QUALITY SERVICES REVIEW RESULTS

ERIE COUNTY
CHILDREN AND YOUTH SERVICES/
JUVENILE PROBATION



Prepared for: Erie County Children and Youth Services/Juvenile Probation

Ву

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On Behalf of the Pennsylvania Office of Children, Youth and Families Department of Public Welfare

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Background

The information provided within this report are the findings from Erie County's Quality Service Review (QSR) which was conducted in July 2013.

The QSR is an in-depth case-based quality review process of frontline practice in specific locations and points in time. It is used for: (1) appraising the current status of a focus child/youth in key life areas, (2) status of the parent/caregiver, and (3) performance of key practices for the same child/youth and family. The review examines recent results for children/youth in protective care and their caregivers as well as the contributions made by local service providers and the system of care in producing those results.

The QSR uses a combination of record reviews, interviews, observations, and deductions made from fact patterns gathered and interpreted by trained reviewers regarding children, youth and families receiving services. The QSR Protocol provides reviewers with a specific set of indicators to use when examining the status of the child/youth and parent/caregiver and analyzing the responsiveness and effectiveness of the core practice functions. Indicators are divided into two distinct domains: child, youth and family status and practice performance.

Child, youth and family status indicators measure the extent to which certain desired conditions relevant to safety, permanence and well-being are present in the life of the child/youth and the parents/ caregivers. Changes in status over time may be considered the near-term outcomes at a given point in the life of a case. In measuring child/youth and family status, the QSR generally focuses on the most recent 30 day period, as of the review date.

Practice indicators measure the extent to which core practice functions are applied successfully by practitioners and others who serve as members of the child/youth and family team. Regardless of any change or lack of change in the status of the cases examined, these indicators generally identify the quality of the work being done within the 90 days leading up to the review.

The QSR instrument uses a Likert scale of 1 to 6 for each indicator, with a score of 1 representing "adverse" performance and a score of 6 representing "optimal" performance. The percentage of cases rated as "acceptable" and "unacceptable" is calculated for each indicator, with scores between 1 and 3 representing the "unacceptable" range and scores between 4 and 6 representing the "acceptable" range.

QSR findings are used by local agency leaders and practice partners in stimulating and supporting efforts to improve practices used for children and youth and their families who are receiving child welfare services in the Commonwealth of Pennsylvania.

Methodology

For the purposes of selecting a sample for the QSR, each county has been assigned to one of eight strata based on the number of dependent (including dependent/delinquent) children it served during federal fiscal year 2011. Erie County falls into stratum III, resulting in 15 cases being selected for review - nine in-home cases and six placement cases. The in-home sample is family-based and was selected for Erie County from a list provided by the county of families with open in-home cases on April 17, 2013. The placement sample is child-based and was selected for Erie County from a list provided by the county of those children in out-of-home placement on the same date.

The proportion of cases randomly selected, 60 percent in-home and 40 percent out-of-home, closely reflect caseloads throughout the Commonwealth. For each of the in-home cases selected for review, one child was randomly selected as the "focus child" about whom reviewers were asked to rate the child-specific indicators.

Erie County conducted its QSR over six days in July 2013. A total of 110 interviews were conducted, an average of seven interviews per case.

¹ A "family-based" sample means that each family in the population represented a single unit that could be randomly sampled. This stands in contrast to a "child-based" sample, in which each child would represent a single unit to be sampled (meaning that a single family could be represented in the sample by multiple children).

The demographics of each child/youth and the current placement setting is reported below and broken out by case type, in-home and out-of-home. The proportion of children in care on April 17, 2013 is reported as a comparison of the out-of-home sampled children/youth to that of the total Erie County foster care population.

							Foster Care
	ln-h	ome	Out-o	f-home	Combin	Population	
— Sex ==	#	% ²	t t	%	#	%	%
Male	6	67%	3	50%	9	60%	47%
Female	3	33%	3	50%	6	40%	53%
Total	9	100%	6	100%	15	100%	100%
							Foster Care
	ln-b	ome	Out-o	f-home	Combin	ed Total	Population
Age	#	%	#	%	#	- %	%
0-4	3	33%	4	67%	7_	47%	45%
5-9	1	11%	0	0%	1.	7%	22%
10 - 13	1	11%	0	0%	1	7%	15%
14 +	4	44%	2	33%	6	40%	18%
Total	9	100%	6	100%	15	100%	100%

Figure 1: Sex and Age of Focus Children/Youth and Countywide Foster Care Population

	200,000,000,000						Foster Care
	In-home		Out-of-home		Combine	ed Total	Population
Race/Ethnicity ³	#	% =	##	%	H	%	<u> </u>
White/Caucasian	8	89%	5	83%	13	87%	73%
Black/African-American	2	22%	1	17%	3	20%	43%
American Indian or Alaskan Native	2	22%	0	0%	2	13%	1%
Native Hawaiian or Pacific Islander	0	0%	0	0%	0	0%	<1%
Asian	0	0%	0	0%	0	0%	0%
Other	0	0%	0	0%	0	0%	
Unknown	0	0%	0	0%	0	0%	<1%
Unable to Determine	0	0%	0	0%	0	0%	
Hispanic	0	0%	0	0%	0	0%	10%
Total	9		6		15		

Figure 2: Race and Ethnicity of Focus Children/Youth and Countywide Foster Care Population

² Percentages throughout the report may not sum to 100 percent due to rounding.

³ Reviewers were able to report more than one race for each focus child, in addition to recording whether the child is of Hispanic ethnicity.

	ln-h	ome	Out-c	if-Home	Foster Care Population
Gurrent Placement	#	%	#	%	%
Birth home (Biological Mother)	5	56%	-	-	
Birth home (Biological Father)	0	0%	-	_	
Birth home (Both Biological Parents)	3	33%	-	•	
Post-Adoptive Home (Mother)	0	0%	-	-	
Post-Adoptive Home (Father)	0	0%	-	-	
Post-Adoptive Home (Both Parents)	0	0%	-	-	
Kinship – Formal		_	3	. 50%	
Kinship – Informal	1	11%	0	0%	
Permanent Legal Custodian/Subsidized					
Legal Custodian	-	-	0	0%	32%
Traditional Foster Home	-		3	50%	
Therapeutic Foster Home		-	0	0%	50%
Group/Congregate Home	-		0	0%	11%
Residential Treatment Facility	1	-	0	0%	
Juvenile Correctional	-		0	0%	
Medical/Psychiatric Hospital		_	0	0%	
Detention	-	-	0	0%	6%
Other ⁵	-	<u>.</u>	0	0%	<1%
Total	9	100%	6	100%	100%

Figure 3: Current Placement Types of Focus Children/Youth and Countywide Foster Care Population

⁴ Placement settings reported in AFCARS include: pre-adoptive home, relative foster family home, non-relative foster family home, group home, institution, supervised independent living, runaway and trial home visit.

⁵ The "other" placement setting was reported as Supervised Independent Living.

The Child/Youth and Family Status Domain section examines the safety, permanence and well-being of the child/youth, as well as the capacity of the child/youth's caregivers (both familial and substitute) to provide support to that child/youth. Nine indicators are utilized, with the indicators generally focusing on the 30 days immediately prior to the on-site review. The percentage of cases rated as "acceptable" and "unacceptable" is calculated for each indicator, with scores between 1 and 3 representing the "unacceptable" range and scores between 4 and 6 representing the "acceptable" range.

Indicator ⁶	% Acceptable	% Unacceptable
Safety: Exposure to threats of harm	100%	0%
Family home #1	100%	0%
Family home #2	100%	0%
Substitute home	100%	0%
School	100%	0%
Other setting	100%	0%
Safety: Risk to self and others	89%	11%
Risk to self	89%	11%
Risk to others	89%	11%
Stability	65%	35%
Living arrangement	67%	33%
School	62%	38%
Living arrangement	89%	11%
Family home #1	91%	9%
Family home #2	100%	0%
Substitute home	83%	17%
Permanency	73%	27%
Physical health	100%	0%
Emotional well-being	87%	13%
Early learning and development	100%	0%
Academic status	62%	38%
Pathway to Independence	100%	0%
Parent or caregiver functioning	57%	43%
Mother	54%	46%
Father	27%	73%
Substitute caregiver	100%	0%
Other	75%	25%

Figure 4: "Child/Youth & Family Domain Ratings" QSR Results

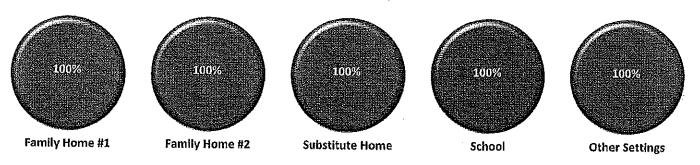
⁶ Indicator ratings in bold represent the indicator's overall score, which includes the ratings from all sub-indicators.

SAFETY

The following two indicators focus on the safety of the focus child/youth.

Indicator 1a: Safety from Exposure to Threats of Harm

Safety is the primary and essential factor that informs and guides all decisions made from intake through case closure. The focus is on identifying safety factors, present and/or impending danger, protective capacities and interventions with caregivers to supplement protective capacities. The first safety indicator assesses the degree to which the child/youth is free of abuse, neglect, and exploitation by others in his/her place of residence, school, and other daily settings; it also addresses whether the child/youth's parents and/or caregivers provide the attention, actions, and supports and possess the skills and knowledge necessary to protect the child/youth from known and potential threats of harm in the home, school, and other daily settings.

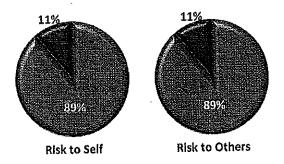


Sub-Indicator			Acce		Unacceptable				
Sub-Indicator	N.	6	5	4	%	3	2	1	%
Family home #1	12	3	4	5	100%	0	0	0	0%
Family home #2	2	1	0	1	100%	0	0	0	0%
Substitute home	6	4	1	1	100%	0	0	0	0%
School	5	2	1	2	100%	0	0	0	0%
Other settings	1	1	0	0	100%	0	0	0	0%
Total		11	6	9	100%	0	0	0	0%

Figure 5: "Exposure to Harm" QSR Results

Indicator 1b: Safety from Risk to Self/Others

Throughout development, a child/youth learns to follow rules, values, norms, and laws established in the home, school, and community, while learning to avoid behaviors and actions that can put themselves or others at risk of harm. The second safety indicator assesses the degree to which the child/youth avoids self-endangerment and if the child/youth refrains from using behaviors that may put others at risk of harm. This indicator applies only to children/youth ages three or older.



			Acce	ptable			Unacc	eptable	
Sub-Indicator	N	6	5	4	-%	3		1	- %
Risk to self	9	5	2	1	89%	0	1	0	11%
Risk to others	9	7	0	1	89%	1	0	0	11%
Total		12	2	2	89%	1	1	0	11%

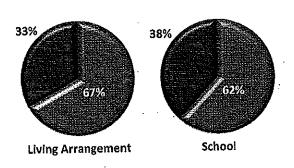
Figure 6: "Behavioral Risk" QSR Results

PERMANENCY

When measuring permanency, the Child and Family Services Review (CFSR) only examines the circumstances for the child/youth placed in out-of-home care. Pennsylvania's QSR, however, examines the permanency needs of all children and youth, those removed from their homes as well as those who continue to live with their parents/caretakers.

Indicator 2: Stability

Stability and continuity in a child/youth's living arrangement, school experience, and social support network is one factor that provides a foundation for normal development. Continuity in caring relationships and consistency of settings and routines are essential for a child/youth's sense of identity, security, attachment, trust, social development and sense of well-being. This indicator assesses the degree to which the



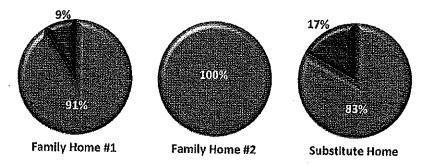
child/youth's daily living and learning arrangements are stable and free from risk of disruptions; their daily settings, routines, and relationships are consistent over recent times; and known risks are being managed to achieve stability and reduce the probability of future disruption. This indicator looks retrospectively over the past 12 months and prospectively over the next six months to assess the relative stability of the child/youth's living arrangement and school settings.

Sub-Indicator Living arrangement	N	6	Acce 5	ptable 4	: %		Unacc 2	eptabl	e %
Living arrangement	15	5	3	2	67%	4	1	0	33%
School	8	3	1	1	62%	2	1	0	38%
Total		8	4	3	65%	6	2	0	35%

Figure 7: "Stability" QSR Results

Indicator 3: Living Arrangement

The child/youth's home is the one that the individual has lived in for an extended period of time. For a child/youth that is not in out-of-home care, this home can be the home of his or her parents, informal kinship care, adoptive parents, or a guardian. For a child/youth in out-of-home care, the living arrangement can be a resource family setting or a congregate care setting. The child/youth's home community is generally the area in which the child/youth has lived for a considerable amount of time and is usually the area in which the child/youth was living prior to removal. This indicator assesses the degree to which the child/youth, consistent with age and/or ability, is currently living in the most appropriate/least restrictive living arrangement, consistent with the need for family relationships, assistance with any special needs, social connections, education, and positive peer group affiliation. If the child/youth is in out-of-home care, the living arrangement should meet the child/youth's basic needs as well as the inherent expectation to be connected to his/her language and culture, community, faith, extended family, tribe, social activities, and peer group. This indicator evaluates the child/youth's current living situation.



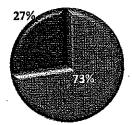
			Acce	ntable			Unacce	ptable	
Sub-indicator	N	6	5	4	%	3	2	1111	%
Family home #1	11	5	2	. 3	91%	1	0	0	9%
Family home #2	2	1	0	1	100%	0	0	0	0%
Substitute home	6	1	4	0	83%	0	1	0	17%
Total		7	6	4	89%	1	1	0	11%

Figure 8: "Living Arrangement" QSR Results

Permanency Indicator 4:

Erie County August 2013

Every child/youth is entitled to a safe, secure, appropriate, and permanent home. Permanency is achieved when the child/youth is living successfully in a family situation that the child/youth, parents, caregivers, and other team members believe will endure for a lifetime. This indicator assesses the degree to which there is confidence by the child/youth, parents, caregivers or other team members that the child/youth is living with parents or other caregivers who will sustain in this role until the child/youth reaches adulthood and will continue to provide enduring family connections and supports into adulthood. Where such support is not available, the review assesses the timeliness of the permanency efforts to ensure that the child/youth will be enveloped in enduring relationships that will provide a sense of family, stability, and belonging.



Permanency

Page 9

	1.50.638.22		Acce	eptable	,	3	Unacc	eptabl	e
	15	6	3	2	73%	4	0	0	27%
Total		6	3	2	73%	4	0	0	27%

Figure 9: "Permanency" QSR Results

WELL-BEING

The following five indicators examine the well-being needs of the child/youth.

Indicator 5: **Physical Health**

A child/youth should achieve and maintain their best attainable health status, consistent with their general physical condition when taking medical diagnoses, prognoses, and history into account. This indicator assesses the degree to which the child/youth is achieving and maintaining his/her optimum health status. If the child/youth has a serious or chronic physical illness, the child/youth should be achieving his/her best attainable health status given the disease diagnosis and prognosis.



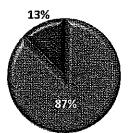
Physical Health

Total		9	5	1	100%	0	0	0	0%
Physical Health	15	9	5	1	100%	0	0	0	0%
Indicator	N	≟6	5	4	%	3	2	1	%
		zhrwi American	Acce	ntable			Hnacc	entahl	

Figure 10: "Physical Health" QSR Results

Indicator 6: **Emotional Well-being**

Emotional well-being is achieved when an individual's essential human needs are met in a consistent and timely manner. These needs vary across life span, personal circumstances and unique individual characteristics. When these needs are met, a child/youth is able to successfully attach to caregivers, establish positive interpersonal relationships, cope with difficulties, and adapt to change. They develop a positive self-image and a sense of optimism. Conversely, problem behaviors, difficulties in adjustment, emotional disturbance, and poor achievement are often the result of unmet needs. This indicator assesses the degree to which the child/youth, consistent with age and/or ability, is displaying an adequate pattern of attachment and positive social relationships, coping and adapting skills, and appropriate selfmanagement of emotions and behaviors.



Emotional Well-being

	Canantagladas	- Value	TO CLE	ptable			Jnacce	ptable	
Indicator	NI C	6	5	4	-%	3			%
Emotional Well-Being	15	4	8	1	87%	2	0	0	13%
Total		4	8	1	87%	2	0	0	13%

Figure 11: "Emotional Well-being" QSR Results

Indicator 7a: Early Learning & Development

From birth, a child progresses through a series of stages of learning and development. The growth during the first eight years is greater than any subsequent developmental stage. This offers a great potential for accomplishment, but it also creates vulnerabilities if the child's physical status, relationships, and environments do not support appropriate learning, development, and growth. These developmental years provide the foundation for later abilities and accomplishments. Significant differences in children's abilities are also associated with social and economic circumstances that may affect learning and development. This indicator assesses the degree to which the young child's developmental status is commensurate with the child's age and developmental capacities; and whether or not the child's developmental status in key domains is consistent with age and/or ability-appropriate expectations. This indicator applies only to children under the age of eight years and not attending school.



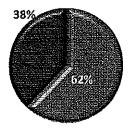
Early Learning & Development

		Zerze	Acce	ptable			Jnacce	ptable	
Indicator	N	6	5	4	%	3	2 -	1	_%
Early Learning & Development	7	4	2	1	100%	0	0	0	0%
Total		4	2	1	100%	0	0	0	0%

Figure 12: "Early Learning & Development" QSR Results

Indicator 7b: Academic Status

A child/youth is expected to be actively engaged in developmental, educational, and/or vocational processes that will enable him or her to build skills and functional capabilities at a rate and level consistent with his/her age and abilities. This indicator assesses the degree to which the child/youth is regularly attending school; is placed in a grade level consistent with age or developmental level; is actively engaged in instructional activities; is reading at grade level or Individualized Education Plan (IEP) expectation level; and is meeting requirements for annual promotion and course completion leading to a high school diploma or equivalent. This indicator applies to a child/youth eight years or older or attending school.



Academic Success

Indicator	N	6	Acce 5	hranie	%	440-27-1-1-17-2	2	ptable) -%
Academic Status	8	0	3	2	62%	2	0	1	38%
Total		0	3	2	62%	2	0	1	38%

Figure 13: "Academic Status" QSR Results

Indicator 8: Pathway to Independence

The goal of assisting youth is to build the capacities that will enable them to live safely and function successfully and independently, consistent with their ages and abilities, following the conclusion of youth services. This indicator assesses the degree to which the youth is gaining the skills, education, work experience, connections, relationships, income, housing, and necessary capacities for living safely and functioning successfully independent of the agency's services, and is developing long-term connections and informal supports that will support him/her into adulthood. This indicator applies to any youth who is age 16 or older and it looks at outcomes beyond formal independent living services.



Pathway to Independence

	23.00		Acce	brable				ptable	
Indicator	200 m 200	6	5	4	A STATE OF THE PARTY OF THE PAR	100	THE PARTY OF STATES	30.00	Lister Your
Pathway to Independence	2	0	0	2	100%	0	0	0	0%
Total		0	0	2	100%	0	0	0	0%

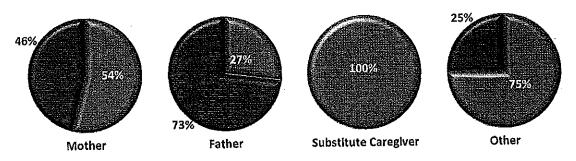
Figure 14: "Pathways to Independence" QSR Results

PARENT/CAREGIVER FUNCTIONING

The following indicator evaluates the capacity of the child/youth's caregivers (both familial and substitute) to provide support to the child/youth.

Indicator 9: Parent/Caregiver Functioning

Parents/caregivers should have and use the necessary levels of knowledge, skills, and situational awareness to provide their child/youth with nurturance, guidance, age-appropriate discipline, and supervision necessary for protection, care, and normal development. Understanding the basic developmental stages that a child/youth experiences, as well as awareness of relevant milestones, expectations, and appropriate methods for shaping behavior are key to parental capacity to support their child/youth's healthy growth and learning. This indicator assesses the degree to which the parent(s), other significant adult(s) and/or substitute caregiver(s), is/are willing and able to provide the child/youth with the assistance, protection, supervision, and support necessary for daily living. If added supports are required in the home to meet the needs of the child/youth and assist the parent(s) or caregiver(s), those added supports should also meet the child/youth's needs.



Total		6	9	5	57%	7	1	7	43%
Other	4	1	2	0	75%	1	0	0	25%
Substitute Caregiver	7	5	2	0	100%	0	0	0	0%
Father	11	0	2	1	27%	2	1	5	73%
Mother	13	0	3	4	54%	4	0	2	46%
Sub-indicator	N	6	5	4	% -	3	2	建	%
			Acc	eptable	Unacceptable				

Figure 15: "Caregiver Functioning" QSR Results

The Practice Performance Domain section examines the twelve indicators used to assess the status of core practice functions. These indicators generally focus on the past 90 days from the date of the on-site review, unless otherwise indicated. The percentage of cases rated as "acceptable" and "unacceptable" is calculated for each indicator, with scores between 1 and 3 representing the "unacceptable" range and scores between 4 and 6 representing the "acceptable" range.

Indicator	% Acceptable	% Unacceptable
Engagement efforts	73%	27%
Child/youth	78%	22%
Mother	92%	8%
Father	42%	58%
Substitute caregiver	86%	14%
Other	75%	25%
Role & voice	64%	36%
Child/youth	50%	50%
Mother	85%	15%
Father :	33%	67%
Substitute caregiver	86%	14%
Other	75%	25%
Teaming	63%	37%
Formation	60%	40%
Functioning	67%	33%
Cultural awareness & responsiveness	75%	25%
Child/youth	80%	20%
Mother	85%	15%
Father	58%	42%
Assessment & understanding	67%	33%
Child/youth	80%	20%
Mother	69%	31%
Father	33%	67%
Substitute caregiver	100%	0%
Long-term view	67%	33%
Child/youth & family planning process	65%	35%
Child/youth	80%	20%
Mother	69%	31%
Father	33%	67%
Substitute caregiver	83%	17%
Planning for transitions & life adjustments	67%	33%
Efforts to timely permanence	86%	14%
Efforts	87%	13%
Timeliness	83%	17%
Intervention adequacy & resource availability	93%	7%
Adequacy	87%	13%

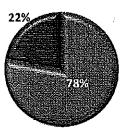
Indicator	% Acceptable	% Unacceptable
Availability	100%	0%
Maintaining family relationships	75%	25%
Mother	83%	17%
Father	38%	62%
Siblings	100%	0%
Other	100%	0%
Tracking & adjusting	83%	17%
Tracking	80%	20%
Adjusting	87%	13%

Figure 16: "Practice Performance Domain Ratings" QSR Results

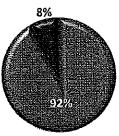
Indicator 1a: Engagement Efforts

For this indicator the central focus is on the diligence shown by the team in taking actions to find, engage, and build a rapport with the child/youth and families and overcoming barriers to families' participation. This indicator assesses the degree to which those working with the child/youth and his/her family (parents and other caregivers) are:

- Finding family members who can provide support and permanency for the child/youth;
- Developing and maintaining a culturally competent, mutually beneficial trust-based working relationship with the child/youth and family;
- Focusing on the child/youth and family's strengths and needs;
- Being receptive, dynamic, and willing to make adjustments in scheduling and meeting locations to accommodate family participation in the service process, including case planning; and
- Offering transportation and childcare supports, where necessary, to increase family participation in planning and support efforts.



Child/Youth



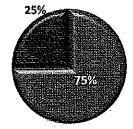
Mother



Father



Substitute Caregiver



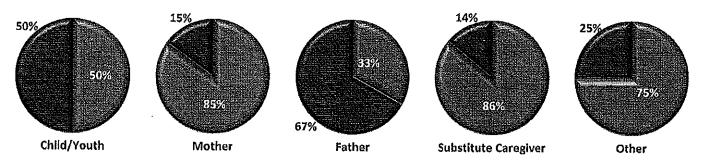
Other

Sub-Indicator		50000	Acc	eptable	•		Unacc	eptabl	e
Sub-indicator	N	6	5	4	- %	3	2	1	%
Child/Youth	9	0	4	3	78%	1	1	0	22%
Mother	13	5	4	3	92%	1	0	0	8%
Father	12	2	1	2	42%	3	2	2	58%
Substitute Caregiver	7	4	1	1	86%	1	0	0	14%
Other	4	1	1	1	75%	1	0	0	25%
Total		12	11	10	73%	7	3	2	27%

Figure 17: "Engagement Efforts" QSR Results

Indicator 1b: Role & Voice

The family change process belongs to the family. The child/youth and family should have a sense of personal ownership in the plan and decision process. Service arrangements should build on the strengths of the child/youth and family and they should reflect their strengths, views and preferences. This indicator assesses the degree to which the child/youth, parents, family members, and caregivers are active, ongoing participants (e.g., having a significant role, voice, choice, and influence) in shaping decisions made about the child/youth and family strengths and needs, goals, supports, and services.

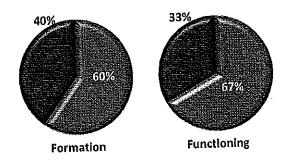


Sub-indicator Child Worth			Acc	eptable			Unacc	eptabl	e
Sub-Indicator	N.	6	5	4	%	3	2		%
Child/Youth	8	1	1	2	50%	2	2	0	50%
Mother	13	3	5	3	85%	1	0	1	15%
Father	12	1	1	2	33%	1	3	4	67%
Substitute Caregiver	7	4	1	1	86%	1	0	0	14%
Other	4	1	1	1	75%	1	0	0	25%
Total		10	9	9	64%	6	5	5	36%

Figure 18: "Role & Voice" QSR Results

Indicator 2: Teaming

This indicator focuses on the formation and functional performance of the family team in conducting ongoing collaborative problem solving, providing effective services, and achieving positive results with the child/youth and family. This indicator assesses the degree to which appropriate team members have been identified and formed into a working team that shares a common "big picture" understanding and long-term view of the child/youth and family.



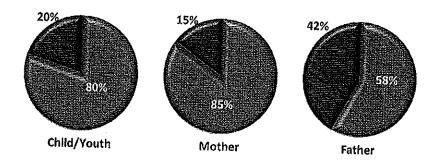
Team members should have sufficient professional knowledge, skills, and cultural awareness to work effectively with the child/youth and family. Members of the team should demonstrate a pattern of working together effectively to share information, plan, provide, and evaluate services for the child/youth and family. This indicator examines and evaluates the formation of the team, and the functioning of the team as two separate components.

	ese elvasorii		Acce	ntable			Unacc	eptabli	9
	N	6	5	4	%	3	2		- % - /
Sup-Indicator	15	3	4	2	60%	2	3	1	40%
Formation Functioning	15	4	4	2	67%	1	2	2	33%
Total		7	8	4	63%	3	5	3	37%

Figure 19: "Teaming" QSR Results

Indicator 3: Cultural Awareness & Responsiveness

Making cultural accommodations may involve a set of strategies used by practitioners to individualize the service process to improve the "goodness-of-fit" between family members and providers who work together in the family change process. The term "culture" is broadly defined; here, focus is placed on whether the child/youth's and family's culture has been assessed, understood, and accommodated. This indicator assesses the degree to which any significant cultural issues, family beliefs, and customs of the child/youth and family have been identified and addressed in practice (e.g., culture of poverty, urban and rural dynamics, faith and spirituality and youth culture). It examines if the natural, cultural, or community supports, appropriate for this child/youth and family, are being provided; and, if necessary, supports and services provided are being made culturally appropriate via special accommodations in the engagement, assessment, planning, and service delivery processes in use among the child/youth and family.

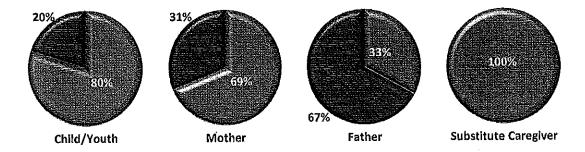


T!					75%	b	2	2	25%
Total		14	۵	4	704				
	12	3	3	1	58%	3	0	2	42%
Father	40		 			1	<u>_</u>	0	15%
Mother	13	5	3	3	85%	1	1		
	15	Ь	3	3	80%	2	1	0	20%
Child/Youth	15		-	1	Carried Marie	STANCE/CERV		in a series	70
-Sub-Indicator- Child/Youth	‡≥N≃	46	- 5	4	96	= 0 1			0/
Sub-ladiantas				chranii			Unacc	eptabl	e
			N.e.	aufall.		PART OF THE REAL PROPERTY.		35-15-15-15-15-15-15-15-15-15-15-15-15-15	o di controposo
Service Control of the Control of th									

Figure 20: "Cultural Awareness & Responsiveness" QSR Results

Indicator 4: Assessment & Understanding

Assessment involves understanding the core story of the child/youth and family and how the family reached its present situation. This story provides a framework for the family's history and is supplemented by the assessment/evaluation of the child/youth and family's current situation, environment, and support networks. This indicator assesses the degree to which the team has gathered and shared essential information so that members have a shared, big picture understanding of the child/youth's and family's strengths and needs based on the underlying issues, safety threats/factors, risk factors, protective capacities, culture, hopes and dreams. It assesses the development of an understanding of what changes must take place in order for the child/youth and family to live safely together, achieve timely permanence, and improve the child/family's well-being and functioning. The team's assessment and understanding of the child/youth and family situation should evolve throughout the family change process, and ongoing assessments of the child/youth and family situation should be used to better understand what modifications in planning and intervention strategies are needed to achieve sustainable, safe case closure.

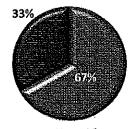


		123404-034	Acce	ptable			Unacc	eptabl	
Sub-indicator	N	6	5	4	- %	3	2	1	-%
Child/Youth	15	4	2	6	80%	3	0	0	20%
Mother	13	2	2	5	69%	3	1	0	31%
Father	12	1	1	2	33%	2	4.	2	67%
Substitute Caregiver	6	3	2	1	100%	0	0	0	0%
Total		10	7	14	67%	8	5	2	33%

Figure 21: "Assessment & Understanding" QSR Results

Indicator 5: Long-term View

Having a long-term view of a better life enables the child/youth, family, and those helping them to see both the next steps forward and the end-points on the horizon that provide a clear vision of the pathway ahead. This indicator focuses on the specification and use of the capacities and conditions that must be attained by the child/youth and family (birth, adoptive, or guardianship) to achieve stability, adequate functioning, permanency, and other outcomes necessary to achieve their desired improvements and goals. This indicator assesses the degree to which there is a guiding strategic vision shared by the family team, including the parents and child/youth, which describes:



Long-Term View

- The purpose and path of interventions for achieving safe case closure;
- The capacities and conditions necessary for safe case closure; and
- The family's knowledge and supports to sustaining those capacities and conditions following safe case closure with child welfare intervention.

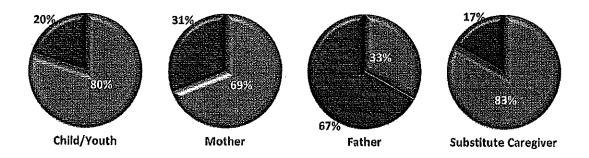
Indicator	de de la	Planter.	Acce	ptable			Unacc	eptabl	ė i i i i i i i i i i i i i i i i i i i
Indicator	N	6	5	4	%	3	2	1	
Long-Term View	15	4	5	1	67%	3	2	0	33%
Total	1.0	4	5	1	67%	3	2	0	33%

Figure 22: "Long-term View" QSR Results

Indicator 6: Child/Youth & Family Planning Process

Planning is an ongoing team-based process for specifying and organizing intervention strategies and directing resources toward the accomplishment of defined outcomes set forth in the long-term view for the child/youth and family. This indicator assesses:

- The degree to which the planning process is individualized and matched to the child/youth's and family's present situation, preferences, near-term needs and longterm view for safe case closure; and
- Provides a combination and sequence of strategies, interventions, and supports that are
 organized into a holistic and coherent service process providing a mix of services that
 fits the child/youth's and family's evolving situation so as to maximize potential results
 and minimize conflicts and inconveniences.

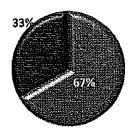


Sub-Indicator			Acce	eptable I			Unacc	eptabl	e F
- DUD-HIMICATON		AND DEF			79	7. O 10.		1	/0
Child/Youth	15	3	5	4	80%	2	1	0	20%
Mother	13	1	4	4	69%	3	1	0	31%
Father	12	1	2	1	33%	4	2	2	67%
Substitute Caregiver	6	3	2	0	83%	1	0	0	17%
Total		8	13	. 9	65%	10	4	2	35%

Figure 23: "Child/Youth & Family Planning Process" QSR Results

Indicator 7: Planning for Transitions & Life Adjustments

A child/youth and family move through several critical transitions over the course of childhood and adolescence. Well-coordinated efforts in assisting the child/youth through significant transitions are essential for success. This indicator assesses the degree to which the current or next life change transition for the child/youth and family is being planned, staged, and implemented to assure a timely, smooth, and successful adjustment after the change occurs. Plans and arrangements should be made to assure a successful transition and life adjustment in daily settings. Well-planned follow-along supports should be provided during the adjustment period to ensure that successes are achieved in the home or school situation.



Planning for Transitions & Life Adjustments

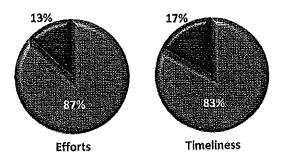
Alternative timeframes are used for the ratings in this indicator. This indicator looks retrospectively over the past 90 days and prospectively over the next 90 days to assess the planning and transitioning through a significant life change and adjustment process of the child/youth and family.

				ar a ta ta	8 N. C	No.	Hosec	antabl	A
		22.770.000	HULE	7020742752			- C	C P. MAIN	1
Indicator	国N 答	6 ₩	5.5		~~%·	100 100 100 100 100 100 100 100 100 100		L	
Planning for Transitions & Life Adjustments	12	3	4	1	67%	2	2	0	33%
Total		3	4	1	67%	2	2	0	33%

Figure 24: "Planning for Transitions & Life Adjustments" QSR Results

Indicator 8: Efforts to Timely Permanence

Conditions for timely permanence define requirements that have to be met in order for the child/youth to have a forever family with necessary supports to sustain the relationship once protective supervision ends. This indicator examines the pattern of diligent actions and the sense of urgency demonstrated by assigned team members. This indicator assesses the degree to which current efforts by system agents for achieving safe case closure (consistent with the long-term view) show a



pattern of diligence and urgency necessary for timely attainment of permanence with sustained adequate functioning of the child/youth and family following cessation of protective supervision. This indicator looks at both efforts and timeliness. The "efforts" for achieving

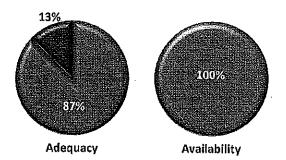
permanence are assessed for both out-of-home and in-home cases; however, the "timeliness" of achieving permanence is rated for out-of-home cases only and includes specific timeframes which reviewers must consider.

		west of	Acce	eptable	Tell Management		Unacc	eptabl	è
Sub-indicator	EN.	6 =	5	4	%	3	2	1	%
Efforts	15	5	3	5	87%	2	0	0	13%
Timeliness	6	2	2	1	83%	0	0	1	17%
Total		7	5	6	86%	2	0	1	14%

Figure 25: "Efforts to Timely Permanence" QSR Results

Indicator 9: Intervention Adequacy & Resource Availability

To be adequate, the intensity and consistency of service delivery should be commensurate with that required to produce sustainable and beneficial results for the child/youth and family. An adequate, locally available array of services must exist in order to implement the intervention and support strategies planned for the child/youth and family. This indicator assesses the degree to which planned interventions, services, and supports being provided to the child/youth and family have



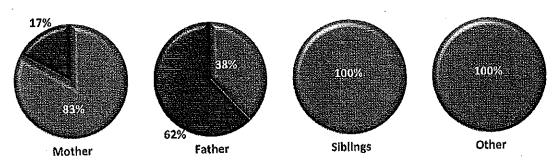
sufficient power and beneficial effect to meet near-term needs and achieve the conditions necessary for safe case closure defined in the long-term view. Resources required to implement current child/youth and family plans should be available on a timely, sufficient, and convenient local basis.

Sub-indicator		1000	Acce	eptable			Unacc	eptabl	e
Sub-indicator	≋ N =	6	5	4	%	3	2	1	%
Adequacy	15	6	6	1	87%	2	0	0	13%
Availability	15	10	5	0	100%	0	0	0	0%
Total		16	11	1	93%	2	0	0	7%

Figure 26: "Intervention Adequacy & Resource Availability" QSR Results

Indicator 10: Maintaining Family Connections

This indicator measures the quality of relationships between the child/youth and his/her family members and other important people in the child/youth's life. The quality of these relationships depends on opportunities for positive interactions; emotionally supportive, mutually beneficial connections; and engaging in nurturing exchanges with one another. When this occurs, it promotes the preservation of families and the successful reunification of the child/youth and his/her parents. This indicator assesses the degree to which interventions are building and maintaining positive interactions and providing emotional support between the child/youth and his/her parents, siblings, relatives and other important people in the child/youth's life, when the child/youth and family members are temporarily living away from one another.



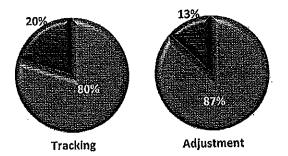
Sub-Indicator		No.	Acce	ptable			Unacco	ptable	
Sub-Indicator	N	6	5	4	-%	3	2	1	_%_
Mother	6	2	3	0	83%	0	0	1	17%
Father	8	0	3	Q	38%	2	0	3	62%
Siblings	6	4	0	2	100%	0	0	0	0%
Other	4	2	1	1	100%	0	0	0	0%
Total		8	7	3	75%	2	0	4	25%

Figure 27: "Maintaining Family Connections" QSR Results

Indicator 11: Tracking & Adjusting

An ongoing examination process should be used by the team to track service implementation, check progress, identify emergent needs and problems, and modify services in a timely manner. This indicator assesses the degree to which:

• The team routinely monitors the



- child/youth's and family's status and progress, interventions, and results and makes necessary adjustments;
- Strategies and services are evaluated and modified to respond to changing needs of the child/youth and family; and
- Constant efforts are made to gather and assess information and apply knowledge gained to update planned strategies to create a self-correcting service process that leads to finding what works for the child/youth and family.

Sub-indicator	1000	Medical Medical	Acce	eptable			Unacc	eptabl	e
Sub-indicator	₽N⊕	6	2世5世紀	4	%	3	2	1	%
Tracking	15	3	6	3	80%	2	1	0	20%
Adjustment	15	3	5	5	87%	1	1	0	13%
Total		6	11	8	83%	3	2	0	17%

Figure 28: "Tracking & Adjusting" QSR Results

QUALITY SERVICE REVIEW PROTOCOL RATING SCALE LOGIC

Improveme	hrte problemensers ntzone: 122	Guide for Child/Youth a Refinemen	it Zone: 3-4	Acceptable Range: 4:6 Maintenanc		
Status is problematic should be taken to in 1	or risky: Quick action in prove the situation.		ts are necessary to	Status is favorable. Efforts should be made to maintain and build upon a positive situation. 5 6		
Adverse Status The Individual's status in this area is poor, unacceptable and worsening. Any risks of harm, restriction, separation, regression, and/or other poor outcomes may be substantial and increasing.	Poor Status Status is and may continue to be poor and unacceptable. The individual's status has been substantially ilmited or inconsistent, being inadequate at some or many moments in time or in some essential aspect(s). Any risks may be mild to serious.	Marginal Status Status is mixed, limited or inconsistent and not quite sufficient to meet the individual's short-terms needs or objectives now in this area. Status has been somewhat inadequate at points in time or in some aspects over the past 30 days. Any risks may be minimal.	Fair Status Status is at least minimally or temporarily sufficient for the individual to meet short-term needs or objectives in this area. Status has been no less than minimally adequate at any time over the past 30 days, but may be short-term due to changing circumstances, requiring change soon.	Substantial Status Substantially and dependably positive status for the individual in this area with an ongoing positive pattern. This status level is generally consistent with eventual attainment of long-term needs or outcomes in this area. Status is good and likely to continue.	Optimal Status The best of most favorable status presently attainable for this individual in this area (taking age and ability into account). The individual is continuing to do great in this area. Confidence is high that long-term needs or outcomes will be or are being met in this area.	

	Interprei Elineckapk bjektar gerøres ent Zonet 1-2 uate : Quick action should	Refineme	e Performance Indicator F	Acceptable Rangerd-6	ce Zone: 5-6	
be taken to limp	rove practice now.	be changing. Further	nal or marginal and may efforts are necessary to actice situation.	Performance is effective. Efforts should be made to maintain and build upon a positive practice situation.		
Adverse Practice Practice may be absent or not operative. Performance may be missing (not done) OR Practice strategies, if occurring in this area, may be contraindicated or may be performed inappropriately or harmfully.	Poor Practice Practice at this level is fragmented, inconsistent, lacking necessary intensity, or off-target. Elements of practice may be noted, but it is incomplete/not operative on a consistent basis.	Marginal Practice Practice at this level may be under- powered, inconsistent or not well-matched to need. Performance is insufficient for the individual to meet short-term needs or objectives. With refinement, this could become acceptable in the near future.	Fair Practice This level of performance is minimally or temporarily sufficient to meet short-term need or objectives. Performance in this area may be no less than minimally adequate at any time in the past 30 days, but may be short term due to change circumstances, requiring change soon.	Substantial Practice At this level, the system function is working dependably for this individual, under changing conditions and over time. Effectiveness level is consistent with meeting long-term needs and goals for the individual.	Optimal Practice Excellent, consistent, effective practice for this individual in this function area. This level of performance is indicative of well-sustained exemplary practice and results for the individual.	