# PINNACLE PLAN MEASURES

# SEMI-ANNUAL SUMMARY REPORT

# August 2018

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# Overview

The Oklahoma Department of Human Services (DHS) is committed to improving the safety, permanency, and well-being of children served by the child welfare (CW) system.   The Pinnacle Plan is the roadmap and public reporting is critical to ensuring transparency and accountability.  The OKDHS Metrics, Baselines, and Targets Agreement - 3/7/13 outlines how the outcomes and other indicators are measured and reported.  Monthly and Semi-Annual Reports are made available to the public.

Oklahoma is committed to good faith efforts and positive trending toward the goals outlined in the plan.  Twice per year DHS provides an analysis in which the agency outlines:  (1) the strategies employed to improve performance in the areas identified in the Compromise and Settlement Agreement; and (2) the progress toward improving performance.  The report includes an update regarding performance improvement strategies implemented to date and, when possible, an assessment of the effectiveness of those strategies.  Each semi-annual report addresses seven performance areas comprised of 27 specific metric elements.  The seven areas are:  Foster Care Safety, Counts for New Foster Homes, Worker Contacts, Placement Stability, Shelter Usage, Permanency Timeliness, and Workloads.

The Compromise and Settlement Agreement requires the Co-Neutrals to determine the extent to which DHS makes good faith efforts to achieve substantial and sustained progress toward each Target Outcome.  This report summarizes the most significant strategies implemented for each Target Outcome and, where possible, draws connections between those efforts and progress toward the Target Outcomes established in the Metrics, Baselines, and Targets Agreement.

# Measurement Notes

DHS was the first state agency in the nation to have a federally approved Statewide Automated Child Welfare Information System (KIDS) and continues to strive for high quality data.  **The findings in this report are subject to change due to ongoing data entry, changes in policy, changes in practice, and changes in definitions, or data quality issues that may be discovered through the process.**

# Organization of the Report

To align the metrics in this report with the elements of a continuous quality improvement (CQI) process, DHS believes it is important to clarify how the various metrics relate to the levers that DHS can potentially influence to improve outcomes for children in care.

The CQI process is based on the premise that improving outcomes for children requires some degree of system reform and system reform involves changing one or more elements of the traditional way of doing business:  (1) the process of care, (2) the quality of care, and (3) the capacity to deliver care.  Process changes pertain to how the work is done; quality changes pertain to how well it is done; and capacity changes pertain to the tangible resources the agency devotes to delivering care.  CQI presumes that a combination of these three types of reforms will lead to improved outcomes (i.e., safety, permanency, and well-being) for children.

To clarify how the various Settlement Agreement metrics relate to these particular aspects of DHS' ongoing reform efforts, the report begins with some contextual information and is then organized by metric type:

**SECTION 1: Contextual information.** This section provides a general description of entry and exit trends since the enactment of the Settlement Agreement and trends in the demographic profile of the children captured during the history of reporting periods.

**SECTION 2: Child outcomes.** This section reports on metrics related to safety and permanency outcomes for children in care.  These include indicators pertaining to **maltreatment in care, frequency of worker contacts**, **placement stability, shelter placement,** and **permanency**.

**SECTION 3: Capacity indicators.** This section reports on metrics designed to measure the capacity of DHS to deliver foster care services.  These include metrics pertaining to **foster home development** and **caseload/workload.**

# SECTION 1. Contextual Information

## Entry and Exit Trends

DHS began Pinnacle Plan implementation in July 2012, six months after the Settlement Agreement was reached.  In July 2012, just over 9,000 children were in care, and this number continued to rise before peaking at 11,303 in October 2014.  In November 2014, the number started to decline for the first time since beginning Pinnacle Plan implementation.  As of June 2018, the number of children in care reached 8,443, a 25.3 percent decrease since October 2014, continuing the reduction in the number of children in care.  Section 1, Graph 1 shows the number of children removed and the children who exited care during each month from April 2017 through June 2018.  Throughout SFY 2018, the total number of children exiting care outnumbered the number of children removed.
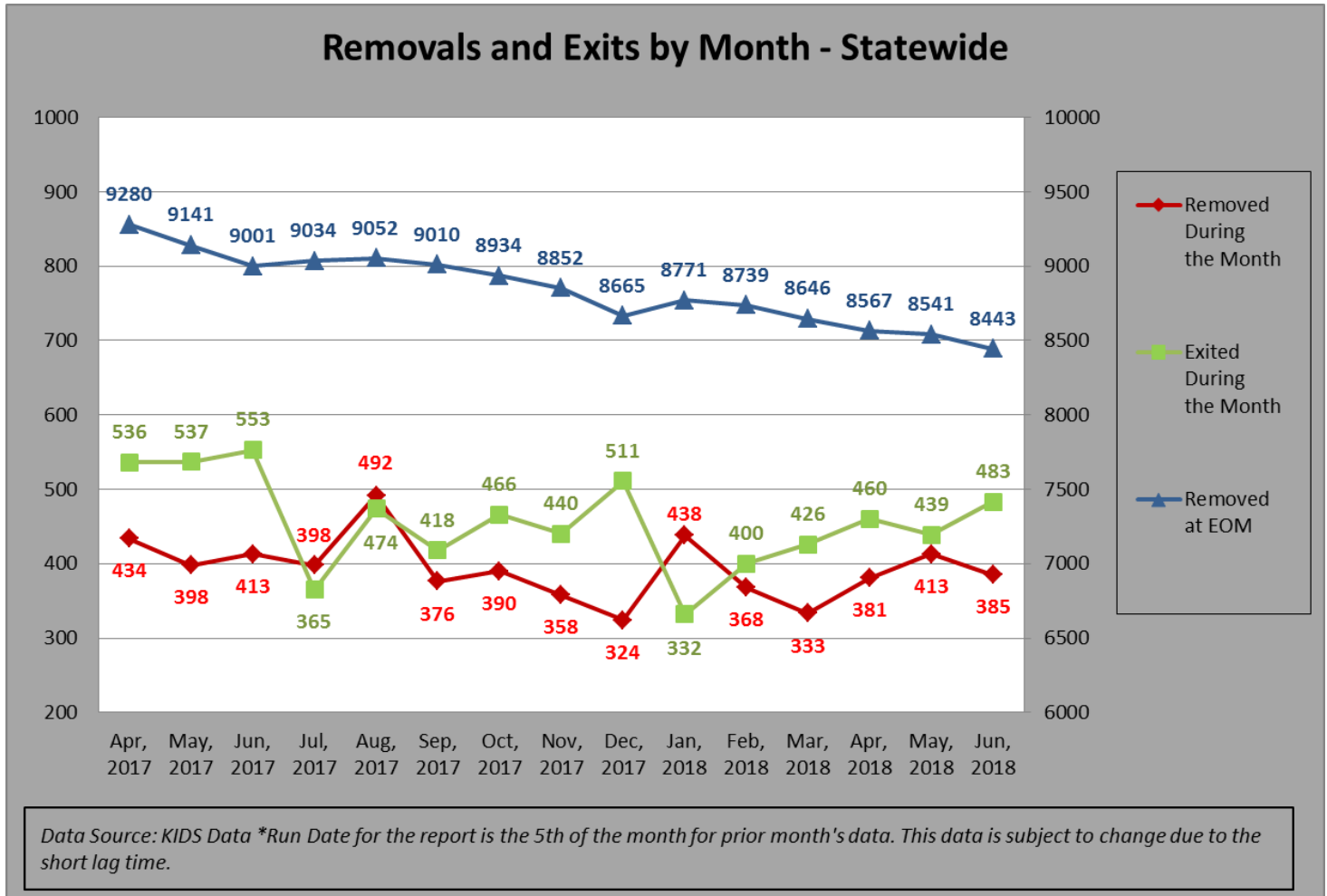


**Section 1, Graph 1**

## Demographic Information by Reporting Period

During the reporting period of April 1, 2017 through March 31, 2018, according to AFCARS, DHS served 14,405 children.  The "served" population includes all children who were in care for at least 24 hours.  This number also includes children in tribal custody.  For the purposes of Pinnacle Plan reporting, children in tribal custody are not included in the measures, except for the Absence of Maltreatment in Care measure that includes all children served.  This leaves a served population of 14,106 excluding children in tribal custody.

Section 1, Charts 1, 2, and 3 show the children's demographics by age, race, and placement type.  For race, when a child claims more than one race, the child is counted in the Multi-Race category.  Hispanic or Latino origin is not counted as a primary race, so when a client indicates that he or she is Hispanic, regardless of any other race selected, the client is

reported in the Hispanic category.  The other races, White, African American, Multi-Race, and Native American, are all Non-Hispanic.

## Total Children Served in Out-of-Home Care
### By Age Groups - Apr. 1, 2017 - Mar. 31, 2018

- 15.07%
- 19.78%
- 33.70%
- 31.45%

Legend:
- 0-1 Years
- 2-5 Years
- 6-12 Years
- Over 13 Years

*Data Source: KIDS Data*
*Pinnacle Context Data*

**Section 1, Chart 1**

## Total Children Served in Out-of-Home Care
### By Race - Apr. 1, 2017 - Mar. 31, 2018

- 18.26%
- 37.19%
- 7.17%
- 28.82%
- 8.41%

Legend:
- White
- African American
- Multi-Race
- Native American
- Hispanic

Asian and Pacific Islander were omitted as they total <0.2% of the population.  Hispanic includes White, African American, Native American, and Multi-Race

*Data Source: KIDS Data*
*Pinnacle Context Data*

**Section 1, Chart 2**

**Section 1, Chart 3**

# SECTION 2. Child Outcomes

## 1.1: Absence of Maltreatment in Care by Resource Caregivers

### Operational Question

Of all children served in foster care during the 12-month reporting period, what percent were **not** victims of substantiated or indicated maltreatment (abuse or neglect) by a foster parent or facility staff member?

### Data Source and Definitions

For the Semi-Annual Report, Oklahoma uses the logic from the official federal metric. This measure is a 12-month period based on the federal fiscal year (FFY) of April 1 through March 31. Oklahoma uses the two official state-submitted Adoption and Foster Care Analysis Reporting System (AFCARS) (17B & 18A) files combined with a non-submitted annual National Child Abuse and Neglect Data System (NCANDS) file covering AFCARS 17B & 18A periods to compute the measure. The NCANDS file used for this report is calculated the same as the file submitted to the federal government, which includes running the data through the official validation tool. However, the official submission to NCANDS occurs only once annually and is due yearly by January 31, so NCANDS data is subject to change until that date.

- Counts of children not maltreated in foster care (out-of-home care) are derived by subtracting the NCANDS count of child maltreatment by foster care (out-of-home care) providers from the AFCARS count of children placed in out-of-home care during the reporting period.
- This metric measures performance over 12 months and differs from the monthly data collected from KIDS.
- The federal metric only counts a victim once during the FFY, even if a child is victimized more than once in the course of a year. In the monthly report, a victim is counted for every substantiated finding of abuse or neglect.
- NCANDS does not include any referral when the report date and completion date do not both fall during the same FFY reporting period.
- The total population in this measure includes tribal custody children, as these children are included in the federal submission to NCANDS.

This measure includes all children placed in traditional foster care homes, kinship homes (relative or non-relative), therapeutic foster care homes, group homes, shelters, and residential facilities.  Oklahoma began including children substantiated for maltreatment by the Office of Client Advocacy (OCA) in institutional settings in March 2013.

## Description of Denominator and Numerator for this reporting period

**Denominator:**   All children served in foster care from 4/1/2017 through 3/31/2018.

**Numerator:**     The number of children served in foster care from 4/1/2017 through 3/31/2018 who did not have any substantiated or indicated allegations of maltreatment by a foster parent or facility staff member during that period.

## Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 4/1/2013 – 3/31/2014 | All children served from 4/1/2013 - 3/31/2014 | 15,605 | 15,806 | 98.73% |
| 10/1/2013 – 9/30/2014 | All children served from 10/1/2013 - 9/30/2014 | 16,066 | 16,272 | 98.73% |
| 4/1/2014 – 3/31/2015 | All children served from 4/1/2014 - 3/31/2015 | 16,410 | 16,640 | 98.62% |
| 10/1/2014 – 9/30/2015 | All children served from 10/1/2014 - 9/30/2015 | 16,543 | 16,808 | 98.42% |
| 4/1/2015 – 3/31/2016 | All children served from 4/1/2015 - 3/31/2016 | 16,323 | 16,548 | 98.64% |
| 10/1/2015 – 9/30/2016 | All children served from 10/1/2015 - 9/30/2016 | 16,037 | 16,244 | 98.73% |
| 4/1/2016 – 3/31/2017 | All children served from 4/1/2016 - 3/31/2017 | 15,571 | 15,753 | 98.84% |
| 10/1/2016 – 9/30/2017 | All children served from 10/1/2016 - 9/30/2017 | 14,929 | 15,113 | 98.78% |
| 4/1/2017 – 3/31/2018 | All children served from 4/1/2017 - 3/31/2018 | 14,229 | 14,405 | 98.78% |
| Target | | | | 99.68% |

**Section 2, Table 1.1-1**
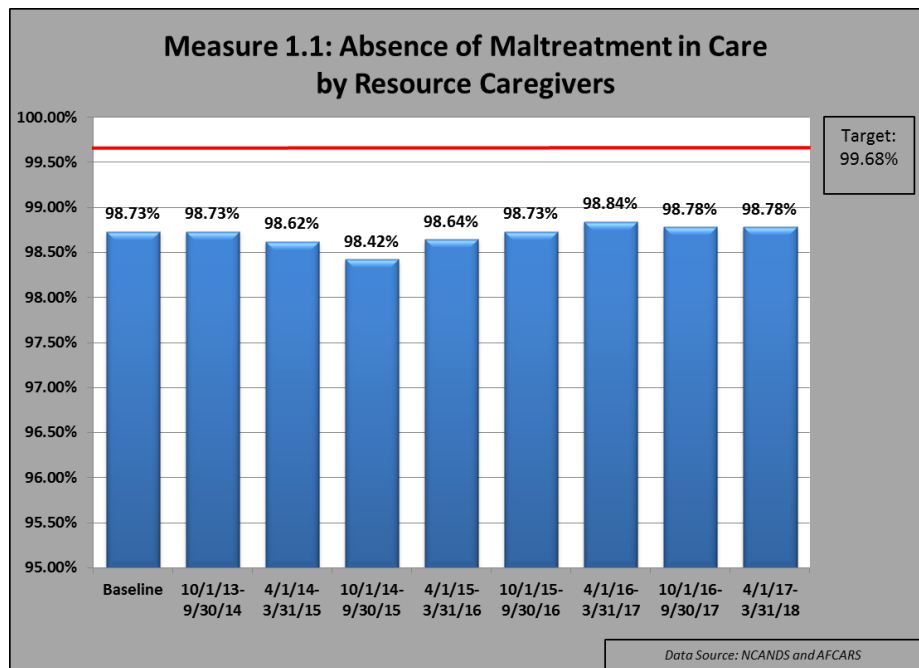


**Section 2, Graph 1.1-1**
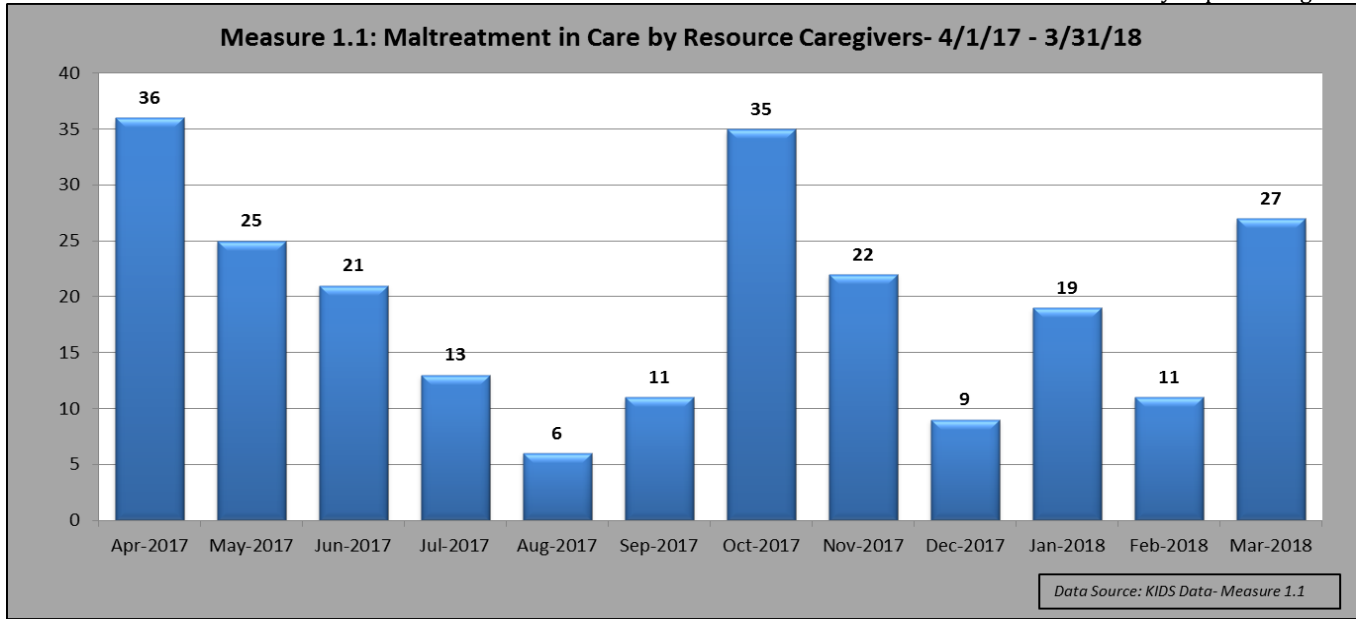
Section 2, Graph 1.1-2

| Children in Out-of-Home Care April 1, 2017 - March 31, 2018 | | | | | | Ending 3/31/18 |
|---|---|---|---|---|---|---|
| Placement Type | Placement Days | Percent | Placement Type | MIC | Percent | MIC Rate per 100,000 days |
| CW Foster Family Homes | 602,944 | 19.8% | CW Foster Family Homes | 50 | 21.3% | 8.3 |
| CW Foster - Supported Homes | 549,367 | 18.1% | CW Foster - Supported Homes | 19 | 8.1% | 3.5 |
| Kinship Foster Care - Relative | 1,076,819 | 35.4% | Kinship Foster Care - Relative | 68 | 28.9% | 6.3 |
| Kinship Foster Care Non-Relative | 297,417 | 9.8% | Kinship Foster Care Non-Relative | 17 | 7.2% | 5.7 |
| Therapeutic Foster Care Homes | 106,198 | 3.5% | Therapeutic Foster Care Homes | 11 | 4.7% | 10.4 |
| Congregate Care | 206,024 | 6.8% | Congregate Care | 69 | 29.4% | 33.5 |
| Other Foster Family Care | 173,108 | 5.7% | Other Foster Family Care | 1 | 0.4% | 0.6 |
| Other Placements | 30,777 | 1.0% | Other Placements | 0 | 0.0% | 0.0 |
| Total | 3,042,654 | 100% | Total | 235 | 100% | 7.7 |
| Data Source: Pinnacle MIC Data for 12 months ending Mar 31, 2018; Run Date: 6/1/18 and  Placement Days by Resource Type; Run date: 4/5/18 | | | | | | |

Section 2, Table 1.1-2

## Commentary

This indicator is based on the federal measure for maltreatment in care and produces representative information about the incidence of maltreatment in care (MIC).  For NCANDS reporting, 176 victims were reported.

For the reporting period April 1, 2017 - March 31, 2018, 235 substantiations of maltreatment while in out-of-home care were reported in the monthly MIC Pinnacle Plan Measure.  These 235 victims were included in 130 separate referrals: 85 referrals for children in foster care and 45 referrals to the Office of Child Advocacy (OCA).  Of the 235 victims, 166 were placed in foster care settings and 69 were placed in congregate care settings:

Foster Family Care Types:
- 66 children were in a Kinship Foster Care Home Relative (39.8%);
- 17 children were in a Kinship Foster Care Home Non-Relative (10.2%);
- 50 children were in a CW Foster Family Home (30.1%);
- 19 children were in a CW Foster-Supported Home (11.4%);

- 11 children were in a Therapeutic Foster Care Home (TFC) (6.6%);
- 1 child was in a Contracted Foster Care Home (0.6%); and
- 2 children were in Tribal-Approved Foster Care - Kinship (1.2%).

Congregate Care Placement Types:
- 39 children were in a Level C, D, D+, or E Resource Facility (56.5%);
- 8 children were in an Acute Psychiatric Hospital or Psychiatric Residential Treatment Center (RTC) (11.6%);
- 13 children were in an Oklahoma Department of Human Services (DHS) Shelter (18.8%);
- 7 children were in a Youth Services Shelter (10.1%);
- 1 child was in a Non-DHS Operated Facility (1.4%); and
- 1 child was in detention (1.4%).

The difference between the two measures is explained in Data Source and Definitions.

**FOSTER CARE**

| Screen-Out Consultations on Out-of-Home Referrals | | | |
|---|---|---|---|
| Screen-Out Referral  Month | Total Screen-Out Referrals | Screen-Out Referrals with Screen-Out Consultation | % in Compliance |
| Baseline (Sept-Nov 2016) | 312 | 122 | 39.1% |
| Oct-17 | 117 | 100 | 85.5% |
| Nov-17 | 79 | 74 | 93.7% |
| Dec-17 | 65 | 59 | 90.8% |
| Jan-18 | 89 | 83 | 93.3% |
| Feb-18 | 70 | 64 | 91.4% |
| Mar-18 | 93 | 88 | 94.6% |
| TOTAL | 513 | 468 | 91.2% |
| *Data Source: YI790B - Out-of-Home Screen-Out Detail; Run Date: 6/4/18* | | | |

**Section 2, Table 1.1-3**

| 10-day Staffing on Out-of-Home (OOH) Investigations | | | |
|---|---|---|---|
| Investigation Closure Month | Total Children in OOH Referrals Assigned | Children with 10-day Staffing | % in Compliance |
| Oct-17 | 162 | 162 | 100.0% |
| Nov-17 | 151 | 151 | 100.0% |
| Dec-17 | 87 | 87 | 100.0% |
| Jan-18 | 100 | 100 | 100.0% |
| Feb-18 | 131 | 131 | 100.0% |
| Mar-18 | 149 | 149 | 100.0% |
| Total | 780 | 780 | 100.0% |
| *Data Source: YI751 - Out-of-Home Investigations; Run Date: 6/4/18* | | | |

**Section 2, Table 1.1-4**

**MIC Activities/Collaborations in Home-Like Settings**

To improve risk assessments of children in foster care, several activities occurred over the reporting time period.  In November 2017, the deputy director of Foster Care and Adoptions (FC&A)-Field position was created and filled.  The deputy director focused efforts on the resource family reviews and assessments that effect MIC.  During the reporting period a quality assurance (QA) team was developed for FC&A.  The team's focus is on evaluating ongoing practice to impact the quality of foster care assessments, strengthening well-being needs of families and children, and enhancing safety decisions.

The YI025-CPS Referral and WPC for Open Resource Homes report and progress report/scorecard is still sent out monthly.  The deputy director and field managers review the information and use it to guide practice.  The reports contain all foster care homes with an open investigation and/or an open written plan of compliance (WPC).  For easy identification, the report also highlights when a resource has an overdue WPC.

Child Protective Services (CPS) program staff continues to review every out-of-home (OOH) screened-out referral to ensure policy guidelines are adhered to in the decision-making process.  In early 2018, a KIDS enhancement allowed for the review process to be captured in KIDS.  CPS program staff can now review and concur or not concur on each screen-out; document their findings; and, when they don't concur, override the referral and assign for investigation in KIDS.  A report is in development that includes the review information.

Work continued on structuring the Children and Family Services Review (CFSR) Oklahoma Performance Improvement Plan (PIP) with a focus on factors related to child safety and MIC.  The PIP was approved in May 2018 emphasizing areas related to child safety, assessment, and coaching to improve practice. A program supervisor was dedicated to PIP rollout efforts and implementation.

In February 2018, summary information from the continuous quality improvement(CQI)/MIC reviews was again presented to the Child Welfare Services (CWS) Executive Team.  Characteristics were provided from the allegations and incidents of abuse and neglect as well as contributing factors.  The quality of visits and referral history are still the most frequent contributing factors.  The MIC review also includes taking each incident and evaluating separately rather than just looking for ongoing patterns of behavior.  Each regional director was given a copy of the presentation to discuss with his or her regional field staff.  An MIC newsletter sent to child welfare (CW) specialists from the CWS Director highlighted the information from the MIC reviews in February 2018.  The newsletter also contained updated information changes to KIDS and upcoming changes that will assist them in their work and help reduce MIC.

To reduce risk and improve safety in TFC homes, the TFC critical incident staffing calls take place anytime a child is placed in a hold.  The calls include the CW specialists responsible for the child, TFC program staff, CQI/MIC staff, TFC agency staff, and a clinician who discusses the incident that occurred as well as previous incidents.  This creates a group case learning opportunity for change and additional de-escalation tactics are also discussed to prevent another critical incident or MIC in the home.  CQI/MIC staff was also involved with TFC program staff in discussions on changing the training curriculum provided to the TFC foster parents.  The new training curriculum is designed to better prepare the TFC foster parents for the increased needs of the population they will be serving.

The ChildStat meeting was developed to impact the TFC agencies' ability to keep children safe and provide an overall learning experience.  ChildStat meeting planning took place during the review period.  This process is a data-informed practice discussion on how an agency or home investigation produced a substantiation.  This includes areas where intervention could or should have been interjected prior to an MIC incident occurring and ways to use group case learning to prevent MIC incidents.  Group case learning is an opportunity for brainstorming on areas of concern and discussing how to mitigate areas that need improvement, things that went well, and additional interventions that could impact outcomes as needed.  These meetings occur when a TFC agency receives substantiation on an OOH investigation.  All TFC agency directors are part of the meeting, as well as CPS program staff, and behavioral health clinicians to provide various perspectives in the discussion.  The second ChildStat meeting was held on 4/20/2018.

**SACWIS/KIDS**

In February 2018, the Resource Information Sheet was released to CW specialists who carry PP caseloads for assessing resource homes. The information prints off automatically when a child's placement is changed in a home-like setting. The resource information assists the child's CW specialist make a full safety assessment prior to a child's placement, which could reduce MIC. The information includes:

- the number of children currently placed;
- the number of total historical placements;
- the total number of children in the home;
- any open WPC/Investigation information;
- any prior referral history;
- any pets; and
- the family makeup/demographics.

Additionally, a screen-out consultation guide in KIDS is in development. The enhancement will display relevant information about the resource, such as the number of referrals, number of investigations, and number of WPCs, as well as provide staff different text areas to document information that needs to be discussed in the consultation. The proposal includes a signature area for each responsible specialist to ensure accountability, similar to the 10-day staffing. This update is tentatively set to release in November 2018. During this period, planning and development continued on the project to track WPCs within KIDS and the possibility of tracking exception requests and policy violations, which are set to release in November 2018. This enhancement will provide better information on why a WPC was implemented and congregate data to inform practice change.

Alert systems were developed to improve information sharing between CW specialists that share responsibilities. The first alert message in KIDS notifies a resource specialist and supervisor when injuries to a child are documented in the PP Case under the client injury screen. Any time this screen has an injury added, an alert goes to the assigned resource specialist and supervisor. Other alert systems are also planned for later in the year. The contact purposes of "Alert-Resource Notice" and "Alert-Resource Notice Resolved" will be added to the resource contacts. Later, as the alert systems are developed, entering this contact type will alert the PP specialist(s) about the issue entered as an alert. This will keep the involved staff updated on any issues with the resource. These alerts will be used when issues do not rise to the level of a referral, but still need to be addressed.

**MIC Small Groups**

The MIC small groups, facilitated by the Office of Performance Outcomes and Accountability (OPOA) staff, continued to meet separately working on: consistent approval of CW and criminal histories; a QA process for worker visits as well as ways to improve the quality of assessment in a worker visit; and a QA process for screen-out consultations. OPOA staff attended the portions of CORE training that included guidance on worker visits to gain perspective on CW specialists' initial trainings. OPOA attended the certification process and watched as specialists conducted their child interview observations. Also as a silent participant, OPOA staff listened to 10-day staffing phone calls and screen-out consultations to witness first-hand what occurs. The subgroup working on the quality of worker visits held meetings to discuss what made for a quality worker visit by gathering information from all levels of CWS staff, which included field specialists to program administrators. During this period, labor on the quality worker visit form was suspended due to PIP work, which will include the Supervisory Framework. Components of the Framework include supervisors addressing and coaching through field observation, case staffing, and worker conference, which includes worker visits. The subgroup tasked with developing a plan for consistent approval of CW and criminal histories in reference to resource homes continued to meet. The plans changed several times; however, a memo is drafted and will be disseminated once training is created to support the memo's guidance.

**Supervisory Framework**

The Supervisory Framework was adjusted to address deficiencies found from MIC reviews, placement stability reviews, permanency safety consultation fidelity reviews, and ongoing CFSRs. The visitation guides developed in the Supervisory Framework utilize the Capacity Building Center for States Guidance on Defining Quality Contacts. Deficiencies are also

addressed in new worker certification field observations/shadowing, ongoing case consultation, and CW 1006 Permanency training.  During rollout in transformation zone work, all staff will receive training on the purpose and general utilization of the guides.  Supervisors will receive training on how to coach workers towards better practice and how to use the Framework to ensure quality practice occurs.  They will also be trained on the purpose behind all core strategy (CS) work and how various plans, such as the practice model, Pinnacle Plan, CSs, and the PIP work together to improve outcomes for children and families.  Results from the ongoing reviews were used to develop the training.  Any adjustments to supervisor training and the coaching approach will be made a part of the ongoing CQI feedback loop process.

**Foster Home Assessments**
In March 2018, FC&A leadership completed an initial statewide analysis of all resource family assessment (RFA) reviews, which included approximately 4,000 DHS and resource family partner (RFP) resource homes.  Preliminary findings revealed a need to analyze the state reviews further for a better understanding of safe practices prior to and after the RFA Action Plan, which included additional tools, training, policy, and procedural strengthening.  The additional analysis included assistance from KIDS data experts.  FC&A leadership will have a completed state analysis at the beginning of the next semi-annual reporting period.  The analysis will include identifying overall trends of practice and policy issues, concerns, and strengths.  Additionally, the analysis is anticipated to identify specific practice areas that may need strengthening and areas of the state that may require heightened monitoring.

A workgroup consisting of staff from FC&A programs, an RFP agency, TFC programs, an RFA contractor, and the University of Oklahoma Center for Public Management revised the RFA guidelines.  The revision's goal was to update and streamline the RFA guidelines while enhancing the quality of the information captured about resource applicants.  The revision was finalized and submitted to DHS Forms for processing.  FC&A programs staff provided RFA update training to all CW and RFP staff as well as contractors and subcontractors.  The training again focused on updates to the guidelines, utilizing second-level questions to address discrepancies, and the overall assessment.  This training was completed by 4/30/2018.

FC&A leadership is working with KIDS to develop enhancements to assist with monitoring items of concern or interest related to a resource home that were identified by CW staff.  Future KIDS enhancements will include a special contact type with a tracking report and, eventually, an alert that will go to CW staff assigned to the resource as well as CW staff with children placed in the resource.  Currently, staff will receive additional instruction as to how items of concern or interest are documented and tracked.

- If the concern or interest is identified during the initial kinship approval, it will be documented in the *Initial Kinship Safety Evaluation and Approval* document.
- If the concern or interest is identified during the approval process, it will be documented in the *Resource Family Assessment Review* tool.

The *Initial Kinship Safety Evaluation and Approval* document and the *Resource Family Assessment Review* tool will be slightly modified to clarify where to document this information.

When KIDS adds these new contact purposes to the picklist, this information can then be entered as a contact with the purpose of "Alert-Resource Notice."  The specific concern or interest that needs to be monitored must be clearly documented in the contact.  When the concern or interest no longer requires monitoring, staff enters a contact with type or purpose of "Alert-Resource Notice Resolved."  The resolution must be clearly documented in the contact.  Resources with these contact purposes pull to a report for monitoring by Resource staff and staff with children placed in the home.

The initial plan to create a QA process for RFAs was to shift the role of the current eight temporary staff reading RFAs to reviewing a monthly sample of approved RFAs for traditional, supported, and kinship resources.  The number of reviews taking place since May 2017 and staff availability made it difficult to implement a more formalized RFA QA process.  A pilot for the RFA QA process helped identify the need to revise the original proposal.  Utilizing part-time, temporary

employees proved challenging for the purposes of communication, training, and consistency. Therefore, a decision was made to dedicate three full-time program staff positions to oversee QA for FC&A and for a FC&A program analyst to supervise the team. The positions were posted, interviews took place on 5/8/2018, the first staff member started on 5/18/2018 and two additional staff began 6/1/2018.

The QA team completed four training reviews to ensure team consistency and quality reviews. The QA team is using a standard RFA Review Tool, which was created with the input of the CWS CQI team, to review a sample of approved RFAs for traditional, supported, kinship, and adoption resources for the prior month. The first random sample was pulled for review in June 2018. The QA team will complete quarterly debriefings with the field to discuss strengths and any identified trends as a result of the reviews. This will also be done with the RFP agencies quarterly. Over the course of the next six months, CWS will establish a baseline of review data that can then be compared to findings at the end of State Fiscal Year 2019. The qualitative data will be provided to FC&A leadership to determine next steps for practice improvement. FC&A leadership will continue to evaluate the progress and make adjustments as needs are identified.

A qualitative quality review of screen-out consultations began during this period. To assess the quality of the information discussed and documented during a screen-out consultation, 125 screened-out referrals with a screen-out consultation were selected for review. A sample was selected from all OOH screen-outs that had a screen-out consultation process during a 12-month period. The sample was then randomized and 25 screen-outs from each region were selected for review. Prior to the review's start, an instrument was drafted and approved for use. Currently, CQI staff is in the review process looking at the quality of the screen-out consultation, as well as the prior referral history and any referrals after the selected screen-out consultation.

An additional evaluative assessment began on screen-out consultation effectiveness. CQI staff worked with KIDS staff to capture information on screened-out referrals from a time period prior to implementing the screen-out consultation practice and a second time period of screened-out referrals with a screen-out consultation. The evaluation assessed the data to determine if having a screen-out consultation provided an opportunity for all involved CW specialists to have the same information and put in supports to prevent other potential issues, thus averting another Hotline referral. After reviewing the data regarding the screen-out consultations, including the resources with screen-outs prior to 9/1/2016 consultation implementation, the data indicates resources that had a screened-out referral with a screen-out consultation were less likely to have a subsequent screened-out referral. Overall, the data also shows a slight increase in the percentage of resources that had no subsequent MIC incidents following a screen-out consultation, compared to those resources with a screen-out prior to screen-out consultation implementation. The report was completed and provided during the reporting period.

**Data Evaluation**
Graph 1.1-1 displays the percent of children safe in out-of-home care with the target of 99.68 percent. During this reporting period, 98.78 percent of children remained safe in out-of-home care, which is the same as the prior reporting period. Graph 1.1.-2 displays the number of victims each month from April 2017 - March 2018. The number of victims varies each month. Table 1.1.-2 displays from April 2017 - March 2018, the MIC incidents with the placement dates, a rate is developed from the data. This data displays there were 235 victims during the reporting period. During this period, the rate increased to 7.7, from 6.6 during the last semi-annual reporting period. The denominator, which includes the placement days, was reduced over the prior reporting periods. Table 1.1.-3 displays positive trending in the completion of the screen-out consultations by month reaching a high in March 2018 of 94.6 percent. Table 1.1-4 continues to display 100 percent compliance for conducting a 10-day staffing during the investigation process.

## CONGREGATE CARE

| Heighten Monitored Period | Closure Month | Group Home / Shelter 1 | Group Home / Shelter 2 | Group Home / Shelter 3 | Group Home / Shelter 4 | Group Home / Shelter 5 | Group Home / Shelter 6 | Group Home / Shelter 7 | Group Home / Shelter 8 | Total |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | |
| 8th Data Period | Apr-17 | 3 | | | 2 | | | | | 5 |
| | May-17 | 1 | 3 | | 3 | | | | | 7 |
| | Jun-17 | | | 2 | 3 | 1 | | | | 6 |
| 9th Data Period | Jul-17 | | | | 1 | | | | | 1 |
| | Aug-17 | | | | | | | | | 0 |
| | Sep-17 | | | | | 3 | | | | 3 |
| 10th Data Period | Oct-17 | | | | | | 2 | 1 | 3 | 6 |
| | Nov-17 | | | | | | | | | 0 |
| | Dec-17 | | | | 2 | 1 | | | | 3 |
| 11th Data Period | Jan-18 | | | | | | 1 | | | 1 |
| | Feb-18 | | | | | | | | | 0 |
| | Mar-18 | | | | 2 | | | | | 2 |
| TOTAL | | 4 | 3 | 2 | 13 | 5 | 3 | 1 | 3 | 34 |

*Data Source: KIDS Data Measure 1.1 MIC; Run Date: May 31, 2018 - Numbers indicate children with substantiations while in DHS custody and placed at Facility.*

| 7th Period Data ID'd as HMF | 8th Period Data ID'd as HMF | 9th Period Data ID'd as HMF | 10th Period Data ID'd as HMF |
|---|---|---|---|

**Section 2, Table 1.1-5**

**Children with Substantiations of Abuse or Neglect while in Out-of-Home Care - OCA Heightened Monitoring Facilities (HMF)**

| Heighten Monitored Period | Closure Month | Acute / RTC 1 | Acute / RTC 2 | Acute / RTC 3 | Acute / RTC 4 | Acute / RTC 5 | Acute / RTC 6 | Acute / RTC 7 | Total |
|---|---|---|---|---|---|---|---|---|---|
| 8th Data Period | Apr-17 | | | | | | | | 0 |
| | May-17 | 1 | | | 1 | | | | 2 |
| | Jun-17 | | | | 1 | 1 | | | 2 |
| 9th Data Period | Jul-17 | | | | | | | | 0 |
| | Aug-17 | | | 1 | | | | | 1 |
| | Sep-17 | | | | | | | | 0 |
| 10th Data Period | Oct-17 | 1 | | | | | | | 1 |
| | Nov-17 | | | | | | | | 0 |
| | Dec-17 | | | | | | | | 0 |
| 11th Data Period | Jan-18 | | | | | | | | 0 |
| | Feb-18 | | | 1 | | | | | 1 |
| | Mar-18 | | | | | | | | 0 |
| TOTAL | | 2 | 0 | 2 | 2 | 1 | 0 | 0 | 7 |

*Data Source: KIDS Data Measure 1.1 MIC-Run Date: May 31, 2018 - Numbers indicate children with substantiations while in DHS custody and placed at Facility.*

| 7th Period Data ID'd as HMF | 8th Period Data ID'd as HMF | 9th Period Data ID'd as HMF | 10th Period Data ID'd as HMF |
|---|---|---|---|

**Section 2, Table 1.1-6**

*Note: The color blocking denotes the data period when a facility was identified as requiring heightened monitoring. Data reporting periods are for three months.*

Core strategy initiatives designed to impact MIC in higher-level settings continue. Current semi-annual report data indicates an increase of nine child MIC victims compared to data in the last semi-annual report. The increase signifies positive trending did not continue in this reporting period; however, 30 of the total MIC incidents occurred in the resources of those facilities whose contracts were terminated or are no longer providing services. Despite the lack of continued positive trending for the overall number of MIC victims in congregate care settings, the heightened monitoring process continues to positively impact the majority of involved resources. Of the six group home or shelter resources identified as in need of heightened monitoring based on data from the seventh, eighth, ninth, and tenth data periods, only two had any MIC victims during the eleventh data period. For one of those resources, SPPU issued a notice to comply (NTC) and written plan of compliance (WPC) to the provider on 4/26/2018 implementing sanctions and exacting a change in their executive leadership. The other resource had not yet become fully involved in the heightened monitoring process at the time of the MIC incident identified during the eleventh data period, but since that time has

made significant progress on their improvement plan and in their overall program with regard to trauma-informed service provision.  Of the seven acute and residential treatment (RTC) level resources identified as in need of heightened monitoring based on data from the seventh, eighth, ninth, and tenth data periods, only one had any MIC victims during the eleventh data period.  That resource is one which previously declined to participate in heightened monitoring, but is now engaged in the process and is making slow progress on their improvement plan.

As detailed in previous semi-annual reports, the three major areas of focus for reducing MIC in OOH care in higher-level settings consists of: heightened monitoring of those facilities identified with the highest number of MIC incidents; policy, practice and technical enhancements; and contract enhancements.

**Heightened Monitoring**
The specific activities and detailed processes on the selection of and the work completed with facilities in need of heightened monitoring based upon nine initial data sets were summarized in previous semi-annual reports.   This reporting period includes heightened monitoring activities based upon the tenth and eleventh MIC data sets.

10th MIC Data Set - October through December 2017
A quarterly heightened monitoring team (HMT) meeting was held 1/8/2018 to identify facilities in need of enhanced support through heightened monitoring based on data from October through December 2017.   Monthly HMT conference call updates were held 1/3/2018, 2/7/2018, and 3/7/2018.   During the monthly calls, action plans were reviewed and action plan updates were suggested based on information from weekly on-site monitoring by Specialized Placements and Partnerships Unit (SPPU) liaisons, bi-monthly visitation by the SPPU program field representative (PFR) assigned to HMT activities, DHS Child Care Licensing (CCL), and OCA feedback.

The tenth MIC data set was received January 2018.  This data set's review identified two new resources in need of heightened monitoring at the group home and shelter level of care in addition to the three resources already engaged in the HMT process.  For the first new resource identified, an initial HMT meeting occurred on 1/30/2018.  Subsequent to the initial meeting an administrative decision was made by SPPU and Developmental Disabilities Services (DDS) leadership in combination with the HMT to not engage in the HMT process with the provider at this time.  The specific MIC incidents were not considered to be reflective of the provider's overall provision of services and culture.  Additionally, the provider's struggles appeared to center on staffing shortages and much of the work of any action plan developed would have put further strain on the program in the area of staffing.  As a result, the team requested the provider focus efforts on increasing staffing levels through development of a staff recruitment and retention plan that the provider continues to work on.

The initial HMT meeting with the second newly identified resource occurred on 2/12/2018.   Program assessment observations occurred 2/19/2018 and 2/20/2018.   The program assessment report was received 3/1/2018 and the corresponding action plan was developed 4/4/2018.   HMT monitoring regarding successful completion of the plan is ongoing.  The other three resources identified at this level of care were already engaged in the HMT process and as a result initial HMT meetings were not conducted; however, continued monitoring and follow-up by HMT continues with these providers.   As a result of the continued heightened monitoring identification for one of these resources, in conjunction with concerns expressed from HMT over the last couple of months, referrals ceased internally on 3/28/2018.  Additionally, an NTC and WPC were issued to this provider on 4/26/2018.

Only one provider at the Acute and RTC level of care had any MIC incidents based on data from October through December 2017, which occurred in October 2017.  Upon review, this incident appeared to be related to an individual staff member's actions and was not reflective of the provider's program.  This resource rarely has reports of abuse or neglect and had not had a substantiated finding of abuse or neglect since February 2014.  As a result, no resources were identified as in need of heightened monitoring from this level of care for this reporting period.

<u>11th MIC Data Set - January through March 2018</u>

The eleventh MIC data set was received April 2018.  A quarterly HMT meeting was not held as the three resources with substantiated findings, based upon data from January through March 2018, were already engaged in the heightened monitoring process.  As a result, these providers were made aware of their additional identification and continued work with these providers is ongoing.  Monthly HMT conference call updates were held 4/4/2018, 5/2/2018, and 6/6/2018. During the monthly calls, action plans were reviewed and action plan updates were suggested based on information from weekly on-site monitoring by SPPU liaisons, bi-monthly visitation by the SPPU PFR assigned to HMT activities, DHS CCL, and OCA feedback.

Furthermore, heightened monitoring efforts with the state run shelter continued during this reporting period and progress was made on its action plan in addition to the work completed by the assigned SPPU Liaison.  Work on the action plan ceased and the SPPU staff person's assignment was dissolved in late June 2018 as a result of the shelter's closure.

**Policy, Practice, and Technical Enhancements**

Efforts to support the use of the Assessing Safety in Residential Settings Contact Guide continued through ongoing guidance to Permanency Planning (PP) staff during level trainings and when youth were referred to group home care. Guidance is delivered both electronically through email communication by the SPPU placement officer.  When a youth referral to a group home bed is made, the following narrative information is included as part of the referral communication and guidance provided to PP staff whose youth is being placed:

> *As a means of continuing to reduce Maltreatment in Care in residential settings, please refer to CWS Numbered Memo 16-09 (attached) whereby the child welfare specialist is required to complete the KIDS Contact Guide using questions in the attached Guide to Safety Assessment in Residential Settings when conducting and documenting required face-to-face monthly visits with youth placed in group homes and other residential settings.*

During CW 1006 level training, PP program staff provide copies to staff of the CWS Numbered Memo 16-09 and the Guide to Safety Assessment in Residential Settings in addition to directing staff to the corresponding policies, answering questions the staff may raise, and guiding staff to speak with their leadership when additional questions arise or clarification is needed.  PP child welfare specialists are expected to utilize the guide when conducting visits to youth in residential settings and to document information gathered from its use into the appropriate sections of the KIDS contact guide screen.

Utilization of the SPPU Facility Services Plan (FSP) screens and reports in KIDS is ongoing and led to the identification of additional needed enhancements to support SPPU staff's work.  These enhancements were brought to the attention of KIDS staff for consideration as needed changes.  ***FSP Log*** is attached.

Case reviews, using the substantiated and unsubstantiated case review tools for facilities, continued through this reporting period.  Monthly, all substantiated referrals involving youth in DHS custody and placed in CWS-contracted facilities are reviewed along with a random selection of unsubstantiated referrals.  Any areas of concern involving SPPU staff practice identified during the completed reviews are followed up on and addressed.  In January 2018, efforts to improve internal SPPU email communication resulted in the development and distribution of ***SPPU Communications Expectations*** to all SPPU staff.

SPPU implemented a more comprehensive, considerate, informed, and supportive process of all referrals for placement to group homes involved in heightened monitoring and for youth with histories of problematic sexual behavior that includes the development and execution of an individualized safety or support plan.  This process began 4/30/2018 and is set out in ***CWS Numbered Memo 18-03*** sent to all staff on 4/25/2018.

**Contract Enhancements**

The initial provider performance report cards, based on data and reports from 1/1/2017 to 3/31/2017, were shared with D+ and E group home providers at the group home administrator meeting on 8/11/2017.

The following report cards have been shared with the D+ and E providers:

- ***Group Home Report Card April – June 2017***;
- ***Group Home Report Card July – September 2017***;
- ***Group Home Report Card October – December 2017***; and
- ***Group Home Report Card January – March 2018***.

Since the Managing Aggressive Behavior (MAB) implementation in January 2017, SPPU, through the Trauma-Informed Care Project (TICP) with the National Resource Center for Youth Services (NRCYS), provided MAB supportive services to facility staff in order to build organizational capacity, support the internalization of the training concepts within each agency, provide direct care staff with competent on-site coaches, and build a statewide trainer network.  Efforts in this regard were outlined in previous semi-annual submissions.  Specific efforts taking place during this reporting period not previously described include:

Training Events Offered
MAB Direct - 2/21/2018 – 2/22/2018
MAB Plus - 4/4/2018 – 4/5/2018
Trauma Responsive Skills Practice - 3/20/2018

Co-Training Events (MAB Directs co-trained by NRCYS with group home provider trainers)
MAB Direct - 1/24/2018 – 1/25/2018
MAB Direct - 1/31/2018 – 2/1/2018
MAB Direct - 5/15/2018 – 5/16/2018

Trainer Development Plans
One Provider's MAB Trainer- 4/24/2018

Trainer Action Learning Sets (ALS)
ALS East - 1/25/2018
ALS West - 2/15/2018
ALS East - 4/12/2018
ALS West - 5/24/2018
ALS East - 6/8/2018

Webinars and Conference Calls
Training Outside of Training Webinar - 1/30/2018
Incident Documentation Webinar - 5/17/2018

Newsletters
https://mailchi.mp/ou/quarterly-okticp-mab-trainer-newsletter-2kizfjlw5k?e=de118c5c08 - 4/9/2018

Ongoing Technical Assistance
TICP continues to provide technical assistance regarding MAB in an informal fashion, which is not always tracked as a specific event.  This often occurs during workshops or Heightened Monitoring meetings, as well as by email, phone call, and in-person.

TICP engaged in incident debriefings with a resource involved in the heightened monitoring process and SPPU on 2/15/2018 and 3/15/2018.  These meetings involved reviewing recent incident reports, as well as hypothetical scenarios of crisis situations.  All participating agencies problem-solved jointly and role played the scenarios to reach safe and

therapeutic solutions. Following the second debriefing meeting, provider staff reported that they were now comfortable in their ability to identify solutions to problematic scenarios that would fit within MAB and trauma-responsive philosophical principles.

## 1.2: Absence of Maltreatment in Care by Parents

### Operational Question

Of all children served in foster care during the 12-month reporting period, what percent were **not** victims of substantiated or indicated maltreatment (abuse or neglect) by a parent while in DHS custody?

### Data Source and Definitions

For the Semi-Annual report, Oklahoma uses the same logic as Data Element XI. Children Maltreated by Parents while in Foster Care on Oklahoma's Federal Data Profile. This element uses a 12-month period based on the time frame of April 1 through March 31. Oklahoma used the two official state-submitted AFCARS (17B & 18A) files combined with a non-submitted annual NCANDS (Covering AFCARS 17B & 18A periods) file to compute the measure. The NCANDS file used for this report is calculated the same as the file submitted to the federal government, which includes running the data through the official validation tool. The official submission to NCANDS occurs only once annually and is due yearly by January 31, so the NCANDS data is still subject to change until that date.

- This metric measures performance over 12 months and differs from the monthly data collected from KIDS.
- The federal data element requires matching NCANDS and AFCARS records by AFCARS IDs.
- The NCANDS report date and completion date must fall within the removal period found in the matching AFCARS record.
- The federal metric only counts a victim once during the FFY, even when a child is victimized more than once in the course of a year. Whereas in the monthly report, a victim is counted for every substantiated finding of abuse or neglect.

The federal data element includes all victims of substantiated abuse or neglect by a parent while in care, even when the reported abuse occurred prior to the child coming into care.

### Description of Denominator and Numerator for this reporting period

**Denominator:** All children served in foster care from 4/1/2017 through 3/31/2018.

**Numerator:** The number of children served in foster care from 4/1/2017 through 3/31/2018 that did not have any substantiated or indicated allegations of maltreatment by a parent during that period.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2010 – 9/30/2011 | All children served from 10/1/2010 - 9/30/2011 | 12,352 | 12,533 | 98.56% |
| 10/1/2012 – 9/30/2013 | All children served from 10/1/2012 - 9/30/2013 | 14,800 | 15,045 | 98.37% |
| 4/1/2013 – 3/31/2014 | All children served from 4/1/2013 - 3/31/2014 | 15,580 | 15,806 | 98.57% |
| 10/1/2013 – 9/30/2014 | All children served from 10/1/2013 - 9/30/2014 | 16,018 | 16,272 | 98.44% |
| 4/1/2014 – 3/31/2015 | All children served from 4/1/2014 - 3/31/2015 | 16,390 | 16,640 | 98.50% |
| 10/1/2014 – 9/30/2015 | All children served from 10/1/2014 - 9/30/2015 | 16,571 | 16,808 | 98.58% |
| 4/1/2015 – 3/31/2016 | All children served from 4/1/2015 - 3/31/2016 | 16,348 | 16,548 | 98.79% |
| 10/1/2015 – 9/30/2016 | All children served from 10/1/2015 -- 9/30/2016 | 16,057 | 16,244 | 98.85% |

| 4/1/2016 – 3/31/2017 | All children served from 4/1/2016 - 3/31/2017 | 15,570 | 15,753 | 98.84% |
|---|---|---|---|---|
| 10/1/2016 – 9/30/2017 | All children served from 10/1/2016 - 9/30/2017 | 14,911 | 15,113 | 98.66% |
| 4/1/2017 – 3/31/2018 | All children served from 4/1/2017 - 3/31/2018 | 14,226 | 14,405 | 98.76% |
| Target | | | | 99.00% |

**Section 2, Table 1.2-1**

**Measure 1.2: Absence of Maltreatment in Care by Parents**

Target: 99.00%

| Period | Percentage |
|---|---|
| Baseline | 98.56% |
| 10/1/12-9/30/13 | 98.37% |
| 4/1/13-3/31/14 | 98.57% |
| 10/1/13-9/30/14 | 98.44% |
| 4/1/14-3/31/15 | 98.50% |
| 10/1/14-9/30/15 | 98.58% |
| 4/1/15-3/31/16 | 98.79% |
| 10/1/15-9/30/16 | 98.85% |
| 4/1/16-3/31/17 | 98.84% |
| 10/1/16-9/30/17 | 98.66% |
| 4/1/17-3/31/18 | 98.76% |

Data Source: NCANDS and AFCARS

**Section 2, Graph 1.2-1**

**Measure 1.2: Maltreatment In Care by Parents - 4/1/17 - 3/31/18**

| Month | Count |
|---|---|
| Apr-2017 | 19 |
| May-2017 | 21 |
| Jun-2017 | 36 |
| Jul-2017 | 19 |
| Aug-2017 | 22 |
| Sep-2017 | 37 |
| Oct-2017 | 25 |
| Nov-2017 | 19 |
| Dec-2017 | 8 |
| Jan-2018 | 9 |
| Feb-2018 | 10 |
| Mar-2018 | 9 |

Data Source: KIDS Data Measure 1

**Section 2, Graph 1.2-2**

## Commentary

Section 2, Graph 1.2-1 is based on the federal indicator for maltreatment in care (MIC) and produces representative information about the incidence of MIC by parents. The data above shows that the MIC rate improved from the baseline. This was also an improvement from the last reporting period by 0.1 percent. In the most recent reporting period, 98.76 percent of children in out-of-home care were not abused or neglected by a parent. Of the 14,405 children served in care during the reporting period, 179 had a substantiation of abuse by parent.

For the reporting period April 1, 2017 – March 31, 2018, a total of 234 substantiations of maltreatment while in out-of-home care by parents were reported in the monthly MIC Pinnacle Plan Measure. The 234 victims were included in 122 separate referrals. In the monthly reporting for the same time period, 61 of these victims were excluded based on the alleged abuse/neglect occurring prior to the child coming into out-of-home (OOH) care; however, these victims are still reported to NCANDS.

Of the **234** victims in OOH care by parents:
- 119 were in Trial Reunification (51%);
- 50 were placed in Kinship Foster Homes (21%);
- 48 were placed in CW Foster Homes (21%);
- 12 were in Above Foster Care or Other Type Settings (5%); and
- 5 were placed in Other Placements (2%).

## Children Maltreated in Out-of-Home Care by Parent, Excluding Prior Abuse

Section 2, Tables 1.2-2 and 1.2-3 provide an additional view of performance on this measure. It is important to understand not only in what setting the abuse occurred in, but when the abuse occurred.

| MEASURE 1.2- CHILDREN MALTREATED WHILE IN OUT-OF-HOME CARE BY PARENT- Excluding Prior Abuse | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Report Month | Apr- 17 | May- 17 | Jun- 17 | Jul- 17 | Aug- 17 | Sep- 17 | Oct- 17 | Nov- 17 | Dec- 17 | Jan- 18 | Feb- 18 | Mar- 18 | TOTAL |
| % Safe in OOHC | 100.00% | 99.95% | 99.79% | 99.82% | 99.84% | 99.76% | 99.87% | 99.82% | 99.97% | 99.93% | 99.93% | 99.91% | 99.05% |
| # in OOHC | 10066 | 9953 | 9855 | 9684 | 9810 | 9727 | 9704 | 9598 | 9473 | 9388 | 9420 | 9341 | 14405 |
| # Safe in OOHC | 10066 | 9948 | 9834 | 9667 | 9794 | 9704 | 9691 | 9581 | 9470 | 9381 | 9413 | 9333 | 14268 |
| # Maltreated in OOHC | 0 | 5 | 21 | 17 | 16 | 23 | 13 | 17 | 3 | 7 | 7 | 8 | 137 |

# in OOHC is from the Annual File built from the SEP 2017 and MAR 2018 AFCARS files. # Maltreated is from the FFY 2018 NCANDS File.

Red font on the # Maltreated in OOHC indicated a reduction in the original number of reported victims due to the abuse occurring prior to removal

Report Date: 6/1/18

**Section 2, Table 1.2-2**

| MIC 1.2 Excluding Prior Abuse by Placement Type | | |
|---|---|---|
| Placement Type | # Children | % Children |
| TRIAL REUNIFICATION | 88 | 64.2% |
| CW FOSTER FAMILY CARE | 10 | 7.3% |
| CW FOSTER FAMILY CARE - SUPPORTED HOME | 15 | 10.9% |
| KINSHIP/RELATIVE/CW FOST. FAM. CARE | 15 | 10.9% |
| KINSHIP/NON-RELATIVE/CW FOST. FAM. CARE | 6 | 4.4% |
| KINSHIP/TERMINATED PARENT NON-PAID | 1 | 0.7% |
| PSYCHIATRIC RESIDENTIAL TREATMENT CENTER | 1 | 0.7% |
| TRIBAL APPROVED FOSTER FAMILY CARE | 1 | 0.7% |
| TOTAL | 137 | 100.0% |

Data Source: # in OOHC is from the Annual File built from the SEP 2017 and MAR 2018 AFCARS files. # Maltreated is from the FFY 2018 NCANDS File; Run Date: 6/1/18

**Section 2, Table 1.2-3**

Victims normally excluded in the monthly reports are included in the Pinnacle Plan's Semi-Annual reports. This means the Semi-Annual report counts substantiations on abuse and neglect by a parent regardless of when the child in the custody of the Oklahoma Department of Human Services (DHS) reports the abuse. When a child was removed from the home and while in DHS custody reported abuse occurred in his or her parents' home prior to custody, and that abuse was substantiated, the child is currently counted in the MIC 1.2 numbers, even though the abuse and/or neglect did not occur while in DHS custody. Based on the monthly reporting that ended 3/31/2018, 61 of these victims would be excluded because the alleged abuse/neglect occurred prior to the child coming into out-of-home (OOH) care. 19 of the 61 victims are already excluded in the NCANDS report as they are not included in the AFCARS population, leaving 42 additional victims that could be excluded due to abuse reported that was prior to the child's removal. If those substantiations were excluded in the Semi-Annual report, the overall number of victims would be reduced to 137 victims, of the originally reported 179 victims, out of a served population of 14,405. This would calculate to 99.05 percent safe, which is above the federal standard and above the target for this measure of 99.00 percent. Of the 137 victims abused in OOH care by a parent, 88 victims or 64.2 percent were placed in trial reunification at the time of MIC.

## 3.1: Frequency of Worker Contacts

### Operational Question
What percentage of the total minimum number of required monthly face-to-face contacts occurred with children who were in foster care for at least one calendar month during the reporting period?

### Data Source and Definitions
This measure is calculated using the criteria for the federal visitation measure. However, the measure differs from the federal measure since this measure does not include children in tribal custody.
- The data reflects the total number of required monthly contacts due to children in out-of-home care over the course of 12 months and the number of total required monthly contacts made for those visits.
- Only one monthly contact per month is counted even though multiple visits may have occurred.

### Description of Denominator and Numerator for this reporting period
**Denominator:**  The number of required monthly contacts due from 7/1/2017 through 6/30/2018.
**Numerator:**  The number of qualifying required monthly contacts made.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 7/1/2011 – 6/30/2012 | All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012 | 90,355 | 94,639 | 95.5% |
| 10/1/2012 – 9/30/2013 | All children due a visit who were in care at least a full calendar month from 10/1/2012 – 9/30/2013 | 105,868 | 110,673 | 95.7% |
| 7/1/2013 – 6/30/2014 | All children due a visit who were in care at least a full calendar month from 7/1/2013 – 6/30/2014 | 118,824 | 123,343 | 96.3% |
| 1/1/2014 – 12/31/2014 | All children due a visit who were in care at least a full calendar month from 1/1/2014 – 12/31/2014 | 124,355 | 128,745 | 96.6% |
| 7/1/2014 – 6/30/2015 | All children due a visit who were in care at least a full calendar month from 7/1/2014 – 6/30/2015 | 123,596 | 128,173 | 96.4% |
| 1/1/2015 – 12/31/2015 | All children due a visit who were in care at least a full calendar month from 1/1/2015 – 12/31/2015 | 121,799 | 125,417 | 97.1% |

| 7/1/2015 – 6/30/2016 | All children due a visit who were in care at least a full calendar month from 7/1/2015 – 6/30/2016 | 117,879 | 120,998 | 97.4% |
|---|---|---|---|---|
| 1/1/2016 – 12/31/2016 | All children due a visit who were in care at least a full calendar month from 1/1/2016 – 12/31/2016 | 111,659 | 114,567 | 97.5% |
| 7/1/2016 – 6/30/2017 | All children due a visit who were in care at least a full calendar month from 7/1/2016 – 6/30/2017 | 106,218 | 108,704 | 97.7% |
| 1/1/2017 – 12/31/2017 | All children due a visit who were in care at least a full calendar month from 1/1/2017 – 12/31/2017 | 102,032 | 104,427 | 97.7% |
| 7/1/2017 – 6/30/2018 | All children due a visit who were in care at least a full calendar month from 7/1/2017 – 6/30/2018 | 98,321 | 100,853 | 97.5% |
| Target | | | | 95.0% |

**Section 2, Table 3.1-1**
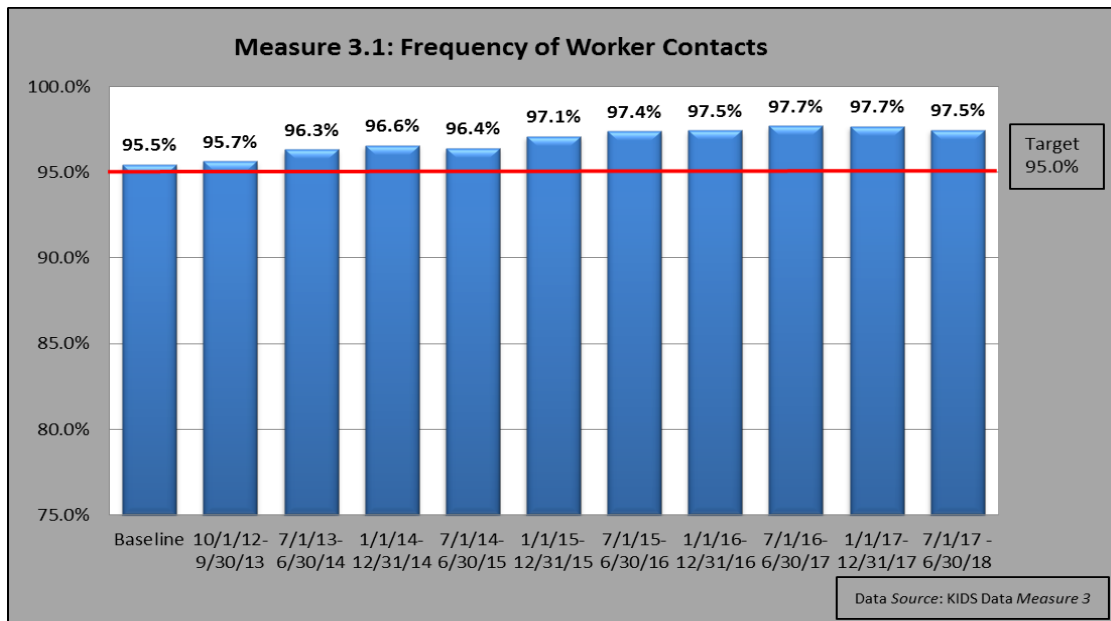


**Section 2, Graph 3.1-1**
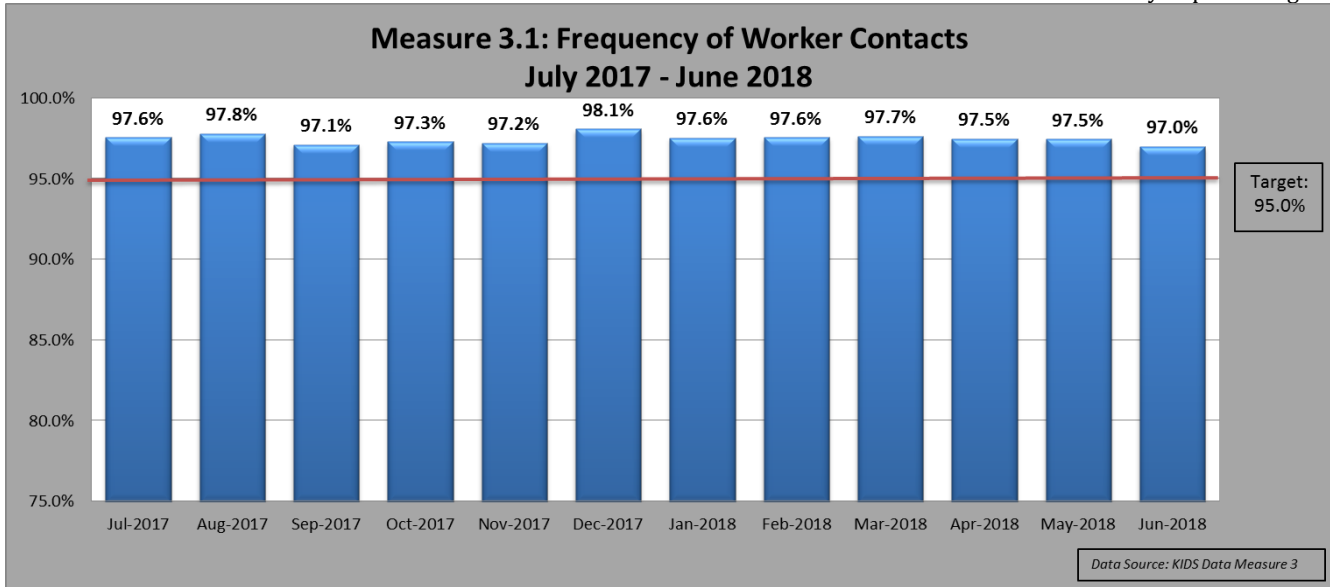
**Section 2, Graph 3.1-2**

## Commentary

The baseline for this measure was 95.5 percent and the target is to sustain 95.0 percent. Over the 12-month period of 7/1/2017 – 6/30/2018, 100,853 monthly contacts were required and 98,321 monthly contacts were completed which resulted in a rate of 97.5 percent. Performance in this area continues to be above the baseline and exceeds the target.

## 3.2: Frequency of Primary Worker Contacts

### Operational Question

What percentage of the total minimum number of required monthly face-to-face contacts was completed by the primary worker with children who were in foster care for at least one calendar month during the reporting period?

### Data Source and Definitions

This measure is calculated similarly to the federal visitation measure. However, the measure only counts visits made by the primary caseworker. In October 2016, for children in trial adoption cases, the monthly contact will be completed by the Primary permanency planning worker if the child is being adopted in an identified placement. However if the child is in a Non-Identified placement, the monthly contact is completed by the Adoption worker with a primary assignment. Beginning with the semi-annual reporting period ending December 31, 2015, children who were placed in out-of-state placements will be excluded from the primary worker visitation measure, as these children have an assigned worker out-of-state responsible for monthly visitation.

- The data reflects the total number of required monthly contacts due to children in out-of-home care over the course of 12 months and the number of total required monthly contacts made by the primary assigned worker.
- Only one contact per month is counted even though multiple visits may have been made during the month.
- To be counted as a valid monthly contact completed by a primary worker, the worker who completed the visit must have had a primary assignment at the time of the visit.

### Description of Denominator and Numerator for this reporting period

**Denominator:** The number of required monthly contacts due from 7/1/2017 through 6/30/2018.
**Numerator:** The number of qualifying monthly visits made by a primary worker.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline:<br>7/1/2011 – 6/30/2012 | All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012 | 48,497 | 94,639 | 51.2% |

| 10/1/2012 – 9/30/2013 | All children due a visit who were in care at least a full calendar month from 10/1/2012 – 9/30/2013 | 81,971 | 110,673 | 74.1% |
|---|---|---|---|---|
| 7/1/2013 – 6/30/2014 | All children due a visit who were in care at least a full calendar month from 7/1/2013 – 6/30/2014 | 93,760 | 123,343 | 76.0% |
| 1/1/2014 – 12/31/2014 | All children due a visit who were in care at least a full calendar month from 1/1/2014 – 12/31/2014 | 99,358 | 128,745 | 77.2% |
| 7/1/2014 – 6/30/2015 | All children due a visit who were in care at least a full calendar month from 7/1/2014 – 6/30/2015 | 105,749 | 128,173 | 82.5% |
| 1/1/2015 – 12/31/2015 | All children due a visit who were in care at least a full calendar month from 1/1/2015 – 12/31/2015 | 108,859 | 121,024 | 89.9% |
| 7/1/2015 – 6/30/2016 | All children due a visit who were in care at least a full calendar month from 7/1/2015 – 6/30/2016 | 107,763 | 116,834 | 92.2% |
| 1/1/2016 – 12/31/2016 | All children due a visit who were in care at least a full calendar month from 1/1/2016 – 12/31/2016 | 103,881 | 110,830 | 93.7% |
| 7/1/2016 – 6/30/2017 | All children due a visit who were in care at least a full calendar month from 7/1/2016 – 6/30/2017 | 99,699 | 105,424 | 94.6% |
| 1/1/2017 – 12/31/2017 | All children due a visit who were in care at least a full calendar month from 1/1/2017 – 12/31/2017 | 96,217 | 101,378 | 94.9% |
| 7/1/2017 – 6/30/2018 | All children due a visit who were in care at least a full calendar month from 7/1/2017 – 6/30/2018 | 93,124 | 97,873 | 95.1% |
| Target | | | | 90.0% |

**Section 2, Table 3.2-1**
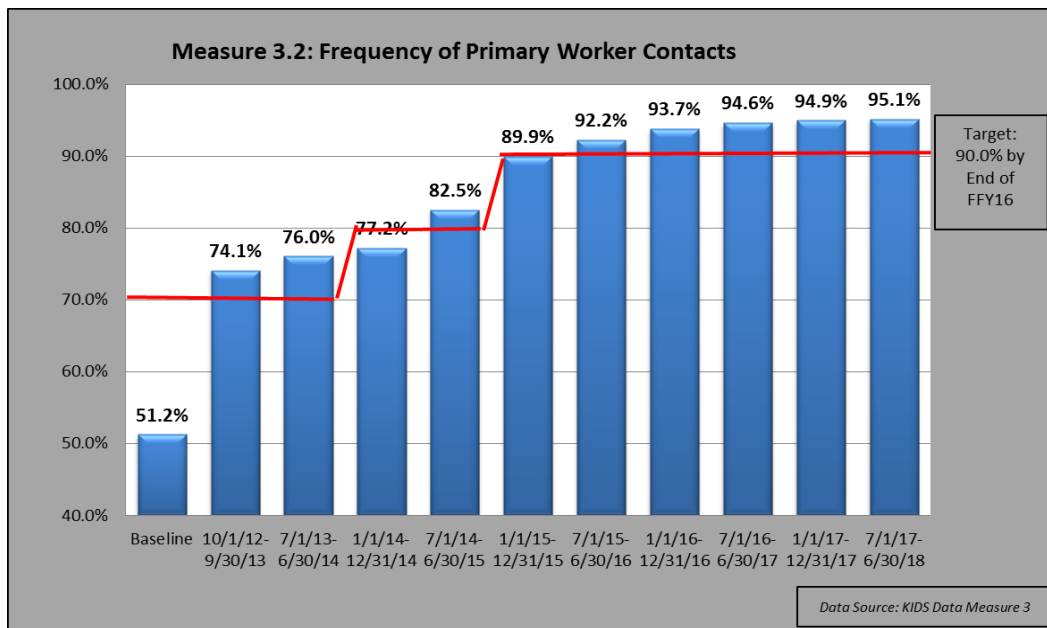


**Section 2, Graph 3.2-1**
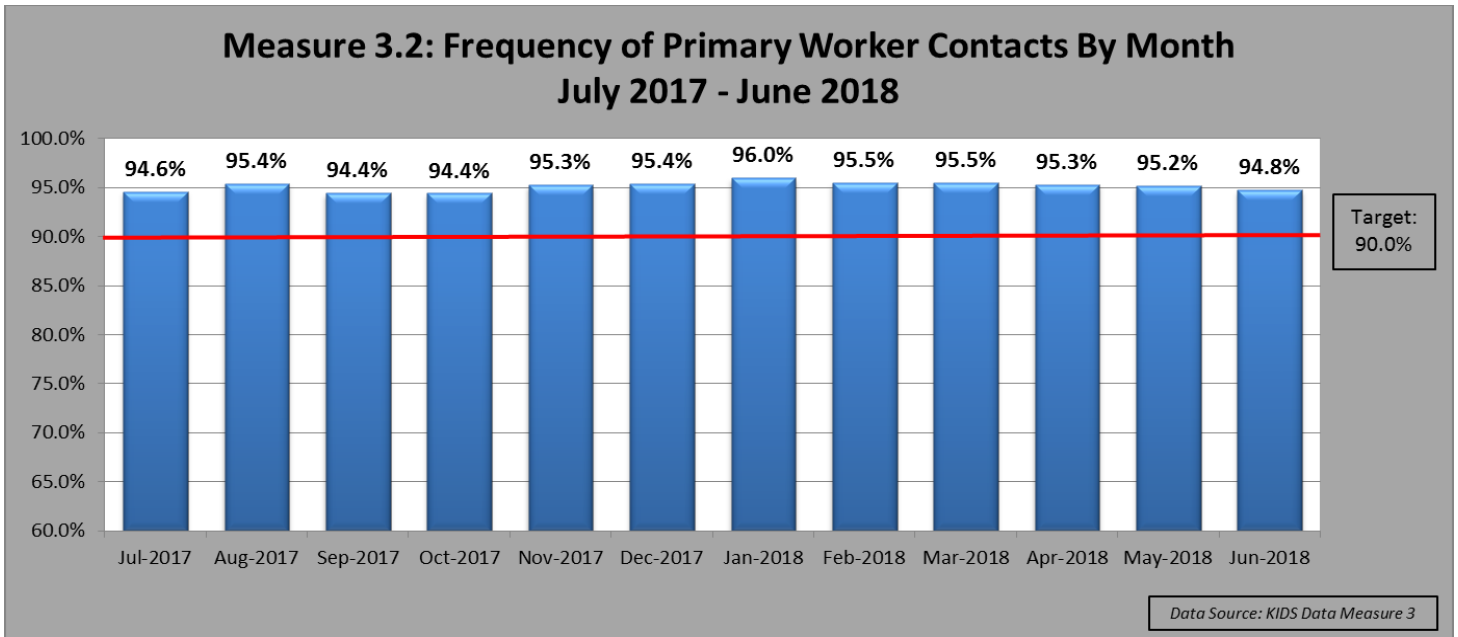
**Section 2, Graph 3.2-2**

## Commentary

The baseline for this measure was 51.2 percent and the final target is 90.0 percent to be met by the end of 6/30/2016. Over the 12-month period of 7/1/2017 – 6/30/2018, 97,873 primary monthly contacts were required and 93,124 of those were monthly contacts made by the primary worker for a rate of 95.1 percent. This measure has shown continual improvement in every reporting period. Performance in this area continues to be above the baseline and exceeds the target.

## 3.3: Continuity of Worker Contacts by Primary Workers

### Operational Question

What percentage of children in care for at least six consecutive months during the reporting period were visited by the same primary caseworker in each of the most recent six months, or for those children discharged from DHS legal custody during the reporting period, the six months prior to discharge?

### Data Source and Definitions

This measure looks at the percentage of children in care for at least six consecutive months during the reporting period who were visited by the same primary caseworker in each of the most recent six months, or for those children discharged from DHS legal custody during the reporting period, the six months prior to discharge. This measure does not include children in tribal custody or children placed out-of-state.

- Only one contact per month is counted even though multiple visits may have been made during the month by different workers.
- To be counted as a valid monthly contact completed by a primary worker, the worker who completed the visit must have had a primary assignment at the time of the visit.

For children in trial adoption (TA) cases, the monthly contact must have been completed by the Adoption worker with a primary assignment. When the child went into TA status in the last six months of the reporting period or when a child in TA's adoption finalized in less than six months, then they are excluded from this measure.

### Description of Denominator and Numerator for this reporting period

**Denominator:** Number of children in custody for at least six consecutive months from 1/1/2018 through 6/30/2018.

**Numerator:**    Number of children who were seen for six consecutive months by the same primary caseworker for the last six months of the reporting period or for those children discharged from DHS legal custody during the reporting period, the last six months prior to discharge.

## Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 1/1/2014 – 6/30/2014 | | | | 40.6% |
| 1/1/2015 – 6/30/2015 | All children in care at least 6 full calendar months from 1/1/2015 – 6/30/2015 | 5,135 | 10,349 | 49.6% |
| 7/1/2015 – 12/31/2015 | All children in care at least 6 full calendar months from 7/1/2015 – 12/31/2015 | 5,259 | 9,997 | 52.6% |
| 1/1/2016 – 6/30/2016 | All children in care at least 6 full calendar months from 1/1/2016 – 6/30/2016 | 5,717 | 9,650 | 59.2% |
| 7/1/2016 – 12/31/2016 | All children in care at least 6 full calendar months from 7/1/2016 – 12/31/2016 | 5,717 | 9,094 | 62.9% |
| 1/1/2017 – 6/30/2017 | All children in care at least 6 full calendar months from 1/1/2017 – 6/30/2017 | 5,519 | 8,718 | 63.3% |
| 7/1/2017 – 12/31/2017 | All children in care at least 6 full calendar months from 7/1/2017 – 12/31/2017 | 5,238 | 8,370 | 62.6% |
| 1/1/2018 – 6/30/2018 | All children in care at least 6 full calendar months from 1/1/2018 – 6/30/2018 | 4,951 | 8,140 | 60.8% |
| Target | | | | 65.0% |

**Section 2, Table 3.3-1**
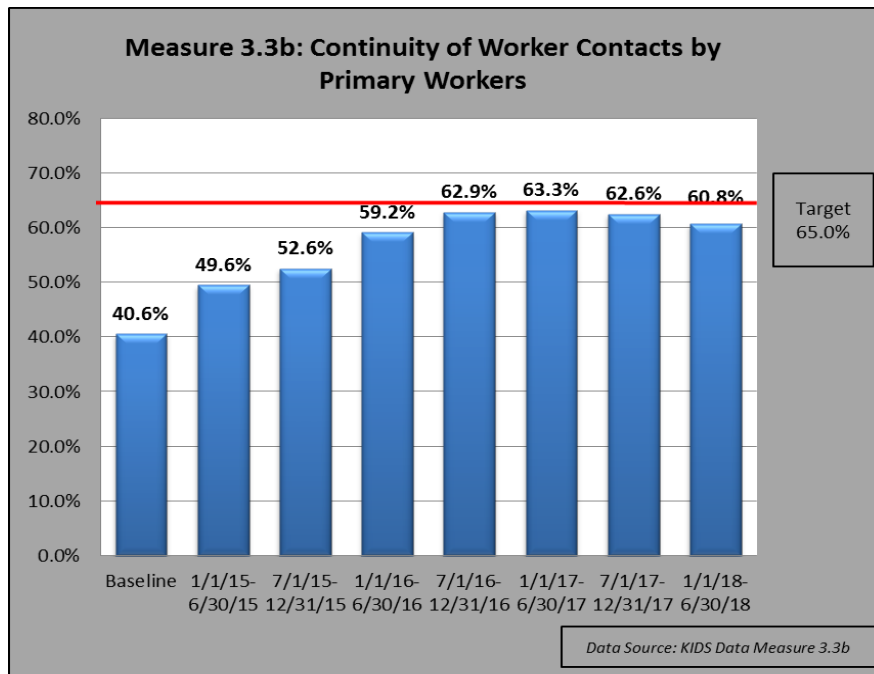


**Section 2, Graph 3.3-1**

## Commentary

From 1/1/2018 – 6/30/2018, 60.8 percent of the children in care were seen by the same primary worker for six consecutive months.  The baseline was set at 40.6 percent.  Though there was a slight decrease from the last reporting period by 1.8 percent, the measure remains 20.2 percent above the baseline reporting.

Efforts to ensure the continuity of worker visits are ongoing. Continuing work to reduce caseloads and improve hiring and staff retention supports continued performance in measures 3.1, 3.2, and 3.3. Additional efforts include the implementation of the supervisor framework.

## 4.1a: Placement Stability—Children in Care for Less than 12 Months

### Operational Question
Of all children served in foster care during the 12-month reporting period that were in care for at least eight days but less than 12 months, what percent had two or fewer placement settings to date?

### Data Source and Definitions
Timeliness and Permanency of Reunification – AFCARS 17B and 18A
- Measures 4.1a, b, and c are based on the Permanency Federal Composite 1 measures C1-1, C1-2, and C1-3. The data looks at the number of children with two or fewer placement settings during the different time periods.

### Description of Denominator and Numerator for this reporting period
**Denominator:**   All children served in foster care from 4/1/2017 through 3/31/2018 whose length of stay (LOS) as of 3/31/2018 was between (b/w) eight days and 12 months.
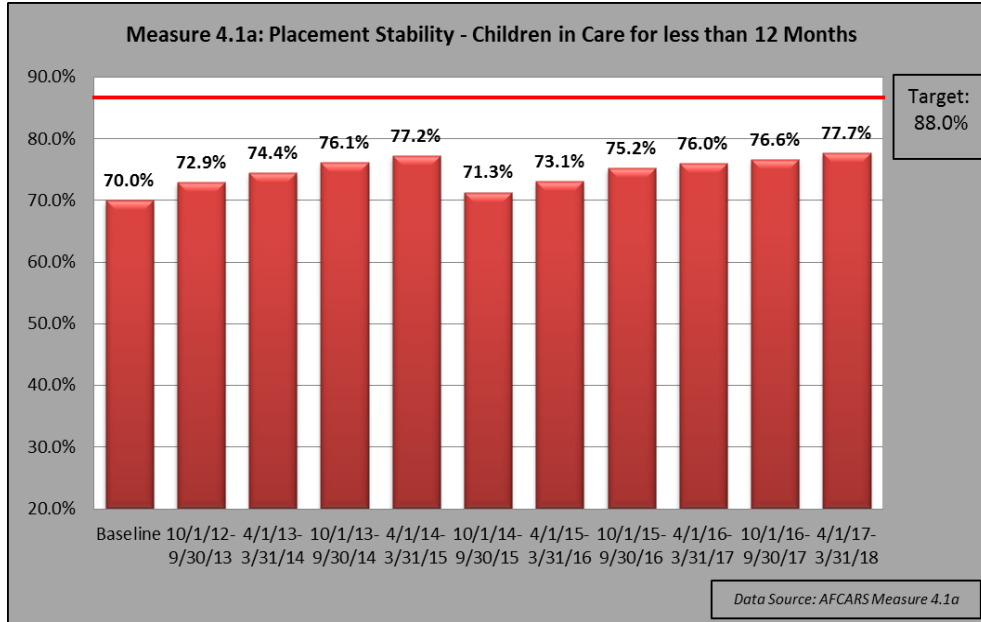
**Numerator:**   All children served in foster care from 4/1/2017 through 3/31/2018 whose length of stay as of 3/31/2018 was between eight days and 12 months **and** who had two or fewer placement settings as of 3/31/2018.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All children served from 10/1/2011 - 9/30/2012 with LOS b/w 8 days and 12 months | | | 70.0% |
| 10/1/2012 – 9/30/2013 | All children served from 10/1/2012 - 9/30/2013 with LOS b/w 8 days and 12 months | 4,396 | 6,031 | 72.9% |
| 4/1/2013 – 3/31/2014 | All children served from 4/1/2013 - 3/31/2014 with LOS b/w 8 days and 12 months | 4,564 | 6,136 | 74.4% |
| 10/1/2013 – 9/30/2014 | All children served from 10/1/2013 - 9/30/2014 with LOS b/w 8 days and 12 months | 4,513 | 5,933 | 76.1% |
| 4/1/2014 – 3/31/2015 | All children served from 4/1/2014 - 3/31/2015 with LOS b/w 8 days and 12 months | 4,297 | 5,564 | 77.2% |
| 10/1/2014 – 9/30/2015 | All children served from 10/1/2014 - 9/30/2015 with LOS b/w 8 days and 12 months | 3,981 | 5,585 | 71.3% |
| 4/1/2015 – 3/31/2016 | All children served from 4/1/2015 - 3/31/2016 with LOS b/w 8 days and 12 months | 4,048 | 5,537 | 73.1% |
| 10/1/2015 – 9/30/2016 | All children served from 10/1/2015 - 9/30/2016 with LOS b/w 8 days and 12 months | 4,106 | 5,462 | 75.2% |
| 4/1/2016 – 3/31/2017 | All children served from 4/1/2016 - 3/31/2017 with LOS b/w 8 days and 12 months | 4,271 | 5,617 | 76.0% |

| 10/1/2016 – 9/30/2017 | All children served from 10/1/2016 - 9/30/2017 with LOS b/w 8 days and 12 months | 4,219 | 5,506 | 76.6% |
|---|---|---|---|---|
| 4/1/2017 – 3/31/2018 | All children served from 4/1/2017 - 3/31/2018 with LOS b/w 8 days and 12 months | 4,039 | 5,196 | 77.7% |
| Target | | | | 88.0% |

**Section 2, Table 4.1a-1**



**Section 2, Graph 4.1a-1**

## 4.1b: Placement Stability—Children in Care for 12 to 24 Months

### Operational Question
Of all children served in foster care during the 12-month reporting period that were in care for at least 12 months but less than 24 months, what percent had two or fewer placement settings to date?

### Data Source and Definitions
Timeliness and Permanency of Reunification – AFCARS 17B and 18A
- Measures 4.1a, b, and c are based on the Permanency Federal Composite 1 measures C1-1, C1-2, and C1-3. The data looks at the number of children with two or fewer placement settings during the different time periods.

### Description of Denominator and Numerator for this reporting period
**Denominator:** All children served in foster care from 4/1/2017 through 3/31/2018 whose length of stay (LOS) as of 3/31/2018 was between 12 months and 24 months.

**Numerator:** All children served in foster care from 4/1/2017 through 3/31/2018 whose length of stay as of 3/31/2018 was between 12 months and 24 months **and** who had two or fewer placement settings as 3/31/2018.

## Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All children served from 10/1/2011 - 9/30/2012 with LOS between 12 and 24 months | | | 50.0% |

| | | | | |
|---|---|---|---|---|
| 10/1/2012 – 9/30/2013 | All children served from 10/1/2012 - 9/30/2013 with LOS between 12 and 24 months | 2,292 | 4,514 | 50.8% |
| 4/1/2013 – 3/31/2014 | All children served from 4/1/2013 - 3/31/2014 with LOS between 12 and 24 months | 2,569 | 4,909 | 52.3% |
| 10/1/2013 – 9/30/2014 | All children served from 10/1/2013 - 9/30/2014 with LOS between 12 and 24 months | 2,795 | 5,174 | 54.0% |
| 4/1/2014 – 3/31/2015 | All children served from 4/1/2014 - 3/31/2015 with LOS between 12 and 24 months | 3,034 | 5,430 | 55.9% |
| 10/1/2014 – 9/30/2015 | All children served from 10/1/2014 - 9/30/2015 with LOS between 12 and 24 months | 2,844 | 5,271 | 54.0% |
| 4/1/2015 – 3/31/2016 | All children served from 4/1/2015 - 3/31/2016 with LOS between 12 and 24 months | 2,710 | 4,977 | 54.5% |
| 10/1/2015 – 9/30/2016 | All children served from 10/1/2015 - 9/30/2016 with LOS between 12 and 24 months | 2,636 | 4,935 | 53.4% |
| 4/1/2016 – 3/31/2017 | All children served from 4/1/2016 - 3/31/2017 with LOS between 12 and 24 months | 2,620 | 4,717 | 55.5% |
| 10/1/2016 – 9/30/2017 | All children served from 10/1/2016 - 9/30/2017 with LOS between 12 and 24 months | 2,719 | 4,684 | 58.0% |
| 4/1/2017 – 3/31/2018 | All children served from 4/1/2017 - 3/31/2018 with LOS between 12 and 24 months | 2,766 | 4,750 | 58.2% |
| Target | | | | 68.0% |

**Section 2, Table 4.1b-1**
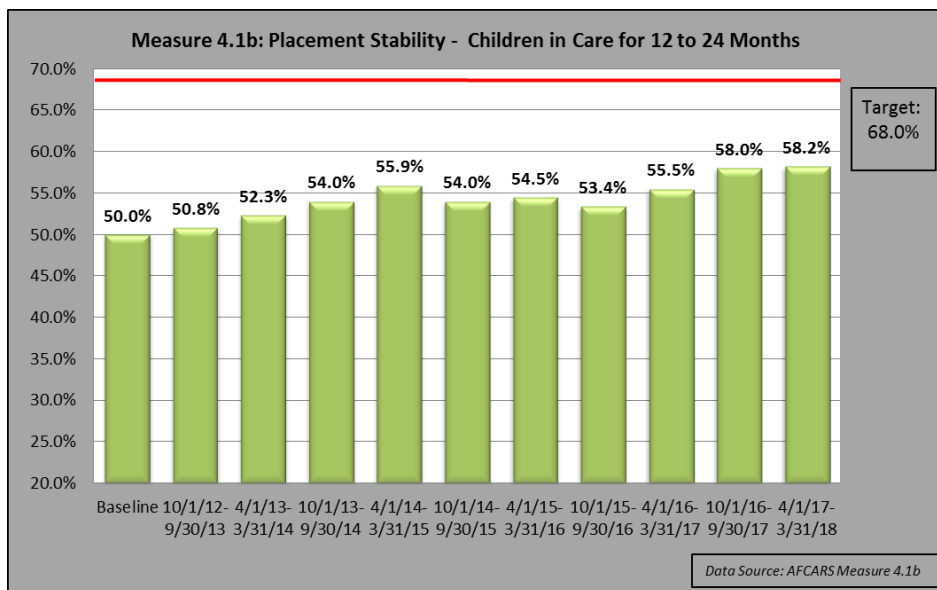


**Section 2, Graph 4.1b-1**

## 4.1c: Placement Stability—Children in Care for 24 Months or More

### Operational Question

Of all children served in foster care during the 12-month reporting period that were in care for at least 24 months, what percent had two or fewer placement settings to date?

### Data Source and Definitions

Timeliness and Permanency of Reunification – AFCARS 17B and 18A

- Measures 4.1a, b, and c are based on the Permanency Federal Composite 1 measures C1-1, C1-2, and C1-3. The data looks at the number of children with two or fewer placement settings during the different time periods.

### Description of Denominator and Numerator for this reporting period

**Denominator:** All children served in foster care from 4/1/2017 through 3/31/2018 whose length of stay as of 3/31/2018 was 24 months or longer.
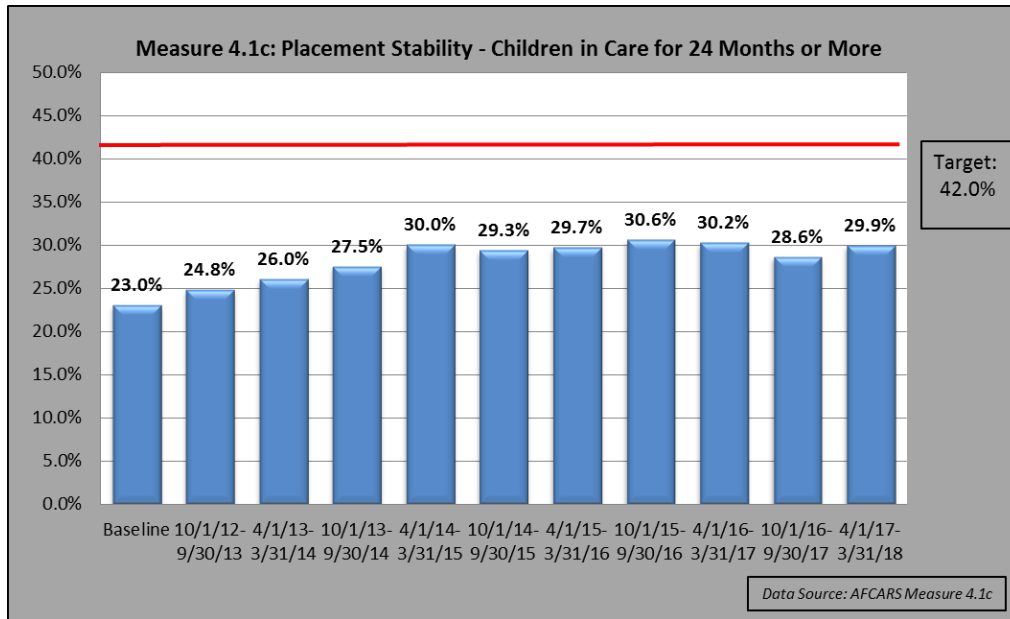
**Numerator:** All children served in foster care from 4/1/2017 through 3/31/2018 whose length of stay as of 3/31/2018 was 24 months or longer **and** who had two or fewer placement settings as of 3/31/2018.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All children served from 10/1/2011 - 9/30/2012 with LOS 24 months or longer | | | 23.0% |
| 10/1/2012 – 9/30/2013 | All children served from 10/1/2012 - 9/30/2013 with LOS 24 months or longer | 1,002 | 4,035 | 24.8% |
| 4/1/2013 – 3/31/2014 | All children served from 4/1/2013 - 3/31/2014 with LOS 24 months or longer | 1,112 | 4,277 | 26.0% |
| 10/1/2013 – 9/30/2014 | All children served from 10/1/2013 - 9/30/2014 with LOS 24 months or longer | 1,303 | 4,731 | 27.5% |
| 4/1/2014 – 3/31/2015 | All children served from 4/1/2014 - 3/31/2015 with LOS 24 months or longer | 1,576 | 5,260 | 30.0% |
| 10/1/2014 – 9/30/2015 | All children served from 10/1/2014 - 9/30/2015 with LOS 24 months or longer | 1,632 | 5,572 | 29.3% |
| 4/1/2015 – 3/31/2016 | All children served from 4/1/2015 - 3/31/2016 with LOS 24 months or longer | 1,688 | 5,677 | 29.7% |
| 10/1/2015 – 9/30/2016 | All children served from 10/1/2015 - 9/30/2016 with LOS 24 months or longer | 1,676 | 5,486 | 30.6% |
| 4/1/2016 – 3/31/2017 | All children served from 4/1/2016 - 3/31/2017 with LOS 24 months or longer | 1,524 | 5,051 | 30.2% |
| 10/1/2016 – 9/30/2017 | All children served from 10/1/2016 - 9/30/2017 with LOS 24 months or longer | 1,324 | 4,630 | 28.6% |

| 4/1/2017 – 3/31/2018 | All children served from 4/1/2017 - 3/31/2018 with LOS 24 months or longer | 1,236 | 4,129 | 29.9% |
|---|---|---|---|---|
| Target | | | | 42.0% |

**Section 2, Table 4.1c-1**



**Section 2, Graph 4.1c-1**

## 4.2: Placement Stability—Placement Moves After 12 Months in Care

### Operational Question
Of all children served in foster care for more than 12 months, what percent of children experienced two or fewer placement settings after their first 12 months in care?

### Data Source and Definitions
Measure 4.2 looks at placement stability that occurs after the child's first 12 months in care. The placement that the child is placed in 12 months after their removal date counts as the first placement, and then the metric shows how many children had two or fewer placement settings after that time.

### Description of Denominator and Numerator for this reporting period
**Denominator:** All children served in foster care from 4/1/2017 through 3/31/2018 whose current removal was prior to 3/31/2018 and remained in care at least 12 months.

**Numerator:** All children served in foster care from 4/1/2017 through 3/31/2018 whose current removal was prior to 3/31/2018 and remained in care at least 12 months **and** had two or fewer placement settings.
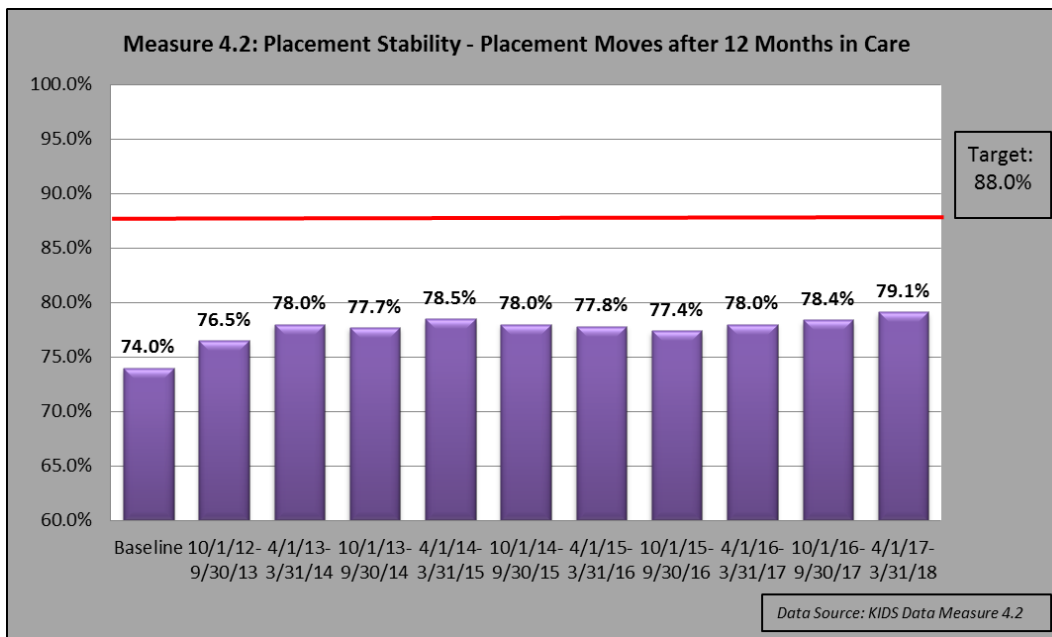
### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All children served from 10/1/2011 - 9/30/2012 with LOS at least 12 months | | | 74.0% |
| 10/1/2012 – 9/30/2013 | All children served from 10/1/2012 - 9/30/2013 with LOS at least 12 months | 6,404 | 8,374 | 76.5% |

| 4/1/2013 – 3/31/2014 | All children served from 4/1/2013 - 3/31/2014 with LOS at least 12 months | 7,026 | 9,002 | 78.0% |
| 10/1/2013 – 9/30/2014 | All children served from 10/1/2013 - 9/30/2014 with LOS at least 12 months | 7,590 | 9,763 | 77.7% |
| 4/1/2014 – 3/31/2015 | All children served from 4/1/2014 - 3/31/2015 with LOS at least 12 months | 8,263 | 10,522 | 78.5% |
| 10/1/2014 – 9/30/2015 | All children served from 10/1/2014 - 9/30/2015 with LOS at least 12 months | 8,334 | 10,691 | 78.0% |
| 4/1/2015 – 3/31/2016 | All children served from 4/1/2015 - 3/31/2016 with LOS at least 12 months | 8,122 | 10,445 | 77.8% |
| 10/1/2015 – 9/30/2016 | All children served from 10/1/2015 - 9/30/2016 with LOS at least 12 months | 7,871 | 10,172 | 77.4% |
| 4/1/2016 – 3/31/2017 | All children served from 4/1/2016 - 3/31/2017 with LOS at least 12 months | 7,479 | 9,583 | 78.0% |
| 10/1/2016 – 9/30/2017 | All children served from 10/1/2016 - 9/30/2017 with LOS at least 12 months | 7,112 | 9,071 | 78.4% |
| 4/1/2017 – 3/31/2018 | All children served from 4/1/2017 - 3/31/2018 with LOS at least 12 months | 6,888 | 8,711 | 79.1% |
| Target | | | | 88.0% |

**Section 2, Table 4.2-1**



**Section 2, Graph 4.2-1**

| First Placement Kinship | | | |
|---|---|---|---|
| Month | Children Placed in Kinship as 1st Placement | Children Removed during Month and Entered in Countable Placement | % of Kinship as 1st Placement |
| **Baseline: Jul - Dec 2016** | **878** | **2540** | **34.6%** |
| Jan-17 | 122 | 399 | 30.6% |
| Feb-17 | 190 | 443 | 42.9% |
| Mar-17 | 206 | 517 | 39.8% |
| Apr-17 | 162 | 432 | 37.5% |
| May-17 | 151 | 397 | 38.0% |
| Jun-17 | 170 | 410 | 41.5% |
| **Jan - Jun 2017** | **1001** | **2598** | **38.5%** |
| Jul-17 | 176 | 398 | 44.2% |
| Aug-17 | 240 | 489 | 49.1% |
| Sep-17 | 158 | 373 | 42.4% |
| Oct-17 | 149 | 357 | 41.7% |
| Nov-17 | 136 | 344 | 39.5% |
| Dec-17 | 150 | 303 | 49.5% |
| **Jul- Dec 2017** | **1009** | **2264** | **44.6%** |
| Jan-18 | 188 | 402 | 46.8% |
| Feb-18 | 146 | 350 | 41.7% |
| Mar-18 | 147 | 312 | 47.1% |
| *Data Source: Baseline-YI844 run date 7/19/2017. YI867: Jan- Sept 2017 run date 10/19/17, Oct 17- Apr 18 run date 20th of each month for previous month data.* | | | |

**Section 2, Table 4.2-2**

## Commentary

Child Welfare Services (CWS) remains committed to improving placement stability for children in out-of-home (OOH) care. Child welfare (CW) staff at all levels understand the practices set forth in the placement stability strategy and the importance of applying those practices to improve placement stability for children in OOH care. CWS continues to support CW staff by developing Instructions to Staff (ITS) and enhancing tools to advance placement stability practices. In addition, CWS is preparing placement stability training modules to support CW staff. Furthermore, CWS continues to monitor data related to the practices to self-correct and advance placement stability. CWS invested a tremendous amount of effort into improving placement stability and as a result CWS is seeing an increase in placement stability for children in OOH care.

## Data

During this reporting period, CWS improved in all four measures for placement stability. CWS saw continued improvement in Measure 4.1a from 76.6 percent to 77.7 percent. This 7.7 percent overall positive growth from the baseline data denotes five consecutive positive trending reporting periods and the highest overall percentage seen in Measure 4.1a since Pinnacle Plan reporting began. A slight increase occurred in Measure 4.1b from 58.0 percent to 58.2 percent and is the highest the measure has been. Since the baseline was established, Measure 4.1b experienced 8.2 percent overall positive growth along with three consecutive positive trending reporting periods. Measure 4.1c increased by 1.3 percent for an overall total of 29.9 percent. Measure 4.1c continues to be above the baseline by 6.9 percent. Measure 4.2 improved to 79.1 percent, which is a 5.1 percent overall increase from the baseline data, and the third consecutive positive trending reporting period. In all four measures, positive trending is indicated.

**Placement Stability Efforts**

The Placement Stability Team meets monthly or every other month.  In January, the Team acted with a renewed focus on placement stability and developed a reporting mechanism to ensure the collected information is communicated and used to improve placement stability.  The regional leads report includes trends, actions, trainings, and meetings.

The team developed a plan to include resource family partner (RFP) staff and field managers in regional leadership meetings quarterly.  The goal is to ensure open communication, identify trends, and develop solutions to better partner with our resource partners to improve placement stability.

The RFP staff and field managers attended regional leadership meetings.

- Region 1 – 5/17/2018
- Region 2 – 4/27/2018
- Region 3 – 5/25/2018
- Region 4 – 4/20/2018
- Region 5 – 5/18/2018

Through the quarterly regional leadership meetings, RFP and CW staff identified the need for one child and resource family support plan that meets the need for CWS and RFP agencies.  Therefore, the Placement Stability Team established a workgroup to develop and create one child and resource family support plan that could be utilized for each level of care.  The workgroup met in June 2018 to draft a child and resource family support plan.  The Placement Stability Team will review the draft and submit the plan to the CWS Executive Team for approval in August 2018.  When the plan is approved, the child and resource family support plan will be placed on online as form for staff.  In addition, guidance on how to use the form will be developed for CW staff.

In addition, the Placement Stability Team engaged the Oklahoma Trauma Assessment and Service Center Collaborative (OK-TASCC) team to look at ways to partner better to support placement stability for children in OOH care.  OK-TASCC is a demonstration grant from the Administration on Children, Youth and Families, Children's Bureau, on the "Initiative to Improve Access to Needs-Driven, Evidence-Based/Evidence-Informed Mental and Behavioral Health Services in Child Welfare." This project's goal is to improve the social and emotional well-being and restore the developmentally-appropriate functioning of children and youth in the CW system with mental and behavioral health needs by developing and implementing a comprehensive, integrated, and reliable continuum of screening, assessment, and aligned service delivery.  OK-TASCC selected core services and activities, including early screening, functional assessment, data-driven case management resulting from screening and functional assessments, and monitoring through ongoing screening and assessment that will improve early detection and referrals for trauma-informed assessment.  With the implementation of a screener and a functional assessment for measurement of improvement over time, OK-TASCC hopes to promote the prevention, early detection, and treatment of behavioral and mental health difficulties.

OK-TASCC's selected screener, the Child Behavioral Health Screener (CBHS), one for birth up to 4 years of age and one for ages 4 through 17, provides a brief evaluation identifying who is at-risk for developing behavioral health difficulties and in need of referral for a clinical assessment.  The screening identifies broad and encompassing problem areas, such as externalizing and internalizing, rather than specific conditions or diagnoses, such as anxiety or depression.  The CBHS is an adapted version of the Survey of Well-Being of Young Children (SWYC) for birth through 47 months and an adapted version of the Pediatric Symptom Checklist (PSC) for 4 years through 17 years of age.  The birth through 47 months version screens for developmental delays and social/emotional functioning through inflexibility, irritability, and difficulty with routines.  The 4 through 17 years of age version screens for attention, internalizing, externalizing, and trauma reactions as well as assessment of current functioning.  Both versions also gather information about current services and treatments, as well as the use of psychotropic medication.

Overall, results suggest that CW staff is using the CBHS.  The repeated screening/functional assessment data is expected to increase a caseworker's capacity to better understand a child's mental and behavioral health needs and provide for a systematic means to understanding which services provide positive outcomes.  CBHS is identifying children who need behavioral health services among children who are not currently in services.  In addressing the social and emotional elements of functioning for children who experience maltreatment, well-being and permanency outcomes for children in care are expected to improve.  Therefore, the Placement Stability Team agreed to replace the in-depth reviews with CBHS.  Beginning in July 2018, each Placement Stability Lead will review a minimum of two cases where a child moved because the resource family was unable to work with the child's behavior.  Each Placement Stability Lead will evaluate the completed screeners, screener outcomes, and what services the child was referred to in order to support the child and resource family.

To further support CW staff, ITS was developed regarding the Initial Meeting (IM).  The ITS provides CW staff with detailed guidance on setting up and conducting an IM.  In addition, Form 04PP023E, Initial Meeting, is available online to assist and prepare each party for the IM.  Lastly, CWS streamlined and combined the Important People in the Child's Life and Family Tree forms for CW staff.  The new Form 04MP015E, Important People in the Child's Life/Family Tree is also available online to assist CW staff in gathering information about connections in the child's life.

**Actively Seeking KINnections**
On 3/29/2018, a new report, YI865–ASK, went live that collects ASK data and outcomes; thus, replacing the recruitment supervisors' manual tracking log.  The YI865 started pulling data for the month of February 2018.  The YI865 provides details on efforts and documentation related to the ASK initiative.  ASK staff are given a secondary assignment to cases to interview key participants to expand the search for kinship placement.  This report only includes secondary assignments with the description "Actively Seeking Kin".  The report updates monthly on the 5th and details all open secondary "ASK" assignments for the previous month. ASK is intended to increase the agency's value of family by identifying additional connections for children in custody, as well as additional prospective kinship foster parents.  CWS leadership's next steps include:
- ongoing assessment of outcomes connected to ASK;
- determining if the YI865 could be enhanced to track how many of the prospective kinship placements actually become a child's kinship placement; and
- evaluating whether or not ASK should be designated as the primary and only job duty for specific staff to remove the challenge of competing priorities.

The outcomes below represent data captured by the recruitment supervisors' manual logs from September 2017 to January 2018, prior to YI865-ASK report.  Since ASK implementation on 9/18/2017, approximately 701 ASK referrals occurred.  One referral equals one case, which could involve one or more children.  There have been 713 interviews with parents and kin, 1371 new connections identified, and 190 prospective kinship placements.

According to KIDS data, the percentage of bed days for kinship care for the last three fiscal years were 47.9 percent for SFY 16; 45.2 percent for SFY 17; and 45.6 percent for SFY 18.  Therefore, there was .4 percent increase from SFY 17 to SFY 18 for bed days for kinship care.  However, SFY 18 compared to SFY 16 shows a 2.3 percent decrease.

**One Move Data Report and In-Depth Reviews**
The One Move Data Report continues to provide valuable information to inform CW practice.  Since January 2018 through May 2018, 1005 children moved into their second placement.  Based on the data from the One Move Data, Report the top three reasons children moved into their second placement were:
- provider requested (other) – 25 percent;
- placement to kinship – 20 percent; and
- placement with sibling or closer to family – 14 percent.

Further analysis of the One Move Report indicated interestingly that only 11 percent of children who moved into their second placement did so because of behaviors. Additionally, 46 percent of the children moved due to behaviors had a Systems of Care (SOC) referral made to support the child's second placement. CWS is confident that the practices in place to support placement stability, such as the Resource Parent Check-In Call and IM assist in identifying needed support for the child and resource family and are helping decrease the number of moves due to behaviors. However, CWS needs to look further into the number of moves requested by the provider to ensure those moves are not associated with the child's behavior.

The One Move Data Report reflects 20 percent of children moved into a kinship placement. Based on the information collected in the One Move Data Report, children not being initially placed in kinship were due to miscellaneous reasons, such as, criminal history, out-of-state background checks, and family unknown at the time.

The in-depth reviews continue to provide much of the same information as previously seen in reviews related to placement stability. Overall, the information collected in the reviews reinforces the practices in place to support placement stability. When practices set forth in placement stability strategy are practiced the outcome for placement stability increases for children in OOH care. Due to a lack of new information generated from the in-depth reviews, CWS decided to move forward using the OK-TASCC screener as a source to review for placement stability.

**Kinship, Resource Parent Check-In Call, IM, and Ongoing Support**
CWS continues to exceed at initial kinship placements, Resource Parent Check-In Calls, IMs, and ongoing support.
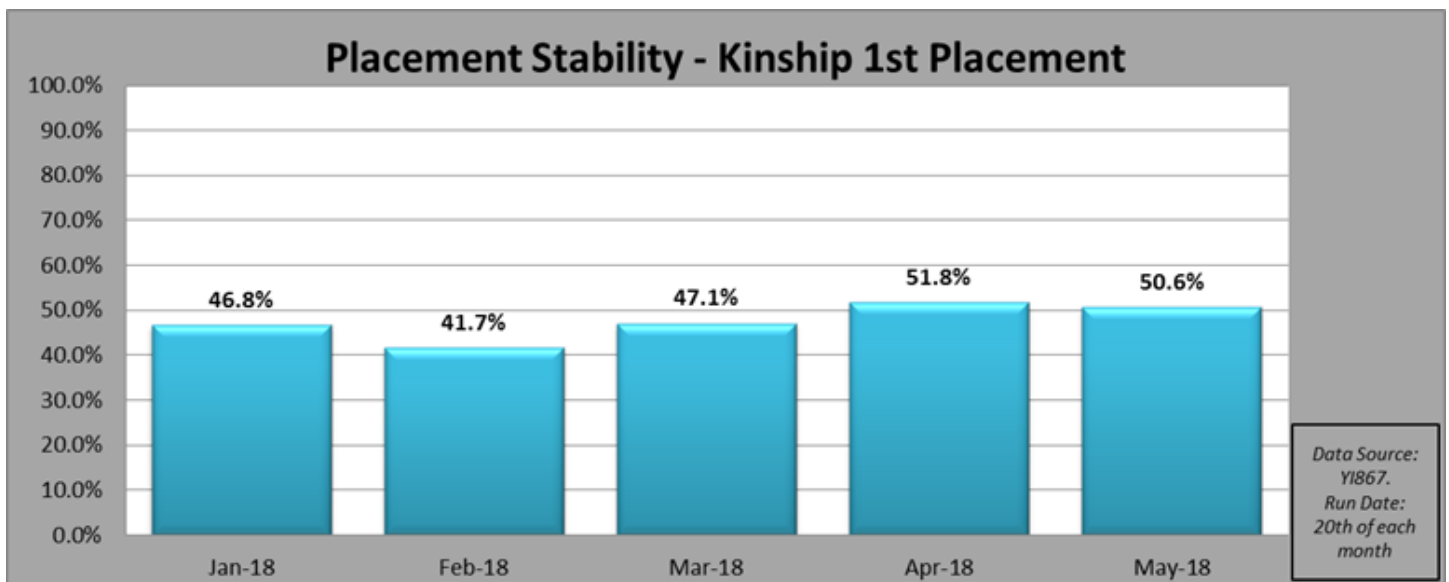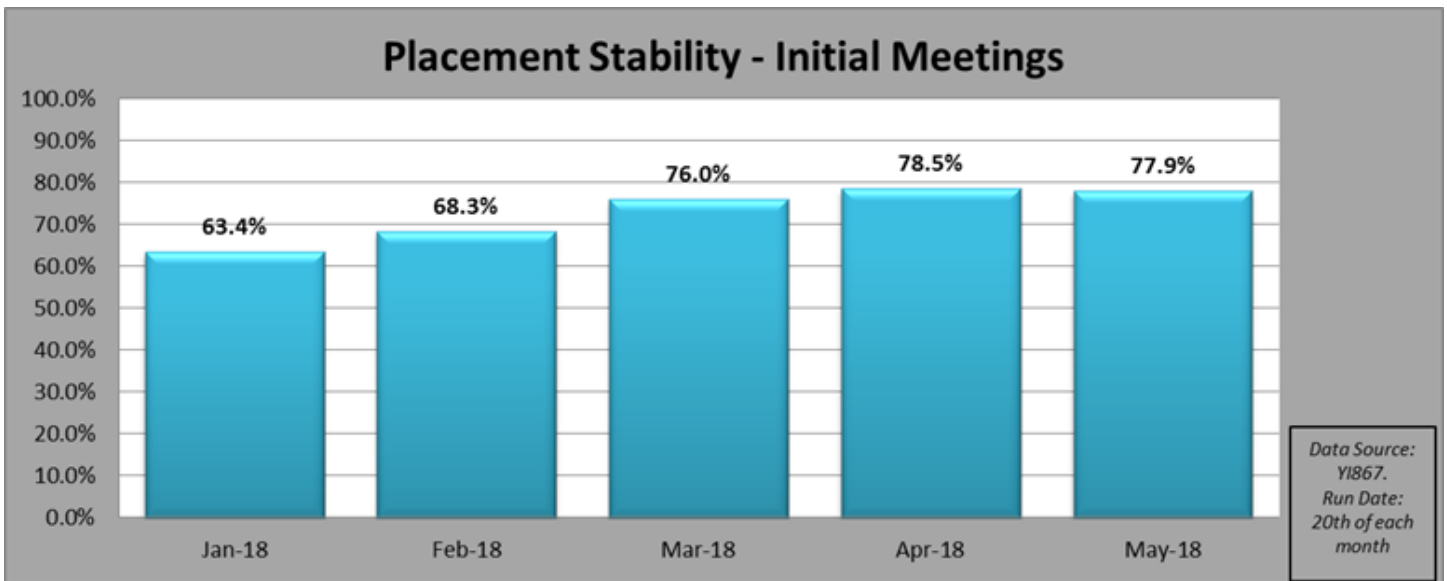


Section 2, Graph 4.2-2

Graph 4.2-2 reflects the percentage of children initially placed in kinship remains between 41.7 percent and 51.8 percent. CWS continues to remain above the national median of 32 percent for children initially placed in kinship placements.

## Placement Stability - Resource Parent Check-In Calls



Section 2, Graph 4.2-3

## Placement Stability - Initial Meetings
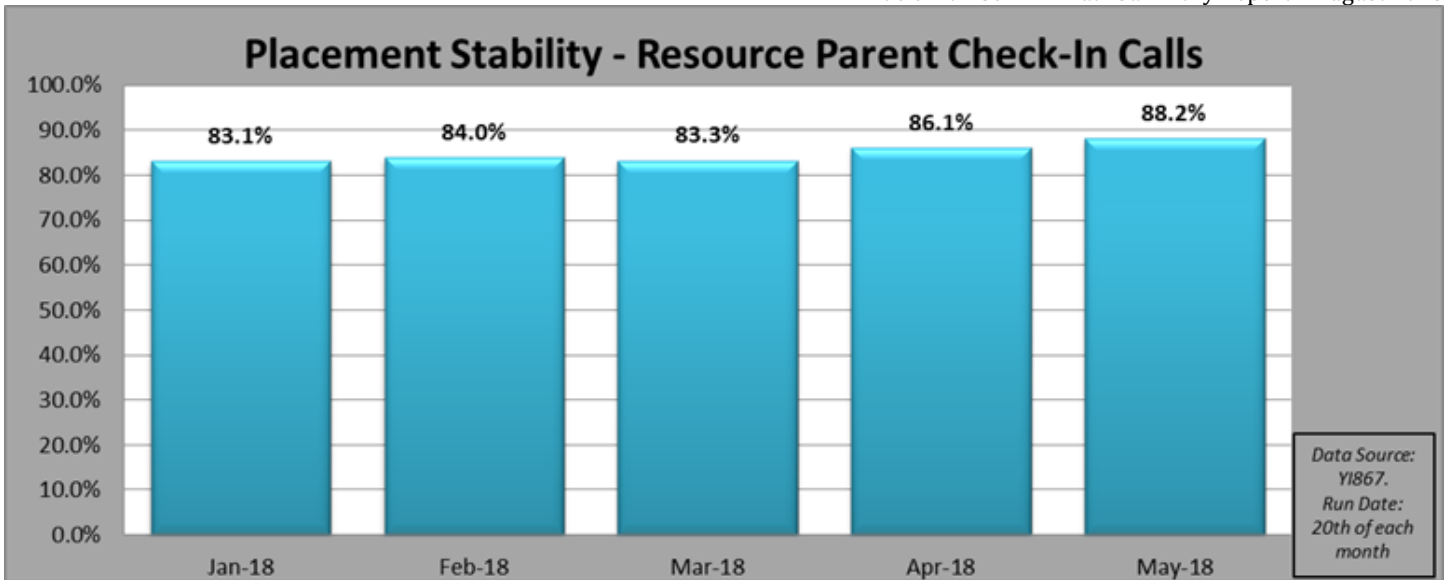


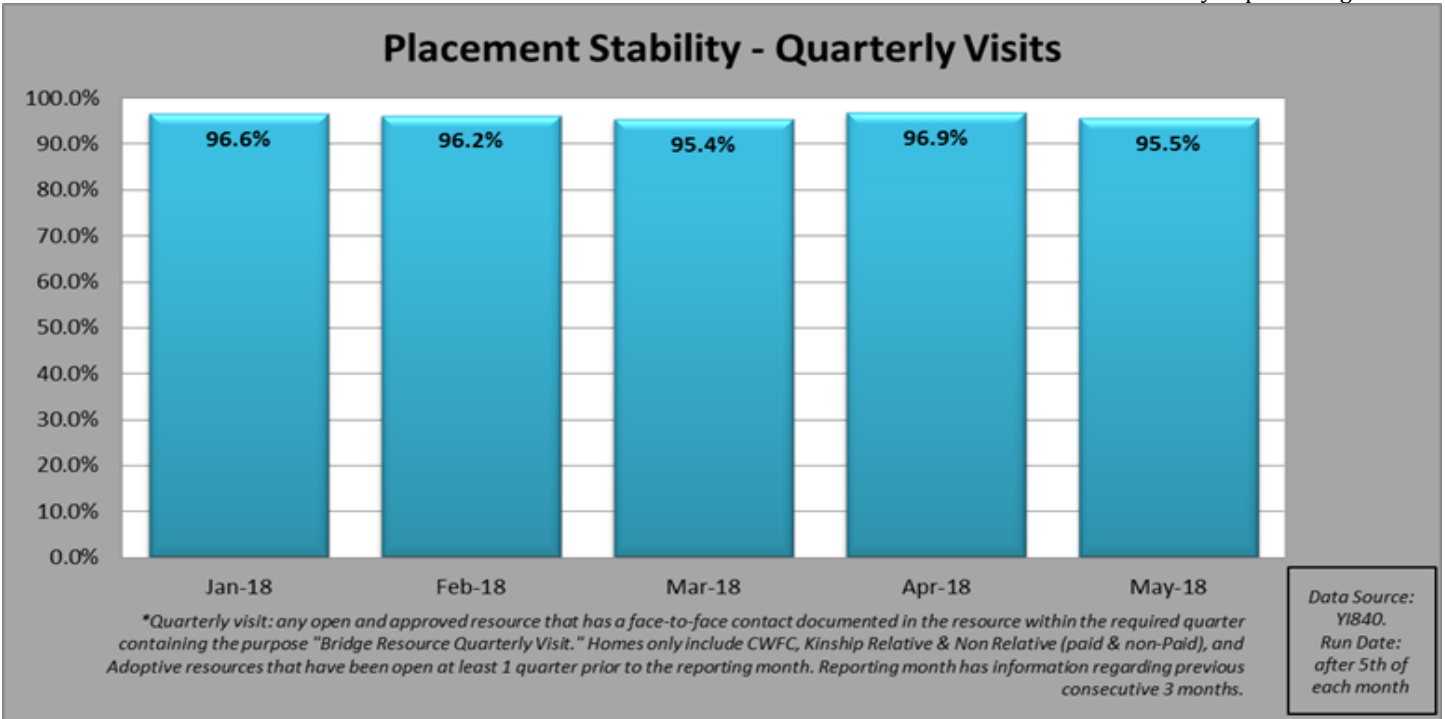Section 2, Graph 4.2-4

Graphs 4.2-3 and 4.2-4 indicate CWS continues to excel at conducting the Resource Parent Check-In Calls and IMs. Although, IMs did have a slight decrease in May 2018, CWS is still far above the baseline of 10.5 percent set in February 2017-April 2017. Furthermore, Graph 4.2-5 shows CWS continues to provide ongoing support through quarterly visits to the child and resource family.

## Placement Stability - Quarterly Visits



*Quarterly visit: any open and approved resource that has a face-to-face contact documented in the resource within the required quarter containing the purpose "Bridge Resource Quarterly Visit." Homes only include CWFC, Kinship Relative & Non Relative (paid & non-Paid), and Adoptive resources that have been open at least 1 quarter prior to the reporting month. Reporting month has information regarding previous consecutive 3 months.

Data Source: YI840. Run Date: after 5th of each month

**Section 2, Graph 4.2-5**

CWS continues its investment in the practices set forth in the placement stability strategy. The data related to the initial kinship placements, resource parent check-in calls, IMs, and quarterly visits reflects CW staff at all levels understand the importance of placement stability for children in OOH care. CWS believes these practices have contributed to the increase in placement stability for children in OOH care.

# 5.1: Shelter Use—Children ages 0 to 1 year old

## Operational Question

Of all children ages 0-1 year old with an overnight shelter stay from 1/1/2018 – 6/30/2018, how many nights were spent in the shelter?
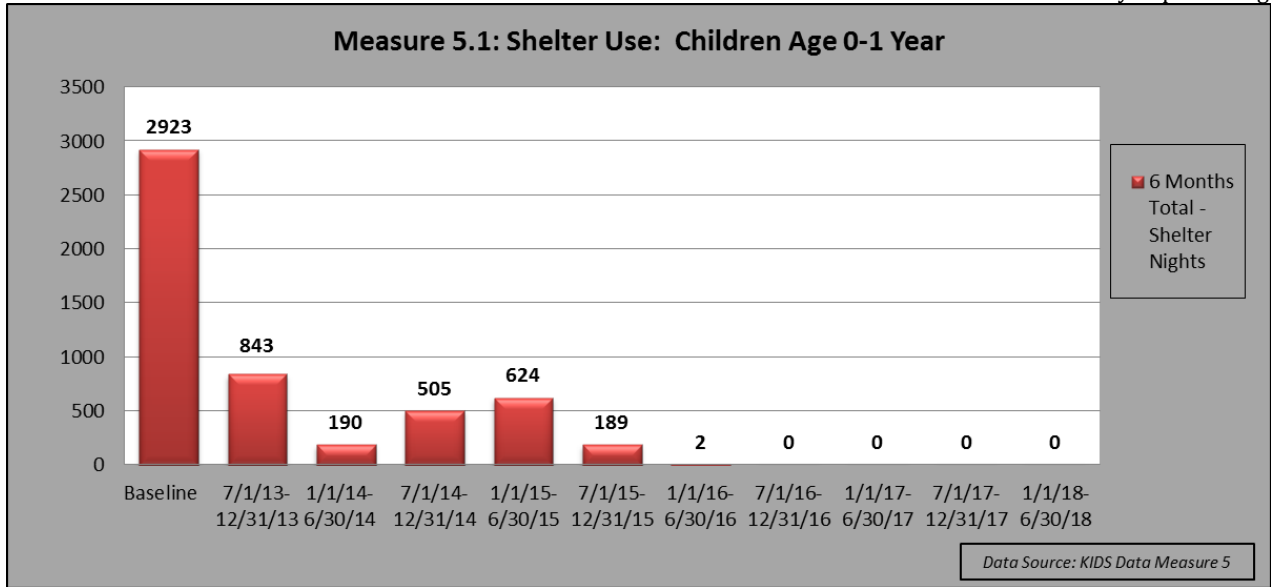
## Data Source and Definitions

Data shown is the total number of nights children ages 0-1 year old spent in the shelter during the time period from 1/1/2018 – 6/30/2018.  The baseline for this measure was 2,923 nights with a target of 0 nights by 12/31/2012. Automatic exceptions are made when the child is part of a sibling set of four or more or when a child is placed with a minor parent who is also in the Oklahoma Department of Human Services (DHS) custody.  Note: Children who meet automatic exceptions are still included in the count of total nights spent in the shelter.
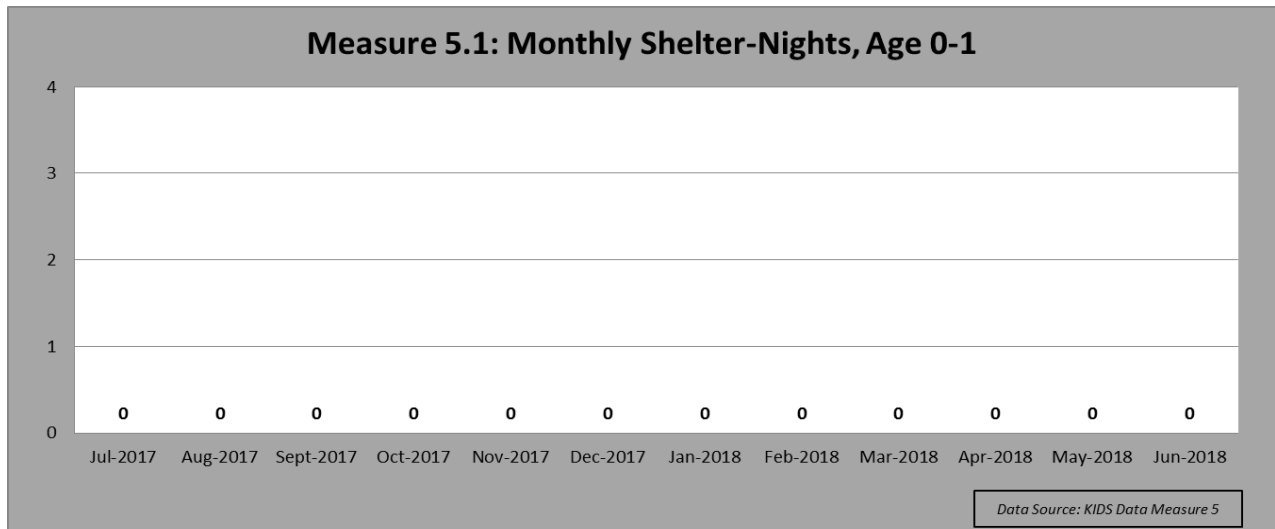
## Trends

| Reporting Period | Population | Result |
|---|---|---|
| Baseline: 1/1/2012 –  6/30/2012 | All children age 0-1 year with an overnight shelter stay from 1/1/2012 – 6/30/2012 | 2,923 Nights |
| 7/1/2013 –  12/31/2013 | All children age 0-1 year with an overnight shelter stay from 7/1/2013 – 12/31/2013 | 843 Nights |
| 1/1/2014 –  6/30/2014 | All children age 0-1 year with an overnight shelter stay from 1/1/2014 – 6/30/2014 | 190 Nights |
| 7/1/2014 –  12/31/2014 | All children age 0-1 year with an overnight shelter stay from 7/1/2014 – 12/31/2014 | 505 Nights |
| 1/1/2015 –  6/30/2015 | All children age 0-1 year with an overnight shelter stay from 1/1/2015 – 6/30/2015 | 624 Nights |
| 7/1/2015 –  12/31/2015 | All children age 0-1 year with an overnight shelter stay from 7/1/2015 – 12/31/2015 | 189 Nights |
| 1/1/2016 –  6/30/2016 | All children age 0-1 year with an overnight shelter stay from 1/1/2016 – 6/30/2016 | 2 Nights |
| 7/1/2016 –  12/31/2016 | All children age 0-1 year with an overnight shelter stay from 7/1/2016 – 12/31/2016 | 0 Nights |
| 1/1/2017 –  6/30/2017 | All children age 0-1 year with an overnight shelter stay from 1/1/2017 – 6/30/2017 | 0 Nights |
| 7/1/2017 –  12/31/2017 | All children age 0-1 year with an overnight shelter stay from 7/1/2017 – 12/31/2017 | 0 Nights |
| 1/1/2018 –  6/30/2018 | All children age 0-1 year with an overnight shelter stay from 1/1/2018 – 6/30/2018 | 0 Nights |
| Target | | 0 Nights |

Section 2, Table 5.1-1

## Measure 5.1: Shelter Use:  Children Age 0-1 Year



**Section 2, Graph 5.1-1**

## Measure 5.1: Monthly Shelter-Nights, Age 0-1



**Section 2, Graph 5.1-2**

## Measure 5.1: Monthly Children in Shelter, Age 0-1
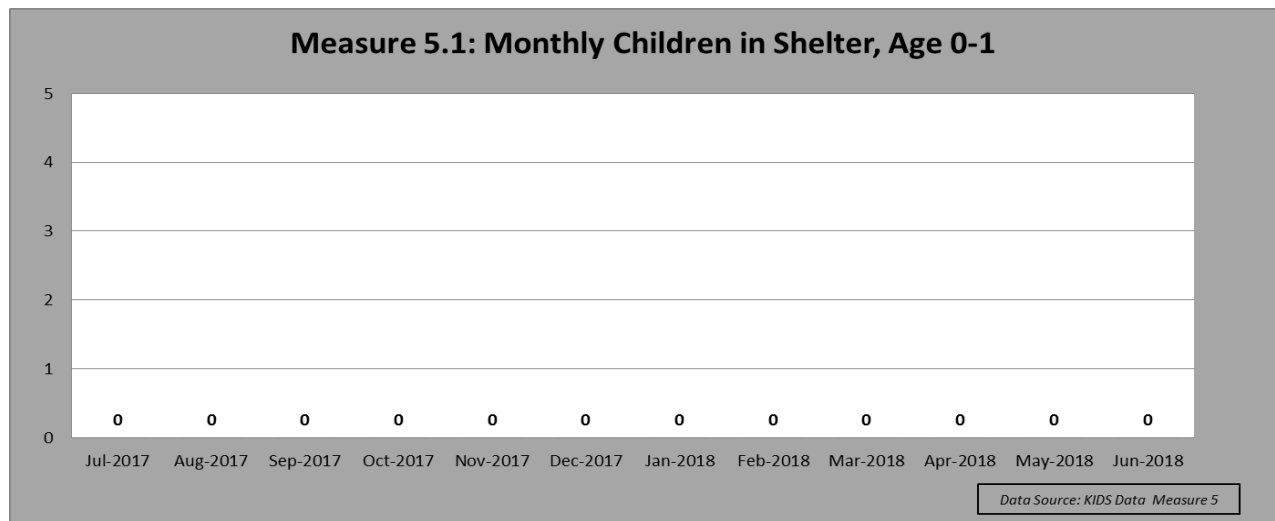


**Section 2, Graph 5.1-3**

## Commentary

A total of 0 children ages 0-1 year old spent 0 nights in the shelter from 1/1/2018 – 6/30/2018.  During this time period, 2,755 children ages 0-1 year were in care and 100 percent of those children did not have a shelter stay.  A child under the age of 2 years old has not been placed overnight in the shelter since January 2016.

# 5.2: Shelter Use—Children ages 2 to 5 years old

## Operational Question

Of all children ages 2-5 years old with an overnight shelter stay from 1/1/2018 – 6/30/2018, how many nights were spent in the shelter?

## Data Source and Definitions

Data shown is the total number of nights children ages 2-5 years old spent in the shelter during the time period from 1/1/2018 – 6/30/2018.  The baseline for this measure was 8,853 nights with a target of 0 nights by 6/30/2013.  Automatic exceptions are made when the child is part of a sibling set of four or more or a child is placed with a minor parent who is also in the Oklahoma Department of Human Services (DHS) custody.  Note: Children who meet automatic exceptions are still included in the count of total nights spent in the shelter.

## Trends

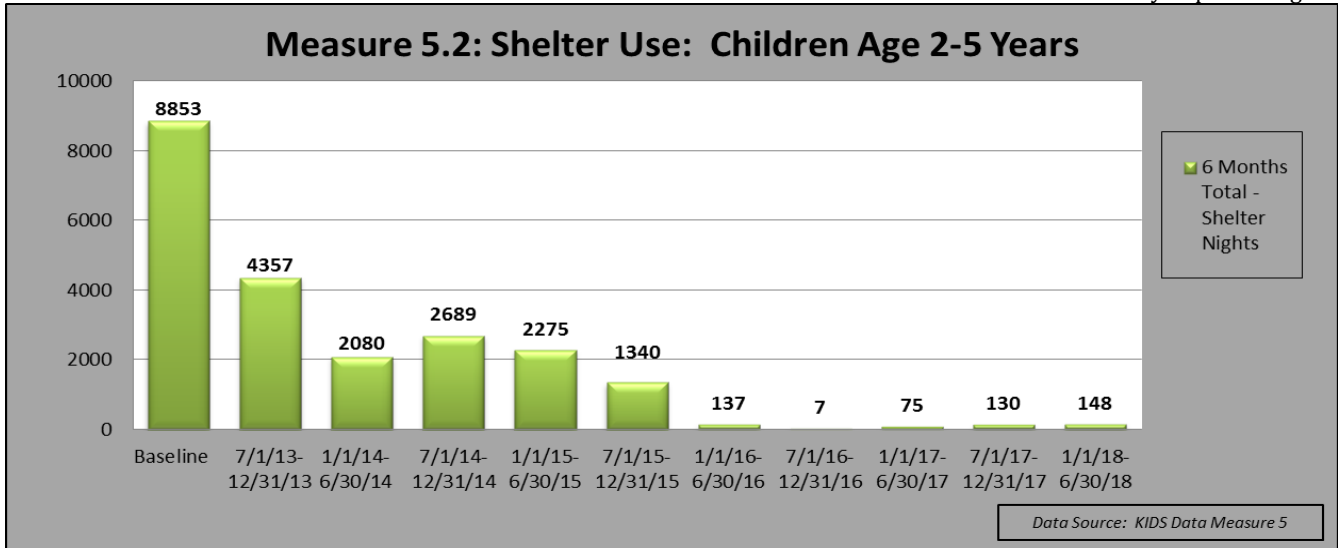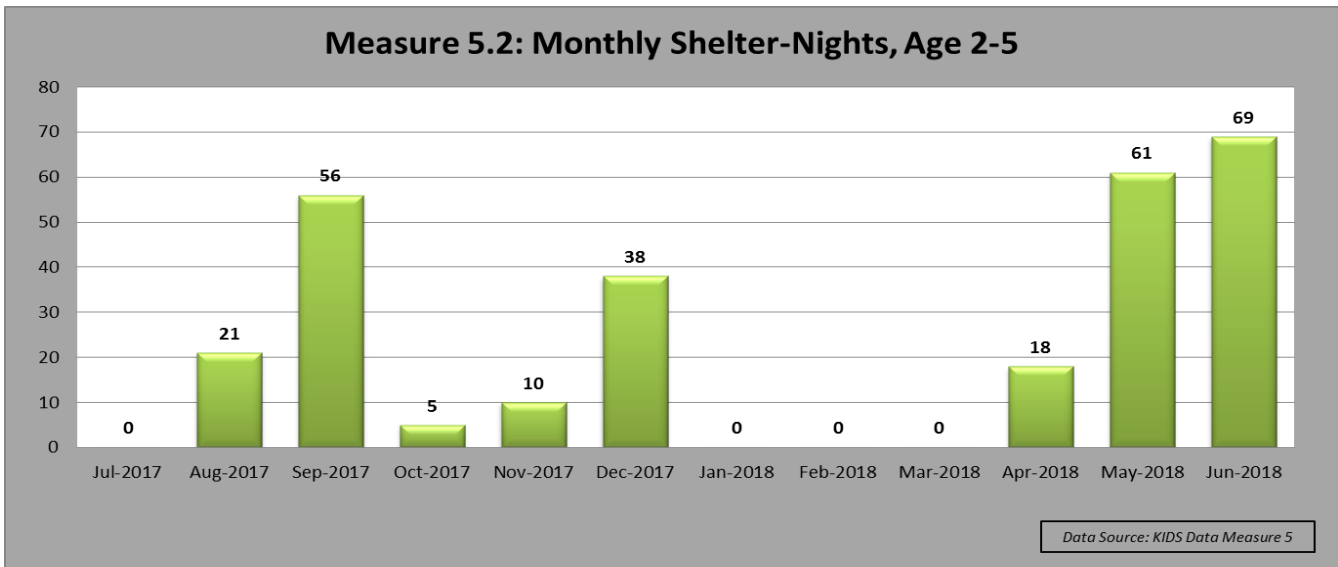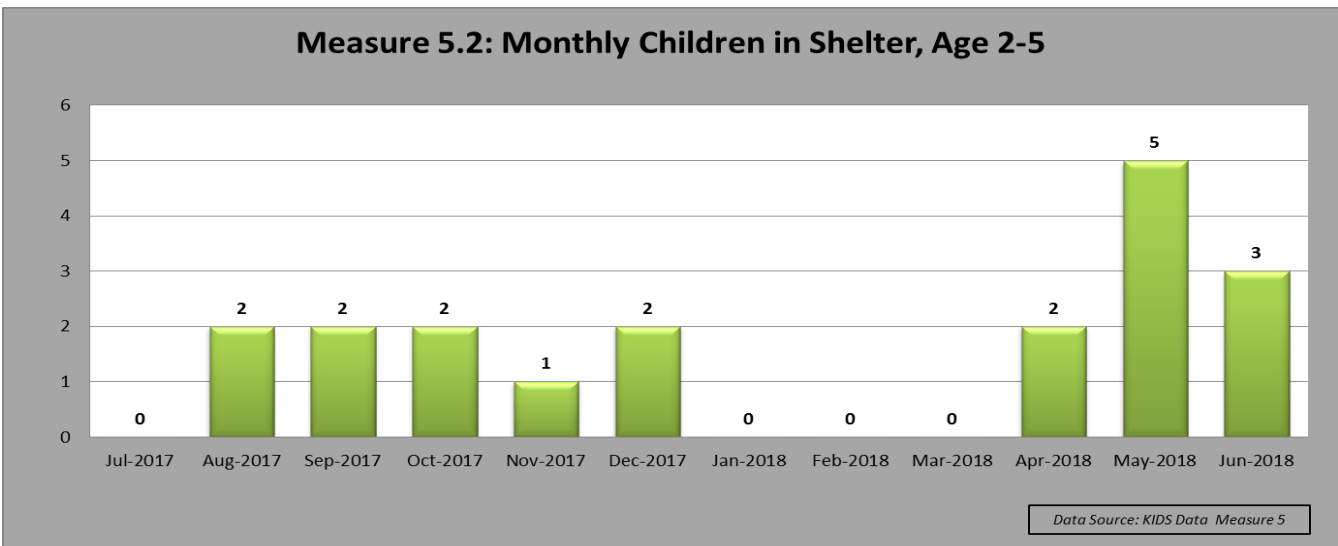| Reporting Period | Population | Result |
|---|---|---|
| Baseline: 1/1/2012 – 6/30/2012 | All children age 2-5 years with an overnight shelter stay from 1/1/2012 – 6/30/2012 | 8,853 Nights |
| 7/1/2013 – 12/31/2013 | All children age 2-5 years with an overnight shelter stay from 7/1/2013 – 12/31/2013 | 4,357 Nights |
| 1/1/2014 – 6/30/2014 | All children age 2-5 years with an overnight shelter stay from 1/1/2014 – 6/30/2014 | 2,080 Nights |
| 7/1/2014 – 12/31/2014 | All children age 2-5 years with an overnight shelter stay from 7/1/2014 – 12/31/2014 | 2,689 Nights |
| 1/1/2015 – 6/30/2015 | All children age 2-5 years with an overnight shelter stay from 1/1/2015 – 6/30/2015 | 2,275 Nights |
| 7/1/2015 – 12/31/2015 | All children age 2-5 years with an overnight shelter stay from 7/1/2015 – 12/31/2015 | 1,340 Nights |
| 1/1/2016 – 6/30/2016 | All children age 2-5 years with an overnight shelter stay from 1/1/2016 – 6/30/2016 | 137 Nights |
| 7/1/2016 – 12/31/2016 | All children age 2-5 years with an overnight shelter stay from 7/1/2016 – 12/31/2016 | 7 Nights |
| 1/1/2017 – 6/30/2017 | All children age 2-5 years with an overnight shelter stay from 1/1/2017 – 6/30/2017 | 75 Nights |
| 7/1/2017 – 12/31/2017 | All children age 2-5 years with an overnight shelter stay from 7/1/2017 – 12/31/2017 | 130 Nights |
| 1/1/2018 – 6/30/2018 | All children age 2-5 years with an overnight shelter stay from 1/1/2018 – 6/30/2018 | 148 Nights |
| Target | | 0 Nights |

Section 2, Table 5.2-1

## Measure 5.2: Shelter Use: Children Age 2-5 Years

| | Baseline | 7/1/13-12/31/13 | 1/1/14-6/30/14 | 7/1/14-12/31/14 | 1/1/15-6/30/15 | 7/1/15-12/31/15 | 1/1/16-6/30/16 | 7/1/16-12/31/16 | 1/1/17-6/30/17 | 7/1/17-12/31/17 | 1/1/18-6/30/18 |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 6 Months Total - Shelter Nights | 8853 | 4357 | 2080 | 2689 | 2275 | 1340 | 137 | 7 | 75 | 130 | 148 |

Data Source: KIDS Data Measure 5

**Section 2, Graph 5.2-1**

## Measure 5.2: Monthly Shelter-Nights, Age 2-5

| Jul-2017 | Aug-2017 | Sep-2017 | Oct-2017 | Nov-2017 | Dec-2017 | Jan-2018 | Feb-2018 | Mar-2018 | Apr-2018 | May-2018 | Jun-2018 |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 21 | 56 | 5 | 10 | 38 | 0 | 0 | 0 | 18 | 61 | 69 |

Data Source: KIDS Data Measure 5

**Section 2, Graph 5.2-2**

## Measure 5.2: Monthly Children in Shelter, Age 2-5

| Jul-2017 | Aug-2017 | Sep-2017 | Oct-2017 | Nov-2017 | Dec-2017 | Jan-2018 | Feb-2018 | Mar-2018 | Apr-2018 | May-2018 | Jun-2018 |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 0 | 2 | 2 | 2 | 1 | 2 | 0 | 0 | 0 | 2 | 5 | 3 |

Data Source: KIDS Data Measure 5

**Section 2, Graph 5.2-3**

**Commentary**

A total of 5 distinct children ages 2-5 years old spent a total of 148 nights in shelter care from 1/1/2018 – 6/30/2018. Section 2, Graph 5.2-3 identifies 10 children spending time in shelters between January and June 2018, although 4 of these children are shown in multiple months as the shelter stay extended more than one month. During this time period, 4,276 children ages 2-5 years were in care and 99.9 percent of those children did not have a shelter stay.

## 5.3: Shelter Use—Children ages 6 to 12 years old

**Operational Question**

Of all children ages 6-12 years old with an overnight shelter stay from 1/1/2018 – 6/30/2018, how many nights were spent in the shelter?
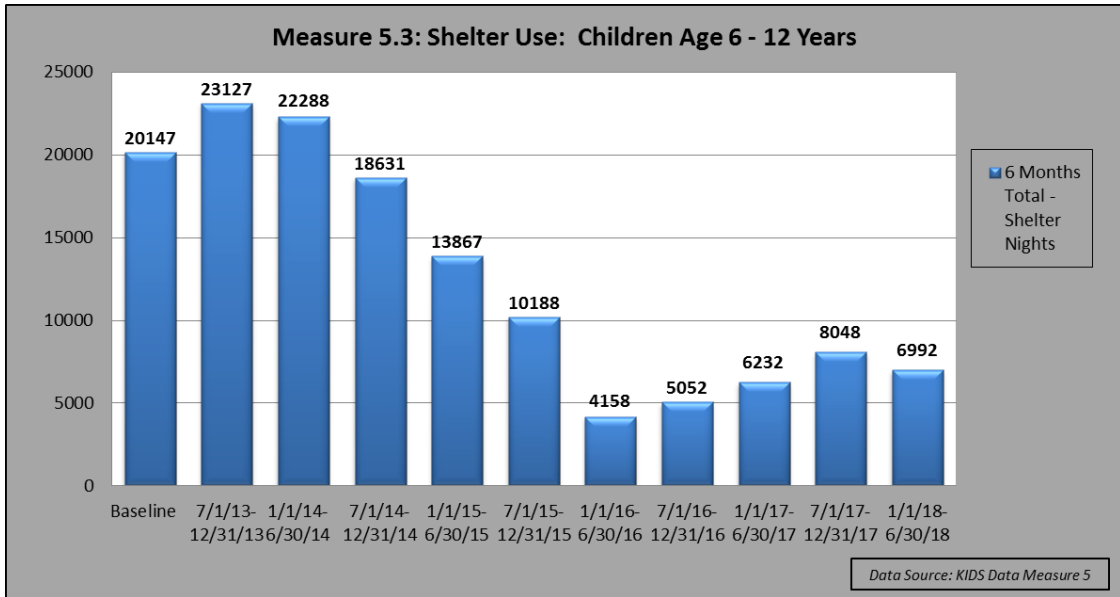
**Data Source and Definitions**

Data shown is the total number of nights children ages 6-12 years old spent in the shelter during the time period from 1/1/2018 – 6/30/2018. The baseline for this measure was 20,147 nights with an interim target of 10,000 nights by 12/31/2013. An automatic exception is made when the child is part of a sibling set of four or more. Note: Children who meet an automatic exception are still included in the count of total nights spent in the shelter.
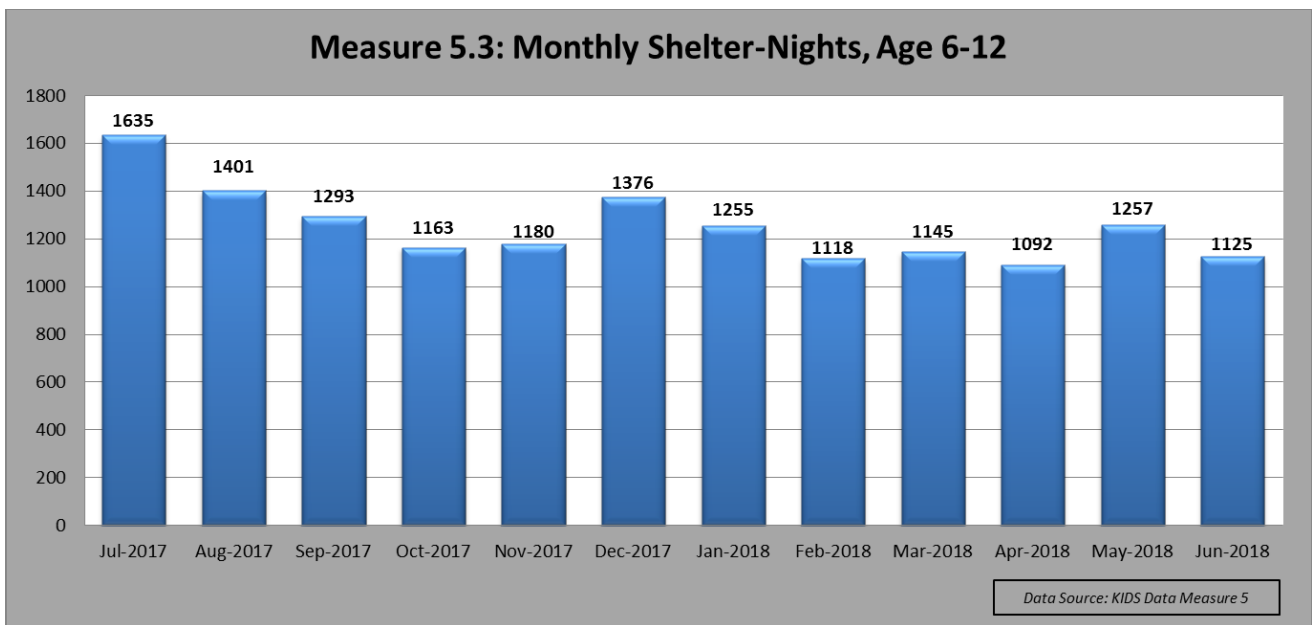
**Trends**

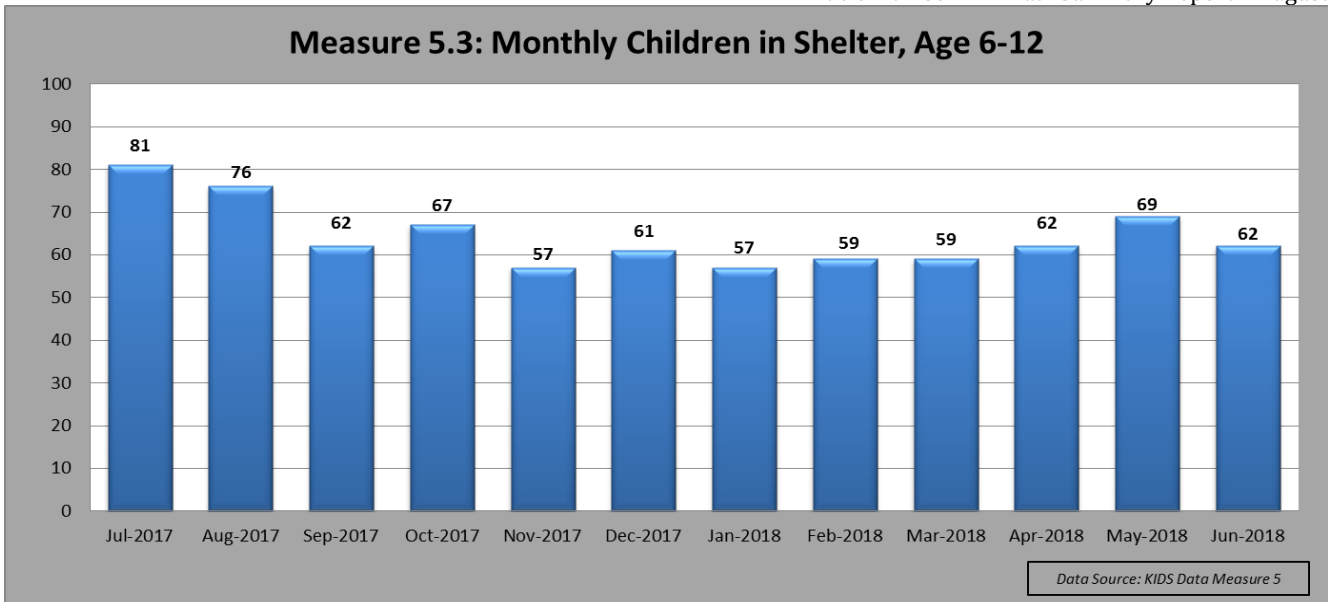| Reporting Period | Population | Result |
|---|---|---|
| Baseline: 1/1/2012 – 6/30/2012 | All children age 6-12 years with an overnight shelter stay from 1/1/2012 – 6/30/2012 | 20,147 Nights |
| 7/1/2013 – 12/31/2013 | All children age 6-12 years with an overnight shelter stay from 7/1/2013 – 12/31/2013 | 23,127 Nights |
| 1/1/2014 – 6/30/2014 | All children age 6-12 years with an overnight shelter stay from 1/1/2014 – 6/30/2014 | 22,288 Nights |
| 7/1/2014 – 12/31/2014 | All children age 6-12 years with an overnight shelter stay from 7/1/2014 – 12/31/2014 | 18,631 Nights |
| 1/1/2015 – 6/30/2015 | All children age 6-12 years with an overnight shelter stay from 1/1/2015 – 6/30/2015 | 13,867 Nights |
| 7/1/2015 – 12/31/2015 | All children age 6-12 years with an overnight shelter stay from 7/1/2015 – 12/31/2015 | 10,188 Nights |
| 1/1/2016 – 6/30/2016 | All children age 6-12 years with an overnight shelter stay from 1/1/2016 – 6/30/2016 | 4,158 Nights |
| 7/1/2016 – 12/31/2016 | All children age 6-12 years with an overnight shelter stay from 7/1/2016 – 12/31/2016 | 5,052 Nights |
| 1/1/2017 – 6/30/2017 | All children age 6-12 years with an overnight shelter stay from 1/1/2017 – 6/30/2017 | 6,232 Nights |
| 7/1/2017 – 12/31/2017 | All children age 6-12 years with an overnight shelter stay from 7/1/2017 – 12/31/2017 | 8,048 Nights |
| 1/1/2018 – 6/30/2018 | All children age 6-12 years with an overnight shelter stay from 1/1/2018 – 6/30/2018 | 6,992 Nights |
| Target | | 0 Nights |

**Section 2, Table 5.3-1**

**Measure 5.3: Shelter Use:  Children Age 6 - 12 Years**



Section 2, Graph 5.3-1

**Measure 5.3: Monthly Shelter-Nights, Age 6-12**



Section 2, Graph 5.3-2

## Measure 5.3: Monthly Children in Shelter, Age 6-12



Data Source: KIDS Data Measure 5

**Section 2, Graph 5.3-3**

### Commentary

A total of 156 distinct children ages 6-12 years old spent a total of 6,992 nights in the shelter from 1/1/2018 through 6/30/2018.  Section 2, Graph 5.3-3 identifies 368 children spending time in shelters from January through June 2018.  In some cases, the child's shelter stay extended across multiple months, thus the child is included in the count for both months.  During this time period, 4,591 children ages 6-12 years old were in care and 96.6 percent of those children did not have a shelter stay.  This is the first reporting period since SFY 16 where there has been a decline in the number of shelter nights for children in this age group.

## 5.4: Shelter Use—Children ages 13 and older

### Operational Question

Of all children ages 13 years or older with an overnight shelter stay from 1/1/2018 – 6/30/2018, how many nights were spent in the shelter?
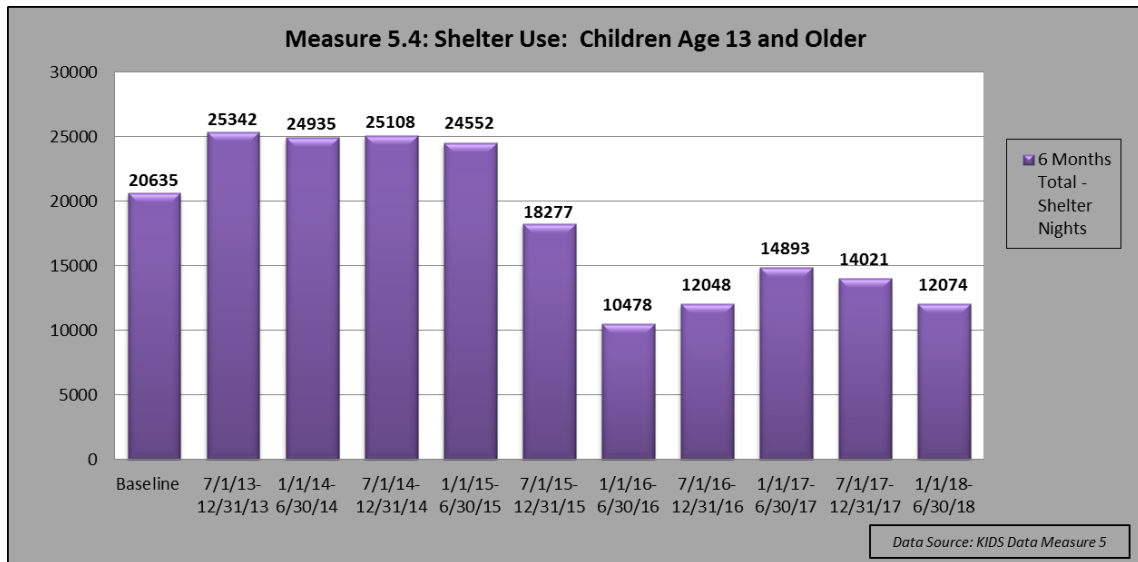
### Data Source and Definitions

Data shown is the total number of nights children ages 13 years or older spent in the shelter during the time period from 1/1/2018 – 6/30/2018.  The baseline for this measure is 20,635 nights with a target of 13,200.  Of the children 13 years and older placed in a shelter during this period, the target is 80 percent of the children will meet the criteria of Pinnacle Plan Point 1.17.  An automatic exception is made for children when the child is part of a sibling set of four or more.  Note: Children who meet and automatic exception are still included in the count of total nights spent in the shelter.

### Trends

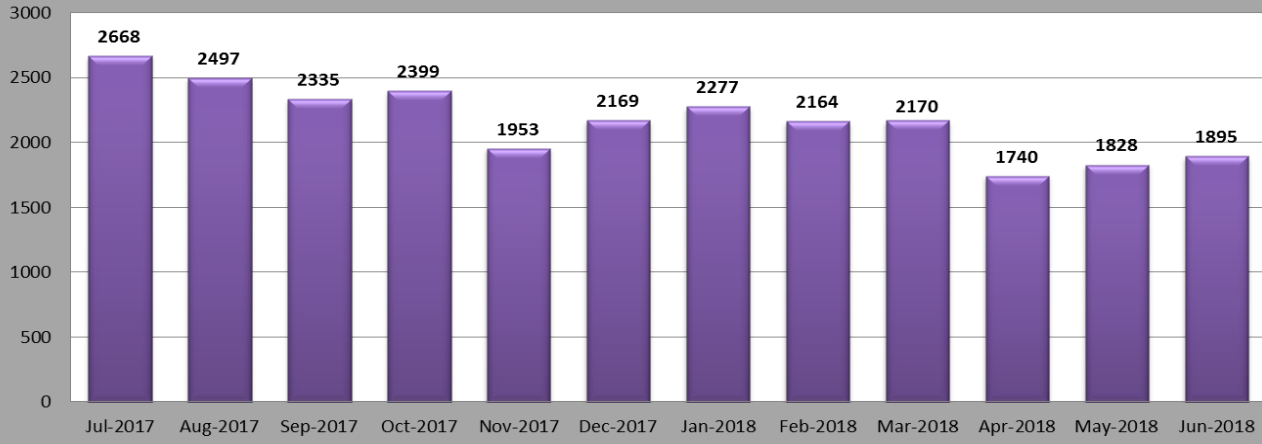| Reporting Period | Population | Result |
|---|---|---|
| Baseline: 1/1/2012 – 6/30/2012 | All children age 13 or older with an overnight shelter stay from 1/1/2012 – 6/30/2012 | 20,635 Nights |
| 7/1/2013 – 12/31/2013 | All children age 13 or older with an overnight shelter stay from 7/1/2013 – 12/31/2013 | 25,342 Nights |
| 1/1/2014 – 6/30/2014 | All children age 13 or older with an overnight shelter stay from 1/1/2014 – 6/30/2014 | 24,935 Nights |
| 7/1/2014 – 12/31/2014 | All children age 13 or older with an overnight shelter stay from 7/1/2014 – 12/31/2014 | 25,108 Nights |

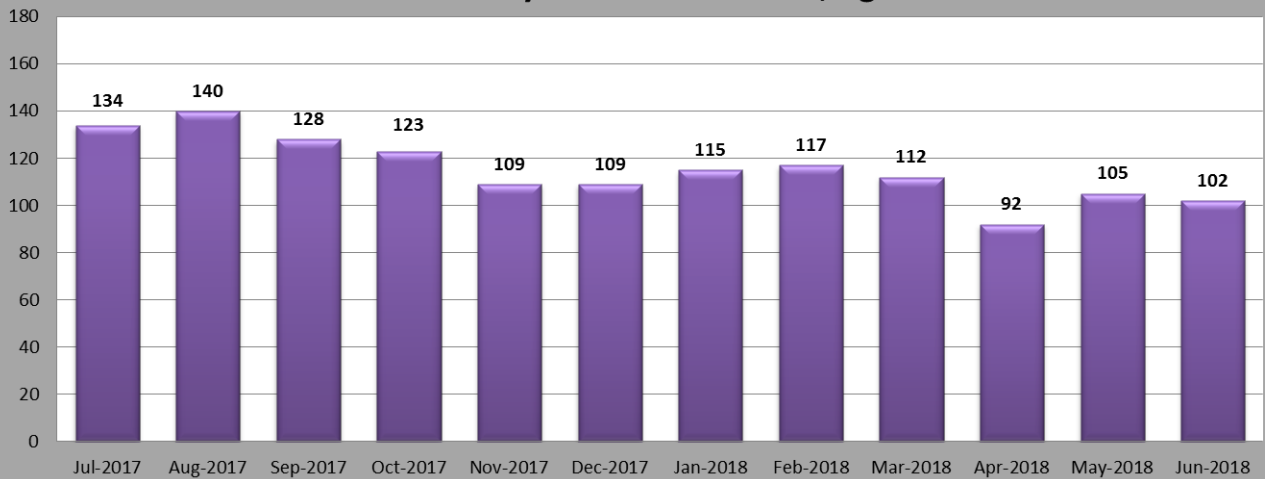| 1/1/2015 – 6/30/2015 | All children age 13 or older with an overnight shelter stay from 1/1/2015 – 6/30/2015 | 24,552 Nights |
|---|---|---|
| 7/1/2015 – 12/31/2015 | All children age 13 or older with an overnight shelter stay from 7/1/2015 – 12/31/2015 | 18,277 Nights |
| 1/1/2016 – 6/30/2016 | All children age 13 or older with an overnight shelter stay from 1/1/2016 – 6/30/2016 | 10,478 Nights |
| 7/1/2016 – 12/31/2016 | All children age 13 or older with an overnight shelter stay from 7/1/2016 – 12/31/2016 | 12,048 Nights |
| 1/1/2017 – 6/30/2017 | All children age 13 or older with an overnight shelter stay from 1/1/2017 – 6/30/2017 | 14,893 Nights |
| 7/1/2017 – 12/31/2017 | All children age 13 or older with an overnight shelter stay from 7/1/2017 – 12/31/2017 | 14,021 Nights |
| 1/1/2018 – 6/30/2018 | All children age 13 or older with an overnight shelter stay from 1/1/2018 – 6/30/2018 | 12,074 Nights |
| Target | | 8,850 Nights |

**Section 2, Table 5.4-1**



**Section 2, Graph 5.4-1**

## Measure 5.4: Monthly Shelter-Nights, Age 13 and Older

Data values by month:
- Jul-2017: 2668
- Aug-2017: 2497
- Sep-2017: 2335
- Oct-2017: 2399
- Nov-2017: 1953
- Dec-2017: 2169
- Jan-2018: 2277
- Feb-2018: 2164
- Mar-2018: 2170
- Apr-2018: 1740
- May-2018: 1828
- Jun-2018: 1895

*Data Source: KIDS Data Measure 5*

**Section 2, Graph 5.4-2**

## Measure 5.4: Monthly Children in Shelter, Age 13 and Older

Data values by month:
- Jul-2017: 134
- Aug-2017: 140
- Sep-2017: 128
- Oct-2017: 123
- Nov-2017: 109
- Dec-2017: 109
- Jan-2018: 115
- Feb-2018: 117
- Mar-2018: 112
- Apr-2018: 92
- May-2018: 105
- Jun-2018: 102

*Data Source: KIDS Data Measure 5*

**Section 2, Graph 5.4-3**

## Commentary

A total of 274 distinct children ages 13 years or older spent a total of 12,074 nights in shelter care from 1/1/2018 through 6/30/2018. Section 2, Graph 5.4-3 identifies 643 children spending time in shelters from January through June 2018. In some cases, the child's shelter stay extended across multiple months thus, the child is included in the count for both months. During this time period, 2,043 children ages 13 years or older were in care and 86.6 percent of those children did not have a shelter stay.

**Initiative 1.17: Youth 13 years and older not to be placed in a shelter more than one time within a 12-month period and for no more than 30 days in any 12-month period.**
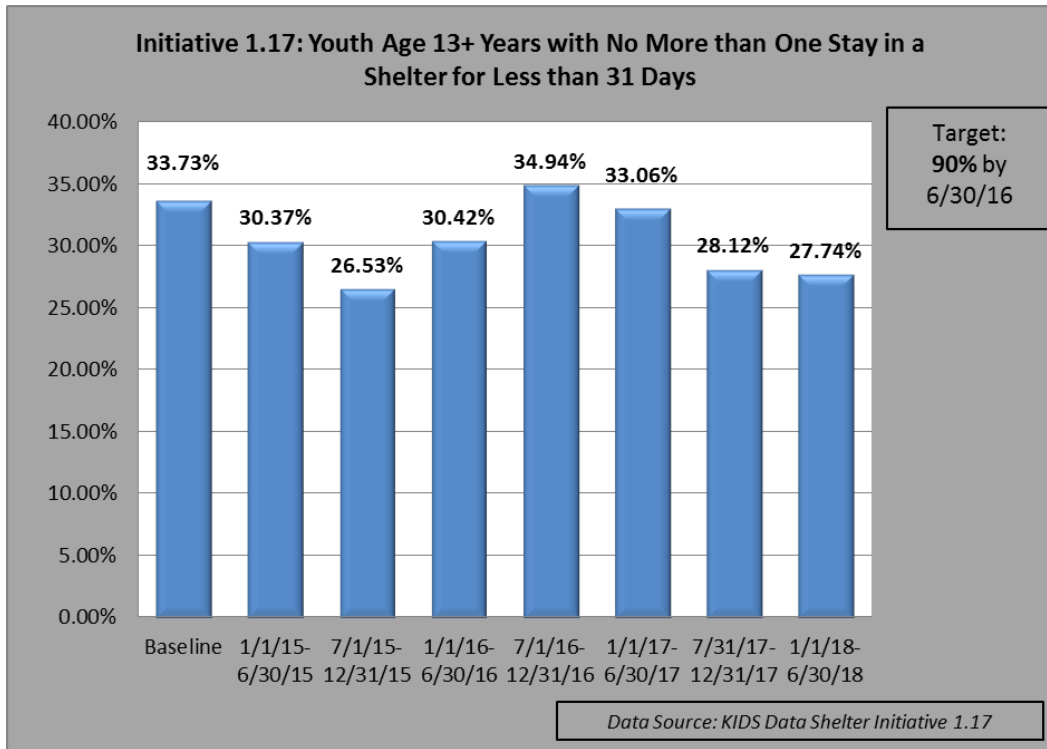


Section 2, Graph 5.4-4

## Commentary

For the six-month period ending 6/30/2018, the Oklahoma Department of Human Services (DHS) experienced a slight decrease from the prior reporting period of 0.38 percent. Of the 274 children age 13 and older who had a shelter stay during the time frame, 76 children, 27.74 percent, had one shelter stay lasting less than 31 days. However, of the 274 children age 13 and up who had a shelter stay: 75 children, 27.37 percent, had one stay that lasted longer than 31 days; 27 children, 9.85 percent, had two or more stays that lasted less than 31 days; and 96 children, 35.04 percent, had two or more stays that lasted more than 31 days in the shelter. Although the overall compliance percentage of youth with one stay less than 31 days decreased, fewer youth were served in a shelter placement during the review period, a 12.5 percent reduction from the 313 youth served in the last review period. Of the 274 youth, 151 had only one stay and the average length of that shelter stay for those youth was 71 nights. In comparison to the previous reporting period, 116 youth with one shelter stay had an average stay of 63 nights. While DHS had fewer youth with short shelter stays, the youth currently in the shelter are staying longer since these youth are the more difficult to place population.

Child Welfare Services (CWS) has actively engaged in a variety of different efforts to reduce shelter utilization over the past few years. Many of these targeted efforts are directly linked to far fewer children utilizing shelter care across the state. Although CWS has not fully achieved the metrics identified for this specific strategy, significant improvements in shelter utilization can be recognized. Shelter utilization for children ages 0-1 was completely eliminated, use for children ages 2-5 occurs extremely infrequently, and overall shelter utilization operates at a significantly lower rate than when targeted efforts began on this strategy over six years ago. The state-operated shelter, Pauline E. Mayer Shelter (PEMS) closed November 2015 and never re-opened. In June 2018, CWS officially closed the remaining state-operated shelter, the Laura Dester Children's Center (LDCC) in Tulsa. CWS is always working towards the defined metrics of reducing shelter utilization, while balancing the best interest and safety of all children in out-of-home care. The data indicates that with targeted efforts, CWS once again saw a decrease in the overall use of shelter care statewide. Challenges seemed to consistently appear that impacted the pool of readily-available, needs-based placements for children within

the child welfare (CW) system.  However, CWS has not allowed these challenges to divert the constant efforts to eliminate shelter care entirely.

**LDCC**
Over the last year, LDCC embraced a physical and cultural renovation prior final closure.  Specifically during this reporting period, several activities occurred which led to LDCC's final closure on 6/27/2018.  CWS engaged in assessing the entire spectrum of needs identified at LDCC to begin changing the way services were delivered and children were cared for when placed at this facility. Identified improvement areas included expanding quality leadership and staffing capacity, exploring specialized facility programming, deployment of the Managing Aggressive Behavior (MAB) approach, continued efforts to address heightened monitoring strategies for maltreatment in care (MIC), as well as other process improvement activities.

Beginning in January, LDCC brought on several new staff to the facility and three new key positions were developed to improve daily operations.  A specialized consultant was hired and began working alongside the existing facility director up to five days per week.  The consultant led the implementation of daily programming focused on educational, skill-based, and recreational activities that were scheduled and executed by the direct care staff, while the facility director was able to focus on other necessary activities to ensure the children's medical, behavioral, and developmental needs were met.  The other two positions hired in March 2018 were vital to ensure continuity throughout the facility.  A client advocate position was hired to work directly with the Office of Client Advocacy (OCA).  A program coordinator position was also added to the staffing roster to develop innovative programming specifically to address the needs of the children placed at LDCC.  The two positions increased the facility director's availability to better focus on reducing MIC incidents, as well as increase training and support to the direct care staff.

During this reporting period, CWS, in partnership with the Office of Performance Outcomes and Accountabilities (OPOA), engaged in an effort to substantially impact the organizational processes and daily operations to better care for the children remaining in the facility.  This effort focused on improving the shift change process and better managing of critical incidents with the residents.  LDCC administration was actively engaged in developing updated and improved processes that increased the quality of information gathered and passed along to staff to ensure the resident's daily needs and challenges were known by all caregivers.  As the decision to cease new admissions to LDCC was executed in March 2018, OPOA and CWS focused primarily on the shift change process improvement effort.  A new shift change protocol was developed and new accountability documentation was created with a specific focus on creating a safe feedback loop regarding the care for the children by direct care staff and supervisors.  Training for all staff was conducted by OPOA and full implementation of the enhanced process occurred in late April 2018.  Although the LDCC facility closed by the end of June, the improvements made during this time can be utilized within other congregate care and shelter facilities to better care for children  The secondary focus was on understanding and improving responses to critical incidents that occurred with children at LDCC.  A process needed to be implemented for evaluating how direct care staff and supervisors addressed these issues, since staff lacked a consistent approach.  It was also necessary to develop a learning opportunity from each of the incidents in order to create a safe living environment for the residents until the facility's closure occurred.  Although the processes were only used for a short period of time, the care and experience children received during those last few months was significantly improved.

In March 2018, CWS received notice that admissions to LDCC must end effective immediately and that all remaining children in the facility needed to be relocated to needs-based placements by the end of June 2018.  CWS immediately ended admissions and began developing a strategy to relocate the children to more appropriate, needs-based placements. This required gathering the previously used multi-disciplinary team to staff each of the remaining children at the facility.  Once placement levels were determined based on the children's needs, they began leaving the facility over the course of the next three months.  On 6/27/2018, the final two children left the facility and CWS requested closure of LDCC's residential child-placing license from the Office of Juvenile Affairs (OJA).  The facility has officially closed for use as a shelter and will reopen in the future under a private contractor as an immediate care facility for children with intellectual and developmental disabilities.

**Enhanced Shelter Reduction Efforts-LDCC and Youth Services Shelters**

Besides LDCC's closure, enhanced efforts to reduce shelter care were put in place January 2018.  CWS began focusing on a new and enhanced set of strategies to reduce the overall population utilizing shelter care for children of all ages.  As the data indicates, CWS continues to ensure very young children, ages 0-1, do not spend any nights outside of a family setting.  During this reporting period, there was a slight increase in the number of children ages 2-5 who spent time in shelter care.  When examined closely, the slight increase in the number of nights utilized focused on five very unique children with such extensive needs that their needs could not be met in a family setting at the time of their shelter placement. CWS works diligently to ensure children in this age group do not have to experience a shelter stay, but when their needs are so great, balancing a child's safety and daily care have to be considered.  Although the goal of "zero child nights" has not been consistently achieved for children ages 2-12, CWS directed specific attention on ensuring the youngest children are in needs-based, family-like settings anytime they can safely be placed in that level of care.  By implementing several enhanced shelter activities, CWS saw a decrease in the number of nights children ages 6-12 experienced in a shelter stay during this reporting period.  CWS also had a reduction in the number of nights youth ages 13-18 spent in shelter care.  Initiative 1.17 continues to remind CWS that continuous efforts need to be put in place to better manage this agreed upon metric, therefore limiting the number of shelter stays for a child to a minimum.

In January 2018, the statewide Shelter Lead with the regional shelter leads, along with Programs support, developed uniform shelter staffing protocols that were implemented statewide.  Staffing protocols were identified to ensure best practices are applied to focus on the continued reduction of the number of children in shelter placements.  Uniform shelter staffing protocols were identified and applied to each child's shelter staffing, which occurs bi-weekly in all regions.  The focused efforts executed at LDCC to ensure children secure placement outside of the facility were applied to all children placed in a shelter based on the length of time a child is placed there.

The uniform shelter staffing protocol went into effect 3/1/2018 and included clear guidance on implementation of the new process for all regions.  This mechanism is used by all regional shelter leads for staffing all children placed in Youth Services shelters.  These staffings occur with the necessary supportive documentation to make informed decisions about each child staffed including the Shelter Authorization Form, the current foster care request form, and the universal shelter staffing tool.  This protocol's implementation had a direct impact on the reduction of shelter utilization during this reporting period.

To better manage shelter use reduction, CWS identified for children ages 0-12 who remained in a shelter for at least 30 days and youth ages 13-18 who remained in a shelter for at least 60 days that an elevated shelter staffing needed to occur.  The Shelter Lead coordinates and conducts the elevated multi-disciplinary staffing for children who meet the timeframes.  Specific program area staff, such as Specialized Placement & Partnership Unit (SPPU), Developmental Disabilities Services (DDS), Education, and Therapeutic Foster Care, participates in the staffings based on each child's specific needs.  Heightened action steps are determined during the staffing process and documentation of these efforts is consistent with those that occur in the uniform shelter staffing protocol.  Ongoing management of the identified action steps that are determined within the elevated shelter staffing are the responsibility of the district director and the regional shelter staffing leads.  With several months of experience engaging in the elevated staffings, placement of children outside of Youth Services shelters was prioritized.  CWS saw both immediate and longer-term impacts of the implementation of the uniform shelter staffing protocol, as well as the elevated shelter staffings, such as increased engagement of shelter direct care staff in the meetings to provide up-to-date information about the children, as well as better collaboration among various programs and agency divisions to ensure the child's needs are met while in shelter care.  CWS determined the enhanced strategies implementation reduced shelter utilization across the state and will continue these efforts going forward.  CWS will continue to examine and revamp these strategies as shelter utilization continues to change and evolve across Oklahoma.

Other supports were developed and implemented to enhance the experience children receive when placed in Youth Services shelters.  During this reporting period, CWS entered into a contractual agreement with two of the Youth Services providers in an effort to provide additional per diem monetary supports known as "direct care authorizations."

This additional support was put into place to assist children whose needs are so great that they require 24/7, one-on-one supervision and care. This additional support was used primarily for children with very complex needs, generally those who are experiencing co-occurring behavioral and intellectual/developmental disabilities. Although not all Youth Services providers utilized this available support, it was offered to all existing Youth Services shelters that provide care for children in DHS custody. In the coming months, additional Youth Service providers could enter into this contract with CWS to expand these supports to other areas of the state.

Beyond the "direct care authorizations," CWS is developing an expansion of the Nursing program to include additional contracted nurses who would provide general medical technical assistance, child-specific medical and/or medication training, and additional support services that impact daily living and hygiene needs for children placed in Youth Services shelters. A great deal of time went into determining program parameters, contractual language needed, and overall expectations of this additional agency support. In the coming months, CWS will be working to pilot this program with select Youth Service agencies who want to specialize in accepting children with various medical needs. Many of the children placed in the Youth Services shelters have medical needs that require additional assistance, which would include direct care staff needing ongoing coaching and mentoring supports to ensure they are able to meet the needs of children placed in their facilities.

To direct more attention on reducing MIC in the shelter setting, CWS decided to re-assign two SPPU facility liaisons to work directly under the Shelter Field Manager. The identified staff focuses solely on shelter care in the Youth Services agencies. These designated facility liaisons are responsible for visiting assigned Youth Services shelters to assess safety, making sure children's needs are met while placed at the shelter, and conducting all follow-up activities related to OCA investigations, screened-out referrals, and policy/contract violations. Although this change was only in place for a few months of this reporting period, the expectation is that having a consistent facility liaison familiar with shelter processes, protocols, and policies permits visits to the facility to be more productive and ensures safety is a primary priority in a shelter setting.

During the last few months, OJA worked to develop new, performance-based contracts that will be awarded to select Youth Services agencies in the coming months. OJA established application criteria and all Youth Services agencies interested in receiving ongoing funding for shelter services must submit an application to the issued contract proposal. Applications are set to be returned in August 2018 with new contracts issued and set to begin 1/1/2019. With this new process in place, shelter availability across the state could become even more limited if some Youth Service agencies opt to no longer offer shelter care in their communities. CWS continues to work closely with OJA on this significant contractual change and supports changes that increase the quality of care and services a child receives when placed in a temporary Youth Services shelter.

In the coming months, CWS has many activities slated to continue efforts towards reducing shelter care for children while increasing the quality of care received. A key focus will be on limiting overall shelter use for all ages, while refocusing on Initiative 1.17. CWS will continue to work collaboratively with all programs and agency divisions to better develop a placement continuum that can meet the capacity needs of children who historically have used shelter care because no other available needs-based placement existed. CWS is working on updating the Shelter Authorization Form to better reflect needed information for CWS leadership when determining shelter care must be utilized when all efforts were exhausted. Changes to this form should be completed soon and all CW staff will be trained on using of the updated form when it becomes available. The recommendation to make additional changes to this form came following the shelter analysis that was conducted in March 2018. Additional information was needed, while other information needed changing or updating to reflect current practices and expectations. Over the next few months, the Shelter Lead will be developing training for CW staff statewide, along with some one-on-one mentoring activities with specific districts on how to place a child with significant challenges in a placement that can best meet their needs. Additionally, the trainings will cover how to ensure a child's needs are met when placed temporarily in a shelter setting. CWS is exploring how to implement some specific training for direct care staff at the Youth Service shelters that focus on delivering high quality direct caregiving to such a highly vulnerable population.

CWS made significant strides in the last few years in reducing the overall use of shelters for all ages and in all areas of the state.  While reducing the overall shelter population, CWS also closed the two state-operated shelters, leaving absolutely no safety net for children who truly have no other place to go.  CWS has to develop placement capacity along a full placement continuum.  Without a full continuum, CWS will continue to struggle at meeting set goals and at permanently reducing shelter usage.  Building on previous success, CWS is ready to accomplish not only the metrics established by the Oklahoma Pinnacle Plan, but also establish better care for children in all placement types.

# 6.2a: Permanency Within 12 Months of Removal

## Operational Question

Of all children who entered foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within 12 months of removal?

## Data Source and Definitions

Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively. This data is pulled from the AFCARS files.

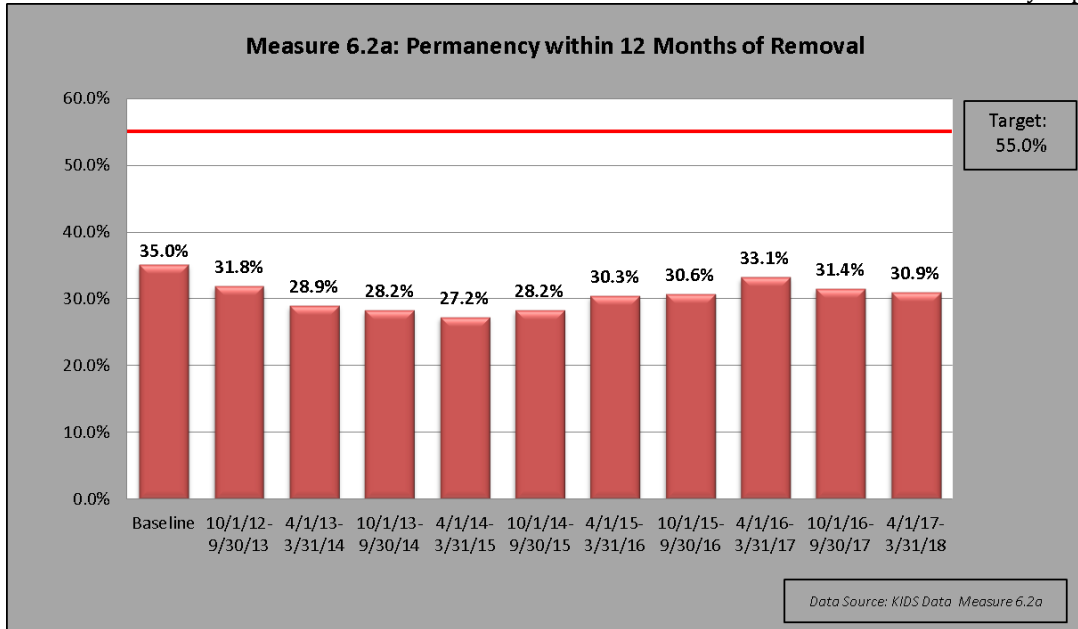## Description of Denominator and Numerator for this reporting period

**Denominator:**  All children who entered foster care from 10/1/2016 through 3/31/2017.
**Numerator:**  The number of children who entered foster care from 10/1/2016 through 3/31/2017 and exited to a permanent setting within 12 months of removal.

## Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All admissions from 4/1/2011 – 9/30/2011 | | | 35.0% |
| 10/1/2012 – 9/30/2013 | All admissions from 4/1/2012 – 9/30/2012 | 856 | 2,692 | 31.8% |
| 4/1/2013 – 3/31/2014 | All admissions from 10/1/2012 – 3/31/2013 | 782 | 2,707 | 28.9% |
| 10/1/2013 – 9/30/2014 | All admissions from 4/1/2013 – 9/30/2013 | 818 | 2,901 | 28.2% |
| 4/1/2014 – 3/31/2015 | All admissions from 10/1/2013 – 3/31/2014 | 748 | 2,749 | 27.2% |
| 10/1/2014 – 9/30/2015 | All admissions from 4/1/2014 – 9/30/2014 | 764 | 2,705 | 28.2% |
| 4/1/2015 – 3/31/2016 | All admissions from 10/1/2014 – 3/31/2015 | 714 | 2,359 | 30.3% |
| 10/1/2015 – 9/30/2016 | All admissions from 4/1/2015 – 9/30/2015 | 840 | 2,741 | 30.6% |
| 4/1/2016 – 3/31/2017 | All admissions from 10/1/2015 – 3/31/2016 | 774 | 2,340 | 33.1% |
| 10/1/2016 – 9/30/2017 | All admissions from 4/1/2016 – 9/30/2016 | 788 | 2,512 | 31.4% |
| 4/1/2017 – 3/31/2018 | All admissions from 10/1/2016 – 3/31/2017 | 733 | 2,375 | 30.9% |
| Target | | | | 55.0% |

Section 2, Table 6.2a-1

**Measure 6.2a: Permanency within 12 Months of Removal**



Section 2, Graph 6.2a-1

## 6.2b: Permanency Within 2 Years of Removal

### Operational Question
Of all children who entered their 12th month in foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within two years of removal?

### Data Source and Definitions
Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively.

### Description of Denominator and Numerator for this reporting period
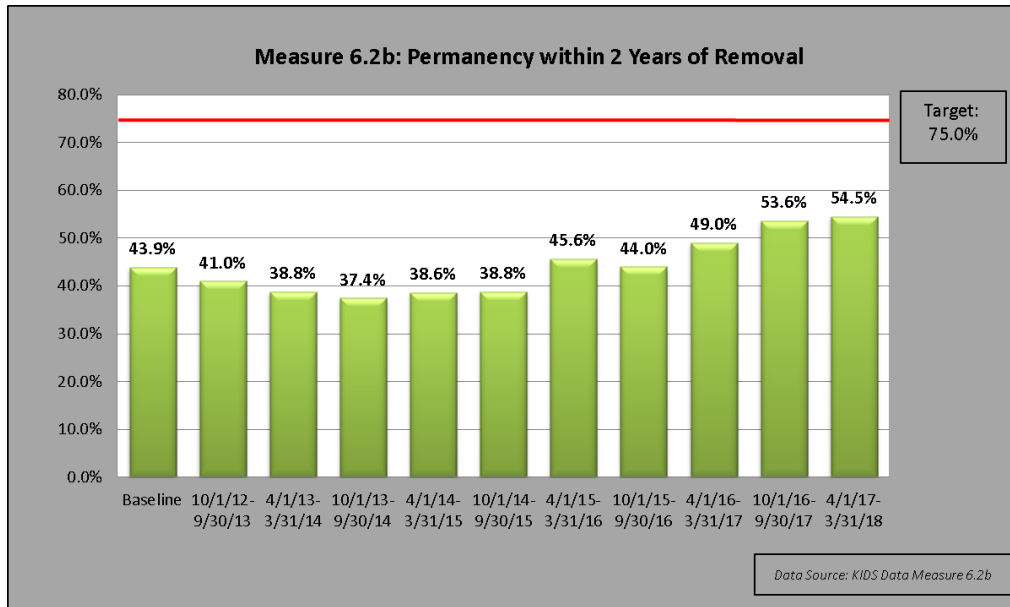**Denominator:** All children who entered foster care from 10/1/2015 through 3/31/2016.
**Numerator:** The number of children, who entered foster care from 10/1/2015 through 3/31/2016, were removed at least 12 months, and exited to a permanent setting within 24 months of removal.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All admissions from 4/1/2010 – 9/30/2010 | | | 43.9% |
| 10/1/2012 – 9/30/2013 | All admissions from 4/1/2011 – 9/30/2011 | 667 | 1,626 | 41.0% |
| 4/1/2013 – 3/31/2014 | All admissions from 10/1/2011 – 3/31/2012 | 577 | 1,487 | 38.8% |
| 10/1/2013 – 9/30/2014 | All admissions from 4/1/2012 – 9/30/2012 | 669 | 1,787 | 37.4% |
| 4/1/2014 – 3/31/2015 | All admissions from 10/1/2012 – 3/31/2013 | 713 | 1,846 | 38.6% |
| 10/1/2014 – 9/30/2015 | All admissions from 4/1/2013 – 9/30/2013 | 780 | 2,008 | 38.8% |
| 4/1/2015 – 3/31/2016 | All admissions from 10/1/2013 – 3/31/2014 | 886 | 1,944 | 45.6% |

| 10/1/2015 –  9/30/2016 | All admissions from 4/1/2014 – 9/30/2014 | 821 | 1,865 | 44.0% |
| 4/1/2016 –  3/31/2017 | All admissions from 10/1/2014 – 3/31/2015 | 769 | 1,570 | 49.0% |
| 10/1/2016 –  9/30/2017 | All admissions from 4/1/2015 – 9/30/2015 | 961 | 1,793 | 53.6% |
| 4/1/2017 –  3/31/2018 | All admissions from 10/1/2015 – 3/31/2016 | 813 | 1,493 | 54.5% |
| Target | | | | 75.0% |

Section 2, Table 6.2b-1



Section 2, Graph 6.2b-1

## 6.2c: Permanency Within 3 Years of Removal

### Operational Question
Of all children who entered their 24<sup>th</sup> month in foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within three years of removal?

### Data Source and Definitions
Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively.  This data is pulled from the AFCARS files.

### Description of Denominator and Numerator for this reporting period
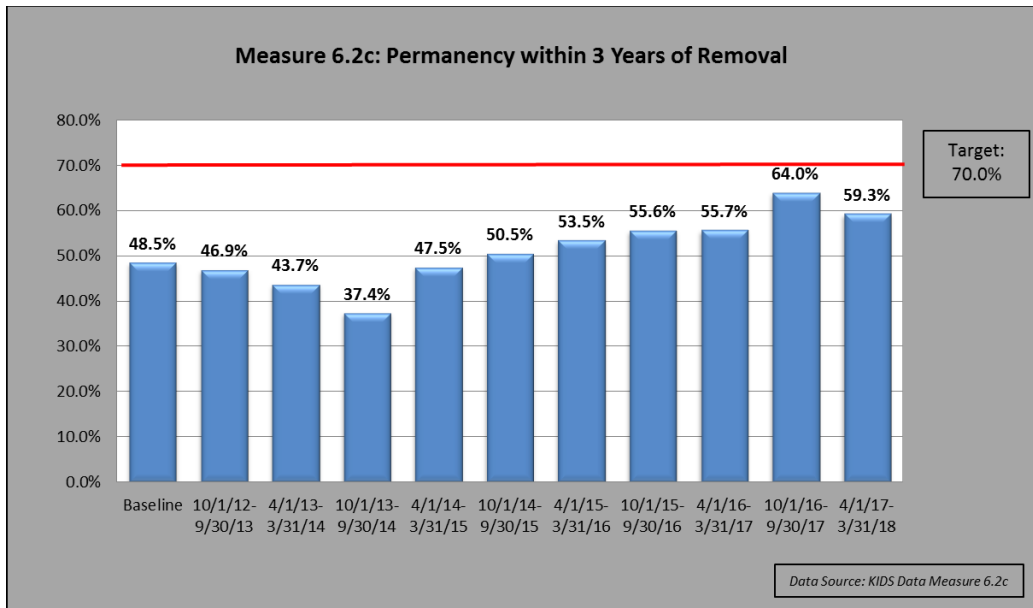**Denominator:**   All children who entered foster care from 10/1/2014 through 3/31/2015.
**Numerator:**   The number of children, who entered foster care from 10/1/2014 through 3/31/2015, were removed at least 24 months, and exited to a permanent setting within 36 months of removal.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All admissions from 4/1/2009 – 9/30/2009 | | | 48.5% |

| 10/1/2012 – 9/30/2013 | All admissions from 4/1/2010 – 9/30/2010 | 350 | 746 | 46.9% |
|---|---|---|---|---|
| 4/1/2013 – 3/31/2014 | All admissions from 10/1/2010 – 3/31/2011 | 286 | 654 | 43.7% |
| 10/1/2013 – 9/30/2014 | All admissions from 4/1/2011 – 9/30/2011 | 346 | 924 | 37.4% |
| 4/1/2014 – 3/31/2015 | All admissions from 10/1/2011 – 3/31/2012 | 414 | 872 | 47.5% |
| 10/1/2014 – 9/30/2015 | All admissions from 4/1/2012 – 9/30/2012 | 552 | 1,094 | 50.5% |
| 4/1/2015 – 3/31/2016 | All admissions from 10/1/2012 – 3/31/2013 | 586 | 1,095 | 53.5% |
| 10/1/2015 – 9/30/2016 | All admissions from 4/1/2013 – 9/30/2013 | 653 | 1,174 | 55.6% |
| 4/1/2016 – 3/31/2017 | All admissions from 10/1/2013 – 3/31/2014 | 558 | 1,002 | 55.7% |
| 10/1/2016 – 9/30/2017 | All admissions from 4/1/2014 – 9/30/2014 | 633 | 989 | 64.0% |
| 4/1/2017 – 3/31/2018 | All admissions from 10/1/2014 – 3/31/2015 | 440 | 742 | 59.3% |
| Target | | | | 70.0% |

**Section 2, Table 6.2c-1**



**Section 2, Graph 6.2c-1**

# 6.2d: Permanency Within 4 Years of Removal

## Operational Question

Of all children who entered their 36th month in foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within 48 months of removal?

## Data Source and Definitions

Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively. This data is pulled from the AFCARS files.

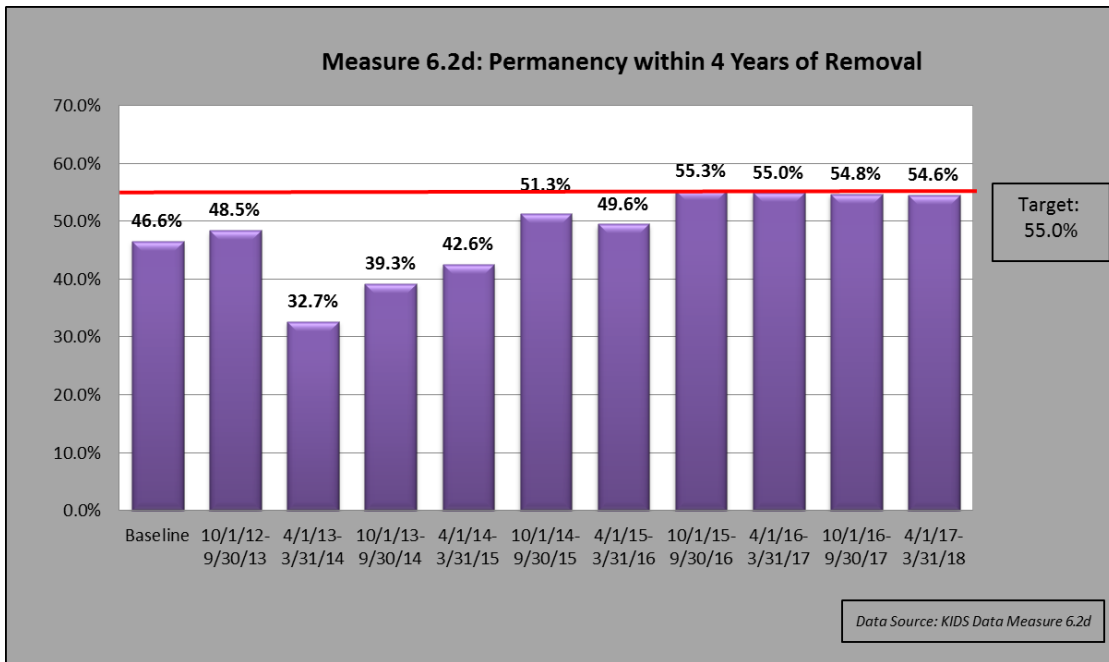## Description of Denominator and Numerator for this reporting period

**Denominator:**     All children who entered foster care from 10/1/2013 through 3/31/2014.

**Numerator:**     The number of children, who entered foster care through 10/1/2013 through 3/31/2014, were removed at least 36 months, and exited to a permanent setting within 48 months of removal.
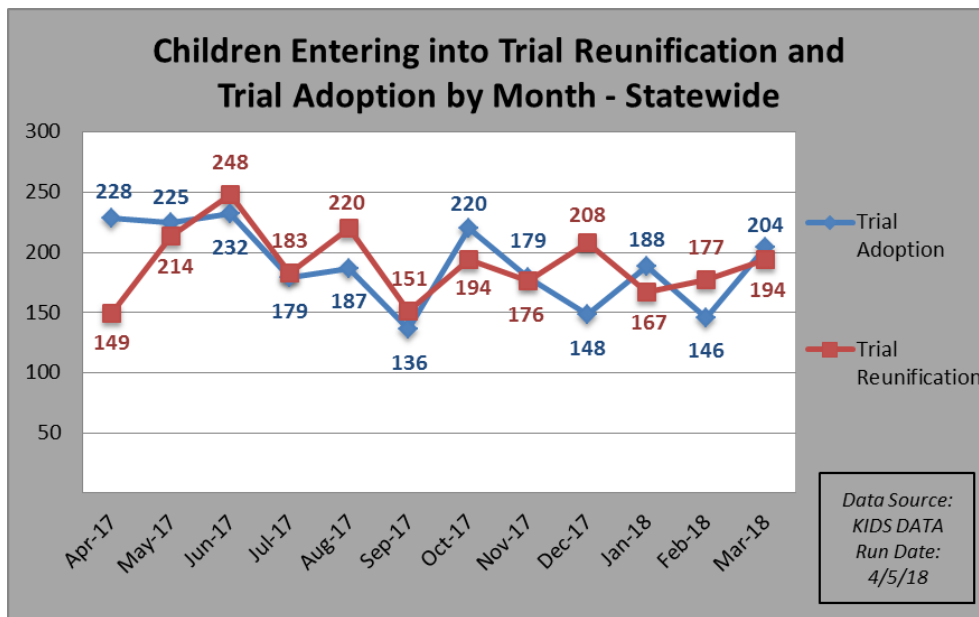
## Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All admissions from 4/1/2008 – 9/30/2008 | | | 46.6% |
| 10/1/2012 – 9/30/2013 | All admissions from 4/1/2009 – 9/30/2009 | 128 | 264 | 48.5% |
| 4/1/2013 – 3/31/2014 | All admissions from 10/1/2009 – 3/31/2010 | 91 | 278 | 32.7% |
| 10/1/2013 – 9/30/2014 | All admissions from 4/1/2010 – 9/30/2010 | 141 | 359 | 39.3% |
| 4/1/2014 – 3/31/2015 | All admissions from 10/1/2010 – 3/31/2011 | 146 | 343 | 42.6% |
| 10/1/2014 – 9/30/2015 | All admissions from 4/1/2011 – 9/30/2011 | 285 | 556 | 51.3% |
| 4/1/2015 – 3/31/2016 | All admissions from 10/1/2011 – 3/31/2012 | 206 | 415 | 49.6% |
| 10/1/2015 – 9/30/2016 | All admissions from 4/1/2012 – 9/30/2012 | 278 | 503 | 55.3% |
| 4/1/2016 – 3/31/2017 | All admissions from 10/1/2012 – 3/31/2013 | 252 | 458 | 55.0% |
| 10/1/2016 – 9/30/2017 | All admissions from 4/1/2013 – 9/30/2013 | 264 | 482 | 54.8% |
| 4/1/2017 – 3/31/2018 | All admissions from 10/1/2013 – 3/31/2014 | 225 | 412 | 54.6% |
| Target | | | | 55.0% |

Section 2, Table 6.2d-1

**Measure 6.2d: Permanency within 4 Years of Removal**

Target: 55.0%

Data Source: KIDS Data Measure 6.2d

**Section 2, Graph 6.2d-1**



**Children Entering into Trial Reunification and Trial Adoption by Month - Statewide**

Data Source: KIDS DATA Run Date: 4/5/18

**Section 2, Graph 6.2d-2**



| Permanency Safety Consultations of Children in Care on 3/31/18 with Goal of Reunification | |
|---|---|
| Children in Care 90+ Days with Goal of Reunification | 3,419 |
| Children with Permanency Safety Consultation | 3,283 |
| Percent with Permanency Safety Consultation | 96.0% |

Data Source: KIDS Data YI104; Run Date: 4/1/18

*Data only includes children that have been in care at least 90 days

**Section 2, Table 6.2d-2**

Section 2, Graph 6.2d-2 is an unduplicated count of children who entered trial adoption or trial reunification for each month during the last 12 months ending March 2018.  This is not a summary count of all children placed in trial adoption or trial reunification during the month.  Although not a Pinnacle Plan measure, Child Welfare Services (CWS) tracks performance in these two areas, as it is reflective of real time progress on moving children to permanency.

## Commentary

Measure 6.2a decreased by 0.5 percent from the last reporting period.  Performance Measure 6.2b increased by 0.9 percent from the last reporting period and is the highest since the measure's Pinnacle Plan reporting began.  This is a 10.6 percent increase from the baseline.  Performance on Measure 6.2b has positively trended for three consecutive reporting periods.  Performance in Measure 6.2c decreased by 4.7 percent, but remains 10.8 percent above the original baseline.  Measure 6.2d also decreased 0.2 percent; however, even with the slight decline, the performance is still 8.0 percent higher than the baseline.

An additional 568 children achieved permanency after the timeliness target dates, yet prior to this report's writing.  As of 3/31/2018, 909 children were in trial reunification and 336 children in trial adoption for a total of 1,245 children close to achieving permanency.  As of 3/31/2018, 3,283 children had a permanency safety consultation (PSC) completed out of 3,419 children eligible with the goal of reunification.  94 children were excluded from the population without a PSC since they are currently in trial reunification and do not need one completed due to achieving permanency.  For the next reporting period, of the 136 children without a PSC, 41 had a documented PSC in May 2018.

**PSC**

Currently one to two other reviewers were designated for each region to assist the PSC Coordinator with collecting fidelity review data.  This process is currently being considered for expansion to collect more information about practice trends in each region, which can then be used to support and enhance regional training specific.  Two QA program field representatives in Region 5 were trained on the fidelity reviews and guidance so they can start attending PSCs in that region for additional support.  Information and data gathered from this process will be used in the coaching and training curriculum for the Supervisory Framework rollout.

Additional support is given to the district directors through a PSC-specific report.  The PSC Coordinator pulls and filters this report monthly to identify which children are due for a PSC that month, as well as which children are overdue for a PSC.  This activity is completed to help keep all districts current on required PSCs.  This report was also recently edited in collaboration with the KIDS team to show which children were found "safe" as of their most recent PSC 90+ days ago and are still not in trial reunification.  This information is also filtered out and compiled into a list when the Coordinator sends the monthly email to the district directors.  The PSC Coordinator, Permanency for Teens Coordinator, and regional permanency leads continue to have monthly phone calls and a quarterly face-to-face meeting with the Permanency Planning program administrator to continue to support each other, all staff, and the work towards best permanency practices that impact child safety.

Enhancements to the PSC process will occur during several improvement efforts being implemented in transformation zones.  The PSC Coordinator will attend PSCs in each region during the transformation zone implementation.  The Coordinator will document and track permanency barriers and use this information to inform the development of additional permanency efforts and learning activities in each region.

**Family Team Meetings**

Family team meetings continue to be a strategy used to impact permanency for children in out-of-home care.  Family meetings are held for each family a minimum of once every six months.  Additional meetings are triggered by changes in family composition, changes in case plan goals, and reunification planning.  During the current reporting period, 7,006 family meetings that included 8,237 children were conducted.

| | # of Family Team Meetings Held | # of Children Included in FTM's | Total Children Served in Care | % of Children with FTM |
|---|---|---|---|---|
| 4/1/17-3/31/18 | 7,006 | 8,237 | 14,405 | 57.2% |

*Data Source: KIDS Data - FTM Types include, FTM, FTM - Alt. Perm Plan, FTM - Concurrent Planning, FTM - ISP Development, FTM - Safety Planning, FTM - 6 Month, FTM - Reasonable Efforts NR Court Finding, FTM - Placement Stability, and FTM - Progress to Permanency*

**Section 2, Table 6.2d-3**

**Permanency Support Calls**

Permanency backlog calls were implemented in January 2018 to increase oversight of permanency cases in which the children were in out-of-home care 24+ months, still have a case plan goal of reunification, and are not placed in trial reunification. The calls are facilitated by the PSC Coordinator and include the specialist and supervisor assigned to the case. Additional program representatives and subject matter experts are invited to join the call to discuss ideas to achieve permanency or suggestions of additional supports for the family as needed. The call's primary goals are identification of barriers preventing the children from returning home and creating action steps with the specialist and supervisor for completion prior to the next month's call. The call is then documented in the child's case and a summary of the conversation is logged on a spreadsheet and sent to district directors and regional directors for follow-up so permanency practices and outcomes can continue to improve.

**Supervisory Framework (formerly referred to as Supervision Framework)**

Training curriculum and tools for the Supervisory Framework were developed March 2018 through July 2018. The Framework's implementation will include back-to-basic training on safety and permanency. The training will incorporate review and use of the ongoing assessment of child safety and application of the safety threshold in determining safe reunification based on PSC findings. Implementation will occur in transformation zones in three to six month increments. Training will occur August through November 2018. After training is completed, 90-calendar days of coaching and transfer of learning activities will be conducted to ensure training content and concepts are operationalized.

**Best Practices Training**
- Articulate how the multiple sources of child welfare (CW) expectations work together toward safety and best practice
- Identify expectations of safety practice and Supervisory Framework
- Identify each program's role in collaborating to ensure safety for children and families
- Connect the expectations of the Supervisory Framework series to daily practice

**Safety-Focused Supervisory Training**
- Articulate, verbally and in writing, when a safety threat exists and when the behaviors and/or conditions that lead to the safety threat have been corrected
- Analyze and coach enhanced and diminished protective capacities at initial assessment and throughout the life of the case
- Identify when sufficient evaluation is present or lacking throughout the life of a case
- Assess and provide feedback on a behaviorally-based individualized service plan and written plan of compliance
- Demonstrate engagement skills through coaching
- Demonstrates capability to approve a quality program related assessment
- Case study to identify practice deficits and enhance critical thinking

**Supervisory Framework Strategies Training**
- Describe how supervision strategies are used to evaluate safety

- Utilize data available to promote positive outcomes for families
- Articulate the desired outcomes of the three key supervision strategies
- Demonstrate supervision strategies through the use of coaching techniques
- Model courageous conversations

**Guardianship Exits**
Efforts outside of the supervisory strategies include development of a funded guardianship guide for use by judges, assistant district attorneys, and other judicial partners.  Judicial partners in each region will be trained on key principles related to achieving timely permanency and on expanding the use of guardianships as an exit type.  These trainings are scheduled to take place in September and October 2018 and will be held in Oklahoma City, Tulsa, Lawton, Enid, and McAlester.

Guides were created to support improvement in the quality of worker visits and contacts with children and parents.  These guides provide direction to workers about steps that need to be taken to prepare for a worker visit, guidance on what should occur during a worker visit, and what should occur regarding documentation and follow up after a worker visit.  The guides are intended to support better parental engagement and improve permanency rates.  These guides will be distributed and implemented with all specialists.  The practice outlined in them is also covered in CORE and CW 1006 training.  Supervisors will be trained on them in August and September 2018.

**Youth Villages**
Youth Villages, as part of a public/private partnership, continues to provide Intercept services to children and families in Oklahoma City, Tulsa, and surrounding areas with the goal of increasing permanency rates for youth in the custody of the Oklahoma Department of Human Services (DHS).  Intercept is a reunification program that requires an identified family or permanent caregiver for the youth for program admittance.  The Oklahoma City site can serve 56 families, the Tulsa site can serve 48 families, and both sites require that the identified permanent placement be in one of the following counties: Oklahoma, Canadian, Logan, Cleveland, Pottawatomie, Lincoln, Tulsa, Creek, Muskogee, or Okmulgee.  Intercept services consist of:
- comprehensive services to youth and families in their own homes at times convenient for the families; and
- successfully reuniting youth who are in a shelter, residential treatment facility, foster home, psychiatric residential treatment facility, hospital, group home, or detention center with their families or another identified permanent placement in the community.

A single family intervention specialist is assigned to work with the youth and family over a six-to-nine month period.  The family intervention specialist works closely with caregivers, the child, teachers, other school personnel, neighbors, extended family, case managers, probation officers, and even members of the child's peer group and their parents.  Family intervention specialists are available to the family 24-hours a day, 7-days a week.

**Family Team, Resources, Evaluation, and Education (T.R.E.E)**
Following the closure of the DHS-operated Pauline E. Mayer Shelter in Oklahoma City, the Children and Family Council, a civic-led community group established with support from CWS, developed a plan to repurpose the former shelter into the Family Team, Resources, Evaluation, and Education (T.R.E.E).  The Family T.R.E.E. Center formally launched in September 2016 and is temporarily housed in a building donated by Chesapeake Energy while the former shelter building undergoes extensive renovations.  Renovations are expected to be complete in May 2019.

Focusing on the common goal of strengthening families, the Family T.R.E.E. partners established four desired outcomes:
1. increase the rate of safe and appropriate family reunification;
2. improve placement stability;
3. reduce the length of time children remain in DHS custody; and
4. decrease the likelihood of future involvement with CWS.

This initiative with eligibility criteria is considered a demonstration project aimed at improving reunification efforts. All cases of children coming into care in Oklahoma County are screened based on the eligibility criteria. Since September 2016, a total of 101 cases met criteria for Family T.R.E.E. service eligibility. All of the eligible cases are then randomly assigned to either a control group or an intervention group, with the intervention group being Family T.R.E.E. Since 2/1/2018, the Family T.R.E.E. permanency team is at caseload capacity, as such, cases which were randomly assigned to Family T.R.E.E. were reassigned to regular rotation. The Family T.R.E.E. permanency team is expected to be eligible for new case assignments by 7/1/2018. The criteria for Family T.R.E.E. services include:

- at least one child placed in Oklahoma County;
- at least one child in a kinship placement;
- at least one child under the age of 12 (*relates to the SafeCare model); and a case plan goal of reunification that excludes shocking and heinous cases.

Eligible families are identified within days of removal. The Family Resiliency Team, a multi-disciplinary team composed of subject matter experts and direct service providers at the Family T.R.E.E. Center, provides expertise to guide the assessment, service, and visitation process from the case's onset. At the Family T.R.E.E., children's medical needs are closely reviewed with an opportunity to be seen at the onsite Fostering Hope clinic for initial health screenings and follow-ups or to be promptly connected for medical evaluation at University of Oklahoma (OU) Fostering Hope Clinic. Additionally, when needed, children can be seen on-site for trauma, behavioral, and developmental assessments and therapy from the OU Child Study Center or can access these services through OU Child Study Center's main campus. Finally, children and families have access to clinical visitation support and additional therapeutic interventions provided through the on-site licensed clinician. The Family T.R.E.E. is comprised of the Family Resiliency Team, OU Fostering Hope Clinic, OU Child Study Center, on-site Quality Family Visitation services provided through NorthCare CHBS, onsite Clinical Visitation Coordinator, supports to foster parents, and additional services as needed.

The Family Resiliency Team uses a multi-disciplinary team approach to staff permanency planning (PP) CW cases, provide case consultation, identify needs of children and families, make recommendations on needed assessments, review assessment results, refer for additional assessments, identify appropriate services needed for children and parents, assist with reducing barriers to appropriate services, and assess effectiveness of services provided to families. The Family Resiliency Team includes experts in medicine, mental health, parent education, substance abuse, domestic violence, and child development that all work together towards strengthening the family unit and correcting the conditions that led to the children's removal.

| Family Resiliency Team Member | Roles and Responsibilities |
|---|---|
| DHS Family Resiliency team coordinator/ coach | Family Resiliency team coordinator, system navigation coaching for families and staff, and liaison to the court. |
| DHS CWS PP staff | CWS PP unit assigned to the center. |
| OU Child Study Center | Child assessment and evaluation coordinator and Family Resiliency team chair. |
| OU Physicians/Fostering Hope | Child medical coordinator. |
| NorthCare CHBS staff | SafeCare - Quality Family Visitation services provider. |
| Family T.R.E.E. Director | Oversees the Center and the Center services. |
| DHS CWS Foster Care | Liaison for placement provider. |
| Tribal representative | Indian Child Welfare Act (ICWA) workers for identified ICWA cases. |
| Court-appointed special advocate (CASA) liaison | Identifies cases in need of CASA volunteer appointment. |
| NorthCare clinician | Clinical Visitation coordinator and mental/behavioral health consultation and services. |

| NorthCare Family Kinnections | Support to kinship foster parents. |
|---|---|
| Adult and Family Services providers | Community service providers serving children and parents, including substance abuse services, mental health, DV services, and others. |

The OU Center on Child Abuse and Neglect is evaluating the impact of the Family T.R.E.E services.  A random control trial is being conducted to evaluate the outcomes of families served by the Family T.R.E.E. when compared to the outcome of families receiving standard CW services.

As of May 2018, the Family T.R.E.E. Center is serving 23 families and 63 children.  Of those, seven families with seventeen children are currently in trial reunification.  Currently, the Center can serve a full caseload for one PP Unit; however, expansion of this model is underway to include an additional PP Unit.  This team is expected to have completed their necessary trainings, transitioned existing caseloads, and be prepared to accept Family T.R.E.E. referrals by 8/1/2018.  The new team is predicted to serve approximately 20 additional families before the end of State Fiscal Year 2019.  Preliminary data is promising within the small sample size, as reunification and time to unsupervised visitation with parents is occurring sooner than the average length of time for families receiving standard CW service.  Since receiving its first referral in September 2016, the Family T.R.E.E. has successfully closed 11 of 35 cases.  Specifically, 11 children, from a total of six families, were reunified, with an average length from removal to permanency of 12.4 months; five children, from a total of four families, were adopted, with an average time from removal to permanency of 12.5 months; and, two children, from one family, are in permanent guardianship, with 18 months' time to permanency.  Placement stability rates are also promising for children served through the Center, with current rates over 91 percent.  Further outcome data will be available in late 2018, following full launch of the independent evaluation.

**Court Improvement Project (CIP)**
Oklahoma's court improvement project continues in Adair, Pottawatomie, and Canadian counties.  Kick off of the joint project began in May 2017.  The kick off meeting included judges, assistant district attorneys, children's attorneys, CASA, district directors, supervisors, CQI staff, CIP, and other community partners from each jurisdiction.  Each jurisdiction reviewed their permanency outcome data as a team and developed action plans that will be implemented over a 12-month time period.  The Adair County team met on 10/5/2017, 12/7/2017, and 3/1/2018.  The Canadian County team met on 9/26/2017 and 3/27/2018.  The Pottawatomie County team met on 9/27/2017 and 2/5/2018.  The project monitors permanency outcomes for 144 children entering care from October 2017 through March 2018 in the project sites.  Progress will be tracked and strategies for increasing permanency will be adjusted when needed.

CWS and the CIP Director attended a Casey Family Programs judicial convening in February 2018 to gather information and assess Oklahoma's capacity and readiness to implement a Jurist-In-Residence (JIR) program in Oklahoma.  The JIR will promote judicial best practices, influence judicial education, mentor juvenile judges, and serve as a liaison between CWS and the juvenile-deprived court system to improve CW outcomes with a focus on improving permanency timeliness.  CWS is collaborating with Casey Family Programs and the CIP Director to develop and implement a JIR program in Oklahoma.  CIP is negotiating a start date with a retiring judge to serve as the JIR beginning in February or March 2019.

Additional court improvement efforts include enhanced training, guidance, and support to local jurisdictions in engaging court partners and the development of judicial performance dashboards.  Training on permanency rates and practice values was conducted with the Juvenile Justice Oversight and Advisory Committee on 4/6/2018.  Additional training on the use of guardianships as a viable permanency option was provided to all the judges, district attorneys, and child attorneys in Region 3 on 4/20/2018.

**Adoption Timeliness Efforts**
The regional Adoption Timeliness Accountability Teams (ATATs) continue to provide focus on reducing the length of time to adoption finalization for children that become legally free in an identified placement.  CWS requested assistance from

Casey Family Programs to review the current ATAT processes and provide feedback on possible enhancements. The ATAT report is being modified to provide for better tracking of barrier types and frequency so systemic issues may be addressed.

Additional efforts to improve permanency continue and include reduced workload standards, ending of secondary assignments, and continuity of worker visits by primary worker. These efforts are reported in detail in other measures.

## 6.3: Re-entry Within 12 Months of Exit

### Operational Question
Of all children discharged from foster care in the 12-month period prior to the reporting period, what percentage re-entered care within 12 months of discharge?

### Data Source and Definitions
Re-entry within 12 months measures all children discharged to permanency, not including adoption, from foster care in the 12-month period prior to the reporting period and the percentage of children who re-enter foster care during the 12 months following discharge. This is the same as the Federal Metric and this data is pulled from AFCARS data.

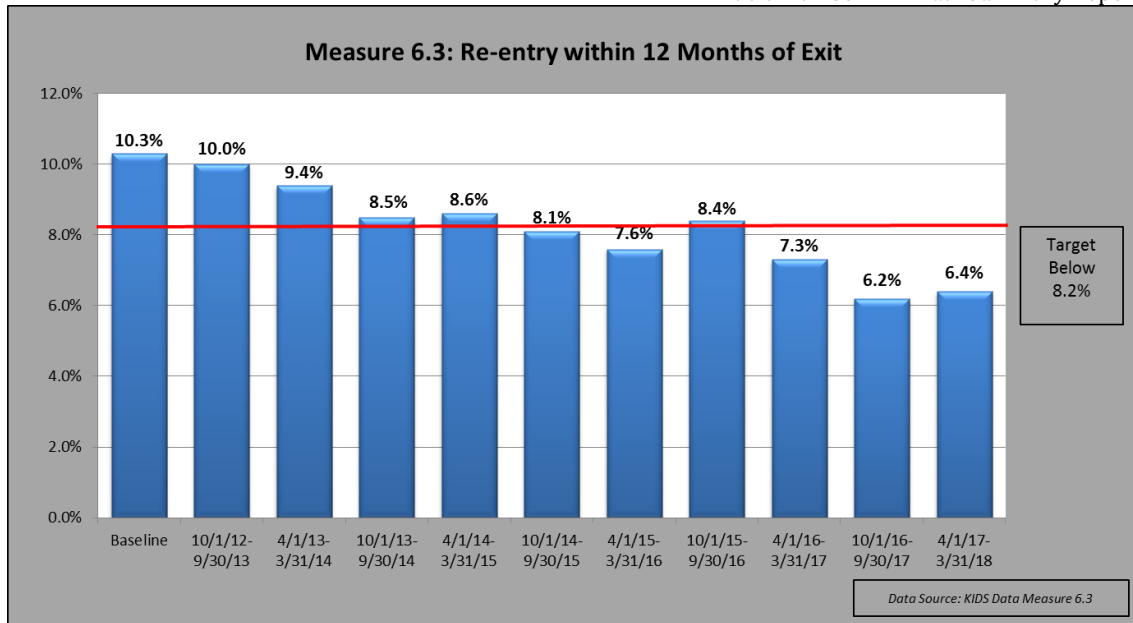### Description of Denominator and Numerator for this reporting period
**Denominator:** All children who exited foster care from 4/1/2016 through 3/31/2017

**Numerator:** All children who exited foster care from 4/1/2016 through 3/31/2017 and re-entered care within one year of exit.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All exits from 10/1/2010 - 9/30/2011 | | | 10.3% |
| 10/1/2012 – 9/30/2013 | All exits from 10/1/2011 - 9/30/2012 | 234 | 2,334 | 10.0% |
| 4/1/2013 – 3/31/2014 | All exits from 4/1/2012 - 3/31/2013 | 223 | 2,375 | 9.4% |
| 10/1/2013 – 9/30/2014 | All exits from 10/1/2012 - 9/30/2013 | 225 | 2,638 | 8.5% |
| 4/1/2014 – 3/31/2015 | All exits from 4/1/2013 - 3/31/2014 | 230 | 2,682 | 8.6% |
| 10/1/2014 – 9/30/2015 | All exits from 10/1/2013 - 9/30/2014 | 223 | 2,756 | 8.1% |
| 4/1/2015 – 3/31/2016 | All exits from 4/1/2014 - 3/31/2015 | 218 | 2,869 | 7.6% |
| 10/1/2015 – 9/30/2016 | All exits from 10/1/2014 - 9/30/2015 | 238 | 2,822 | 8.4% |
| 4/1/2016 – 3/31/2017 | All exits from 4/1/2015 - 3/31/2016 | 207 | 2,828 | 7.3% |
| 10/1/2016 – 9/30/2017 | All exits from 10/1/2015 - 9/30/2016 | 187 | 3,004 | 6.2% |
| 4/1/2017 – 3/31/2018 | All exits from 4/1/2016 - 3/31/2017 | 185 | 2,879 | 6.4% |
| Target | | | | 8.2% |

Section 2, Table 6.3-1

**Measure 6.3: Re-entry within 12 Months of Exit**



Data Source: KIDS Data Measure 6.3

**Section 2, Graph 6.3-1**

## Commentary
The number of children reentering out-of-home care within a 12-month period is now at 6.4 percent, which remains below the set target of 8.2 percent.  Despite the very slight increase by 0.2 percent, the measure remains 3.9 percent lower than the original baseline and exceeds the target by 1.8 percent.

Permanency safety consultations (PSCs) continue to be the main strategy implemented to maintain reduced reentry rates.  PSCs with a safe recommendation include the completion and documentation of an assessment of child safety prior to reunification as an action step.  Additional follow-up activities are developed to support safe family reunification as needed.  Services such as Comprehensive Home-Based Services, Intercept, and Systems of Care continue to be utilized to support families during trial reunification.  Child Welfare Services will continue to monitor this measure and engage in ongoing activities to ensure children remain safely in their homes post-reunification and ensure performance in this measure consistently exceeds the baseline and meets the target.

## 6.4: Permanency for Legally-Free Teens

### Operational Question
Of all legally-free foster youth who turned age 16 in the period 24 to 36 months prior to the report date, what percent exited to permanency by age 18?

### Data Source and Definitions
Among legally-free foster youth who turned 16 in the period 24 to 36 months prior to the report date, Measure 6.4 reports the percent that exited to permanency by age 18.  An "Exit to Permanency" includes all youth with an exit reason of adoption, guardianship, custody to relative, or reunification. "Legally Free" means a parental rights termination date is reported to AFCARS for both mother and father.

### Description of Denominator and Numerator for this reporting period
**Denominator:**   All children in care who turned 16 from 4/1/2015 through 3/31/2016 and were legally free at the time they turned 16.
**Numerator:**   The number of children, who turned 16 from 4/1/2015 through 3/31/2016, were legally free at the time they turned 16, **and** reached permanency prior to their 18th birthday.

**Trends**

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline:<br>10/1/2011 – 9/30/2012 | All children in care who turned 16 from 10/1/2009 - 9/30/2010 and were legally free at the time they turned 16. | | | 30.4% |
| 10/1/2012 – 9/30/2013 | All children in care who turned 16 from 10/1/2010 - 9/30/2011 and were legally free at the time they turned 16. | 44 | 170 | 25.9% |
| 4/1/2013 – 3/31/2014 | All children in care who turned 16 from 4/1/2011 - 3/31/2012 and were legally free at the time they turned 16. | 36 | 134 | 26.9% |
| 10/1/2013 – 9/30/2014 | All children in care who turned 16 from 10/1/2011 - 9/30/2012 and were legally free at the time they turned 16. | 37 | 148 | 25.0% |
| 4/1/2014 – 3/31/2015 | All children in care who turned 16 from 4/1/2012 - 3/31/2013 and were legally free at the time they turned 16. | 37 | 146 | 25.3% |
| 10/1/2014 – 9/30/2015 | All children in care who turned 16 from 10/1/2012 - 9/30/2013 and were legally free at the time they turned 16. | 33 | 126 | 26.2% |
| 4/1/2015 – 3/31/2016 | All children in care who turned 16 from 4/1/2013 - 3/31/2014 and were legally free at the time they turned 16. | 29 | 105 | 27.6% |
| 10/1/2015 – 9/30/2016 | All children in care who turned 16 from 10/1/2013 - 9/30/2014 and were legally free at the time they turned 16. | 35 | 123 | 28.5% |
| 4/1/2016 – 3/31/2017 | All children in care who turned 16 from 4/1/2014 - 3/31/2015 and were legally free at the time they turned 16. | 41 | 132 | 31.1% |
| 10/1/2016 – 9/30/2017 | All children in care who turned 16 from 10/1/2014 - 9/30/2015 and were legally free at the time they turned 16. | 59 | 136 | 43.4% |
| 4/1/2017 – 3/31/2018 | All children in care who turned 16 from 4/1/2015 - 3/31/2016 and were legally free at the time they turned 16. | 84 | 162 | 51.9% |
| Target | | | | 80.0% |

**Section 2, Table 6.4-1**

**Measure 6.4: Permanency for Legally-Free Teens**
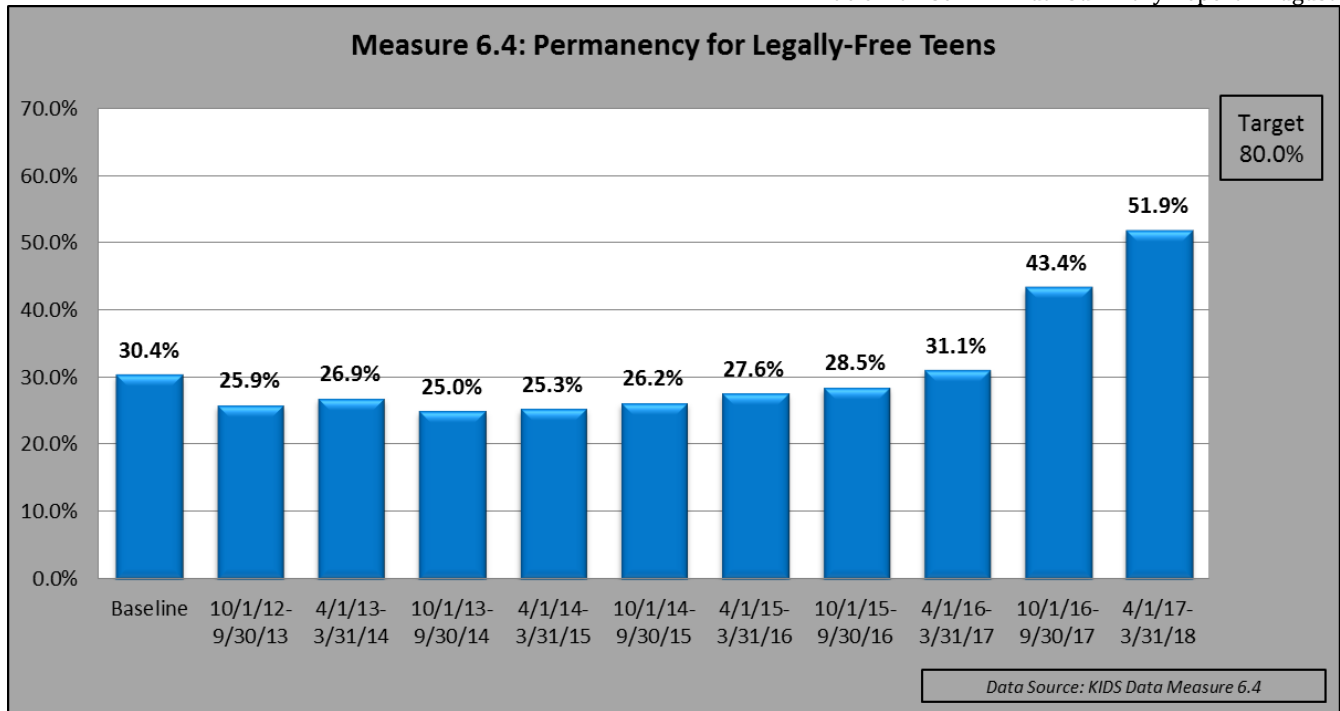


Section 2, Graph 6.4-1

**Commentary**

From 4/1/2015 through 3/31/2016, a total of 162 legally-free youth turned 16 years of age. Of these youth, 84 or 51.9 percent achieved permanency and 78 or 48.1 percent exited care prior to reaching permanency.

Achieved Permanency:
- 69 youth were adopted (42.6%);
- 14 youth were placed in guardianship or custody to relative (8.6%); and
- 1 youth was reunified through re-instatement of parental rights (0.6%).

Exited Care Prior to Reaching Permanency:
- 73 youth exited care via emancipation/aging out (45.1%); and
- 5 youth exited for other reasons (3.1%).

Although performance continues to remain below the target, positive trending occurred over the last seven reporting periods. This reporting period showed an increase between reporting periods of 8.5 percent and since establishing the baseline an overall improvement of 21.5 percent. The performance is the highest of all reporting periods at 51.9 percent.

The Permanency Expediters (PE) continue to work with all youth ages 16-17 with the case plan goal (CPG) of planned alternative permanent placement (PAPP) to make concerted permanency efforts for youth they are assigned. As a secondary worker, PEs work in conjunction with the Permanency Planning (PP) child welfare (CW) specialist to ensure all permanency options for legally-free youth on their caseload have been explored. The PE visits every youth bi-monthly unless a youth is AWOL/RUNAWAY and no contact or location information is known. The PE visits youth jointly with the primary CW specialist when possible, to model how to engage in permanency-focused conversation that will guide subsequent conversations with the youth. PEs are designated to each region based on need and their assignment is as follows: one in Region 1, one in Region 2, two in Region 3, and one in Region 5. Region 4 does not have an assigned PE as they previously designated staff to conduct this work and were successful in improving outcomes in this area. Currently, Region 4 has one youth with a PAPP goal and that youth is staffed monthly by Region 4 designated staff. The

PE is supervised by the respective regional permanency lead and receives support from the Permanency for Teens Coordinator (PTC). *6.4 Tracking Tool* documents the supportive efforts and activities occurring in each region.

The PE facilitated monthly conference calls serve as a form of accountability. Action steps are assigned at the end of each monthly call and are revisited on the following month's call. District directors are not mandated to participate, they are provided the notes from the call; however, it is mandatory for someone from the district's leadership team to be present when the assigned supervisor of the PP CW specialist is not able to participate. Holding the conference calls provides the PE an opportunity to provide information and support in relationship to permanency, hold each other accountable for the action steps, and allows for an opportunity for the PE to provide an objective perspective as they navigate the permanency options for the youth. A *PE Monthly Report* was also developed to track the PE caseload, identify the number of youth added or removed to the cohort, and to identify barriers or needs identified by the PE. The *PE Tracking Tool* continues to document the efforts of the PE with their assigned teens.

On 12/21/2017 CW specialists were informed of revisions to Instructions to Staff that clarify the expectations in the selection of a child's permanency plan goal and additional efforts required before the CPG of PAPP is selected for a youth. The CW supervisor must ensure these requirements are met and documented prior to considering PAPP as the permanency plan. To begin with, all permanency plan options that have been determined as not feasible or in the child's best interest must be explored and documented. A sufficient number of permanent connections the youth can depend on after exiting care must also be identified with best practice being six to 10 connections. Additionally, a family meeting (FM) that includes the youth, all identified permanent connections, CW specialist, CW supervisor, and regional PE must take place to discuss and agree upon the permanency plan that is in the youth's best interest. The FM report must include a detailed description of how and why all other permanency options were ruled out and what ongoing steps will be taken to achieve permanency for the child. Last, the youth must be actively engaging and participating in OKSA services. A guide is currently in development to reinforce for specialists the steps required before a CPG is changed to PAPP.

A PE conducts case transfer calls with the CW specialist from the Adoption Transition Unit (ATU) when an ATU CW specialist was previously assigned to youth who had the goal of adoption, but the goal was subsequently changed to PAPP. The PE initiates scheduling of transfer meeting. The ATU CW specialist completes *The Transfer Meeting Between Adoption Transition and Permanency Expeditor* review tool and distributes the completed form by email along with the Child Profile and most recent update to the PE, PE's supervisor, PP CW specialist, supervisor, district director, (PP staff optional attendance), PTC, and ATU field manager. The tool if for reviewing the conversation during the transfer meeting to provide a clear picture of what permanency efforts were made to date. The case transfer meeting is facilitated by PTC or ATU field manager. After the case transfer, the PE adds clarifying language and notes, and uploads into KIDS within two weeks of the meeting.

PEs continue to participate in monthly face-to-face trainings since 8/10/2017. Training topics included case mining and family finding techniques, guardianships, Developmental Disabilities Services (DDS) information, and question and answer assistance from Region 4 Safety Analysts who conduct conference calls similar to the calls the PE are facilitating. PEs shadowed Region 4 Safety Analysts during the conference calls conducted in Region 4. PEs also continue to participate in weekly support conference calls with the PTC that include a discussion of successes and barriers they are experiencing within the context of their duties and also is an opportunity receive support.

Oklahoma's Successful Adulthood (OKSA) program continues to reinforce the importance of permanency for teens messaging within the program to show how exploring permanency for teens and providing transitional living supports are not mutually exclusive and must be simultaneously provided for teens in care. OKSA dedicated the week of May 14 - 18, 2018 to the topic of permanency for teens as part of their professional development trainings (PDT) that began November 2017. Michael Sanders from the Annie E. Casey Foundation spent four days on topics such as "Approach Matters/Permanency Matters", "Unpacking the NO", and the "3-5-7 Model". On the fifth day, Mr. Sanders provided one-on-one case consultation to the five PE and six Adoption Transition Unit (ATU) leads. The coaching component allowed the consultant to observe, model, and coach the staff in real time. This approach gave staff the ability to

transfer the theory of permanency to the application of practical approaches to permanency; thus, enhancing the skill level of these specialists whose main focus is to improve the permanency outcomes for the legally-free youth they work with.  Additional PDT included "The Adolescent Brain" and "Youth Mental Health First Aid."  OKSA also updated the website to include a permanency section with permanency resources from the Capacity Building Center for States, Casey Family Programs, Child Welfare Information Gateway, Children's Bureau, and Adopt US Kids.  The resources include topics such as "How to Review a Youth's Case Record," "Talking with Older Youth about Adoption," and "When a Teen Says No to Permanence."  The OKSA website also provides PE and PTC photos and contact information.

CWS continues its work with Youth Villages (YV), a public/private partnership providing resources and services to support permanency outcomes for legally free youth in out-of-home care.  YV LifeSet is a comprehensive community-based program that helps at-risk young people successfully transition to adulthood which currently has the capacity to serve approximately 96 youth per month in the Oklahoma City and Tulsa metro areas.

The consistent messaging, accountability, and support provided to CW staff at all levels within CWS regarding the value and importance of legal permanency for teens in care has contributed to an increase in legally-free permanency rates for 16-17 year olds during this reporting period.  Moving forward, the implementation of current PE activities taking place with legally-free 16 and 17 year olds with the goal of guardianship will be explored, as well as ways to support CW specialists through future workshops, training, and OKSA events.

## 6.5: Rate of Adoption for Legally-Free Children

### Operational Question
Of all children who became legally free for adoption in the 12-month period prior to the year of the reporting period, what percentage were discharged from foster care to a finalized adoption within 12 months of becoming legally free?

### Data Source and Definitions
All children who became legally free for adoption in the 12-month period prior to the year of the reporting period with the percentage who were discharged from foster care to a finalized adoption in less than 12 months from the date of becoming legally free are reported in Measure 6.5.  "Legally Free" means there is a parental rights termination date reported to AFCARS for both mother and father.  This measure is federal metric C 2.5.

### Description of Denominator and Numerator for this reporting period
**Denominator:**   All children who became legally free for adoption from 4/1/2016 through 3/31/2017.
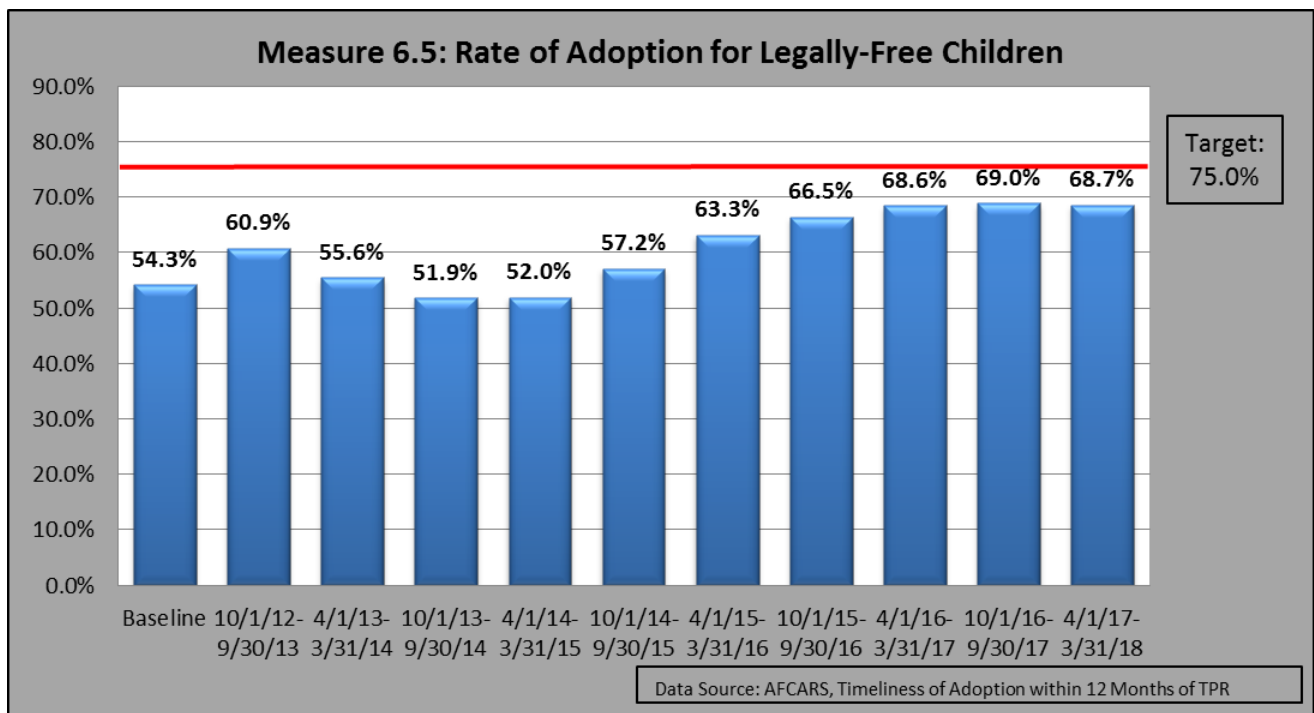**Numerator:**   The number of children who became legally free for adoption from 4/1/2016 through 3/31/2017 **and** were discharged from care to a finalized adoption in less than 12 months from the date they became legally free.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All children who became legally free from 10/1/10 - 9/30/2011 | | | 54.3% |
| 10/1/2012 – 9/30/2013 | All children who became legally free from 10/1/11 - 9/30/2012 | 898 | 1,474 | 60.9% |
| 4/1/2013 – 3/31/2014 | All children who became legally free from 4/1/12 - 3/31/2013 | 857 | 1,540 | 55.6% |
| 10/1/2013 – 9/30/2014 | All children who became legally free from 10/1/12 - 9/30/2013 | 839 | 1,618 | 51.9% |
| 4/1/2014 – 3/31/2015 | All children who became legally free from 4/1/13 - 3/31/2014 | 935 | 1,797 | 52.0% |
| 10/1/2014 – 9/30/2015 | All children who became legally free from 10/1/13 - 9/30/2014 | 1,200 | 2,099 | 57.2% |

| 4/1/2015 – 3/31/2016 | All children who became legally free from 4/1/14 - 3/31/2015 | 1,459 | 2,304 | 63.3% |
|---|---|---|---|---|
| 10/1/2015 – 9/30/2016 | All children who became legally free from 10/1/14 - 9/30/2015 | 1,567 | 2,355 | 66.5% |
| 4/1/2016 – 3/31/2017 | All children who became legally free from 4/1/15 - 3/31/2016 | 1,754 | 2,558 | 68.6% |
| 10/1/2016 – 9/30/2017 | All children who became legally free from 10/1/15 - 9/30/2016 | 1,886 | 2,734 | 69.0% |
| 4/1/2017 – 3/31/2018 | All children who became legally free from 4/1/16 - 3/31/2017 | 1,770 | 2,577 | 68.7% |
| Target | | | | 75.0% |

Section 2, Table 6.5-1



Section 2, Graph 6.5-1

## Commentary

During this review period, Child Welfare Services (CWS) saw a slight decrease in the number of children who were discharged from care to a finalized adoption within 12 months from the date they became legally free. A 0.3 percent decrease occurred from the last reporting period making this reporting period 68.7 percent. Even with the slight decrease, the rate is still higher than the baseline at 14.4 percent.

Specialized Adoption supervisory units established in February 2017, as a special project to focus on adoption finalizations in Regions 4 and 5, remain in place. Foster Care and Adoptions management is considering the end of the fiscal year data to determine what structure best supports ensuring the timeliness of adoption for legally-free children.

The regional Adoption Timeliness Accountability Teams (ATATs) continue to provide focus on reducing the length of time to adoption finalization for children that become legally free in an identified placement. CWS requested assistance from Casey Family Programs to review the current ATAT processes and provide feedback as to possible enhancements. The

report utilized by the ATATs will be modified to provide for better tracking of barrier types and frequency so systemic issues may be addressed.

## 6.1 Rate of Permanency for Legally-Free Children with No Adoptive Placement

### Operational Question
Of children who were legally free but not living in an adoptive placement as of January 10, 2014, what number of children has exited care to a permanent placement?

### Data Source and Definitions
All children who were legally free for adoption as of 1/10/2014 and did not have an identified adoptive family with the percentage who have since achieved permanency, either through adoption, guardianship, or reunification are reported in Measure 6.1.  The target for this measure is that 90.0 percent of the children age 0-12 years, and 80.0 percent of the children age 13+ years will achieve permanency.  "Legally Free" means there is a parental rights termination date reported to AFCARS for both mother and father or for one parent when the child was previously adopted by a single parent.  In the KIDS system, these children are classified as "Quad 2" children, indicating that these children are legally free and have no identified adoptive placement.

### Description of Denominator and Numerator for this reporting period
**Denominator:**    All Quad 2 children with a case plan goal of adoption as of 1/10/2014.
**Numerator:**       The number of Quad 2 children with a case plan goal of adoption who achieved permanency.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Cohort Baseline 1/10/14 | | | | 292 Children |
| 1/10/2014 – 6/30/2014 | All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption | 8 | 207 | 3.9% |
| | All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption | 1 | 85 | 1.2% |
| 7/01/2014 – 12/31/2014 | All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption | 47 | 207 | 22.7% |
| | All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption | 8 | 85 | 9.4% |
| 1/01/2015 – 6/30/2015 | All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption | 78 | 207 | 37.7% |
| | All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption | 17 | 85 | 20.0% |
| 7/01/2015 – 12/31/2015 | All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption | 119 | 207 | 57.5% |
| | All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption | 23 | 85 | 27.1% |
| 1/01/2016 – 6/30/2016 | All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption | 137 | 207 | 66.2% |
| | All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption | 32 | 85 | 37.6% |
| 7/01/2016 – 12/31/2016 | All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption | 156 | 207 | 75.4% |
| | All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption | 34 | 85 | 40.0% |

| | | | | |
|---|---|---|---|---|
| 1/01/2017 – 6/30/2017 | All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption | 162 | 207 | 78.3% |
| | All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption | 37 | 85 | 43.5% |
| 7/01/2017 – 12/31/2017 | All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption | 167 | 207 | 80.7% |
| | All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption | 39 | 85 | 45.9% |
| 1/01/2018 – 6/30/2018 | All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption | 171 | 207 | 82.6% |
| | All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption | 39 | 85 | 45.9% |
| Target | | 90.0% (Age 0-12) | | 80.0% (Age 13+) |

**Section 2, Table 6.1-1**
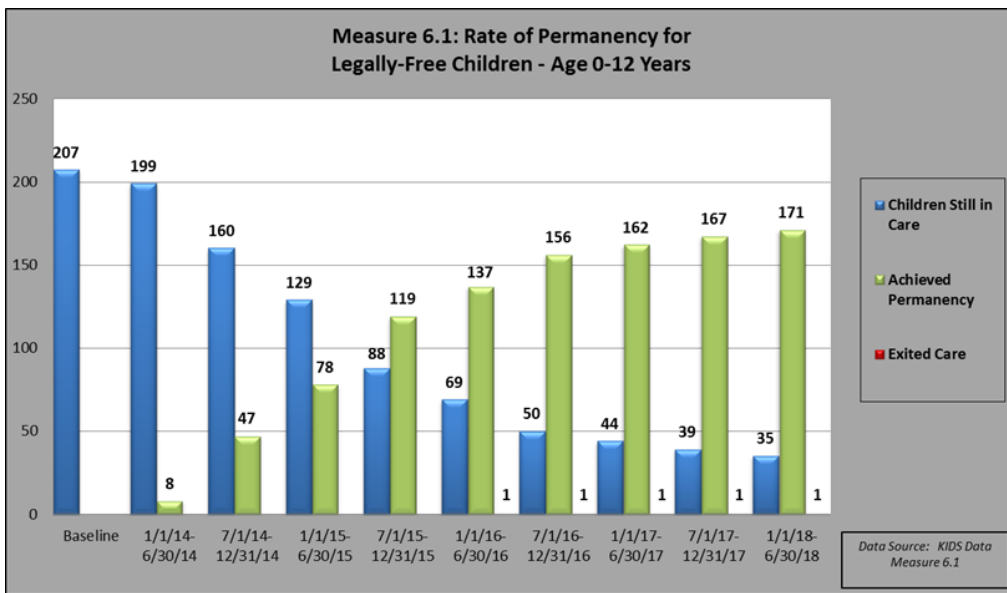


**Section 2, Graph 6.1-1**
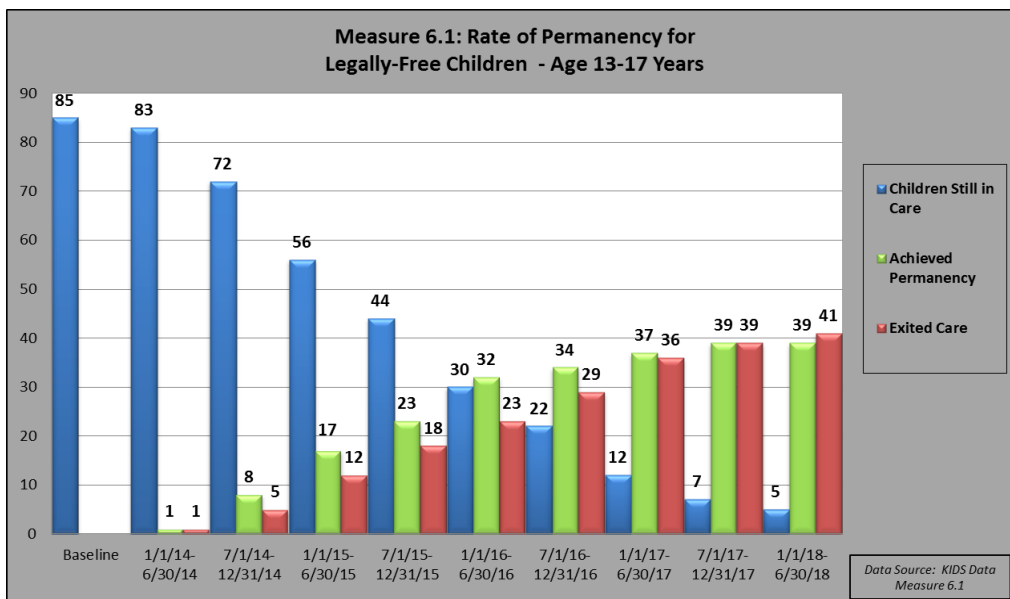


**Section 2, Graph 6.1-2**
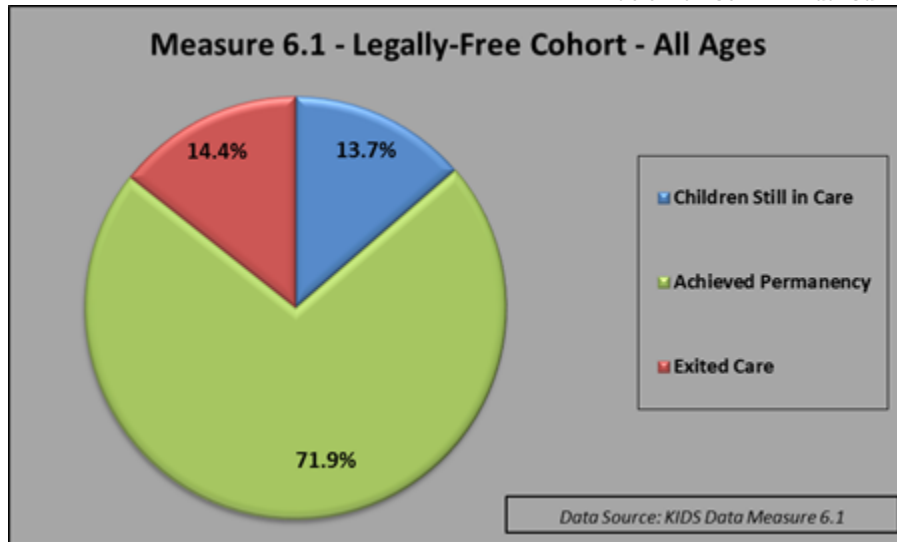
**Section 2, Chart 6.1-1**

## Commentary

Of the 292 children in the original cohort from 1/10/2014, a total of 210 children or 71.9 percent achieved permanency, 42 children or 14.4 percent left care to non-permanent exits, and 40 children remain in care.

As of 6/30/2018, for the cohort of 207 children, age 0-12 who were legally free without an identified placement, 171 or 82.6 percent reached permanency. Of the remaining 35 children in care age 0-12, 33 children have a case plan goal of adoption and 2 children have a case plan goal of guardianship. Of the 67 children that were 6 years old and under as of 1/10/2014, 60 children achieved permanency as of 6/30/2018 which meets the overall target of 90.0 percent for those children 6 years and under. Of the 140 children ages 7-12, a total of 111 children or 79.3 percent achieved permanency.

For the cohort of 85 youth, age 13 and older who were legally free without an identified placement, 39 or 45.9 percent reached permanency. Of the remaining 5 youth still in care age 13 and older, 2 youth are currently placed in trial reunification, and another 2 youth are working towards guardianships.

Adoption Transition Unit (ATU) staff are assigned to each Quad 2 child and youth to diligently assist in achieving permanency. The Ongoing Quad 2 YI823 report continues as a primary management tool for ATU leadership and is helpful in both identifying trends within the Quad 2 cohort, such as placement types and specialized recruitment needs, as well as needs within each supervisory group and within the team as a whole. ATU now consists of eight supervisor groups statewide, with each group consisting of four to six ATU specialists. As of the end of this reporting period, ATU had one vacant position, and three staff on graduated workloads.

Through two focus group meetings and ongoing follow-up, ATU is working with Resource, Programs, and Communications staff to streamline the adoption event preparation and statewide staffing presentation and follow-up. These partnerships, and those with the following groups, continue to be critical in achieving permanency for Quad 2 children and youth:

- Local television stations in Lawton (KSWO), Oklahoma City (KFOR), and Tulsa (KTUL), who feature stories at least weekly on waiting children. During this reporting period, 43 children were filmed and 34 were featured;
- Oklahoma Fosters Initiative and Oklahoma Heart Gallery resulted in the creation of 189 videos of children waiting for adoptive families. Due to miscellaneous reasons, some videos are no longer available online. Currently, 163 videos can be used throughout different media sources and social media sites, such as Facebook, The Adoption Exchange, and AdoptUsKids, and are specifically located on the Oklahoma Heart

Gallery website. Video shoots were held in March and May 2018 that resulted in photographs and videos of 32 children and youth;

- Oklahoma Heart Gallery website and physical traveling displays, which feature photos and/or videos of children who are legally-free, awaiting an adoptive families that are updated frequently based on the status of featured children and youth;
- DHS Recruitment and Development specialists, who collaborate with ATU to recruit specifically for identified children and youth within the community;
- Oklahoma Successful Adulthood and Permanency Planning programs; and
- Mental health consultants from the Oklahoma Department of Mental Health and Substance Abuse Services, who contract with DHS to provide family and child-specific supports needed by adoptive families.

From 1/01/2018 to 6/30/2018, the Foster and Adoptive Parent Support Center received 2,696 inquiries. The numbers for "Inquiry Channel," "Specified Interest," and "Referral Source" are represented below. During the time frame "Referral Source" was specified on 1845 inquiries, 68.43 percent.

| Total Number of Inquiries: | | | | **2696** | |
|---|---|---|---|---|---|
| **Inquiry Channel** | | | **Referral Source** | | |
| Internet | 2118 | 78.56% | Internet | 658 | 35.66% |
| Hotline | 365 | 13.54% | Facebook | 262 | 14.20% |
| Direct Phone | 141 | 5.23% | Adoptive Parent | 180 | 9.76% |
| AdoptUSKids | 61 | 2.26% | Friend | 160 | 8.67% |
| Email | 5 | 0.19% | Foster Parent | 145 | 7.86% |
| Paper Application | 2 | 0.07% | AdoptUSKids | 96 | 5.20% |
| Adoption.com | 2 | 0.07% | TV | 81 | 4.39% |
| Other | 2 | 0.07% | Relative Recruiter Booth | 69 | 3.74% |
| | | | DHS Employee | 62 | 3.36% |
| **Specified Interest** | | | Faith Based | 46 | 2.49% |
| Adoption | 1344 | 49.85% | Life Church | 24 | 1.30% |
| Resource Parent | 599 | 22.22% | Radio | 12 | 0.65% |
| Fostering | 597 | 22.14% | Newspaper | 9 | 0.49% |
| Other | 97 | 3.60% | OK Fosters Website | 9 | 0.49% |
| Kinship | 10 | 0.37% | DHS Recruiter | 8 | 0.43% |
| OK Fosters | 10 | 0.37% | Informational Meeting | 8 | 0.43% |
| Kinship Adoption | 6 | 0.22% | Private | 8 | 0.43% |
| DDS | 2 | 0.07% | DHS Website | 4 | 0.22% |
| TFC | 1 | 0.04% | ICPC Request | 2 | 0.11% |
| | | | Waiting Hearts | 2 | 0.11% |
| | | | Total | 1845 | 100.00% |

Data Source: Foster and Adoptive Parent Support Center

During this reporting period, ATU completed Adoption Efforts Staffings on 27 children/youth. Of these, 24 were completed on baseline cohort children, and 15 were on youth 13 and older. One of the six ATU lead specialists became the main facilitator for this strategy effective May 2018 for ongoing sustainability. As this strategy was implemented in August 2017, ATU will be evaluating its effectiveness in the coming months. As of this reporting period, the strategy seems to effectively bring together the decision-makers for a child's case and fosters team decision-making.

ATU continues working to reinvigorate conversations with permanency-challenged youth through an ongoing partnership with the Oklahoma Successful Adulthood (OKSA) program, as well as Permanency Planning partners. A practicum student, working with the University of Oklahoma and in collaboration with ATU and OKSA, conducted focus groups regarding permanency with young people in two group homes as well as with the Oklahoma foster youth alumni board during June 2018. The focus groups' intent was to obtain feedback for revamping some of the tools used to assist young people in thinking about and discussing permanency, particularly the older youth. The results of the focus groups and updated tools will be available in future reporting periods.

ATU will continue to partner with Resource staff on discussions with both kinship and other resource parents of Quad 2 children and youth around barriers to providing permanency. During this reporting period, ATU staff participated in 22 intentional and customized team conversations with relatives and kinship families about their hesitancy in providing permanency, as well as exploring other family who may provide legal permanency. Efforts by ATU and other partners to further identify people important in the youth's life will be incorporated into new programmatic processes currently in development to increase permanency possibilities for children and youth within the Quad 2 cohort.

To increase documentation quality and capabilities, ATU and KIDS management formed a workgroup to develop a KIDS dashboard specific to Quad 2 children and reconfigure KIDS screens to more accurately capture adoption efforts.

ATU collaborated with AdoptUSKids to participate in a webinar on safety in online photolisting. Additionally, ATU is also working with AdoptUSKids to enhance narrative and profile writing capacities within the team, and will be participating in another webinar in the coming months on this topic.

## 6.6: Trial Adoption Disruptions

### Operational Question
Of all children who entered trial adoptive placements during the previous 12-month period, what percent of adoptions did not disrupt over a 12-month period?

### Data Source and Definitions
A trial adoption (TA) placement is defined as the time between when a child is placed into an adoptive placement until the adoption is legally finalized. A trial adoption disruption is defined as the interruption of an adoption after the child's placement and before the adoption finalization.

### Description of Denominator and Numerator for this reporting period
**Denominator:**  Number of children that entered trial adoption from 4/1/2016 through 3/31/2017.
**Numerator:**  Number of children that entered trial adoption from 4/1/2016 through 3/31/2017 **and** the trial adoption did not disrupt within 12 months.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 – 9/30/2012 | All children who entered TA from 10/1/2010 – 9/30/2011 | | | 97.1% |
| 10/1/2012 – 9/30/2013 | All children who entered TA from 10/1/2011 – 9/30/2012 | 1,433 | 1,489 | 96.2% |
| 4/1/2013 – 3/31/2014 | All children who entered TA from 4/1/2012 – 3/31/2013 | 1,366 | 1,417 | 96.4% |
| 10/1/2013 – 9/30/2014 | All children who entered TA from 10/1/2012 – 9/30/2013 | 1,195 | 1,239 | 96.4% |
| 4/1/2014 – 3/31/2015 | All children who entered TA from 4/1/2013 – 3/31/2014 | 1,252 | 1,297 | 96.5% |

| 10/1/2014 – 9/30/2015 | All children who entered TA from 10/1/2013 – 9/30/2014 | 1,477 | 1,549 | 95.4% |
|---|---|---|---|---|
| 4/1/2015 – 3/31/2016 | All children who entered TA from 4/1/2014 – 3/31/2015 | 1,938 | 2,020 | 95.9% |
| 10/1/2015 – 9/30/2016 | All children who entered TA from 10/1/2014 – 9/30/2015 | 2,138 | 2,189 | 97.7% |
| 4/1/2016 – 3/31/2017 | All children who entered TA from 4/1/2015 – 3/31/2016 | 2,337 | 2,403 | 97.3% |
| 10/1/2016 – 9/30/2017 | All children who entered TA from 10/1/2015 – 9/30/2016 | 2,413 | 2,513 | 96.0% |
| 4/1/2017 – 3/31/2018 | All children who entered TA from 4/1/2016 – 3/31/2017 | 2,511 | 2,615 | 96.0% |
| Target | | | | 97.3% |

**Section 2, Table 6.6-1**
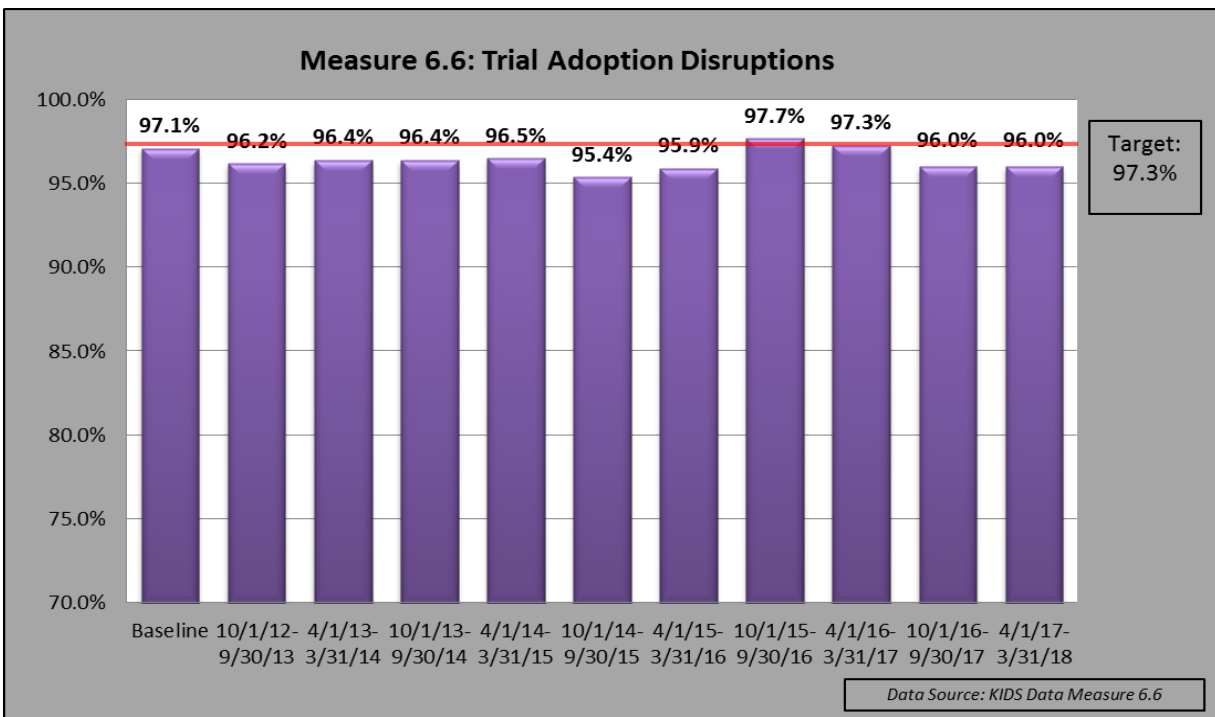


**Section 2, Graph 6.6-1**

## Commentary

Child Welfare Services (CWS) remained the same in this measure. For the current reporting period, 2,615 children entered into trial adoption (TA), which is 102 more children entering TA than the last reporting period, with 2,511 or 96.0 percent not disrupting while in TA placement. Although there was no improvement or decline in this reporting period, CWS is placing 75.6 percent more children in TA than when this measure began in October 2012. Of the 104 children that disrupted, the average age of a child disrupting from TA was 10.1 years old. The average amount of time in TA before disruption was 86.3 days.

CWS increased support to families pre-placement by utilizing behavioral health consultants (BHCs) in the disclosure process for Quad 2 children. The goal of the BHCs involvement is to prevent future disruptions and dissolutions by evaluating the child's special needs and past trauma, as well as the household dynamics of the prospective adoptive family, and then to identify and access resources and supports for the newly established family. A BHC's expertise aids these families to better understand the children's current diagnosis and prepare for potential trauma triggers. BHCs have transparent conversations with the family based upon facts gathered from the child and family profile, in addition

to brainstorming as a team about current and future needs, and then developing a support continuum for the family. According to the BHCs, empowering the family by setting realistic expectations and assisting with identifying a strong support system is paramount to the stability for these children.  CWS Nursing staff are also available to consult and/or attend disclosure, as needed.  In addition, this fall Foster Care and Adoptions management are providing training regarding the disclosure process, pre-placement visits, and the purpose and development of the adoption post-placement service plan (APPSP).

Post-Adoption Services introduced the field service worker (FSW) to the Adoption Transition Unit (ATU) in March 2018. Disclosures for all Quad 2 and high-risk Quad 1 children will be attended by Post-Adoption Services.  The objective of this partnership is to establish a relationship with the prospective parents prior to the adoption and to discuss the agency's support continuum available post-finalization.  To streamline processes, the BHC's referral form and the FSW's referral form were merged into one *Referral Form*.  Training will be provided to the field statewide as to the referral process.

Currently, a Master of Social Work practicum student and a part-time staff member are reviewing disruptions for the first nine months of State Fiscal Year (SFY) 18.  The review's goal is to identify factors that may have contributed to the disruptions so those factors may be addressed to prevent future disruptions.  Foster Care and Adoptions leadership is also in the process of exploring additional trauma training opportunities for prospective adoptive families.

## 6.7 Adoption Dissolutions

### Operational Question
Of all children whose adoptions were finalized over a 24-month period, what percentage of those children did not experience dissolution within 24 months of finalization?

### Data Source and Definitions
A finalized adoption is defined as the legal consummation of an adoption.  Adoption dissolution is defined as the act of ending an adoption by a court order terminating the legal relationship between the child and the adoptive parent.   This term applies only after finalization of the adoption.

### Description of Denominator and Numerator for this reporting period
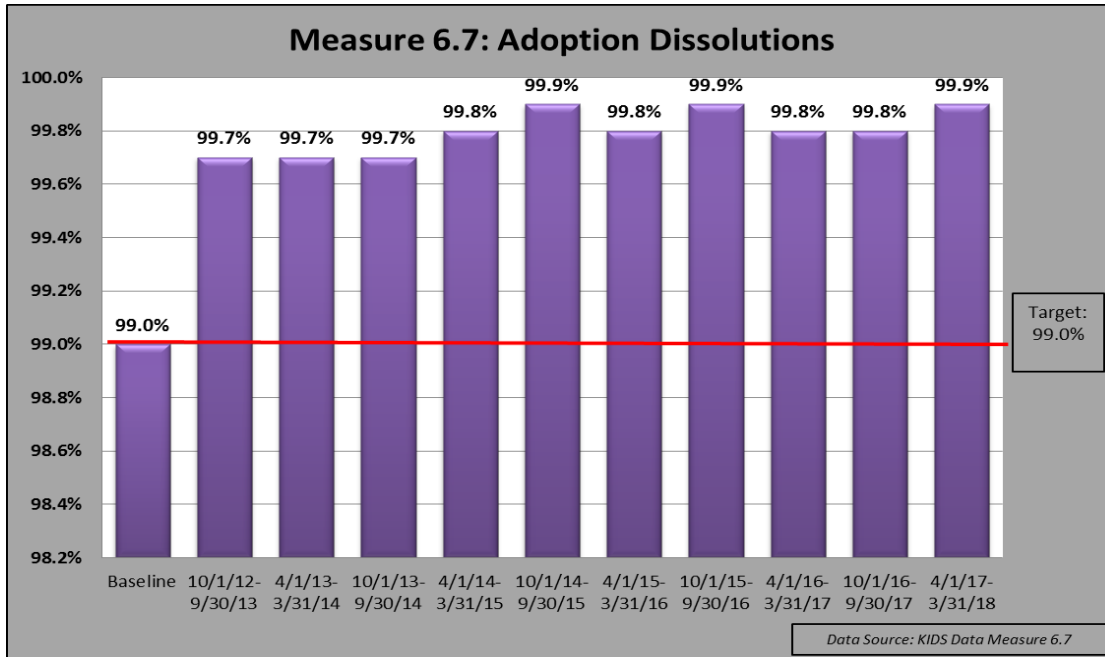**Denominator:**     All children who had a legalized adoption during the 24 months ending 3/31/2016.
**Numerator:**       All children who had a legalized adoption during the 24 months ending 3/31/2016 that did not dissolve in less than 24 months.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline: 10/1/2011 –  9/30/2012 | All children with a legalized adoption from 10/1/2008 - 9/30/2010 | | | 99.0% |
| 10/1/2012 –  9/30/2013 | All children with a legalized adoption from 10/1/2009 - 9/30/2011 | 2,969 | 2,979 | 99.7% |
| 4/1/2013 –  3/31/2014 | All children with a legalized adoption from 4/1/2010 - 3/31/2012 | 3,055 | 3,063 | 99.7% |
| 10/1/2013 –  9/30/2014 | All children with a legalized adoption from 10/1/2010 - 9/30/2012 | 2,856 | 2,865 | 99.7% |
| 4/1/2014 –  3/31/2015 | All children with a legalized adoption from 4/1/2011 - 3/31/2013 | 2,945 | 2,950 | 99.8% |
| 10/1/2014 –  9/30/2015 | All children with a legalized adoption from 10/1/2011 - 9/30/2013 | 2,846 | 2,849 | 99.9% |
| 4/1/2015 –  3/31/2016 | All children with a legalized adoption from 4/1/2012 - 3/31/2014 | 2,697 | 2,702 | 99.8% |

| 10/1/2015 – 9/30/2016 | All children with a legalized adoption from 10/1/2012 - 9/30/2014 | 2,737 | 2,741 | 99.9% |
|---|---|---|---|---|
| 4/1/2016 – 3/31/2017 | All children with a legalized adoption from 4/1/2013 - 3/31/2015 | 3,086 | 3,093 | 99.8% |
| 10/1/2016 – 9/30/2017 | All children with a legalized adoption from 10/1/2013 - 9/30/2015 | 3,647 | 3,655 | 99.8% |
| 4/1/2017 – 3/31/2018 | All children with a legalized adoption from 4/1/2014 - 3/31/2016 | 4,312 | 4,317 | 99.9% |
| Target | | | | 99.0% |

**Section 2, Table 6.7-1**



**Section 2, Graph 6.7-1**

## Commentary

Child Welfare Services (CWS) continued to exceed the goal of a 99.0 percent success rate for adoption stability with less than 0.1 percent in dissolutions. During the 24 months ending 3/31/2016, 4,317 children had a legalized adoption and 4,312 or 99.9 percent of those adoptions did not dissolve within 24 months. An additional 662 children had finalized adoptions when compared to the last reporting period. Five children disrupted from five separate adoption finalization cases. The average amount of time before dissolution was 12 months.

The Post-Adoption Services field services worker (FSW) will continue to meet with families adopting a Quad 2 child or a high-risk Quad 1 child prior to finalization to establish a supportive relationship, and provide resources and services. The FSW is available to assigned families as a support following the adoption finalization. The activities implemented related to adoption disruption are believed to help minimize the likelihood of an adoption ending in a dissolution.

# SECTION 3. Capacity Indicators

## 2.1: New Family Foster Care Homes

### Operational Question

How many new foster homes, including Foster Family Homes and Supported Foster Homes were opened during SFY 18?
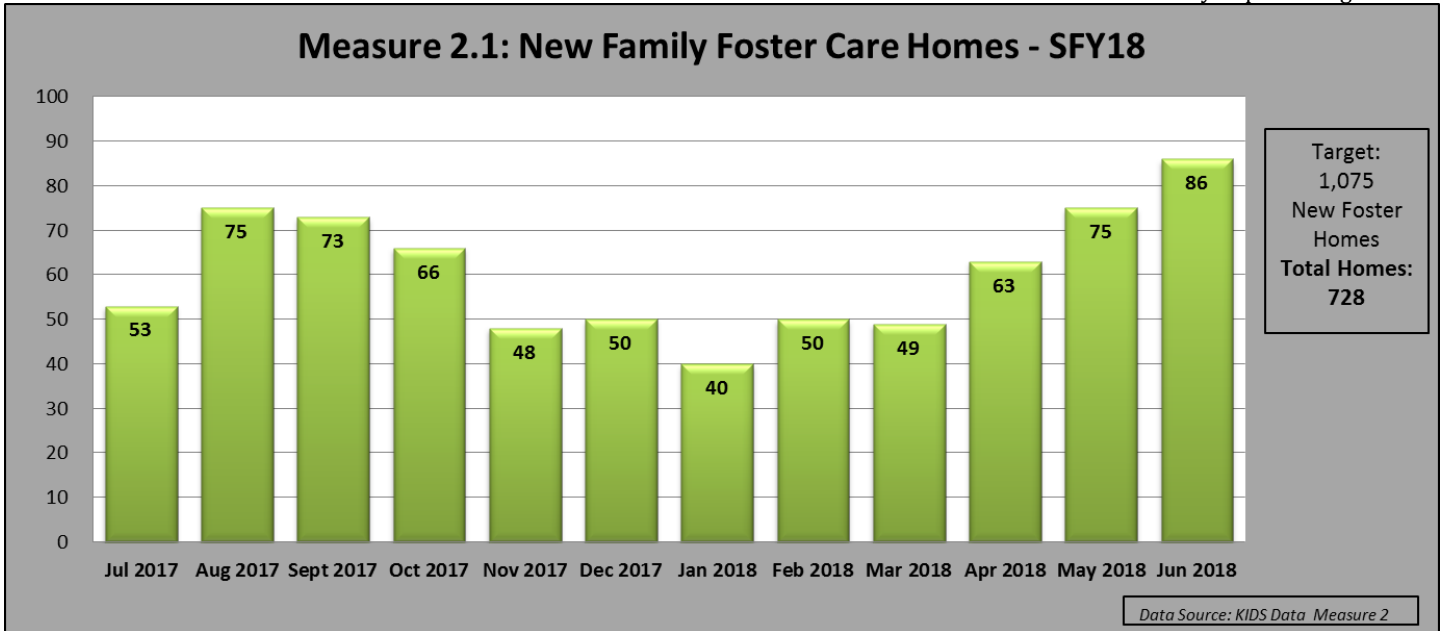
## Data Source and Definitions

Total count of new foster homes includes all Foster Family Homes and Supported Foster Homes by the month that the family assessment was approved using the agreed upon criteria. As of 7/1/2014, this measure does not include Kinship, Contracted Foster Care (CFC) Homes, Emergency Foster Care (EFC), Shelter Host Homes (SHH), Adoptive, or Tribal Foster Homes.

## Trends

| Reporting Period | Population | Result | |
|---|---|---|---|
| SFY 18 Baseline | | 2,139 Foster Homes open as of 7/1/2017 | |
| 7/1/2013 – 12/31/2013 | All CFC, Foster Family Homes, EFC, SHH, and Supported Foster Homes opened during the first half of SFY 14 | 346 Homes | 763 Total Homes opened in SFY 14 |
| 1/1/2014 – 6/30/2014 | All CFC, Foster Family Homes, EFC, SHH, and Supported Foster Homes opened during the second half of SFY 14 | 417 Homes | |
| 7/1/2014 – 12/31/2014 | All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 15 | 409 Homes | 780 Total Homes opened in SFY 15 |
| 1/1/2015 – 6/30/2015 | All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 15 | 371 Homes | |
| 7/1/2015 – 12/31/2015 | All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 16 | 387 Homes | 1,080 Total Homes opened in SFY 16 |
| 1/1/2016 – 6/30/2016 | All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 16 | 693 Homes | |
| 7/1/2016 – 12/31/2016 | All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 17 | 431 Homes | 884 Total Homes opened in SFY 17 |
| 1/1/2017 – 6/30/2017 | All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 17 | 453 Homes | |
| 7/1/2017 – 12/31/2017 | All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 18 | 365 Homes | 728 Total Homes opened in SFY 18 |
| 1/1/2018 – 6/30/2018 | All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 18 | 363 Homes | |
| Target | | 1,075 New Foster Homes opened by 6/30/2018 | |

**Section 3, Table 2.1-1**

## Measure 2.1: New Family Foster Care Homes - SFY18



Target:
1,075
New Foster
Homes
**Total Homes:**
**728**

Data Source: KIDS Data  Measure 2

**Section 3, Graph 2.1-1**

## Commentary

As of 6/30/2018, Child Welfare Services (CWS) opened 728 CWS Foster Family Homes and Supported Foster Homes that were counted as new according to the Pinnacle Plan criteria.  The target for new homes by the end of State Fiscal Year (SFY) 18 was 1,075 homes.  CWS achieved 67.7 percent of the SFY 18 target for new homes.  As of 7/1/2017, 2,137 homes were open.  During SFY 18, 878 homes opened and 1,033 homes closed, leaving 1,982 homes open as of 6/30/2018 for a net loss of 155 homes.  Net gain only counts unique homes even though a resource family may provide more than one type of foster care.  This measure also excludes any out-of-state foster homes or homes open to provide respite-only care. Homes that move out-of-state are included through the end of the current SFY but will be excluded for the starting baseline for the next SFY.  The starting baseline for SFY 19 will be 1,981 after excluding the one home that moved out-of-state during SFY 18.

**Recruitment**

CWS continues to evaluate reasons for lagging behind on recruitment goals during this fiscal year.  Based on the number of homes recruited by the Oklahoma Department of Human Services (DHS) as well as external agency partners, overall recruitment of foster homes was more difficult this past fiscal year.

During the second quarter of SFY 18, Foster Care and Adoptions leadership decided to reallocate the second vacated field administrator position to oversee recruitment staff.  Delays in this position's reallocation meant it was not available as quickly as leadership anticipated.  The newly created position, recruitment field administrator, was filled with the selected leader to assume leadership duties for all 10 recruitment units effective August 2018.  The leadership restructuring will enhance the oversight and support of the recruitment program with a focus on not only recruitment, but also retention.  The recruitment field administrator has already initiated research for national best practices and evidence-based practices for recruitment and retention.

**Closures**

CWS continues to assess the rate of home closures by reviewing the reasons for closure and working with staff to correctly identify and document closure reasons.  Prior to closure, the assigned supervisor or field manager contacts the family to inquire about their fostering experience and possible plans for future foster parenting.  This provides an opportunity to resolve any issues, to thank the family for their service, and to let the family know they will receive a call to conduct an exit interview.  To further enhance this practice, Foster Care and Adoptions leadership provided additional

Resource Closure Prevention Practice guidance to the field managers in July 2018.  The guidance provided talking points and instruction for documentation.  The contacts will now be tracked through reports in KIDS.

The KIDS team is assisting with a foster home closure analysis considering data from SFY 14 – SFY 18.  The data indicates SFY 17 accounted for the largest number of closed homes, accounting for 27.39 percent of all closures for the five years under review.  The previous year, SFY 16, OK Fosters rolled out, and 1,080 new homes were approved.  Despite closures from the end of SFY 14 to current, the end of SFY 18 there were 286 more homes available than the end of SFY 14, which is a 16 percent increase.  Thus far, the analysis indicates some positive trending:
- a significant reduction in SFY 18 in the number of homes that closed after their first placement;
- an increase in the number of days open;
- a significant increase in the number of foster homes adopting children placed in their home;
- a reduction in the number of homes that closed without ever taking a placement;
- an increase in foster families' placement preferences met;
- an increase in the utilization rate; and
- a reduction in the number of homes with extended vacancy periods.

The exit interviews with foster families that requested to have their home closed are conducted by the Foster Care and Adoption Support Center (FCASC).  FCASC staff were able to complete interviews with 101 of 162 foster parents whose homes closed between the months of January and June 2018.

Information obtained from the calls.
- 89 percent decided to no longer foster based on a family decision that was independent from their experience with CWS.
- 79 percent stated they would consider fostering in the future.
- 83 percent would recommend fostering/adopting with DHS or an agency partner.
- 31 percent reported that family expectations were the most challenging aspect of being a foster parent.  This includes attachment with the foster children, working with biological parents, adjusting to fostering, expectations about fostering not being met, and placement preferences not being met.
- 28 percent indicated working with the system was the most challenging part of being a foster parent.  This includes general system issues, working with case workers, lack of information at placement, and paperwork.
- 18 percent stated needs of the custody child was the most challenging part of being a foster parent.
- 37 percent did not have any recommendations for DHS and/or resource family partner agencies to enhance the experience of foster parents.
- 24 percent stated improved communication would enhance their experience as a foster parent.
- 20 percent recommend system changes to enhance their experience as a foster parent.  This includes staff training, staff retention, revising requirements, and court process improvement.
- 19 percent stated more support would enhance their experience as a foster parent.  This includes access to resources, respite care, foster parent education, DHS staff availability, and additional financial resources.

Foster Care and Adoptions (FCA) is utilizing the information learned through the closure analysis and exit interviews to determine steps that may be taken to enhance current processes and better support foster families.

Changes and/or enhancements already in process
- Although there has been some positive trending in the last fiscal year regarding retention of foster families after their first placement, FCA is considering additional ways to support a family when they receive their first placement.  A few recruitment supervisory units are making plans to pilot a new process to include the foster family's assigned recruitment staff person continuing to work with the family for a limited time after the family receives their first placement.  Consideration for expansion will be based upon feedback, outcomes, and staff capacity.

- Tulsa County recruitment units will be piloting a support and retention group for newly approved foster parents who were approved within the last year. The group will be called GAPS-Gathering, Asking (questions) and Problem Solving. This support group will focus on the challenges of new foster homes, helping them learn to navigate the child welfare system and bringing in community partners for the foster parents to learn more about supports offered throughout the community. In addition, the plan is to have long-term foster parents occasionally attend these groups to give encouragement, feedback, and answer questions from the perspective of those who have done the work of fostering children in custody. The first meeting is set for 8/30/2018 at 7 pm at the Tulsa Area Protection for Children Resource Center. The meetings will be held at least quarterly and dependent upon the response from Tulsa County, the GAPS meetings will be expanded to the rural areas of Region 5 as well.
- To insure families have the support needed during a crisis, a number for the statewide mobile crisis stabilization is provided to all resource parents.
- FCA is in the initial stages of exploring some type of support or service to assist families dealing with the grief and loss issues from foster children leaving their home.
- CWS is working with OKBenefits to have a portal for individuals/families interested in applying to become a foster family to submit their application, forms and documents online. This convenience for the applicants will also minimize redundancy and the opportunity for misplaced paperwork.
- Information gathered through the exit interviews will be shared with CWS leadership so they may reinforce with all CW staff the importance of timely communication and support for foster families, and with the foster parent support workgroup to further brainstorm ways to improve the fostering experience.

**Special Needs Recruitment**
When children are approved to meet emergency criteria for Developmental Disabilities Services (DDS), efforts to utilize a DDS level home begin immediately and continue until a need is fulfilled. DDS and the recruitment team continue to meet monthly to discuss the children approved by DDS for Specialized Foster Care (SFC) or Agency Companion (AC) homes. The group determines which, if any, of the currently approved homes would be a good match to provide services for children. Additionally, the children and families are reviewed to determine where barriers to placement lie and then potential solutions to barriers are discussed. This meeting also provides an opportunity for DDS and recruitment to identify any child-specific recruitment efforts that need to be considered when attempting to make placement matches.

Through the combined efforts of Oklahoma Fosters, CWS, and DDS, radio and TV commercials specific to this population were completed and released to raise public awareness of the need. An Oklahoma City area news channel completed a story focused on the needs of the children who are medically fragile or have a disability. The news story was also posted online and made available to share through social media. A special recruitment day highlighting children at the JD McCarty Center was held in June. Over 65 people, including both internal staff and external partners, from across the state attended the event. The main focus of the event was to highlight the younger children with less severe needs whose needs could be met in a traditional foster care setting. The additional training and supports available to families who interact with JD McCarty were discussed.

At this time, all five positions of the recruitment unit are filled. The two newest staff will cover the Oklahoma City and Tulsa areas. They are in the process of onboarding and receiving cross training with Foster Care and DDS. Currently, five homes are in development at the DDS level of foster care that are directly tied to efforts of the recruitment team. Four of the homes are being developed as SFC homes and one is being developed as an AC home. All of these homes are for specific children approved for DDS who are not currently placed in foster homes; instead, they are currently in shelters or hospitals. The partnership between recruitment and DDS continues to explore ways to streamline the approval process for families.

**Oklahoma Fosters**

Oklahoma Fosters continues to have coffee shop talks in eight areas of the state to engage both internal and external recruiters. These meetings provide an opportunity for brainstorming, problem solving, and distribution of new recruitment materials. Oklahoma Fosters and the recruitment ambassadors meet monthly to focus on collaboration methods for recruitment efforts. A representative from each region, six private agency partners, and one tribal recruiter attend. Oklahoma Fosters is also working to strategically develop support groups in Oklahoma counties that have a high number of foster parents and no active support group. **Oklahoma Foster June 2018** provides more details on recruitment efforts.

*Foster Care Public Service Announcements*

To increase awareness about the need for all types of foster families, the Oklahoma Fosters team oversaw the creation of public service announcements that were distributed to the Oklahoma Association of Broadcasters and shared on social media and the Oklahoma Fosters YouTube channel. The videos featured Senator James Lankford; Special Assistant to the DHS Director, Cody Inman; and foster families.

*Oklahoma Fosters Special Needs Video Shoot*

In May, Oklahoma Fosters collaborated with The Bethany Children's Center, JD McCarty Rehabilitation Center, and the Laura Dester Shelter to complete a video shoot including portraits of each child. Sixteen children were filmed. The shoot's purpose was to focus on some of the most vulnerable children in need of placement, as well as bring awareness to their stories and to identify long-term foster and/or adoptive placements.

*Newsletter for Foster Families*

In an effort to increase communication with foster parents, the Oklahoma Fosters team launched four newsletters, meant to target the primary foster care stakeholders in Oklahoma - prospective foster families, current foster families, foster care recruiters, and foster care partners. These newsletters quickly and efficiently communicate changes in policy, important data, monthly safety themes, partner discounts, and more.

*Myriad Gardens*

Oklahoma Fosters partnered with the Myriad Gardens for discounted booth space for each of the Summer Sonic Movie nights. This partnership allows foster care recruiters the opportunity to sign up for a booth at the event that attracts thousands of families each year. Each week, a different recruiter or recruitment agency staffs the booth and talk with families about getting involved in the foster care system.

*Website Update Project*

Since launching in 2015, Oklahoma Fosters and CWS have created many new and exciting supports for foster families and made them available at okfosters.org. This spring, a workgroup went through all of the items on the website and determined what needed to be removed, updated, or added. After the development of many new support materials and the revision of older materials, the University of Oklahoma Center for Public Management team is implementing the website changes. The updated site includes video tutorials located on the appropriate pages, PDF guides to acronyms and common CWS terms, and a clear breakdown of each type of foster care and the agencies that provide it. These changes are to be completed by the end of August 2018.

*Plunge for Foster Care*

In honor of Foster Care Awareness Month in May, Oklahoma Fosters hosted an online challenge called the "Plunge for Foster Care" in which community members were challenged to film themselves jumping into a body of water after saying how they support foster care. This could be fostering children, preparing meals for foster families, working in child welfare, or supporting a foster or adoptive family. The videos encouraged people to stop "dipping their toes in the water" and "take the plunge" in whatever way they can.

*Frontier City Foster Care and Adoptive Parent Appreciation Event*
Oklahoma Fosters partnered with the Foster Care and Adoptive Association of Oklahoma (FCAO) to host an appreciation day for families and engage with foster and adoptive families.  To conclude the day, families gathered for an accolade, door prizes, and food.  Frontier City worked with Oklahoma Fosters and FCAO to make the event affordable for families, which included free parking, admission, and a buffet.  Frontier City also opened their water park a week early, which allowed foster families to enjoy playing in the water with their children.  To support large foster families, FCAO distributed additional tickets for families who purchased the first four. For example, a family of seven purchased four tickets, and FCAO gave them the remaining three free.  Over 198 tickets were sold and 105 were given away by FCAO. The foster and adoptive families that attended raved about the event and said they look forward to attending next year.

**Communication and Supports**
The collaboration between CWS and the faith community through the Care Portal continues to be successful.  From 1/1/2018 to 6/30/2018, 796 children benefited from requests that were met.  The estimated value of these requests was $61,471.  This met the needs of 796 children.  Adair County joined the Care Portal so the Care Portal is now active in the following counties:  Adair, Delaware, Cherokee, Craig, Mayes, Nowata, Oklahoma, Rogers, Stephens, Tulsa, and Washington.  CWS and Care Portal's leadership decided to pilot an expansion to Tier 2 that includes volunteer services. This opportunity would allow volunteers to support foster families, support children in the system, learn more about the needs, and potentially lead to some of the volunteers becoming interested in fostering.  The first outreach event was held in Broken Arrow at the Church at Battle Creek in May.  There was a strong response from individuals interested in volunteering and the process to approve the volunteers is underway.  During this event, which was a partnership with DHS, Project 111, and the Church at Battle Creek, an appeal was also made for families that would consider becoming foster parents for emergency placements.  In an effort to support the families through the process, training and childcare was offered on-site.  As a result of these efforts, 27 families are going through the approval process to become foster families for emergency placements.

To improve communication and proactively resolve issues, a Foster Care program field representative (PFR) continues to monitor foster parent social media sites.  When questions or concerns arise, the assigned PFR contacts the families and attempts to answer questions or assist with problem resolution.  The PFR logs and tracks the questions and concerns to identify any trends or issues that need addressing, such as systemic problems or personnel issues.  Overall, complaints from foster parents continue to be at a minimum over the past six months.

The large Foster Parent Support Workgroup resumed meeting in February 2018.  The group decided to meet quarterly, as most tasks were resolved.  DHS Communications and Design Services completed the publications that were submitted previously and they are now available for distribution.  Since January 2018, the following information was provided to foster parents:  Emergency Contact Guide, Water Safety, Hot Car Safety, and In-service training opportunities.  The Information Sharing Guide, Caring for Foster Children, and Lifebook publications were sent to all CWS staff in April and staff were instructed to provide the publications to their resource parents.  All of these publications or links to the publications were made available on the Oklahoma Fosters website.  One of the support workgroup subgroups continues to meet to explore the potential of developing a resource parent mentoring program.  The subgroup developed draft program guidelines for a mentoring program and is now considering the options for moving forward.

The National Resource Center for Youth Services (NRCYS) at the University of Oklahoma maintains coordination for the six CWS Family Support Network groups currently located in four regions.  The groups established in Sequoyah, Pottawatomie, Payne, and Tulsa Counties do well with the support of NRCYS.  The average monthly attendance between the six active groups is 72 participants.  Logan, Oklahoma, and Cherokee County are in the process of developing support network groups.  Additional support groups are present in local communities statewide and are often attended by Foster Care and Adoptions staff to support the families.

Potential resource families continue to take part in online training.  From January to June 2018, 624 participants enrolled in online training.  392 individuals completed the training, 99 withdrew, and 133 individuals are still in the process of completion.  Feedback continues to be positive and families report that the training is interactive and useful.

Oklahoma Baptist Homes for Children (OBHC) partnered with several Baptist churches across the state to offer training to all foster and adoptive families during their local vacation Bible school (VBS).  This allowed the resource parents to obtain training hours while their children attended VBS.  The trainings included subjects such as self-care, trauma-informed care, trust-based relational intervention (TBRI), navigating the system, and working with biological families.

The National Adoption Competency Mental Health Training Initiative (NTI) statewide implementation team (SIT) continues to meet monthly and is working on sustainability and is currently rolling out the training for behavioral health practitioners.  NTI and DHS, funded by the Oklahoma Trauma Assessment and Service Center Collaborative, hosted a one-day Well-Being conference in Norman and Catoosa in February 2018.  An introduction and launch of Oklahoma's pilot of the NTI Behavioral Health training was included in the conference.

## 2.3: New Therapeutic Foster Care Homes

### Operational Question
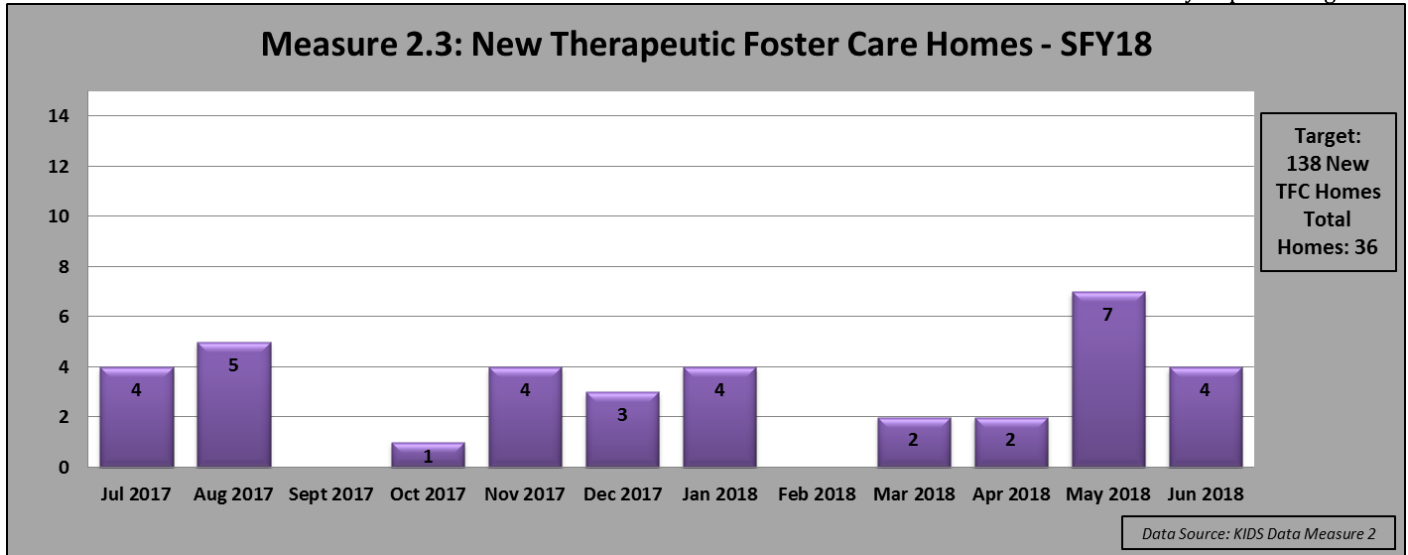How many new Therapeutic Foster Care (TFC) homes were opened in SFY 18?

### Data Source and Definitions
Total count of new Therapeutic Foster Homes includes all new TFC Homes, by month that they were opened using the agreed upon criteria.

### Trends

| Reporting Period | Population | Result | |
|---|---|---|---|
| SFY 18 Baseline | | 280 TFC homes open as of 7/1/2017 | |
| 7/1/2013 – 12/31/2013 | All new TFC homes opened in the first half of SFY 14 | 55 TFC Homes | 107 Total TFC Homes opened in SFY 14 |
| 1/1/2014 – 6/30/2014 | All new TFC homes opened in the second half of SFY 14 | 52 TFC Homes | |
| 7/1/2014 – 12/31/2014 | All new TFC homes opened in the first half of SFY 15 | 66 TFC Homes | 137 Total TFC Homes opened in SFY 15 |
| 1/1/2015 – 6/30/2015 | All new TFC homes opened in the second half of SFY 15 | 71 TFC Homes | |
| 7/1/2015 – 12/31/2015 | All new TFC homes opened in the first half of SFY 16 | 43 TFC Homes | 105 Total TFC Homes opened in SFY 16 |
| 1/1/2016 – 6/30/2016 | All new TFC homes opened in the second half of SFY 16 | 62 TFC Homes | |
| 7/1/2016 – 12/31/2016 | All new TFC homes opened in the first half of SFY 17 | 36 TFC Homes | 59 Total TFC Homes opened in SFY 17 |
| 1/1/2017 – 6/30/2017 | All new TFC homes opened in the second half of SFY 17 | 23 TFC Homes | |
| 7/1/2017 – 12/31/2017 | All new TFC homes opened in the first half of SFY 18 | 17 TFC Homes | 36 Total TFC Homes opened in SFY 18 |
| 1/1/2018 – 6/30/2018 | All new TFC homes opened in the second half of SFY 18 | 19 TFC Homes | |
| Target | | 138 New TFC Homes opened by 6/30/2018 | |

**Section 3, Table 2.3-1**

## Measure 2.3: New Therapeutic Foster Care Homes - SFY18



Target:
138 New
TFC Homes
Total
Homes: 36

Data Source: KIDS Data Measure 2

Section 3, Graph 2.3-1

## Commentary

As of 7/1/2017, 280 Therapeutic Foster Care (TFC) homes were open statewide. During SFY 18, 58 TFC homes were opened and 167 TFC homes were closed, leaving 171 homes open as of 6/30/2018, for a net loss of 109 homes. The net gain only counts unique homes even though a resource family may provide more than one type of foster care. Of the 58 TFC homes that opened during SFY 18, 36 of these TFC homes met the criteria to be counted as new homes according to the Pinnacle Plan.

Over the past few years, the TFC program directed efforts on evaluating the current status of operations and developing a strong infrastructure based on the principles of high quality safety assessment at all levels. With a program reset, many areas needing improvement were identified and became the focus of attention. Swiftly addressing issues related to maltreatment in care (MIC), vacancy rates, overutilization of TFC resource homes, and the assessment and training needs of TFC providers was a priority. Following the evaluation of those key components, the next level of improvements began by focusing on reducing the TFC waiting list, better assessing children's needs for this level of care, restraint elimination, and identifying barriers to high quality treatment within the TFC setting. All of these areas were necessary adjustments that had to be made to the program before increasing the pool of highly-skilled TFC resource families could occur. Many of these areas in need of improvement saw significant growth and development specifically focused on safety, which was needed for a strong program foundation. The TFC program continues to implement an overall vision of safe, streamlined processes, effective evidence-based treatment interventions, and new programmatic innovation to meet the ever changing needs of an underdeveloped placement continuum. Child Welfare Services (CWS) consistently strives to improve the TFC program, so that Oklahoma's children with the highest needs are able to be successful in less restrictive environments.

## Recruitment and Retention

Significant infrastructure and programmatic changes took place during the last few reporting periods in preparation for resource growth and development within the TFC program. Two years ago, CWS met with the private TFC providers where the program was operating in the context of the existing placement continuum. Under a program design that was well over 20 years old, the TFC program was outdated, ill-prepared, and no longer sustainable as the only level of family-based care for children with very high social, emotional, and behavioral health needs. Once identified as a program that could no longer operate as it once had, CWS collaboratively worked with the private TFC providers to begin the program transformation process. At times, the process has been long and hard, but the efforts and energy put into rebuilding the program's infrastructure was a vital step in preparing for future growth and expansion. CWS recognizes that success or failure of the program has been solely measured by whether an annual goal of new TFC homes is achieved or not, but without focusing on the key programmatic areas that support sustainable growth and

successful retention of TFC resource families, new families would have joined a program that was not prepared to fully engage and support them while caring for some of Oklahoma's most vulnerable children.

The TFC program continues to struggle to recruit, secure, and retain TFC resource families to work with children who have significantly higher acuity levels. Over the past two years, the TFC providers have been open and willing to try various ways of recruiting families, but have hit a point where they are unable to secure a large pool of families as they once had been able to do approximately eight to ten years ago. In addition to increasing efforts to recruit families into TFC, they are also challenged with retaining families in their programs, due to the acuity levels and increasing needs of the children CWS has asked them to care for. With a lack of recruiting new families into the TFC program and also the inability to retain families, the TFC program continues to experience a net loss in the number of TFC resources available to serve children with high needs in a family-like setting. The TFC providers developed 36 new homes since the beginning of State Fiscal Year (SFY) 2018, far below the number of new homes required to be opened and available by June 30, 2018. In SFY 18, CWS experienced a loss of four TFC providers; thus, leaving far fewer agencies to recruit and retain such a large goal of new TFC resource homes.

CWS has not been able to reach the determined threshold in any of the years since the Pinnacle Plan has been in place. Despite significant program improvements, a new set of revised core strategies specifically focused on recruitment of therapeutic foster care homes was necessary. Three new strategies were developed and were to be executed through 6/30/2018. The revised core strategy for therapeutic foster care includes some activities that were initiated during this reporting period. The three revised strategies include exploring families currently serviced by the Systems of Care (SOC) program, exploring the conversion of existing resource families into TFC families, and a new concept in development of supplementing private TFC recruitment with state-supported recruitment resources.

CWS, in partnership with specific Co-Neutrals, engaged in the development of an internal review of the SOC program currently delivered by the Oklahoma Department of Mental Health and Substance Abuse Services. Children who receive these wraparound services are currently placed in lower level foster care programs, such as traditional, supported, or kinship care. The purpose of conducting the review was to look at the intensity of services provided by SOC and to determine if this service is equivalent to what a child would receive if they were placed in a TFC resource home. The review was conducted in late December 2017 and the outcomes of the review were further assessed. At this time, CWS has identified that outcomes presented during the review indicate that the therapeutic services provided in the SOC program are not consistently equivalent to those children that receive in the current TFC model. The SOC program is a valuable resource for outpatient behavioral health services; unfortunately, CWS determined that the homes serviced by that program do not currently meet the threshold to be considered a resource family within the TFC program. Since this was a significant strategy aimed at increasing the already available pool of TFC resources, CWS will not be able to utilize these homes for the identified number of required new TFC homes this year.

CWS decided to explore the concept of locating and transitioning over existing resource homes such as traditional, supported, adoptive, or kinship homes who would be interested in serving as a TFC family. When the Pinnacle Plan metrics were determined several years ago, transfers of this nature were not allowed to be counted towards the "new home" count for the TFC program. To effectively approach this avenue for experienced, well-versed foster families, significant collaboration occurred between the TFC program and the Foster Care and Adoptions program for this process to be successful. Although the metrics have yet to be officially modified, CWS plans to utilize the existing transition protocol that is in place for traditional and/or supportive homes if a family converts over from the TFC program. This conversion process includes counting the converted family upon TFC certification and placement of the first TFC child in their home. During this reporting period, the TFC providers who maintained both a TFC and resource family partner (RFP) contract converted two homes over to TFC, despite those homes not counting in the above-mentioned 36 new homes for SFY 18. Additional RFP homes are in the transfer process, but those will not finalize during this reporting period. CWS requested that the three TFC providers with existing RFP contracts continually evaluate their existing homes for conversion into the TFC program if they believe they have strong, well-prepared families who are willing and able to meet the needs of children at this placement level.

In June 2018, CWS expanded staff within the TFC program to include recruiters to work alongside the TFC providers. This expansion is to bring in leads for the development of additional TFC resources. CWS will not be certifying or maintaining TFC resource homes specifically brought in by the Oklahoma Department of Human Services (DHS) Recruitment team, but instead, they will be providing a warm hand off to the most appropriately matched, such as by location, service availability, values, and/or personality, TFC provider for certification and ongoing maintenance. The DHS recruiter position for the TFC program never existed before; therefore, some initial activities to be completed by the staff are focused on setting up new recruitment events, updating social media outlets, creating new marketing materials, and providing technical assistance to the TFC providers on successful approaches to recruiting families for TFC. In addition to assisting with external TFC recruitment, the DHS recruiters are responsible for the internal process of identifying existing traditional DHS resource homes that have the necessary skills and abilities to serve in a more advanced and professional way as TFC resource homes. Once these potential homes are identified, the DHS recruiters will assist the family through the conversion process. Now that the TFC program is in a better programmatic position to begin bringing on new families, adding the recruitment position is yet another positive step towards meeting identified recruitment goals. CWS did not meet the designated 138 new homes during SFY 18, but in the coming months results from these targeted efforts should be realized as new families will be entering into the TFC program.

**Quality Services within the TFC Program**
Assessing and managing the quality of services in the TFC program was a major component from the beginning of the program renovation. Initially, CWS reviewed 65 cases of children served in TFC to assess the types and quality of services delivered to have a general understanding of the areas needing improvement. As the program has changed over the past two years, the key focus has been on ensuring safety, addressing MIC, and developing sustainable program processes for effective treatment delivery. During this reporting period, CWS took the opportunity to review and participate in the treatment team meetings on the 20 "longest stayers" in TFC. This opportunity led to the TFC programs team understanding the finite dynamics surrounding the quality of care and service within the TFC program. Of the 20 unique children's cases that were reviewed in these treatment team meeting, CWS found the following areas that need ongoing improvement.

*Lack of Consistency with the Treatment Team Meetings*
These designated treatment team meetings revealed several challenges with a few key areas making up the majority of the concerns. First, each treatment team meeting is conducted at varying times and locations based on which agency the child is placed with. In addition, the participating members of each child's treatment team meeting again varies from TFC agency to TFC agency. Several meetings were observed to last anywhere from ten minutes upwards towards one hour. CWS observed when the child's treatment review only occurs once every 90 days, this amount of time is not sufficient to cover all topics necessary for a well-rounded review of the child's needs, progress made, and anticipated next steps.

Second, CWS found that many of these treatment team meetings occurred over the phone, while some did take place face-to-face in the TFC agency office. The inconsistencies of the location also led to a variation in the team members present to discuss the child's case. It was observed that some child welfare (CW) staff frequently participate and are aware of the child's progress and are able to contribute to updating the team on what is happening with permanency goals and court activities. However, other CW staff simply did not participate and were anticipating being able to "sign the treatment plan" by fax or email, thus not actually participating in the meeting at all. Sometimes the TFC resource parents participated, other times they did not, and biological parents never participated in the treatment meetings that the TFC team observed during this review. This creates many challenges in understanding where the child is at in treatment, how family or sibling visitation impacts the situation, and how all parties should be planning for anticipated changes in the coming 90-day review period.

Lastly, the format in which the child's treatment progress is reviewed remains inconsistent among each of the TFC agencies. Each agency covers their "necessary topics," leaving plenty of room for improvement on conducting a more robust treatment review. As observed, the treatment meetings need to contain far more discussion regarding the

child's CW case, much more detailed discussion regarding types of services, how often the child is receiving them, and what changes or modifications need to occur to see continued growth and development of the child's emotional and behavioral well-being.

CWS observed that the current model of infrequent, low quality treatment team meetings are likely leading to unnecessary lengths of stay in the TFC program, with little to no evidence of true behavior modification and emotional well-being impacting each child while placed in TFC. CWS, in collaboration with the TFC providers and the DHS clinical support team, is going to develop a uniform treatment team model as the foundation for more detailed, robust meetings regarding the child's treatment goals and objectives. CWS seeks to move away from "cookie-cutter" treatment plans and develop a universal approach used by the TFC providers, heavily focused on meeting each child's individual needs. CWS leadership must support mandatory engagement in a child's treatment programming when placed in this level of care, and ensure accountability that these actions occur, otherwise, many of the challenges will remain the same as was found in this review. In conjunction with this review process, one of the TFC providers participated as a pilot group focusing on how ways to better engage CW staff in the ongoing treatment team meetings for children within their program. By scheduling, required mandatory face-to-face meetings, and focusing on discharge at the time of intake, this agency was able to see more CW staff involvement and was better able to focus on the child's needs when the team fully participated in the meetings. After participating in the treatment team meetings of these identified 20 children, CWS was able to pinpoint areas needing improvement, along with developing a better understanding of more of the treatment services provided.

*Negative Behaviors of the Child and Inconsistency of Review Periods*
Since the inception of the TFC program in Oklahoma, the focus has solely been on the actions or behaviors the child displays in order to initially qualify for this level of care. The Oklahoma Health Care Authority (OHCA) focuses on the behaviors the child exhibits within the 30-day time period prior to the request for TFC. Not to discount other questions that are asked at the time of initial request, the key focus of OHCA appears to be on justifying a child's negative behaviors in order for them to qualify for TFC. This historically has been a driver for how children entered into the TFC program, including but not limited to identifying any child who displayed any perceived negative behaviors, such as defiance, cussing, aggression, tantrums, school challenges, and problematic sexual behavior as "in need of TFC." Although much of this has been remedied on the front end of the process with the *TFC Application for Therapeutic Family Care*, challenges still arise in the ongoing review/assessment for continued care at this level.

The TFC providers report that OHCA is requiring them to inconsistently submit reviews on children more frequently than every 90-days, which is heavily burdensome and extremely overwhelming for their clinical staff to maintain. In addition, the focus of the documents submitted to OHCA solely remains on reporting the negative behaviors a child has, which can also been seen in the daily logs the TFC resource parent completes, rather than the successful progress a child has made both therapeutically and behaviorally in order for continued qualification for TFC. It has become extremely difficult as a system to require and mandate high quality treatment services when the qualifying payee of services does not support positive progress, but rather requires justification of the child's behaviors to remain a candidate for TFC. CWS, along with TFC providers, wants to see children achieving treatment goals and objectives and for movement out of the TFC program into a lower level of care, but until all systems tied to ensuring high quality services are consistently moving towards the same goal, achieving these outcomes will continue to be a struggle for all involved.

*Evidence-Based Treatment Models*
Over the past few years, CWS partnered with the TFC providers to offer access to various evidence-based training programs to increase the knowledge, skills, and abilities of the clinical staff working with the children placed in the TFC program. During this reporting period alone, cohorts of clinicians were selected to participate in the parent-child interaction therapy (PCIT) and trauma-focused cognitive behavioral therapy (TF-CBT) training programs. Other cohorts of TFC clinicians participated in these opportunities and are using these modalities as part of their clinical treatment models. Additional TFC clinical staff are set to participate in an upcoming cohort of TF-CBT, as well. At this time, all TFC providers have had access to these trainings, fully funded by CWS; thus, eliminating a common barrier to

implementation of these programs for small clinical programs.  In the coming months, CWS, in partnership with the University of Oklahoma Center for Child Abuse and Neglect (CCAN), will be working to train and implement with the TFC providers the "Children with Problematic Sexual Behavior" program that is currently only offered in Oklahoma City through the CCAN network.  By adding this additional training modality, the TFC providers will be more equipped to continue to improve the quality services delivered to children in the TFC level of care.  CWS has focused heavily on offering various opportunities to develop the skills and abilities of the TFC clinical staff to improve the outcomes for children who are served in this level of care.  CWS continues to offer several other training opportunities to the TFC providers as a means to ensure the knowledge base is provided to best care for children with high-level needs.

By focusing on all three of these quality aspects, improvement in service delivery for children in TFC will occur.  CWS recognizes that improving the quality of services does not happen quickly, primarily when there are several multi-level systems engaged in the process of doing so.  With a much stronger infrastructure, the TFC program is now at a place to begin focusing on not just recognizing challenges, but rather taking steps to implement new processes and expectations.  The TFC providers were given the training and skill development to be successful.  Now, movement towards completely changing the way the program operates regarding treatment services, ongoing authorizations, and the delivery of positive behavior and well-being outcomes can become the focus of  the TFC program.  CWS seeks to deliver a high quality program for children with high-level needs, where placement into this level of care promises greater outcomes upon treatment completion.  All the factors listed above indicate that there is more to be accomplished to focus on the quality of services delivered, but with the recognition that it takes time to occur.  The TFC program has various program resources in place to support the necessary changes to address the identified challenges regarding service quality and delivery to the children and families served by the TFC program.

**What's Next for the TFC Program**
During the next reporting period, the TFC program will undergo yet another significant change in programmatic design, but continue improvement in areas that will affect ongoing services for children in this level of care.  In July 2018, CWS will be hosting the training program for the TFC providers on the new TFC-Pressley Ridge Resource Parent training.  Each TFC agency will have two staff trained to deliver the new model to both new and existing TFC resource parents.  CWS selected three additional staff to participate in this training modality, as the use of this training program can also be applied to other levels of care.  CWS built in an evaluation and fidelity component, so CWS can validate the efficacy and consistency of the training being taught to the TFC families.

The TFC program team anticipates the addition of several new staff.  With the staff increase, the focus can shift to a much greater level of support, coaching, and training in a variety of different dynamics.  One aspect that is in development is a DHS clinical team of a licensed clinician, a psychologist, and psychiatrist who will be providing direct consultation to the TFC providers, as well as developing some internal guidelines and protocols for various clinical meetings to be used by several different levels of care.  With this added support, the TFC providers should be better positioned to deliver stronger initial and ongoing treatment team meetings for children in TFC.

The largest activity the TFC program is currently undertaking is the development of an entirely redesigned TFC program.  After years of attempting to modify an outdated system, CWS, in partnership with the TFC providers, is ready to embark on the process of creating a program that has both the skills and capacity to serve children of all types in a drastically different way.  Through years of understanding efforts that make treatment for children successful and learning the hard way through challenges that burdened the existing program, the time has come to develop a program that can operate with or without a fully developed continuum of care within the CW system.  CWS anticipates this redesign to be both structurally and philosophically different from what TFC has always been known for in the current placement arrangement.  In the coming months, CWS will be spending a great deal of time working through this new program design and looks forward to the direction the program is headed.  The TFC program has made many well-designed modifications during the last two years, but it has not been enough to significantly move the needle in response to the Oklahoma Pinnacle Plan.  Although it has taken some time to become fully equipped and prepared to make such drastic changes, the TFC program is ready to embark on a new path towards better outcomes for children in this level of care.

## 7.1 Worker Caseloads

### Operational Question
What percentage of all child welfare (CW) workers meet caseload standards, are close to meeting workload standards, or are over workload standards?

### Data Source and Definitions
Utilizing the standards set forth in the Pinnacle Plan, each individual type of case is assigned a weight and then the weights are added up in order to determine a worker's caseload.  The consolidated workload tracking process allows Oklahoma to factor in the worker's "Workload Capacity."   The chart below represents the consolidated workload tracking process.  A snapshot is taken every morning at 12:00 am of the workload of all CW workers.  The entire workload of workers with a qualifying case assignment of Child Protective Services (CPS), Permanency Planning (PP), Family-Centered Services (FCS), Adoption, and Foster Care are calculated and compared against the caseload standards.  The workload is classified as meeting standards if it is 100 percent at or below a caseload.  When the workload is over 100 percent but less than 120 percent of a caseload, it is considered to be "over but close"; otherwise, the workload is considered to be over the standard.  The measure tracks each worker each day to determine if they meet the standard, and this is called a "worker day."  Work performed by CW specialists is broken into multiple categories.  This measure will look specifically at all CW workers (total), PP, FCS, CPS, Adoption, Foster Care, and Comprehensive workers.  As of 12/31/2016, the Oklahoma Department of Human Services (DHS) began using the YI768C as the data source for the Workloads reporting measure, which is a point in time number of workers who are meeting workload standards on the last day of the reporting period.  All previous reporting periods were updated to reflect this data.

### Description of Denominator and Numerator for this reporting period
**Denominator:** The number of all CW workers in Adoptions, Foster Care, FCS, CPS, and PP that were caseload carrying eligible on the last day of the reporting period with at least one assignment on their workload.

**Numerator:** Number of worker days where workers met the standard carrying a caseload of 100 percent or less of their calculated workload capacity.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline:<br>1/1/2013 – 6/30/2013 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | | | 27.0% |
| 1/1/2014 – 6/30/2014 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 359 Workers | 1219 Workers | 29.5% |
| 7/1/2014 – 12/31/2014 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 419 Workers | 1227 Workers | 34.2% |
| 1/1/2015 – 6/30/2015 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 658 Workers | 1345 Workers | 48.9% |
| 7/1/2015 – 12/31/2015 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 912 Workers | 1501 Workers | 60.8% |
| 1/1/2016 – 6/30/2016 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 1176 Workers | 1656 Workers | 71.0% |
| 7/1/2016 – 12/31/2016 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 1274 Workers | 1651 Workers | 77.2% |

| 1/1/2017 – 3/31/2017 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 1212 Workers | 1644 Workers | 73.7% |
|---|---|---|---|---|
| 4/1/2017 – 6/30/2017 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 1299 Workers | 1621 Workers | 80.1% |
| 7/1/2017 – 9/30/2017 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 1037 Workers | 1562 Workers | 66.4% |
| 10/1/2017 – 12/31/2017 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 1097 Workers | 1555 Workers | 70.5% |
| 1/1/2018 – 3/31/2018 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 1113 Workers | 1546 Workers | 72.0% |
| 4/1/2018 – 6/30/2018 | All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP | 1106 Workers | 1545 Workers | 71.6% |
| Target | | | | 90.0% |

**Section 3, Table 7.1-1**
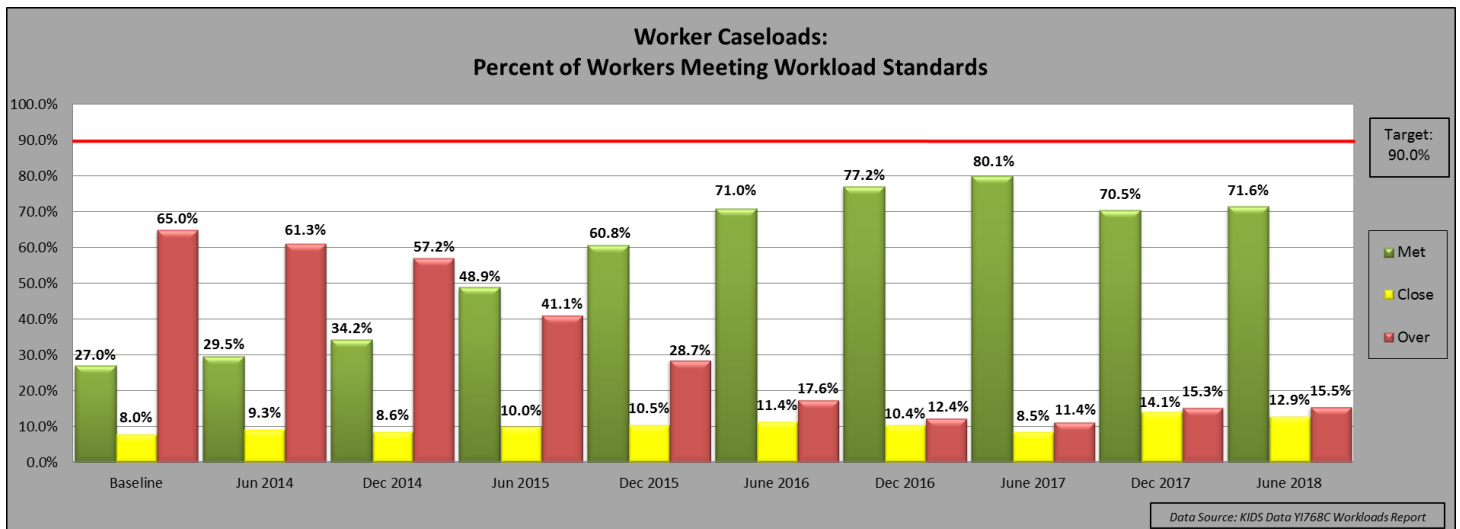


**Section 3, Graph 7.1-1**

## Commentary

A one-day snapshot of the workload data is represented in Section 3, Graph 7.1-1.  As of 6/30/2018, using the point-in-time YI768C Workload data report, the percentage of CW workers meeting the standard is 71.6 percent, with 12.9 percent close, and 15.5 percent over standard.  Of the 1,545 workers, 1,106 workers were meeting workload standards, 200 workers were close, and 239 workers were over the standard.
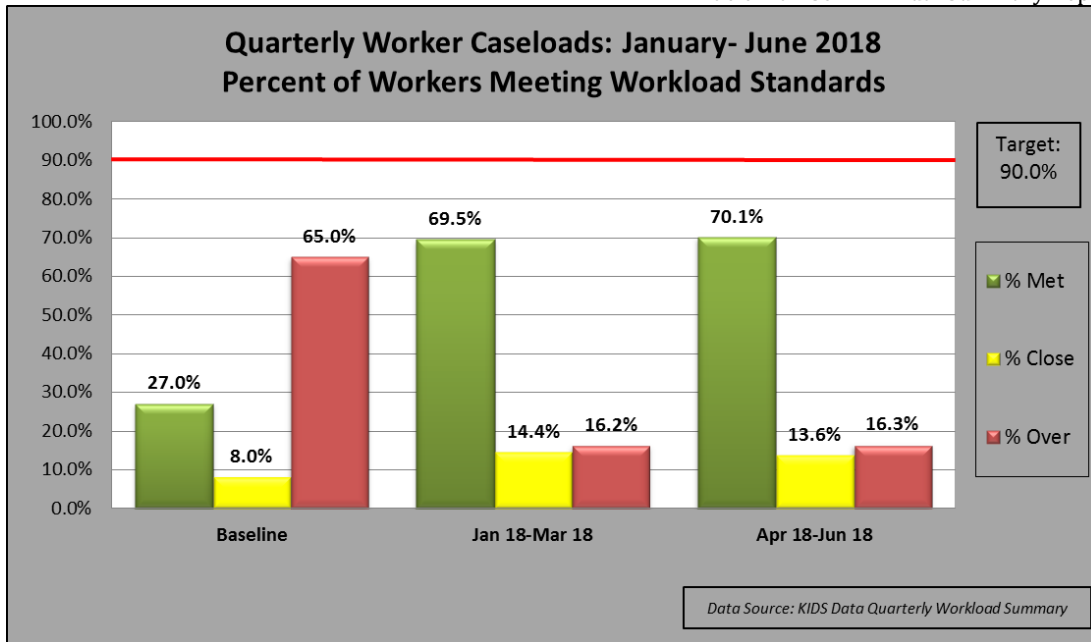
**Section 3, Graph 7.1-2**

| Quarterly Workload Standards Report Apr 1, 2018 - Jun 30, 2018 | | | | |
|---|---|---|---|---|
| **Worker Type** | **Worker Days** | **% Met** | **% Close** | **% Over** |
| ADOPTION SPECIALIST | 4722 | 84.4% | 6.5% | 9.1% |
| RESOURCE FAMILY SPECIALIST | 18565 | 75.4% | 18.9% | 5.7% |
| COMPREHENSIVE | 8675 | 72.2% | 16.6% | 11.2% |
| PERMANENCY PLANNING | 56254 | 70.0% | 13.5% | 16.4% |
| PREVENTIVE/VOLUNTARY | 5879 | 73.4% | 10.4% | 16.2% |
| INVESTIGATION | 39137 | 63.5% | 11.3% | 25.2% |
| RECRUITMENT | 4133 | 98.3% | 1.7% | .0% |
| ADOPTION TRANSITION SPECIALIST ATU | 3887 | 54.6% | 32.4% | 13.0% |
| **STATEWIDE TOTAL** | **141252** | **70.1%** | **13.6%** | **16.3%** |
| *Data Source: KIDS Data Quarterly Workload Summary Ending 6/30/18* | | | | |

**Section 3, Table 7.1-2**

## Commentary

In addition to the point-in-time reporting of workloads, a snapshot of each worker's workload is captured for every day during the quarter. The total days during the quarter that each worker is meeting, close, and over workload standards is then reported in the Quarterly Workload Standards Report. This number will differ from the point-in-time report taken from the YI768C, as this quarterly report reflects all days during the quarter. This report counts the number of days workers were meeting, close, or over, workload standards, whereas, the YI768C report is reporting on the number of workers. For the quarter of 4/1/2018 through 6/30/2018, a total of 141,252 days were worked. Of those days, workers were meeting workload standards 70.1 percent of the worker days, workers were close to workload standards 13.6 percent of the worker days, and workers were over workload standards 16.3 percent of the worker days.

Child Welfare Services (CWS) continues to recover from the dip in performance in the fall of 2017 where workload standards fell to a low of 66.4 percent. This period, CWS finished at 71.6 percent which is up from the last semi-annual report and back to where 70.5 percent of workers met the standards. DHS has continually struggled to sustainably have a little of 70 percent of staff meeting standards. Consistently, over 270 caseworker positions are vacant but there is still

enough capacity statewide to meet standards.  Two major issues are preventing CWS from seeing an increase in compliance.  The first issue is making sure workers with capacity are utilized to maximize their capacity.  This would reduce the number of workers over standard.  The second issue is CWS has assigned positions based on a method that places those positions where the cases are which has resulted in a high number of vacant positions with little to no applicants in those areas.  CWS is looking at data and analyzing how to realign positions to areas that can support the hiring and have those workers take cases outside of the current jurisdiction.  This will be a sustainable way for CWS to continue to maximize capacity and handle local spikes in caseload or turnover without having an entire district fall below standards.  CWS is working with the Office of Performance Outcomes and Accountability to analyze data to figure where to best allocate vacant positions that can't be filled.

## 7.1 Supervisor Caseloads

### Operational Question
What percentage of child welfare (CW) supervisors meet caseload standards, are close to meeting workload standards, or are over workload standards?

### Data Source and Definitions
This measure looks at supervisor units in regards to the worker standard per unit.  There are two parts to determine if a supervisor unit meets the standard.  First, the measure looks at the number of CW workers each supervisor is currently supervising in his or her unit.  The target is for each unit to have a ratio of five CW workers to one supervisor.  When a unit has a ratio of 5:1 or less, they are considered to meet the standard.  Units are "close" when they have a ratio of 6:1.  All units with a ratio of 7:1 or over are considered "over."  Each worker accounts for 0.2 percent of a supervisor's workload capacity.  Secondly, the measure looks at any of those supervisors who are currently supervising caseload carrying workers and also have primary assignments on his or her own workload.  Because these workload assignments deduct from a supervisor's capacity to supervise their workers, the additional caseload must be factored into the measurement.  When a supervisor has less than two case assignments, the case assignments will not be calculated into the measurement.  Any other assignments on a supervisor's caseload will be calculated at the same weight as a worker's caseload and then added to the supervisor capacity, which includes the number of workers being supervised.  With this combined calculation of the supervisor's workload capacity, it is then determined how many of these supervisor units are meeting the workload standard.

### Description of Denominator and Numerator for this reporting period
**Denominator:**    All current supervisor units currently supervising caseload carrying workers in Adoptions, Foster Care, Family-Centered Services, Child Protective Services, and Permanency Planning.

**Numerator:**    All current supervisors with a combined workload of 100 percent or less.

### Trends

| Reporting Period | Population | Numerator | Denominator | Result |
|---|---|---|---|---|
| Baseline:<br>4/1/2014 – 6/30/2014 | All supervisors with a unit currently supervising caseload carrying workers | | | 58.8% |
| 7/1/2014 – 12/31/2014 | All supervisors with a unit currently supervising caseload carrying workers | 217 - Met | 306 Units | 70.9% |
| 1/1/2015 – 6/30/2015 | All supervisors with a unit currently supervising caseload carrying workers | 259 - Met | 345 Units | 75.1% |
| 7/1/2015 – 12/31/2015 | All supervisors with a unit currently supervising caseload carrying workers | 297 - Met | 372 Units | 79.8% |

| 1/1/2016 – 6/30/2016 | All supervisors with a unit currently supervising caseload carrying workers | 308 - Met | 379 Units | 81.3% |
|---|---|---|---|---|
| 7/1/2016 – 12/31/2016 | All supervisors with a unit currently supervising caseload carrying workers | 330 - Met | 387 Units | 85.3% |
| 1/1/2017 – 3/30/2017 | All supervisors with a unit currently supervising caseload carrying workers | 317 - Met | 376 Units | 84.3% |
| 4/1/2017 – 6/30/2017 | All supervisors with a unit currently supervising caseload carrying workers | 313 - Met | 375 Units | 83.5% |
| 7/1/2017 – 9/30/2017 | All supervisors with a unit currently supervising caseload carrying workers | 301 - Met | 368 Units | 81.8% |
| 10/1/2017 – 12/31/2017 | All supervisors with a unit currently supervising caseload carrying workers | 319 - Met | 377 Units | 84.6% |
| 1/1/2018 – 3/31/2018 | All supervisors with a unit currently supervising caseload carrying workers | 318 - Met | 375 Units | 84.8% |
| 4/1/2018 – 6/30/2018 | All supervisors with a unit currently supervising caseload carrying workers | 312 - Met | 373 Units | 83.6% |
| Target | | | | 90.0% |

**Section 3, Table 7.1-3**
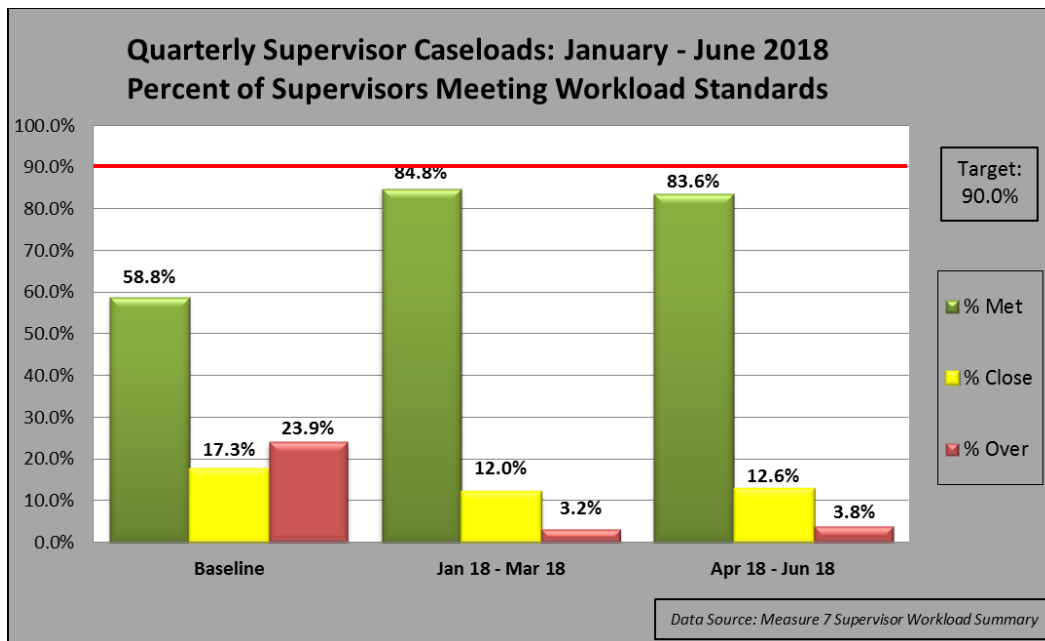


**Section 3, Graph 7.1-3**

## Commentary

For the current quarter, there are a total of 373 supervisor units, which are comprised of 1,679 CW specialists I, II, and III's.  This calculates to a statewide worker to supervisor ratio of 4.50.  As of 6/30/2018, 312 supervisors met the

workload standard, 47 supervisors were close to meeting the standard, and 14 supervisors were over the standard.  As part of this measure, the work assigned to supervisor's workloads must also be calculated into the workload standard. For this quarter, 67 supervisors had at least one assignment on his or her caseload and 23 of those supervisors had more than two assignments[i].  A total of 179 assignments were on a supervisors caseload and 125 of those assignments were for investigations, 69.8 percent.  Since the last reporting on 12/31/2017, the percentage of supervisors meeting the standard decreased by 1.2 percent.

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[i] Due to the recent backlog reduction plan, the number of supervisors carrying at least one assignment increased.  These supervisors are assisting with backlog outside the scope of their normal supervisory duties and are being compensated for the extra duties completed outside normal work hours.  Of the 76 supervisors carrying at least one assignment, 53 supervisors were carrying a backlog CPS investigation.