 28.3.d See P1.9.1.d 28.3.e See P1.9.1.e		
				28.4 Improve diligent search for relatives/parents Bonnie Washeck		28.4.a See P1.6.2.a 28.4.b See P1.6.2.b 28.4.c See P1.6.2.c 28.4.d See P1.6.2.d		
				28.5 Collaborate with OSCA to amend 211.447 RSMo to ensure consistency w/ASFA requirements regarding filing of TPR petitions w/in 60 days of a judicial determination that the child is an abandoned infant, or that no Reasonable Efforts are required. Jim Harrison	Draft proposal	28.5.a Proposal drafted.	P-Aug 05 A-	
						28.5.b Written proposal reviewed by OSCA and the Department.	P-Oct 05 A-	
					Meeting agenda	28.5.c Meetings held between OSCA and the Department of Social Services to finalize proposal.	P-Nov 05 A-	
					Draft legislation	28.5.d Advocated for proposed legislation.	P-Jun 06 A-	

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
Item 29: Provides a process for foster parents, re-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child.		X	29.1 Increase ability of foster parents to be notified of and heard in court. Bonnie Washeck		29.1.a Implemented HB 1453.	P-Aug 04 A-Aug 04	
				Consumer survey	29.1.b Revised consumer surveys for foster parents, youth and bio parents to incorporate questions regarding notification of court hearings and opportunity to be heard in court.	P-Jun 05 A-Jun 05	
					29.1.c Emphasized to staff the importance of including correct names and addresses in court reports.	P-Mar 05 A-Apr 05	
				Cross training curriculum	29.1.d Comprehensive Child Welfare Training completed with OSCA.	P-May 05 A-May 05	
Item 30: Standards to assure quality services and ensure children's safety and health	X						
Item 31: Identifiable QA system that evaluates the quality of services and improvements	X						
Item 32: Provision of ongoing staff training that addresses the necessary skills and knowledge	X						
Item 33: Ongoing training for staff		X					
			33.1 Develop supervisory training for front line supervisors.		33.1.a Professional Development and Training collaborated with HRC for on-going supervisors training.	P-Feb 04 A-Feb 04	

Program Improvement Implementation

1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				Jeff Adams	Training agenda	33.1.b Implemented Module Four of the CPS Supervisor Training Project.	P-Mar 04 A-Apr 04	
					Training agenda	33.1.c Implemented Module Five of the CPS Supervisor Training Project.	P-Jul 04 A-Aug 04	
					Training agenda	33.1.d Implemented Module Six of the CPS Supervisor Training Project.	P-Oct 04 A-Nov 04	
					Debriefing report	33.1.e CPS Supervisor Training Project Debriefing.	P-Dec 04 A-Dec 04	
					List of trainings offered	33.1.f HRC supervisor administrative pre-service training began for CD supervisors.	P-Dec 04 A-Nov 04	
					Curriculum developed	33.1.g Professional Development and Training completed development of new supervisor training curriculum/structure including initial and on-going training.	P-July 05 A-Jul 05	
						33.1.h Training curriculum reviewed and approved by CD management.	P-Aug 05 A-	
						33.1.i Professional Development and Training selected one rural and one metro field test site.	P-Aug 05 A-	
						33.1.j Professional Development and Training field tested curriculum in two test sites	P-Sep 05 A-	
					Evaluation report	33.1.k Professional Development and Training evaluated field test results	P-Jan 06 A-	
					Curriculum revised	33.1.l Professional Development and Training, revised curriculum based on evaluation	P-Jan 06 A-	
						33.1.m Professional Development and Training implemented curriculum statewide.	P-June 06 A-	
					33.2 Develop advanced in-service training module for investigations and	Curriculum developed	33.2.a Professional Development and Training developed advanced in-service curriculum for investigators and assessors.	P-Oct 04 A-Sept 04

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				assessments Jeff Adams		33.2.b CD administration approved advanced investigation and assessment in-service training module.	P-Nov 04 A-Sept 04	
					Training dates	33.2.c Professional Development and Training began training advanced investigation and assessment curriculum.	P-Jan 05 A-Sept 04	
					Curriculum revised	33.2.d Professional Development and Training evaluated advanced investigation and assessment training module and made revisions.	P-June 05 A-Jun 05	
						33.2.e Professional Development and Training implemented revised investigation and assessment advanced in-service training statewide.	P-Jul 05 A-Jul 05	
				33.3 Develop advanced in-service training module for Family-Centered Services Jeff Adams	Workgroup participant list	33.3.a Professional Development and Training formed workgroup to develop Family-Centered Services advanced in-service training module.	P-Feb 04 A-Feb 04	
					Focus group report	33.3.b Professional Development and Training workgroup conducted focus groups for feedback on Family-Centered Service training needs.	P-Mar 04 A-Mar 04	
						33.3.c Professional Development and Training reviewed Family-Centered Service focus group feedback.	P-Mar 04 A-Mar 04	
					Curriculum developed	33.3.d Professional Development and Training developed advanced in-service curriculum for Family-Centered Services.	P-Aug 05 A-	
						33.3.e CD administration approved advanced Family-Centered Services in-service training module.	P-Aug 05 A-	
					Training dates	33.3.f Professional Development and Training began training advanced Family-Centered Services curriculum.	P-Sep 05 A-	

Program Improvement Implementation

Program Improvement Implementation								
1			2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
					Curriculum revisions	33.3.g Professional Development and Training evaluated advanced Family-Centered Services training module and made revisions.	P-Mar 06 A-	
						33.3.h Professional Development and Training implemented revised Family-Centered Services advanced in-service training statewide.	P-Sep 06 A-	
				33.4 Develop advanced in-service training module for Family-Centered Out-of-Home Care Services	Workgroup participant list	33.4.a Professional Development and Training formed workgroup to develop Family-Centered Out-of-Home Care Services advanced in-service training module.	P-Jun 04 A-Jun 04	
				Jeff Adams	focus group report	33.4.b Professional Development and Training workgroup conducted focus groups for feedback on Family-Centered Out-of-Home Care Services training needs.	P-Jul 04 A-Jul 04	
						33.4.c Professional Development and Training reviewed Family-Centered Out-of-Home Care Services focus group feedback.	P-Jul 04 A-Jul 04	
					Curriculum developed and reviewed	33.4.d Professional Development and Training developed advanced in-service curriculum for Family-Centered Out-of-Home Care Services and reviewed by OSCA.	P-Oct 05 A-	
						33.4.e CD administration approved advanced Family-Centered Out-of-Home Care Services in-service training module.	P-Nov 05 A-	
					Training dates	33.4.f Professional Development and Training began training advanced Family-Centered Out-of-Home Care Services curriculum in one metro and one rural site.	P-Dec 05 A-	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
					Curriculum revision	33.4.g Professional Development and Training evaluated advanced Family-Centered Out-of-Home Care Services training module and made revisions.	P-Mar 06 A-	
						33.4.h Professional Development and Training implemented revised Family-Centered Out-of-Home Care Services advanced in-service training statewide.	P-May 06 A-	
				33.5 Enhanced On-The-Job (OJT) Training Jeff Adams	Workgroup participant list	33.5.a Professional Development and Training and Children's Services Specialist formed OJT workgroup.	P-Mar 04 A-Mar 04	
					Evaluation tools developed	33.5.b Workgroup developed new evaluation tools for OJT activities.	P-Mar 05 A-Mar 05	
						33.5.c Children's Services Specialists provided enhanced OJT in field and served as clinical mentors/trainers for OJT.	P-June 05 A-Jun 05	
				33.6 Create training advisory Committee to annually assess needs and evaluate training Jeff Adams	Advisory Committee participant list	33.6.a Professional Development and Training created state training advisory committee, including schools of social work.	P-Mar 05 A-Apr 05	
					Mission statement	33.6.b Advisory committee developed a mission statement.	P-Apr 05 A-Pending	
					Written assessment plan	33.6.c Advisory Committee developed a written plan for assessing training needs	P-May 05 A-Pending	
					Written evaluation plan	33.6.d Advisory Committee developed a written plan for evaluating training needs	P-May 05 A-Pending	
						33.6.e Plan submitted to CD administrators for approval	P-Jul 05 A-Pending	
				33.7 Develop Child Abuse and Neglect Training (CA/N) Institute for CD staff	Committee participant list	33.7.a CA/N Training Institute Planning Partnership committee met to finalize topics and session content for upcoming three CA/N Training Institutes	P-Jan 04 A-Jan 04	

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
			Cindy Wilkinson	Training agenda	33.7.b Held first CA/N Training Institute Session	P-Apr 04 A-Jun 04	
				Training agenda	33.7.c Held second CA/N Training Institute	P-Nov 04 A-Nov 04	
				Training agenda	33.7.d Held third CA/N Training Institute	P-Feb 05 A-Feb 05	
			33.8 Provide training based on circuit specific needs	Circuit Self-Assessments	33.8.a Circuits completed Circuit Self-Assessments	P-Aug 04 A-Aug 04	
			Jeff Adams		33.8.b Circuits notified Professional Development and Training Unit of targeted training needs	P-Nov 04 A-Nov 04	
					33.8.c Professional Development and Training Unit to began providing targeted training to circuits based on identified need	P-Jan 05 A-Jan 05	
Item 34: Provision of training for caregivers and adoptive parents that parents addresses the necessary skills and knowledge	X						
Item 35: Service array		X					
			35.1 Increase access and availability to dental services		35.1.a See WB3.22.1.a		
					35.1.b See WB3.22.1.b		
					35.1.c See WB3.22.1.c		
					35.1.d SeeWB3.22.1.d		
			Bonnie Washeck		35.1.e SeeWB3.22.1.e		
			35.2 Increase the ability of staff and families to access Alcohol and Drug Abuse Services (ADA)	Curriculum developed	35.2.a Professional Development and Training developed Family Drug and Safety Training based in focus group information	P-Jan 04 A-Jan 04	
				Training agenda and date	35.2.b Presented Drug training to focus group	P-Feb 04 A-Feb 04	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity			Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
				Jeff Adams	Field test training	35.2.c Field tested drug training in Southwest region	P-Jun 04 A-Jun 04	
					Training agenda	35.2.d Second field test conducted in Jefferson County	P-Nov 04 A-Nov 04	
					Curriculum revised	35.2.e Curriculum revised to reflect recommendations during field test, including target audiences and how many staff	P-Apr 05 A-Apr 05	
					Training dates and sites	35.2.f Completed three additional Family, Drugs and Safety trainings across the state.	P-June 06 A-	
				35.3 Increase availability of specialized foster homes for older youth, siblings, disabled and medically fragile children. Cindy Wilkinson		35.3.a See P1.6.5.a		
						35.3.b See P1.6.5.b		
						35.3.c See P1.6.5.c		
						35.3.d See P1.6.5.d		
						35.3.e See P1.6.5.e		
				35.4 Increase availability of and access to parenting classes and family/parent aide services. Bonnie Washeck	Circuit self-assessment	35.4.a Through circuit self-assessment, determined available parenting classes and family/parent aide services	P-Mar 05 A-Aug 04	
					CTS contracts	35.4.b Developed performance based CTS contracts for family/parent aide and parenting class service	P-Feb 06 A-	
				35.5 Increase services to meet the needs of non-English speaking consumers. Kathryn Sapp	Circuit self-assessments	35.5.a Through circuit self-assessment, determined available interpretive services for non-English speaking clients	P-Mar 05 A-Aug 04	
					Recruitment plans	35.5.b Developed recruitment plan for multi/bilingual staff in circuits with identified need	P-May 05 A-Jul 05	

Program Improvement Implementation

1		2		3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement		Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
							Benchmark	Goal
A	N/A							
					Forms translated	35.5.c Made CD forms available in other languages (Spanish to accommodate growing Hispanic population)	P-Dec 05 A-	
				35.6 Increase availability of transportation services. Bonnie Washeck	Circuit self-assessment	35.6.a Available transportation services determined through circuit self-assessment.	P-Mar 05 A-Aug 04	
						35.6.b Recruited regional service organizations to provide transportation services.	P-May 05 A- Jul 05	
					CTS contracts	35.6.c Issued state-wide transportation contracts.	P-Mar 06 A-	
Item 36: The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP.		X						
				See Item 35, 1-6				
Item 37: The services in item 35 can be individualized to meet the unique needs of children and families served by the agency.		X						
				37.1 Increase access to existing services		See Item 35 1-6		
				37.2 Strengthen worker/supervisor skills in engaging families in the assessment, case		37.2.a See S2.3.2.a		
						37.2.b See S2.3.2.b		
						37.2.c See S2.3.2.c		
						37.2.d See S2.3.2.d		

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
	A	N/A					
			planning and case plan review process to increase parent, caregiver (alternative care provider) and child involvement in case assessment, plan development and reassessment. Kathryn Sapp		37.2.e See S2.3.2.e 37.2.f See S2.3.2.f		
Item 38: Engages in ongoing consultation with critical stakeholders in developing the CFSP	X						
Item 39: Develops annual progress reports in consultation with stakeholders	X						
Item 40: Coordinates services with other federal programs	X						
Item 41: Standards for foster family and child care institutions	X						
Item 42: Standards are applied equally to all foster family and child care institutions	X						
Item 43: Conducts necessary criminal background checks.	X						

Program Improvement Implementation

1		2	3	4	5	6	7
Outcome or Systemic Factors and Item(s) Contributing to Non-Conformity		Goal/Negotiated Measure/Percent of Improvement	Action Steps	Method of Measurement	Benchmarks Toward Achieving Goal	Dates of Achievement	
						Benchmark	Goal
A	N/A						
Item 44: Diligent recruitment of foster and adoptive families that reflect children's racial and ethnic diversity.		X					
			44.1 Increase the number of resource families. Cindy Wilkinson		44.1.a See P1.6.5.a 44.1.b See P1.6.5.b 44.1.c See P1.6.5.c 44.1.d See P1.6.5.d 44.1.e See P1.6.5.e 44.1.f See P 2.12.3.a 44.1.g See P 2.12.3.b 44.1.h See P 2.12.3.c 44.1.i See P 2.12.3.d 44.1.j See P 2.12.3.e		
Item 45: Uses cross-jurisdictional resources to find placements	X						