

**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: February 28, 2006, 4th Quarter ___ Region III ___ Region VI ___ Region IX

A = Achieved
N/A = Not Achieved

***Performance derived using the average of pervious four quarters performance**

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) Performance after 4 Quarters = 82.0%* Exceeds Goal 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		Monitored through CD Outcomes Report Outcome #1: Improve timeliness of initial child contact.			Projected- Dec 2006 Actual-

Program Improvement Implementation

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							Benchmark	Goal
A	N/A							
			tracked quarterly over two year period from CD Outcomes Report).					
				S1.1.1 Clarify policy regarding timeliness of initiating reports of child maltreatment.		All benchmarks have been completed.		
				S1.1.2 Increase accuracy of data regarding initial contact. Kathryn Sapp Susan Savage		S.1.1.2.a Data system entry guidelines clarified for “initial contact”.	P-Aug 05 A-Aug 05	
						S.1.1.2.b As determined, if needed by policy clarification, additional systems entry codes developed to capture accurate data.	P-Feb 06 A-Jan 06	
					PRR revised	S1.1.2.c Revised Peer Record review questions to assess accuracy of coding.	P-Sept 05 A-Oct 05	
					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 quarterly A-Ongoing quarterly	
				S1.1.3 Study feasibility for alternative protocols for managing non CA/N referrals		All benchmarks have been completed.		
				S1.1.4 Develop improvement plan to respond timely to reports of maltreatment		All benchmarks have been completed.		
				S1.1.5 Call Management and Structured Decision Making (SDM) Protocols Implemented at the Child Abuse and	Protocols developed	S1.1.5.a Began development of SDM and Call Management protocols for CA/N HU.	P-Dec 03 A- Dec 03	
						S1.1.5.b Incorporated SDM and Call management protocols into CA/N HU process.	P-Apr 04 A-Apr 04	

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A	N/A							
				Neglect Hotline Unit (CA/N HU) to provide consistent screening and classification of calls received. Charlotte Gooch	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-Sept 05	
						S1.1.5.e CA/N Hotline protocols automated.	P-Sept 05 A-Jun 05	
					PRR revision	S1.1.5.f Added CA/N HU section to the Peer Record Review tool.	P-Sept 05 A-Oct 05	
					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- Jan 2006	
				S1.1.6 Revised policy relating to non CA/N referrals (M,P,N) given the division's need to better address its core functions and statutory mandates, with existing available resources. Kathryn Sapp		S1.1.6.a Defined what statutory core functions are.	P-Dec 05 A-Dec 05	
					Draft plan	S1.1.6.b Developed proposed plan for information dissemination on practice changes regarding non CA/N calls.	P- Dec 05 A-Dec 05	
					Consult with NRC-CPS	S1.1.6.c Consulted with National Resource Center on Child Protective Services regarding non CA/N referrals.	P-Feb 06 A-	
						S1.1.6.d Shared proposed plan with CJA taskforce	P-Mar 06 A-	
					Policy developed	S1.1.6.e Policy changed for CANHU on the screening process for non CA/N calls.	P-Mar 06 A-	
					Training agenda	S1.1.6.f Training provided to CANHU staff on modified protocol changes.	P-Apr 06 A-	
					Notification letter	S1.1.6.g Notified known mandated reporters and other professional organizations on practice changes.	P- May 06 A-	

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A	N/A							
					Disseminate policy	S1.1.6.h Disseminate policy changes to all staff.	P-Jun 06 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)					P-Dec 2006 A-
Recurrence of Maltreatment:		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	4th quarter performance= 5.1%* based on quarterly Outcome Report not NCANDS. NCANDS data not available quarterly.					
				S1.2.1 Ensure consistent and accurate completion of SDM safety and risk assessment.		All benchmarks have been completed with quarterly evaluation of SDM PRR.		
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						

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A	N/A							
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. Susan Savage	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		
					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-Aug 05		
				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 R-Jul 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 R-Jul 06 A-		
				Policy disseminated	S1.2.3.b Disseminate policy and monitor through on going circuit self-assessments, PRR and supervisory oversight.	P-June 05 R-Jul 06 A-		

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A	N/A							
				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.		All benchmarks have been completed.		
			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 Three pilot sites selected (Jasper, McDonald and Newton counties) based on negotiations with Federal partners.	P-July 05 A-Jun 05		
				Training agenda	S1.2.5.e Pilot sites trained by FCS consultants.	P-Jul 05 A-Jun 05		
				IAR Screening Tool	S1.2.5.f Used IAR's screening tool to determine if families meet the CN criteria.	P-Nov 05 A-Oct 05		
				Tracking tool	S1.2.5.g Developed a tool for manual tracking of CN families to be utilized throughout pilot	P-Feb 06 A-		
					S1.2.5.h Initiated pilots.	P-Apr 06 A-		
				Evaluation report	S1.2.5.i CD staff evaluated effectiveness of pilot.	P-Oct 06 A-		

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					Outcome data	S1.2.5.j Based on results determine statewide applicability	P-Nov 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 A-Oct 05	
						S1.2.6.c Informed foster parents of PFDP criteria at assessment and reassessment	P-Aug 05 ongoing A-Oct 05	
					Memo	S1.2.6.d Identify plan to inform CD staff of new requirements for foster parents.	P-Nov 05 A-Dec 05	
					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% 4th quarter PRR results = 78.7%* Goal 84.4% (Goal established is calculated by taking the average of 8 quarters performance		Peer Record Review (PRR) IV-15 Rating of the overall quality of the service plan and service delivery			P-Dec 2006 A-

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						Benchmark	Goal
A	N/A						
		in 2003 and 2004 and adding 5% of the average to measure improvement.)					
			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 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	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	
				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 R-Jan 06 A-Dec 05	
				Training	S2.3.1.g Training of existing staff completed.	P-Jan 06 A-Feb 06	
					S2.3.1.h Incorporated changes into BASIC training.	P-Jan 06 A-Feb 06	
			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		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	

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A	N/A							
				reassessment. Bonnie Washeck		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-Oct 05	
					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 A-Feb 06	
				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-Sep 05	
						S2.3.3.c Supervisory case review tool field tested by selected supervisors.	P-Sept 05 A-Sep 05	
					Feedback summary	S2.3.3.d Feedback from field testing reviewed by review team.	P-Jan 06 A-Dec 05	
					Tool revision	S2.3.3.e Supervisory case review tool revised as needed.	P-Jan 06 A-Jan 06	
					Protocol established and manual revision	S2.3.3.f Protocol for supervisory case review established and manual revisions made.	P-Jan 06 A-Jan 06	
						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-Aug 05	

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A	N/A						
				Guidelines distributed	S2.3.4.b Distributed service access funding grid and guidelines to all staff.	P-Sept 05 A-Feb 06	
			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.		All benchmarks have been completed.		
Item 4: Risk of harm to child(ren)	X	Baseline 89.4% 4th quarter PRR results = 89.5%* 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.)		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.		All benchmarks have been completed.		
			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		

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A	N/A						
					S2.4.2.f See to S1.2.2.f		
			S2.4.3 Implement enhanced background screening for foster/kinship and court ordered providers.		All benchmarks have been completed.		
			S2.4.4 Development of “Culture of Care Initiative” for improving safety and nurturance of children in a residential care setting.		All benchmarks have been completed with ongoing monitoring of POE reports received by residential facilities.		
			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 specifically related to child safety and risk concerns. Kathryn Sapp		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 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		X	Stability in foster care. Nat’l Standard				P-Dec 2006

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A	N/A							
placement			86.7% or more 4th quarter performance based on quarterly outcomes report = 74.9%* not AFCARS formula. AFCARS data not available. MO FFY 2003 78.6% AFCARS Goal 80.5% (Based on Federal formula for goal setting)					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	
					Policy disseminated	P1.6.1.b Coding changes in Legacy completed.	P-May 05 A-May 05	
					Data converted	P1.6.1.c Policy updated and distributed to CD staff.	P-Aug 05 A-Sep 05	
					Quarterly Outcome Report	P1.6.1.d Staff will convert existing data to reflect accurate placement types.	P-Dec 05 A-Feb 06	
					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.		All benchmarks have been completed.		

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	A	N/A						
				P1.6.3 Expand use of family support team meetings to promote stability in alternative care placements		All benchmarks have been completed.		
			P1.6.4 Identify resource family types and shortages Cindy Wilkinson	Circuit data	P1.6.4.a Resource and recruitment contractors worked with circuits to determine resource family needs.	P-Mar 05 A-Apr 05		
				Circuit management plan	P1.6.4.b Recruitment plan targeting resource families written into a circuit management plan to address identified need.	P-May 05 A-Jul 05		
				Contract extension	P1.6.4c Extended current Foster Care/Adoption Resource Services contract	P-Nov 05 A-Nov 05		
				Circuit progress reports	P1.6.4d Circuit reported quarterly progress on recruitment activities	P-Feb 06 quarterly A-		
				NRC Technical Assistance plan	P1.6.4e Consulted with the National Resource Center for Family Centered Practice and Permanency Planning regarding recruitment of resource families.	P-Mar 06 A-Jan 06		
			P1.6.5 Increase number of resource families Cindy Wilkinson	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 A-Jun 04		
				Adopt US Kids campaign	P1.6.5.b Implemented Adopt US Kids campaign.	P-Jul 04 A-Jul 04		
				Request for Proposal	P1.6.5.c RFP written and released for performance based case management contracts (PBC).	P-Apr 05 A-Apr 05		
				Award letters	P1.6.5.d Awarded PBC contracts.	P-Jun 05 A-Jun 05		
					P1.6.5.e PBC Case Management Services began	P-Sep 05 A-Sep 05		

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A	N/A							
					Contract extension	P1.6.5.f Extended current Foster Care/Adoption Resource Services contract.	P-Nov 05 A-Nov 05	
					ACTS data report	P1.6.5.g Quarterly report on PBC contractors' performance on stated child outcome on safety, permanency, and stability.	P-Feb 06 quarterly A-	
					NRC Technical Assistance plan	P1.6.5.h Consulted with the National Resource Center for Family Centered Practice and Permanency Planning regarding recruitment of resource families.	P-Mar 06 A-Jan 06	
					Annual report	P1.6.5.i Annual report to General Assembly regarding PBC regarding case management, recruitment and training outcomes.	P-Jul 06 annually A-	
				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 A-Jan 06	
				Cindy Wilkinson	Survey results	P1.6.6.b Surveyed resource families to gather information regarding placement stability.	P-May 06 A-	
						P1.6.6.c Developed a placement matching tool designed for use in team decision making.	P-Oct 06 A-	
					Matching tool developed disseminated	P1.6.6.d Tool disseminated with instructions.	P-Nov 06 A-	
						P1.6.6.e Tool incorporated into BASIC training and supervisory oversight provided to existing staff.	P-Dec 06 A-	

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			P1.6.7 Evaluate support and training provided for relative/kinship resource families Cindy Wilkinson Jeff Adams	Survey Analysis report Curriculum revision	P1.6.7.a Surveyed current relative caregivers on the adequacy of the Caregiver who Knows the Child training curriculum. P1.6.7.b Data Collected and analyzed. P1.6.7.c Based on curriculum modifications, training to began to be delivered to newly licensed relative/kinship providers.	P-Dec 05 A-Feb 06 P-Feb 06 A- P-Sep 06 A-	
Item 7: Permanency goal for child	X	Baseline 85.9% 4th quarter PRR results = 83.5%* 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		All benchmarks have been completed. Ongoing PRR monitoring.		
			P1.7.2 Improve quality of Family Support Teams (FSTs) to ensure permanency goal is reviewed and established	Policy developed	P1.7.2.a Made ACTS systems changes to track permanency reviews separately from FSTs. P1.7.2.b Policy written on ACTS systems changes and elements necessary for permanency reviews.	P-Aug 04 A-Aug 04 P-Sep 04 A-Aug 04	

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				Kathryn Sapp Cindy Wilkinson	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-Jul 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 R-Jan 06 A-Jan 06	
					Memo disseminated	P1.7.2.h Memo describing expert facilitator access protocol and expert facilitator duties distributed to all staff.	P-Apr 05 R-Jan 06 A-Feb 06	
				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 Division staff on ASFA & Permanency hearings consistent with state and federal regulations.		All benchmarks have been completed. Continue bi-annual training with OSCA.		

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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						
		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). 4th quarter performance based on quarterly outcomes report = 68.2 %* 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.		All benchmarks have been completed.		
			P1.8.2 Establish procedures to access various service funding streams. Bonnie Washeck		P1.8.2.a See S2.3.4.a. P1.8.2.b See S2.3.4.b.		

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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						
				P1.8.3 Ensure frequency and timeliness of Family Support Team Meetings occurs per policy.		All benchmarks have been completed.		
				P1.8.4 Improve quality of Family Support Teams to assure the review of permanency goal. Kathryn Sapp Cindy Wilkinson		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 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.		All benchmarks have been completed.		
				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.		All benchmarks have been completed.		

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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						
			P1.8.7 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.		All benchmarks have been completed.		
			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	
					P1.8.8.b See P1.6.1a	A-Oct 05	
					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.	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	

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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 Kathryn Sapp	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	
					Policy disseminated	P1.9.1.d Policy disseminated to staff and supervisory oversight	P-Aug 05 R-Mar 06 A-	
						P1.9.1.e Incorporated into BASIC training.	P-Jun 05 R-Mar 06 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.		All benchmarks have been completed.		
				P1.9.4 Improve access to legal representation for CD staff.		All benchmarks have been completed.		
Item 10: Other planned living arrangement		X	Baseline 63.6% 4th quarter results for PRR V-22 = 52.7%* Goal = 66.4% Baseline 63.3%		PRR V-22 Youth 16 or older have an ILP plan documented in the case record (CS-1 Att.)			

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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						
		Goal = 66.4% 4th quarter results for PRR V-21 = 71.5%* Goal achieved 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-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 resource families for older youth Cindy Wilkinson		P1.10.1.a See P1.6.5.a P1.10.1.b See P1.6.5.b 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	
				Recruitment activities report	P1.10.1.g Met with IL Specialists to report on community recruitment activities.	A-Mar 05 P-Jun 05	
					P1.10.1.h Incorporated Ready, Set, Fly curriculum and Chafee video into foster parent training.	A-Jun 05 P-Sep 05	
			P1.10.2 Increase awareness of Chafee program services to staff and community members.		All benchmarks have been completed. Continue annual SYAB conference and providing Chafee information.	A-Sep 04	

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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						
			P1.10.3 Increase program accessibility to provide life skills training services for older youth.		All benchmarks have been completed. Continue annual SYAB conference and consulting with SYAB on older youth needs.		
Permanency Outcome P2:							
Item 11: Proximity of foster care placement	X						
Item 12: Placement with siblings		X	Baseline 85.6 4th quarter PRR results = 85.8%* Goal 89.9% (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 V-4: Siblings are placed together or there is ongoing visitation			P-Dec 2006 A-
			P2.12.1 Increase the number of siblings placed together Kathryn Sapp	Policy developed Policy enhancement PRR results & Improvement plans	P2.12.1.a Policy developed for FST to be required prior to separating siblings at any time during placement episode. P2.12.1.b Enhanced policy addressing the continual need for maintaining sibling relationship. P2.12.1.c Circuit Managers monitored quarterly PRR results and improvement plans developed.	P-Aug 04 A-Aug 04 P-Aug 04 A-Aug 04	
						P-Feb 05 Ongoing Quarterly A-Ongoing	

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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							
					Administrative review developed	P2.12.1.d Developed administrative process to review cases after siblings are separated after 30 days.	P-Nov 05 R-Apr 06 A-	
			P2.12.2 Develop an ongoing training module regarding sibling placements for staff, foster parents, and juvenile court staff. Jeff Adams			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 A-Dec 05	
						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				
				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 A-		
			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 % 4th quarter PRR results = 84.5%*		Parents' visits monitored through PRR Question V-13.			

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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							
			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% 4th quarter PRR results = 85.8%* Goal 89.9% (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).		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-
				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 R-Jul 06 A-	
				Cindy Wilkinson		P2.13.1.b Incorporated policy revision into BASIC training and supervisory oversight provided to existing staff.	P-Sept 05 R-Aug 06 A-	
					PRR	P2.13.1.c Incorporated revisions into PRR tool.	P-Sept 05 R-Aug 06 A-	
					Revised policy and training module	P2.13.1.d Policy revision incorporated and staff training began: Advanced FCOOHC In-Service training module.	P-May 06 R-Aug 06 A-	

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							Benchmark	Goal
A	N/A							
					Quarterly data reports	P2.13.1.e Circuit Managers monitor data regarding frequency of parent/child/sibling visits.	P-Oct 05 R-Nov 06 A-	
					Practice improvement plans developed	P2.13.1.f Circuit Managers assisted by the PET teams developed practice improvement plans using all available data for guidance.	P-Oct 05 R-Nov 06 A-	
Item 14: Preserving connections		X	Baseline 23.3% 4th quarter performance = 25.0%* Goal 25.6% Baseline 83% 4th quarter results for PRR = 84.0 %* 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.		Relative Placement CD-Outcomes #17. Increase the number of children placed with relative provider PRR V-1 Consideration was given to relatives or kin for placement.			P-Dec 2006 A-
				P2.14.1 Increase emphasis on preserving familial and community connections for children in out of home care.	Evaluation report	P2.14.1.a Evaluated Family-to-Family program regarding applicability for statewide implementation.	P-May 05 A-Jan 06	
						P2.14.1.b Submitted evaluation recommendations to administration.	P-July 05 A-Jan 06	

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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		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-Jan 06	
					State plan developed	P2.14.1.d Develop state plan to address preserving connections.	P-Oct 05 A-Feb 06	
				P2.14.2 Improve diligent search for relatives/missing parents.		All benchmarks have been completed.		
				P2.14.3 Revise ICWA policy	Policy revision	P2.14.3.a Revised ICWA policy to reflect best practice standards.	P-Aug 04 A-Aug 04	
				Cindy Wilkinson Kathryn Sapp	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-Dec 05	
					PRR	P2.14.3.d Add ICWA question to Peer Record Review tool.	P-Sept 05 A-Mar 05	
					PRR quarterly data reports	P2.14.3.e Establish a baseline for ICWA for Peer Record.	P-Sept 05 A-Jun 05	
Item 15: Relative placement		X	Baseline 25.9% 4th quarter Outcome Reports results = 28.0%* Goal achieved Goal 27.2% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and		Relative Placement monitored through the number of children placed with relative provider in legal status 1-4		P-Dec 2006 A-	

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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). Progress to be tracked quarterly over two year period from CD Outcomes Report Baseline 83.0% 4th quarter PRR results = 84.0%* Goal 87.2% (Goal established is calculated by taking the average of 8 quarters performance adding 5% of the average to measure improvement).		Monitored through Peer Record Review question V-1: Consideration was given to relatives or kin for placement			
			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.		All benchmarks have been completed.		
			P2.15.3 Evaluate support and training		P2.15.3.a See P1.6.7.a P2.15.3.b See P1.6.7.b		

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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						
			provided for relative/kinship resource families Cindy Wilkinson Jeff Adams		P2.15.3.c See P1.6.7.c		
Item 16: Relationship of child in care with parents	X	Baseline 91.0% 4th quarter PRR results = 90.1%* Goal 91.9% (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).		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-
			P2.16.1 Improve diligent search for non-custodial parent.		All benchmarks have been completed.		
			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.	PRR Outcomes	P2.16.2.a See S2.3.2.a P2.16.2.b See S2.3.2.b P2.16.2.c See S2.3.2.c P2.16.2.d See S2.3.2.d P2.16.2.e See S2.3.2.e P2.16.2.f See S2.3.2.f		

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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						
			Increase parent, caregiver (alternative care provider) and child involvement in case assessment, plan development and reassessment. Kathryn Sapp				
Well Being Outcome 1 Families have enhanced capacity to provide for children's needs							
Item 17: Needs and services of child, parents, foster parents	X	Baseline 82.1% 4th quarter PRR results = 80.9%* Goal 86.2% Baseline 91.0% 4th quarter PRR results = 89.6%* 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-10 Rating for the overall quality of the comprehensive assessment. PRR III-3 The needs of the family/child are identified.			P-Dec 2006 A-
			WB1.17.1 Improve family assessment and		WB1.17.1.a See S2.3.1.a WB1.17.1.b See S2.3.1.b		

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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							
				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.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		
			Baseline 80.4% 4th quarter PRR results = 78.7 %* 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 Strength 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		WB1.17.3.a See S1.2.2.a		

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							Benchmark	Goal
	A	N/A						
				Implementation of "Confirming Safe Environments" to reduce the risk for children in foster/kinship care to identify needs of child and providers. Cindy Wilkinson		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		
Item 18: Child and family involvement in case planning.		X	Baseline 74.1% 4th quarter PRR results = 74.8 %* 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-Aug 05	
				WB1.18.2 Improve the quality of Family Support Team		WB1.18.2.a See P1.7.2a WB1.18.2.b See P1.7.2b WB1.18.2.c See P1.7.2c		

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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							
				Meetings. Kathryn Sapp Cindy Wilkinson		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		
			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-Aug 05	
				Workgroup list		WB1.18.3.b Convened a work group to evaluate parent handbooks.	P-Oct 05 A-Sep 05	
				Parent handbook		WB1.18.3.c Developed a universal parent handbook.	P-Jan 06 A-Jan 06	
				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% 4th quarter PRR results = 77.3%* exceeds goal 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	Team appointments	WB1.19.1a Appointed visitation policy and practice team.	P-Jan 05 A-Feb 05	

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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							
				quality of visits to incorporate case planning, service delivery and goal attainment. Bonnie Washeck	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 R-Apr 06 A-	
					Recommendations reviewed	WB1.19.1.d Recommendation reviewed by policy review team and executive staff.	P-Jun 05 R-May 06 A-	
						WB1.19.1.e Policy disseminated to staff.	P-Aug 05 R-Jul 06 A-	
						WB1.19.1.f Utilize Practice Enhancement Teams (PET) to support protocols.	P-Aug 05 R-Jul 06 A-	
				WB1.19.2 Increase policy compliance for frequency of worker visits for intact and out-of-home cases.		All benchmarks have been completed. Quarterly circuit workload reports.		
				WB1.19.3 Tracking system to track worker visits (date/site). Jim Harrison		WB1.19.3.1.a Enhancements made to the existing ACTS and FCS system.	P-Feb 06 A-	
						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% 4th quarter PRR results = 85.6%* Goal 89.5% (Goal established is calculated by taking the average of 8 quarters performance in 2003 and 2004 and adding 5% of the		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-

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							Benchmark	Goal
A	N/A							
			average to measure improvement).					
				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 R-Apr 06 A-	
						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		

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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							
		X	Baseline 95.6% 4th quarter PRR results = 94.8%* 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.)		PRR V-18 The child is at grade level and receiving appropriate educational services.			P-Dec 2006 A-
				WB2.21.1 Improve working relationship among Children's Division, Department of Elementary and Secondary Education (DESE) and local school districts.		All benchmarks have been completed.		
				WB2.21.2 Improve the flow of educational records and reports when children transfer schools. Kathryn Sapp Cindy Wilkinson	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	
					Residential Facility contracts	WB2.21.2.b. Incorporated accountability measures for transfer of educational records into Residential Facility contracts.	P-Jun 05 R-Jan 06 A-Feb 06	

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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							
				WB2.21.3 Decrease the incidence of educational neglect, truancy and suspension of children in care. Cindy Wilkinson Kathryn Sapp		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	
					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-Nov 05	
					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-Nov 05	
					Protocol developed	WB2.21.3.e Protocol developed for children expelled due to the Safe School Act.	P-Oct 05 A-Nov 05	
					Protocol disseminated	WB2.21.3.f Protocols distributed to staff and shared with local school districts.	P-Nov 05 A-Feb 06	
						WB2.21.3.g Protocols incorporated into BASIC and foster parent training.	P-Dec 05 A-Feb 06	
				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	

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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						
				Distribute youth training video	WB2.21.4.c Distribute Youth Training Video for teacher in-service training.	P-Sep 05 A-Nov 05	
				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-Nov 05	
				Protocol developed	WB2.21.4.e Protocol developed for children expelled due to the Safe School Act.	P-Oct 05 A-Nov 05	
				Protocols disseminated	WB2.21.4.f Protocols distributed.	P-Nov 05 A-Feb 06	
					WB2.21.4.g Protocols incorporated into BASIC training.	P-Dec 05 A-Feb 06	
Well-Being 3 (WB3): Children receive adequate services to meet their physical and mental health needs.							
Item 22: Physical health of the child	X	Baseline 96.9% 4th quarter PRR results = 96.1%* 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-

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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							
				WB3.22.1 Increase ability of Children's Division staff and families to access available dental resources.		All benchmarks have been completed.		
				WB3.22.2 Increase capacity of staff to assess medical needs of children in intact families. Bonnie Washeck	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 R-Dec 05 A-Dec 05	
					Training curriculum	WB3.22.2.c Existing staff trained in Assessment and Service Planning using CD-14 as tool statewide.	P-Oct 05 R-Jan 06 A-Feb 06	
						WB3.22.2.d Integrated CD-14 into Advanced Family-Centered In-service training module.	P-Jan 06 A-Feb 06	
Item 23: Mental health needs of the child		X	Baseline 96.4% 4th quarter PRR results = 96.0%* 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-

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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						
				WB3.23.1 Increase the ability of Children's Division staff and families to access available mental health resources.		All benchmarks have been completed.		
				WB3.23.2 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		X						

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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						
of children in foster care.							
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.		X	Baseline 80.4% 4th quarter PRR results = 78.7%* 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		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		

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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							
				assessment, plan development and reassessment. Kathryn Sapp		25.2.f See S2.3.2.f		
				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-	

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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) 4th Quarter performance = 56.0%* 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		All benchmarks have been completed.	
				26.2 Recruit 3 rd party participants for Administrative Reviews	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-Nov 05
				Cindy Wilkinson		26.2.b Circuit Managers scheduled and assigned individual reviewers to cases.	P-May 05 R-May 06 A-
				26.3 Increase ability to track 6 month Administrative Reviews separately from FSTs.		All benchmarks have been completed.	

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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							
		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 1/31/06 = 92.3% Goal 88.0% with a 2% increase					P-Dec 2006 A-
				27.1 Improve access to legal representation for CD.		All benchmarks have been completed.		
				27.2 Implement training to develop testifying skills for CD staff. Jeff Adams		27.2.a Current curriculum evaluated by Division of Legal Services.	P-Apr 05 A-Dec 04	
						27.2.b Obtained technical assistance from DLS, NRC and OSCA.	P-Jun 05 A-Jul 05	
					Curriculum modified	27.2.c Based on evaluation and technical assistance curriculum modified.	P-Oct 05 A-Oct 05	
						27.2.d Modified curriculum approved.	P-Dec 05 A-Dec 05	
					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		27.3.a See 27.2.a		
						27.3.b See 27.2.b		

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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 Cindy Wilkinson Kathryn Sapp		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 R-Apr 06 A-	
				27.4 Provide cross training to judiciary, court staff, GALs and Children's Division staff on ASFA & Permanency hearings consistent with state and federal regulations.		All benchmarks have been completed.		

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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 28: Provides a process for termination of parental rights proceedings in accordance with provisions of ASFA.		X	Baseline 83.4% 4th Quarter PRR results = 88.1%* Goal achieved 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.		All benchmarks have been completed.		
			28.2 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		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 28.2.f See S2.3.2.f		
			28.3 Termination of Parental Rights will be filed in a timely		28.3.a See P1.9.1a 28.3.b See P1.9.1.b 28.3.c See P1.9.1.c		

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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							
				manner, except when compelling reasons are documented. Cindy Wilkinson		28.3.d See P1.9.1.d 28.3.e See P1.9.1.e		
				28.4 Improve diligent search for relatives/parents.		All benchmarks have been completed.		
				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-Aug 05	
						28.5.b Written proposal reviewed by OSCA and the Department.	P-Oct 05 A-Aug 05	
					Meeting agenda	28.5.c Meetings held between OSCA and the Department of Social Services to finalize proposal.	P-Nov 05 A-Aug 05	
					Draft legislation	28.5.d Advocated for proposed legislation.	P-Jun 06 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		X		29.1 Increase ability of foster parents to be notified of and heard in court.		All benchmarks have been completed.		

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						Benchmark	Goal
A	N/A						
held with respect to the child.							
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	
			Jeff Adams	Training agenda	33.1.b Implemented Module Four of the CPS Supervisor Training Project.	A-Feb 04	
				Training agenda	33.1.c Implemented Module Five of the CPS Supervisor Training Project.	P-Mar 04 A-Apr 04	
				Training agenda	33.1.d Implemented Module Six of the CPS Supervisor Training Project.	P-Jul 04 A-Aug 04	
				Debriefing report	33.1.e CPS Supervisor Training Project Debriefing.	P-Oct 04 A-Nov 04	
				List of trainings offered	33.1.f HRC supervisor administrative pre-service training began for CD supervisors.	P-Dec 04 A-Dec 04	
						P-Dec 04 A-Nov 04	

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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 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-Aug 05	
						33.1.i Professional Development and Training selected one rural and one metro field test site.	P-Aug 05 A-Aug 05	
						33.1.j Professional Development and Training field tested curriculum in two test sites	P-Sep 05 A-Sep 05	
					Evaluation report	33.1.k Professional Development and Training evaluated field test results	P-Jan 06 A-Jan 06	
					Curriculum revised	33.1.l Professional Development and Training, revised curriculum based on evaluation	P-Jan 06 A-Jan 06	
						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 assessments		All benchmarks have been completed.		
				33.3 Develop advanced in-service training module for Family- Centered Services	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	
				Jeff Adams	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	

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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							
						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-Aug 05	
						33.3.e CD administration approved advanced Family-Centered Services in-service training module.	P-Aug 05 A-Sep 05	
					Training dates	33.3.f Professional Development and Training began training advanced Family-Centered Services curriculum.	P-Sep 05 A-Oct 05	
					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	

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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 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-Oct 05	
						33.4.e CD administration approved advanced Family-Centered Out-of-Home Care Services in-service training module.	P-Nov 05 A-Feb 06	
					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-Feb 06	
					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		All benchmarks have been completed.		
				33.6 Create training advisory Committee to annually assess needs and evaluate training	Core team members	33.6.a Created a core team consisting of social work specialists, supervisors, workers and trainer to enhance the provision of On-the-Job Training (OJT).	P-Jan 06 A-Jan 06	
				Jeff Adams	Core skills and competencies identified	33.6.b Identified core skills/competencies that CD will expect new staff to have after completing BASIC.	P-Apr 06 A-	
						33.6.c Supervisors used beginning skills/guide list with workers.	P-Apr 06 A-	
					Activities list	33.6.d Provided activities for staff to practice during OJT, after BASIC	P-Apr 06 A-	

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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							
						33.6.e Supervisors commented on the skills/guide list.	P-Jun 06 A-	
						33.6.f Skills guide/list available for statewide use by supervisors.	P-Aug 06 A-	
					Advisory committee list	33.6.g Expanded core team to include external partners to develop a review process for the enhanced OJT.	P-Sep 06 A-	
						33.6.h Began review process to assess effectiveness.	P-Oct 06 A-	
				33.7 Develop Child Abuse and Neglect Training (CA/N) Institute for CD staff.		All benchmarks have been completed.		
				33.8 Provide training based on circuit specific needs.		All benchmarks have been completed.		
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.		All benchmarks have been completed.		
				35.2 Increase the ability of staff and families to access Alcohol and Drug Abuse Services.	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	
				Jeff Adams	Training agenda and date	35.2.b Presented Drug training to focus group	P-Feb 04 A-Feb 04	

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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							
					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-Dec 05	
				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-Feb 06	
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		37.2.a See S2.3.2.a 37.2.b See S2.3.2.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						
			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		37.2.c See S2.3.2.c 37.2.d See S2.3.2.d 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	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						
necessary criminal background checks.								
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							