

Continuous Quality Improvement Quality Service Review

FINAL REPORT

*September 17- 21, 2007
Fond du Lac County
Department of Social Services*

**Child Welfare Continuous Quality Improvement Program
Section of Performance Monitoring
Office of Performance and Quality Assurance
Wisconsin Department of Children and Families**

*A Report by
The Continuous Quality Improvement (CQI) Team*

August 4, 2008

I. INTRODUCTION

The Continuous Quality Improvement (CQI) Program, within the Section of Performance Monitoring, in the Office of Performance and Quality Assurance (OPQA) of the Department of Children and Families (DCF); uses the Quality Services Review (QSR) protocol to evaluate the case practice models of Wisconsin's county child welfare programs. The QSR generates useful information for county staff and community stakeholders as to outcomes for children and families served, strengths of local practice, and opportunities for improving system performance.

The QSR process also provides an opportunity to gather additional information the department will use in reporting some federally required information, which is part of the Child and Family Services Reviews (CFSR).

The Continuous Quality Improvement Team conducted a Quality Service Review in Fond du Lac County during the week of September 17-21, 2007. During the same week, staff from the Children's Court Initiative (CCI) conducted a review of the Juvenile Court. CCI is a comprehensive, ongoing, collaborative project designed to strengthen court processing in Chapter 48 cases.

Note: This Final Report was completed after July 1, 2008 when the new Department of Children and Families formally came into existence. Only the title page and footnote have been amended to reflect issuance by the new department on August 4, 2008. Within the report the names of divisions, bureaus, and sections remain as they were referenced as parts of Department of Health and Family Services (DHFS).

II. THE FOND DU LAC COUNTY REVIEW

A. REVIEWERS

In the Fond du Lac County review, twelve case reviewers participated in reviewing the twelve cases selected. A total of 72 persons were interviewed. Two reviewers served as mentors to their review partners ("Shadow Two" reviewers) to help coach them in their development as lead case reviewers. All of the lead case reviewers who provided coaching have extensive experience in child welfare. The case reviewers included three state employees, three retired individuals with extensive child welfare backgrounds, three Continuous Quality Improvement Specialists, one area administrator, and one agency caseworker. In addition, there was one state employee who observed the review of one case and served as a "Shadow One," a role created to allow child welfare stakeholders to experience a QSR review.

B. CASE SAMPLE

Twelve cases were randomly selected for review in Fond du Lac County Department of Social Services (DSS). In each case, one child was selected as the “focus child.” Every attempt is made to stratify the case sample across workers, ages, and genders of children. A family must agree to participate in the review process and sign releases for participants to be interviewed by the review team, or the case is not reviewed. In the Fond du Lac review, a total of 72 persons were interviewed. Of the twelve cases, seven of the children were residing with at least one of their parents, three of the children were in a county foster care placement, one child was in a foster care placement in another county, and one child was in a relative/kinship placement. There were five children was in the 0-4 age range, three children in the 5-9 age range, one child was in the 10-13 age range, and three children were over the age of 14. There were seven males and five females in the sample.

C. STAKEHOLDER INTERVIEWS

As a complement to the individual case reviews, focus groups were conducted with stakeholders from the local child welfare system. Site Leader and CQI Section Manager Harry Hobbs, with the assistance of co-site leaders CQI Specialists Bridget Chybowski and Julie Fliss, conducted these sessions. In addition, Bridget Bauman of the Children’s Court Initiative conducted sessions jointly with the Site Leader for many of the focus groups. The external perspectives that were gathered provide a valuable source of perspective, insight, and feedback about how all the systems families are involved with, interface and perform with the child welfare agency, thereby affecting and influencing outcomes. The stakeholder focus groups and their perspectives are described in Section III.

D. DEMOGRAPHICS

Fond du Lac County is among the 19 largest counties in the state of Wisconsin (including Milwaukee County) and has the 14th largest child population in the state. Whereas the three cities (Fond du Lac, Ripon, and Waupun) comprise a little more than half of the county’s population, the overall composition of the county is a mixture of urban and rural communities. The population is predominately Caucasian; however, there has been an increase in minority populations, including the African American and Hispanic populations. Although language barriers can prove challenging with service delivery, the addition of three bi-lingual, bi-cultural staff members has helped the agency meet the needs of such populations.

III. THE SYSTEMIC PERSPECTIVE (MACRO VIEW)

A. ORGANIZATIONAL – STRENGTHS

High Quality, Experienced Staff

Supervisors and social workers are “responsive” to the community and “dedicated” to serving the children and families of Fond du Lac County. The social workers take the time to get to know their families and understand their needs. The workers put this knowledge to good use while preparing comprehensive documents for court and communicating regularly with legal partners.

There is a low rate of social worker turnover at DSS. As a result, DSS benefits from the experience of “seasoned” social workers who “make good decisions when out in the field.” The low turnover rate has also led to cohesion among social workers and supervisors. Various focus group participants stated that staff, including supervisors, are very supportive of each other and provide assistance to colleagues whenever it is needed.

Similar to the social workers, the supervisors and director provide support and assistance. One example of this is that each supervisor takes a turn screening the reports of maltreatment made to DSS, so that they have a better understanding of the responsibilities of the Access/Initial Assessment Supervisor and can fill in if that supervisor is unavailable. Moreover, the director was regarded as accessible by community partners and willing to address difficult issues even if doing so may make her unpopular among staff members.

Positive Working Relationship with Community Partners

DSS has a solid working relationship with law enforcement agencies, including the Sheriff’s Department and local police departments. Many individuals noted that DSS and law enforcement work as a team when conducting investigations into child maltreatment. The Memorandum of Understanding (MOU) between DSS and Law Enforcement agencies was recently updated and all of the agencies signed on to the agreement. Although DSS has made a decision that they will no longer be opening cases where the alleged mal-treater is not a caregiver, they have chosen to assign a social worker in circumstances when law enforcement feels the situation would benefit from the involvement and expertise of a DSS social worker. When the circumstances have been reversed, law enforcement agencies have also assigned an officer to assist the DSS when requested. Overall, the two agencies appear to have developed a good partnership.

Many individuals in the focus groups also commented that DSS has a collaborative relationship with area school districts. The school system and the agency worked together to develop a protocol for interviewing children while at school to make the child more comfortable with the process. In addition, DSS has provided trainings to community partners, including school personnel, to provide them with information on mandated reporting, updates on state laws, and the roles and responsibilities of the workers at DSS. These trainings have helped to open the lines of communication between DSS, school

personnel, and other community partners allowing each to have a better understanding of the other's role.

DSS is also working with local resources that provide services to victims of domestic violence in an attempt to develop a Memorandum of Understanding. DSS often works with the same families as other community agencies and DSS would like to find a way to collaborate efforts in serving these families better. Prior to the review, the agencies surveyed staff from DSS, and the domestic violence services, to obtain a better sense of what the other knew about domestic violence and child protective services. Using the results of the survey, the agencies plan to come together to educate each other on the challenges facing their clientele as well as their staff. Overall, the results of the survey were positive and helpful in developing a collaborative relationship between child welfare and domestic violence services in this community.

DSS has also made a concerted effort to include their community partners in Administrative Permanency Plan Reviews. In many of the focus groups, at least one individual, often many more, stated that they sit on the Administrative Permanency Plan Review Board in Fond du Lac County. Through this experience, individuals noted that they were able to gain a better understanding and respect for the staff at DSS and their efforts to improve outcomes for the children and families of Fond du Lac County. Individuals involved in the Administrative Permanency Plan Reviews were "impressed by the work that comes out of the reviews" and the efforts DSS social workers put forth with "families that may seem hopeless."

Overall, community partners expressed an appreciation to the openness of DSS and their willingness to talk through situations, even if the two parties did not agree. Many individuals felt they could question the director, supervisors and social workers regarding a decision and that an explanation would be provided to the extent that was reasonable. Because of this open communication, DSS has been able to sustain positive working relationships with their community partners.

Internal Resources

Family Foundations (formerly "POCAN" Promoting Opportunities to Care and Nurture) is a voluntary program offered by DSS that is offered to families who are at-risk of having their children removed from the home. Family Foundations maintains strong partnerships with other community resources including Special Supplemental Nutrition Program for Women, Infants and Children (WIC), Birth to Three, the Family Resource Center, and Public Health. The focus of this program is building relationships with families by "starting where the family is." The families involved in this program are actively involved in the planning process and it is the family, not the worker, who identifies the goals they wish to accomplish. This practice philosophy has proven effective, as workers are able to intervene early on and have been successful in engaging the families in a change process before the situation escalates to a level that requires court involvement.

DSS also has Family Support Workers who are assigned to the various units, whom assist the social workers in providing services to families. A few of the services include in-home safety checks, supervising family interactions, and transportation. The Family Support Workers have flexible schedules that allow them to meet with and provide services to families when it is convenient for the families. In addition, there are three bilingual Family Support Workers (One of whom speaks Hmong and two of whom speak Spanish). The two Family Support Workers who speak Spanish are also very knowledgeable of community resources that serve the Spanish speaking families and have played a vital role in helping Fond du Lac County serve this population.

Willingness to pilot initiatives

On a whole, DSS is described as "adaptable" and "open" to piloting new initiatives. A few years ago, DSS reorganized their Child Protection Services staff to create a specialized foster care unit that would focus primarily on cases where the child is placed out of the home and reunification does not appear to be possible. The intent of the agency's reorganization was to create specialized units where social workers can enhance or "specialize" their skills to meet the needs of families assigned to their area of focus. The agency's hope is that the creation of the specialized units will allow them to work more effectively with families to achieve more stable, permanent homes for children.

In addition, DSS recognized a gap in dental services for children on Medical Assistance. To remedy this problem, the County Executive secured funding and DSS collaborated with community resources to implement a strategy to service this population. The County Executive was also pivotal in the creation of this program and collaborated with DSS to help move the program from an idea into reality. DSS anticipates this initiative to become operational soon after the completion of this review.

B. ORGANIZATIONAL – CHALLENGES

Decrease in Face Time vs. Increase in Screen Time

As a result of increasing demands set forth by state standards and the electronic Wisconsin Automated Child Welfare Information System (eWiSACWIS), DSS Social Workers find that they are spending more time in front of a computer screen and less time with families. The increase in documentation time is a point of frustration for DSS Social Workers, who sometimes have to rely on others, such as Family Support Workers, to do work with families that the social workers had previously done on their own. Moreover, social workers state they are not able to focus as much on preventative efforts as they would like because the focus of their practice appears to have shifted to "putting out fires" and meeting paperwork deadlines.

Sibling Placements and Preserving Connections

In accordance with best practice principles, social workers strive to place siblings together when removed from their biological homes. However, due to a lack of resources or other reasons, this is not always possible. In situations where siblings are placed in separate homes, focus group participants advised that foster children are not always having regular visits with their siblings or other contact, such as telephone calls or letters.

When children must be removed from their biological homes for safety concerns, they struggle with the change, so it is critical to keep with them connected to as many things that are familiar to them as possible – community, school and family. If children are not able to maintain communication with their siblings, it affects the overall quality of their relationships with their family members and may affect their overall emotional well-being.

Provision of Services to Incarcerated Parents

A challenge facing social workers is connecting incarcerated parents with services to help address their needs and the needs of their families. In situations where the child has been placed out of the home, the court requires the parent to complete conditions that must be met before the child can return to their home. Unfortunately, resources are not always available to help incarcerated parents meet these conditions. In general, focus group participants noted the need to provide incarcerated parents with change-oriented services to improve their chances of being permanency resources for their child (ren). In addition, individuals advised that such services are currently lacking for incarcerated parents and expressed a need for the community collaborate to identify and develop services to enhance the parents' abilities to safely care for their children.

Decreased Federal, State and Local Funding

Similar to other counties in the state, Fond du Lac County is faced with the challenge of decreased funding, despite increased demands in everyday responsibilities. The changes in state practice standards and required trainings all come at a cost to counties, yet the state's ability to seek federal reimbursement and the state's own funding limitations for child welfare systems falls short – to the extent that one individual described the level of financial assistance available to be “abominable”. Whereas the staff at DSS maintain their dedication helping children and families, they are frustrated with the arduous task of doing so with less resources and additional expectations along the way.

C. RESOURCES – STRENGTHS

Diverse Array of Community Resources

Fond du Lac County offers a wide range of services and resources to its residents. Some of the resources identified include a domestic violence program, family resource center, respite services, and in-home parenting and therapy services. In addition, the county has a group home and shelter care facilities, both of which are run by DSS. The county also has a secure detention center and anger management/corrective thinking services for youth that are run by the Sheriff's Department. The diversity of resources was noted as a strength in a quite a few of the focus groups.

Access to Services for Victims of Sexual Assault (ASTOP)

ASTOP, in collaboration with St. Agnes Hospital, provides crisis support to families impacted by sexual assault and counseling to victims. St. Agnes Hospital will also conduct Sexual Assault Nurse Examiner (SANE) exams on child victims to a limited degree. DSS can access the services of Children's Hospital of Wisconsin (Milwaukee and Neenah) if the exam cannot be completed locally.

In addition, Fond du Lac County has adopted a Victim Sensitive Interview Protocol (VSIP) in an effort to limit the number of times that a child who is a victim of maltreatment is interviewed and decrease the likelihood that the child will need to testify in front of the maltreater. Initial assessment staff members and law enforcement officers have been trained in forensic interviewing. When the trained professional talks with the child, the interview is videotaped and this tape may be used as evidence, should the criminal case go to trial. In some circumstances, the videotape accompanied by the testimony of the trained interviewer can be used in lieu of the child's testimony. Furthermore, this resource was identified by many as an effective strategy to prevent exposing children to further distress.

Dental Program for Children with Medical Assistance

As stated earlier, a program was created in Fond du Lac County to fill the gap in dental services provided to children with Medical Assistance. This program was started by Public Health and DSS assisted with its development. For example, DSS has secured funding to hire a dental hygienist for the program and has secured the agreement of at least one dozen local dentists to donate their time to the effort. The plan is for children in out-of-home care to receive priority for this needed service before other children in the community. DSS is excited about this initiative and hopeful that it will successfully close the gap in such services for children with Medical Assistance.

Transitional Living Facility and Independent Living Skills (ILS) Resources

DSS runs a house in the community where the specific focus is on working on developing the Independent Living Skills (ILS) of teens in out-of-home care. Whereas DSS is no longer able to provide housing to teens transitioning to independence, the staff at this facility continue to provide teens with many other services and resources. For example, teens are able to participate in classes where they can learn information on such topics as renting an apartment, balancing a checkbook, or searching for a job. The Transitional Housing Facility is also a place where teens can drop in, even after they reach independence, to talk with staff, wash their laundry, or search through items donated by the community for the teens. In addition to the ILS services provided at this facility, staff occasionally conduct supervised visits in the space available. By and far, many positive comments were made about this resource and the ILS services provided to teens preparing for adulthood.

Foster parents are also recognized as a valuable resource in teaching teens independent living skills by talking to the teens about the importance of establishing goals and providing needed support for the teens to believe that they can accomplish their goals. DSS foster parents help the teens in their homes consider options after high school and take them on tours of colleges and technical schools. Moreover, DSS educates teens in out-of-home care to be aware of the financial assistance available to them for higher education. Overall, the ILS services provided were impressive.

D. RESOURCES – CHALLENGES

Mental Health and Alcohol and Other Drug Abuse (AODA) Services for Children and Youth on Medical Assistance

Families with Medical Assistance have a difficult time finding local mental health providers and alcohol and drug treatment services for their children. Frequently, many providers in Fond du Lac County only accept private insurance. This limitation becomes a barrier because parents and caregivers are forced to travel out-of-county to access such services or sit on waiting lists for the few local providers who do accept Medical Assistance. Consequently, children and youth may not be receiving the level of services required to meet their needs, which in turn affects their stability and their parents/caregiver's capacity to ensure their safety and well-being.

Services for Children with Autism or Developmental Delays

There is a lack of services for families with children diagnosed with autism or developmental delays. As these children age, parents are struggling more with the needs of their children and are finding fewer resources to turn to for support. For this reason, more parents are turning to DSS and requesting their child be placed in foster care out of fear that they may harm the child or that the child may harm one of their other children. Such situations are challenging to DSS because there is not only a lack of services for this population, but there is also a lack of placement options for children with these needs. Furthermore, it is predicted that this issue will continue to challenge the community unless early intervention services become available to these families.

Community Wide Trauma-Informed and Responsive Delivery Systems

Various populations challenge the staff at DSS, most notably individuals with substance abuse issues, mental illness, and victims of domestic violence. The local child welfare community tends to have services that address the needs of the first two populations. It is more difficult for the system to identify and respond to the needs of individuals who have been exposed to or who have demonstrated symptoms of trauma. As an agency, DSS is no different. Whereas there are a few service providers who have been trained to assess trauma, this knowledge is not shared throughout the community, limiting the ability to effectively identify and respond to the needs of this population.

Transportation

Lack of transportation is frequently identified as a challenge to small counties with minimal resources. Fond du Lac County however is a larger county with a number of resources, yet transportation was repeatedly identified in focus groups as a resource challenge for families involved with DSS. Social workers or family support workers often have to transport a family on their own, which only adds more to their already busy schedules. The lack of transportation affects both the parents' ability to access services for themselves or for their children and their ability to attend regular visits with their children if placed in out-of-home care. Transportation appears to be a resource challenge that impacts DSS staff workload, as well as the family's ability to make progress toward gaining independence from the agency.

E. PRACTICE – STRENGTHS

Training System for New and Experienced Staff

DSS has the benefit of an in-house training supervisor, who was repeatedly touted to be a huge asset to the agency and community. The training supervisor is very involved with the Wisconsin Child Welfare Training System and is a trainer with the North East Wisconsin (NEW) Training Partnership. He is able to conduct some of the required trainings on-site for the convenience of workers and supervisors. The training supervisor also acts as a mentor to workers and supervisors who need assistance implementing new concepts, learned in trainings, into their everyday practice. Whereas child welfare agencies tend to struggle with supporting workers to transfer learning into practice, DSS has found an effective way to sustain the development of their workers and supervisors with the addition of an in-house training supervisor.

Implementation of a Teaming Model

DSS has recently secured grant funding for the implementation of a teaming model to use with families involved in child protective services. A consultant has been hired to help implement the model. The consultant will further assist in training some of the social workers to be facilitators for the teaming model. Teaming is an area that DSS recognized was lacking in their practice model. The agency determined that the teaming approach would be beneficial in achieving successful outcomes for the children and families whom they serve.

Efforts to Maintain Children in Parental Homes

Supervisors, social workers, and family support workers do their best to maintain children safely in their parental homes. DSS staff uses their assessment skills to identify the parent's capacity to provide a safe environment for their child and implement in-home safety plans to manage safety threats whenever possible. Moreover, social workers understand the impact that removal from their home and parents can have on a child. Whereas removal is sometimes necessary, DSS makes it a priority to use in-home safety plans and work with families to implement strategies to ensure the child's safety while in their most natural setting – their family home.

Identification and Use of Relative Placements

If a child must be removed from their parental home for safety reasons, DSS social workers collaborate with the family to identify relatives who may be a placement option for the child. DSS understands the importance of maintaining as much of a child's supports or routine when a child is removed from the home. Thus, placing a child with a relative, with whom the child is familiar, will likely have less of a negative affect on a child than placing them with a foster parent, with whom the child is unfamiliar. Therefore, when a child feels more comfortable in her placement, the placement is less likely to be disrupted and the overall functioning of the child is going to be better.

Family-based Assessments and Case Plans for At-Risk Families

Families are less likely to engage in a change process if they feel like an outsider looking in on the process. However, when a family and social worker work together to identify the family's needs and strategies to accomplish change, the family is more likely to become engaged in the change process and also sustain the change. These principles are at the core of the practice model used by the agency's Family Foundations program. Social workers approach families as the expert of their situation and find value in engaging the family to create case plans. The practice model used by the Family Foundations social workers mirror many of the core practice principles and values of the QSR. Furthermore, the social workers in this program have found much success with this model.

Effective Matching of Children with Placement Providers

DSS takes great care to provide high quality foster homes to children who need to be removed from their biological homes. The social workers are careful to complete an accurate assessment of the child's needs and functioning to match them with caregivers who can provide the appropriate care for the child based on the child's needs. The effective matching of a child to a foster home is critical in order to develop a stable placement for the child and minimize the risk of disruption.

F. PRACTICE – CHALLENGES

Engaging Families in a Change Practice

When a family's case closes with the agency, the hope is that the family will sustain the changes necessary to remain independent from the child welfare system. However, this can be a challenge if the family is not engaged in the change process. Whereas social workers in the Family Foundations program have found some success with engaging families, social workers in other units with DSS and community partners are finding it more difficult to develop trust based working relationships with families whose involvement in the child welfare system is involuntary. Unless a family feels they have something to offer to the process, they will frequently resist change by "going through the motions" or refusing to participate. These are examples of a few of the challenges that social workers at DSS face despite attempts to build relationships and partner with families.

Root Cause Analysis of the Family's Underlying Needs

Symptoms for a problem are sometimes easier to identify than the actual problem. For instance, a mother's parental capacities may be diminished as a result of alcohol or drug use; however, the mother's substance abuse may be the mother's way of dulling the reoccurring anxiety she is experiencing from being repeatedly sexually assaulted as a child. Though the mother's alcohol and drug use may have been the behavior that directly impacted the safety of her children, treating her substance abuse alone may not address the root cause of what led to the family's involvement with the agency. Overall, the symptoms of a problem (e.g. alcohol and drug use) can be more concrete and observable than the underlying issues (e.g. trauma exposure) that may take some digging before they present themselves. When bogged down by constant crises, paperwork and deadlines,

social workers and supervisors may look to short cuts or quick answers to keep up with their daily demands. As a result, the more concrete, observable problems tend to be the focus of interventions and case plans rather than the root causes of these concerns, which often impacts the family's ability to gain and/or sustain the changes needed to achieve independence from the agency. Furthermore, this was identified as a practice challenge among focus group participants and in half of the cases reviewed. This will be explained in further detail under *Overall Assessment and Understanding* for Core Practice Performance.

Development of Measurable and Behaviorally Specific Case Plans for Each Family

What would it look like for the family to be independent from the agency? What needs to happen to achieve safe case closure? The answers to these questions help to develop a road map for families to help them understand what direction they need to go to reach their destination. Case plans should serve as the family's road map to help them identify not only how to reach their destination, but also measure the progress toward reaching their destination. For example, a case plan that requests a parent complete a parenting class is insufficient unless it also includes a desired outcome from the parent's participation in the class and a means to measure their progress. Concerns were raised that families in Fond du Lac County do not always know what steps they need to take to accomplish the conditions outlined in their case plans, some of which were described as "cookie cutter" plans. When there is no way to measure change, families tend to grow frustrated and to distrust their workers because the family is unable to determine if they are getting any closer to independence of the agency and court system.

Multiple Caseworkers Assigned to a Family Throughout the Life of a Case

The creation of specialized units within Child Protective Services has allowed individuals to be very focused in how they work with families to achieve positive outcomes. However, another result of the specialized unit is that multiple social workers could be assigned to a family's case throughout the time the family is involved with DSS. Although the intent of the reorganization was good, it appears to have lead to confusion for the family and others involved with the family's case. For example, if the permanency goal is reunification, the family will be assigned to a worker in the ongoing unit. Yet, if the permanency goal is Termination of Parental Rights (TPR)/Adoption, the family will be assigned to a worker in the foster care unit. On the other hand, if the goal ever changed back to reunification, the assigned worker may change again. Focus group participants expressed concerns that parties are not always notified when there is a change in worker. In addition, the newly assigned worker may disagree with the previous case plan and completely change the direction of the family's case. Though individuals noted that the new direction was sometimes a positive, they also noted that this practice is inefficient and may delay permanency for the child.

Use of a Teaming Model that includes all of the Family's Supports (Formal & Informal)

Whereas teaming was used in some circumstances, only some individuals involved with the family appeared to be included on the team. The family is the most critical part of the team and needs to be able to identify their formal supports, as well as those informal

supports who will continue to be with the family when DSS is no longer in their life. Teaming is a very effective strategy to get everyone on the same page with a clear, big picture understanding of what needs to occur to achieve safe case closure. If someone is missing from the team, that person may be on a different page as the others or share a different long-term view. Moreover, DSS has taken a step in the right direction in their efforts to implement a teaming model to be used with their families.

G. LEGAL – STRENGTHS

Appointment of Attorneys and Notices of Hearings

Overwhelmingly, judges are appointing attorneys for biological parents in Child in Need of Protection or Services (CHIPS) cases so that parents can be represented in court and get legal advice throughout the process. Focus group participants also noted that both biological and foster parents appear to be receiving notice of hearings in a timely manner.

Child Advocate Program (CAP)

The Child Advocate Program (CAP) is comprised of volunteers who act as “an extra set of eyes” on some CHIPS cases, similar to the Court Appointed Special Advocates (CASA) program used in other counties. A CAP volunteer may be appointed to a child’s case based on a referral from the DSS social worker or the Assistant District Attorney assigned to the case. Overall, CAP was viewed as an asset as the CAP workers can be helpful in getting “the ball rolling” to access services for children and focus on the best interest of the child.

Good Working Relationship with the District Attorney and Guardians ad Litem

Before the District Attorney moved into his current position, he prosecuted all of the CHIPS cases in Fond du Lac County and asked to be assigned to these cases because of his interest in improving outcomes for children and families. Whereas the District Attorney no longer prosecutes CHIPS cases, his prior experience gave him a solid understanding of the dynamics of these cases and the challenges facing families. Agency staff and legal partners described the District Attorney to have “a vested interest in kids.” This interest has led to a positive working relationship between the District Attorney and DSS.

Social workers also have an effective working relationship with many of the Guardians ad Litem (GAL’s) appointed to the CHIPS cases. Agency staff indicated that this has improved in recent times as more GAL’s are meeting with families and consulting social workers regarding their knowledge of the child and family’s situation. It was further noted that GAL’s have been willing to participate in Administrative Permanency Plan Reviews. Overall, the relationship between the GAL’s and the social workers was viewed as positive.

H. LEGAL – CHALLENGES

Rotation of Judges and Assistant District Attorneys

The Judges and Assistant District Attorneys (ADA's) rotate every four weeks. The rotation on its own may not prove to be problematic; however, neither the Judges nor the ADA's keeps a case for the life it is involved in the court system. The current rotation system has resulted in a lack of continuity as the Judge or ADA often does not have knowledge of the child and/or family's history or may not have the same opinion of how the case should proceed as the previous Judge or ADA who had the case. Many ADA's reportedly read as much as they can in the file a few minutes prior to the hearing and others questioned if the Judges even read the information that social workers have provided in court documents. Focus group participants overwhelmingly identified the rotation to be challenging for DSS staff, legal partners, and the families. It was noted that delays would sometimes occur due to "judge shopping" or when the ADA's or defense attorneys try to schedule hearings when a more preferable judge has rotated on to the case. Moreover, the rotation process in Fond du Lac County creates an unpredictable situation for all parties involved.

Backlog in Filing of Termination of Parental Rights Petitions

Many Focus Group participants expressed frustration with the length of time that it takes to file TPR petitions. There is reportedly a "backlog" of TPR petitions in the District Attorney's Office waiting to be filed. Individuals noted that this has affected the social worker's ability to establish stability and permanency for the children in such cases. The delay can also be hard on biological parents. In one example provided, a mother had chosen to voluntarily terminate her parental rights; however, the petition reportedly remained with the District Attorney for a year before it was filed. One individual noted that the delay resulted in greater turmoil for the mother, who had struggled to make the decision in the beginning. In general, focus group participants stated that the delays created by the backlog are challenging for all those involved.

Inconsistent Visitations by Guardians ad Litem with Children

The visitation of children by GAL's depends on the attorney who is assigned to the child. For the most part, GAL's visits with children are "minimal" and some parties question their knowledge of the child and family. In some situations, GAL's have not been meeting with biological and foster families until a few minutes before court and do not meet the child unless he or she is also present at court. Individuals also expressed that the GAL's are basing their decisions solely on information gained from the worker rather than soliciting information from others or making an independent judgment on the situation.

Lack of Foster Parent Participation in Court

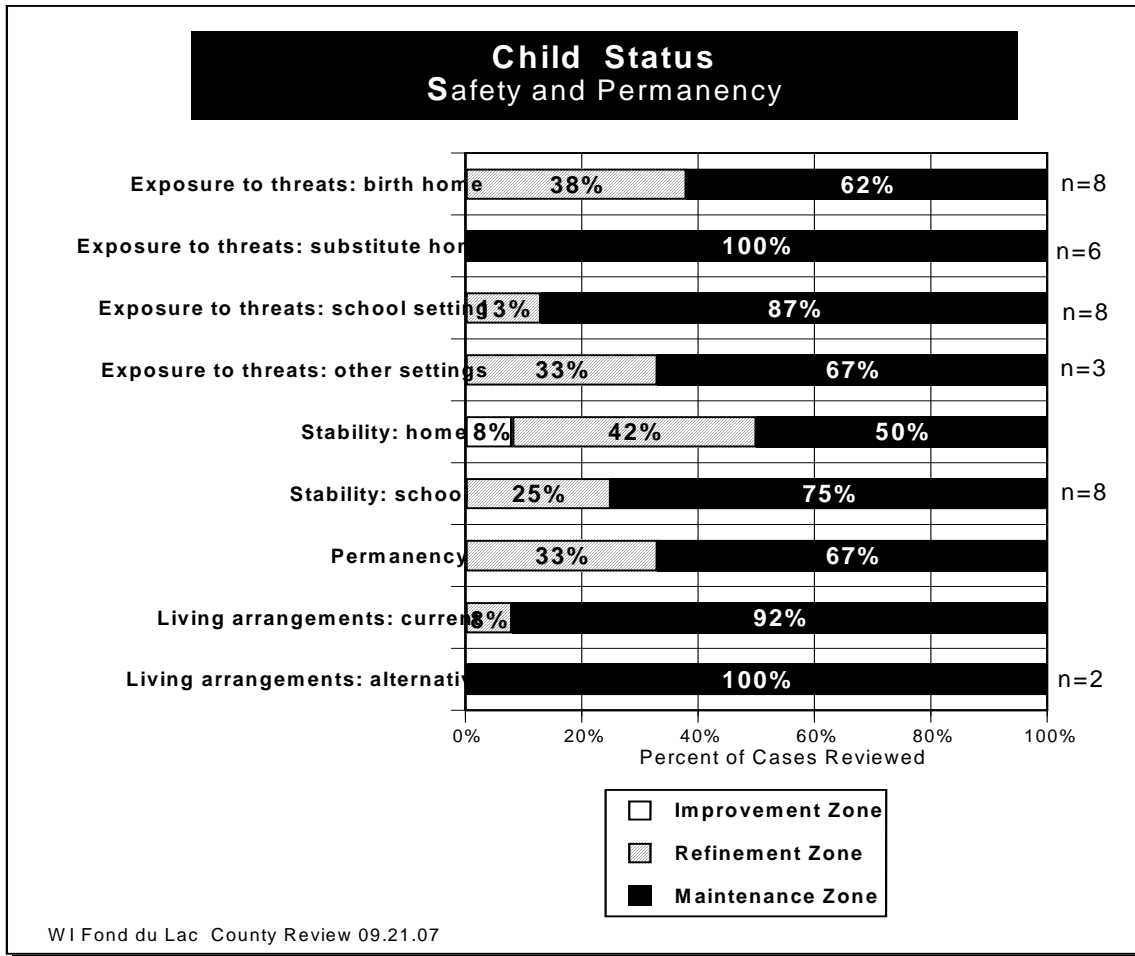
In various focus groups, participants commented that foster parents frequently do not participate or have a voice in court. The reasons for this varied. Individuals noted foster parents are not necessarily told that they can participate; however, judges often do not give foster parents the opportunity to voice comments or concerns in court. Others noted that foster parents sometimes choose not to come to hearings as they are not encouraged to do so or feel that their presence is not valued if they did choose to attend. Whatever the reason, there appears to be a lack of foster parent participation in court.

IV. CHILD AND PARENT/CAREGIVER STATUS INDICATORS

The QSR uses eight indicators to assess a child’s status and five indicators to assess parents and/or caregivers. The QSR Interpretative Guide (below) provides definitions to understand the scoring system. The results for the 13 indicators are presented in aggregate and graphic format on the following pages and measure the child and parent/caregiver status in the 180 days prior to the review.

QSR Interpretative Guide for Child Status		
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p style="text-align: center;">Maintenance Zone: 5-6</p> <p>Status is favorable. Efforts should be made to maintain and build upon a positive situation.</p> </div>	<p>6 = OPTIMAL STATUS. The best or most favorable status presently attainable for this child in this area [taking age and ability into account]. Child is doing great! Confidence is high that long-term goals or expectations will be met in this area.</p> <p>5 = GOOD STATUS. Substantially and dependably positive status for the child in this area, with an ongoing positive pattern. This status level is consistent with attainment of long-term goals in this area. Status is “looking good” and likely to continue.</p>	<div style="border: 1px solid black; padding: 10px; background-color: #f0f0f0;"> <p style="text-align: center;">Acceptable Range: 4-6</p> </div>
<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p style="text-align: center;">Refinement Zone: 3-4</p> <p>Status is minimal or marginal, maybe unstable. Further efforts are necessary to refine the situation.</p> </div>	<p>4 = FAIR STATUS. Status is minimally or temporarily sufficient for the child to meet short-term objectives in this area. Status is minimally acceptable at this point in time, but may be short-term due to changing circumstance, requiring change soon.</p> <hr style="border-top: 1px dashed #ccc;"/> <p>3 = MARGINAL STATUS. Status is marginal/mixed, not quite sufficient to meet the child’s short-term objectives now in this area. Not quite enough for the child to be successful. Risks may be uncertain.</p>	
<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">Improvement Zone: 1-2</p> <p>Status is now problematic or risky. Quick action should be taken to improve the situation.</p> </div>	<p>2 = POOR STATUS. Status has been and continues to be poor and unacceptable. The child seems to be “stuck” or “lost” and is not improving. Risks may be mild to moderate.</p> <p>1 = ADVERSE STATUS. Child status in this area is poor and getting worse. Risks of harm, restriction, exclusion, regression, and/or other adverse outcomes are substantial and increasing.</p>	<div style="border: 1px solid black; padding: 10px; background-color: black; color: white;"> <p style="text-align: center;">Unacceptable Range: 1-3</p> </div>

Note: n = (x) next to a bar in a graph signifies the number of cases meeting the specified criteria for the measurement. For some indicators, not all cases in the sample are scored.



Exposure to Imminent Threats of Harm: To what degree is the child free of abuse, neglect, and exploitation by others in his/her place of residence and other daily settings? Is the child free from injury caused by others in his/her daily home, school, and community settings? Do parents and caregivers provide the attention, actions, and supports necessary to protect the child from known threats of harm in the home?

Comments:

The scores for this indicator demonstrate that the children in substitute care appear to be free from the exposure of harm that may cause maltreatment. All children in an out-of-home placement scored in the maintenance zone, while sixty-two percent of children residing with a biological parent(s) scored in the maintenance zone. Thirty-eight percent of the children scored in the refinement zone which indicates some area of concern for children's exposure to possible imminent threats in the biological home. As one reviewer noted, "Exposure to threats of harm in her home and stability in the home are areas that need continued refinement. Her mother continues to deny that she is a 'child abuser' and has every right to 'smack [focus child] when she gets in her face'." These outbursts between Mother and [focus child] have led to brief periods of respite, threats of suicide, and runaway behaviors."

Stability: To what degree are the child’s daily living, learning, and work arrangements stable and free from risk of disruption? Are the child’s daily settings, routines, and relationships consistent? Are known risks being managed to achieve stability and reduce the probability of future disruption?

Comments:

This indicator is assessing the child's stability in the home and school over the previous twelve months along with predicting the child's stability in the home and school over the next six months. The children in Fond du Lac County scored slightly higher in stability in the school setting at seventy-five percent in the maintenance zone and twenty-five percent in the refinement zone, then the first 17 counties that participated in a QSR. On average, they scored sixty-seven percent in the maintenance zone, thirty-two percent in the refinement zone and one percent in the improvement zone for school settings.

Children's stability in their home setting, whether out of home or with biological parent, scored fifty percent in the maintenance zone, forty-two percent in the refinement zone and eight percent in the improvement zone. In one case reviewed that scored in the maintenance zone, "...the focus child has had good stability remaining in the continuous care of his father. His current family situation provides him with a sense of belonging, social connection, and age-appropriate activities." While another case reviewed scored in the refinement zone; a case revealed, "The child has a history of instability in his living arrangements including multiple placements, many which were unplanned. Although the focus child and his parents are motivated and hopeful that his current living arrangement will be sustained, it's too early to say with certainty that this will be stable for him." This child also scored in refinement for school stability.

Permanency: Is the child/youth living with parents or out-of-home caregivers that the child, parents or out-of-home caregivers, and other stakeholders believe will sustain until the child reaches adulthood and continue onward to provide family connections and supports? If not, to what degree are permanency efforts presently increasing the likelihood that the child/youth soon will be enveloped in enduring relationships that provide a sense of family, stability, and belonging?

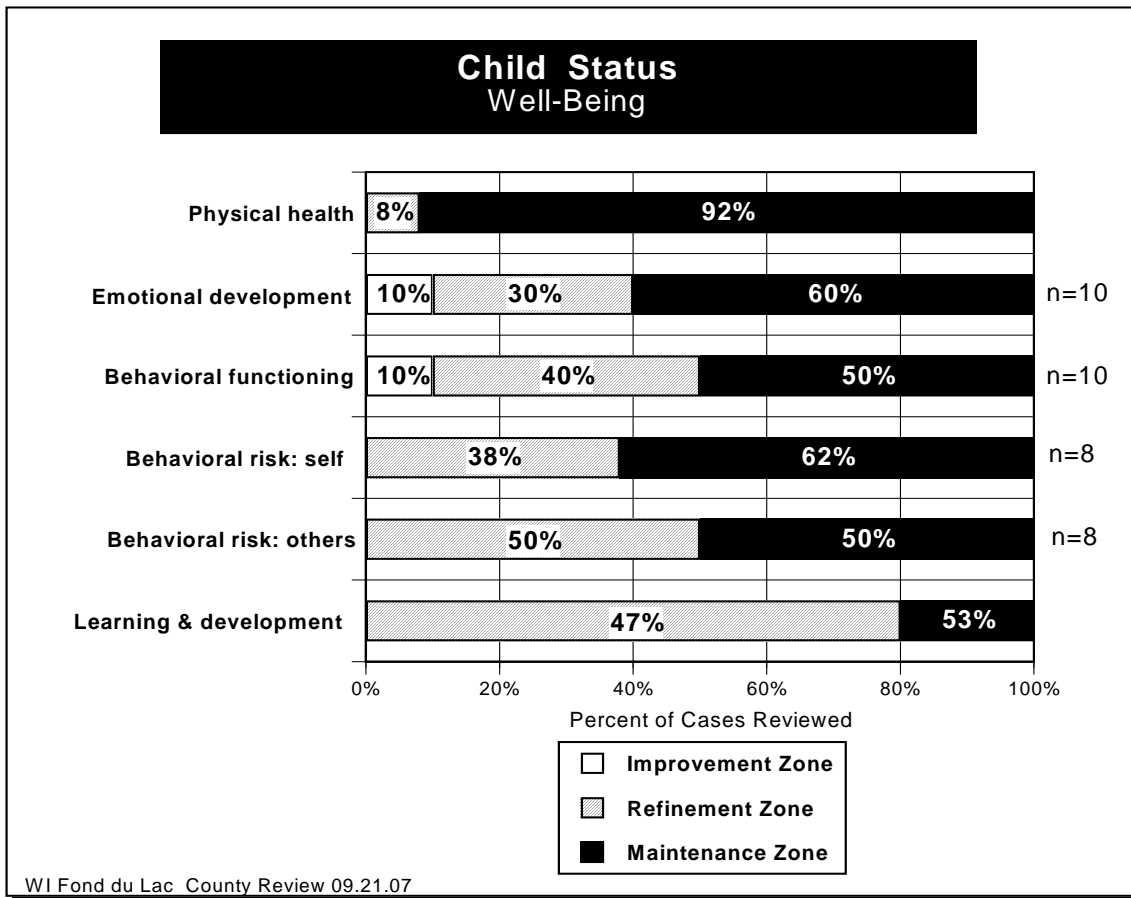
Comments:

Permanency is assessed for all children, whether in out-of-home placement or residing in the biological home. The permanency indicator is critical for all children in that it is assessing how effective the efforts are in achieving and sustaining a permanent placement for the child following safe case closure. DSS scored sixty-seven percent in the maintenance zone and thirty-three percent in the refinement zone. These are higher scores than the first 17 counties reviewed in Wisconsin, which scored thirty-five percent in the maintenance zone, fifty-six percent in the refinement zone and nine percent in improvement zone. It should be noted that five of the cases that scored in the maintenance zone, the children are residing in the parental home, and no foreseen disruptions were expected in the future. Two were seen has achieving permanency under guardianship and sustaining care.

Living Arrangement: To what degree is the child in the most appropriate/least restrictive living arrangement, consistent with needs for family relationships, social connections, age, ability, special needs, and positive peer group affiliation? If the child is in temporary out-of-home care, does the living arrangement meet the child’s needs to be connected to his or her language and culture, community, faith, extended family, tribe, social activities, and peer group?

Comments:

This indicator is assessing the child's current living arrangement. It is in the child's best interest for his/her living arrangement to not only provide for his/her physical, emotional, medical, education needs appropriately, but also to maintain family and community connections along with continuing to develop their cultural identity. Ninety-two percent of Fond du Lac County's children scored in the maintenance zone while only eight percent scored in the refinement zone. These results demonstrate that Fond du Lac County's children are residing in the least restrictive and most appropriate environment.



Physical Health: To what degree is the child achieving and maintaining his/her optimum health status? If the child has a serious or chronic physical illness, is the child achieving his/her best attainable health status given the disease diagnosis and prognosis?

Comments:

Fond du Lac children in the review sample scored slightly higher than the first 17 counties reviewed in Wisconsin. Ninety-two percent of cases were in the maintenance zone for Fond du Lac County and eighty-six percent for the first 17 counties reviewed in Wisconsin. This is an area that Wisconsin as a state overall scored well and is a strength in Fond du Lac County. As one case reviewer shared, "The focus child's physical health is very good. He is current on his immunizations, he has routine physicals and has no current medical issues. He is not prescribed any medication. The focus child appears small for his age; this observation has not elicited concern or action from his doctor and is regarded as nothing to be concerned about. "

Emotional Development: To what degree is the child presenting age-appropriate emotional development, adjustment, appropriate coping skills, and self-control?**Comments:**

Sixty percent of cases scored in the maintenance zone, thirty percent in the refinement zone, and ten percent in the improvement zone. These scores revealed an area of exploration for DSS. The scores support themes revealed in focus groups regarding the need for mental health services for children, not only outpatient but inpatient mental health services. The community lacks the capacity to provide timely and local mental health services for children. In a case reviewed, the child experienced placements under his delinquency order at a psychiatric hospital and two residential treatment facilities, all outside of Fond du Lac County. The child's combined total months in out of county placements were 16 out of the last 24 months. For the children in the review, twenty-five percent had a mental illness diagnosed and fifty-eight percent experienced or were exposed to trauma.

Behavioral Functioning: To what degree is the child achieving and maintaining an adequate level of behavioral functioning in daily settings, activities, and social groups?**Comments:**

Fifty percent of the children were in the maintenance zone, forty percent fell into the refinement zone and ten percent in the improvement zone. The children that scored in the refinement zone for behavioral functioning also scored in the refinement zone for emotional development and behavioral risk to self and others. Twenty-five percent of the children in the review have a behavior disorder diagnoses. One case reviewed, the child is diagnosed with Attention Deficit Hyperactivity Disorder and Bipolar. A reviewer wrote, "Behavioral functioning was an area that was rated as needing refinement. It is too early to tell how the focus child will do in this area. He has a history of "stuffing" his feelings only to "blow up" at a later point. Given this tendency, along with his serious disposition and mature attitude, it may be difficult for persons to recognize when he is struggling or needing a break. It will be important for the focus child to be able to recognize his internal cues and respond accordingly. He has been practicing different ways to manage and express his feelings at the treatment facility; now he'll need to use

these skills in his new environments. It's too early to tell if this will go well or need further modification."

Behavioral Risk: To what degree is the child/youth consistently avoiding self-endangerment situations and refraining from using behaviors that may put him/herself or others at risk of harm?

Comments:

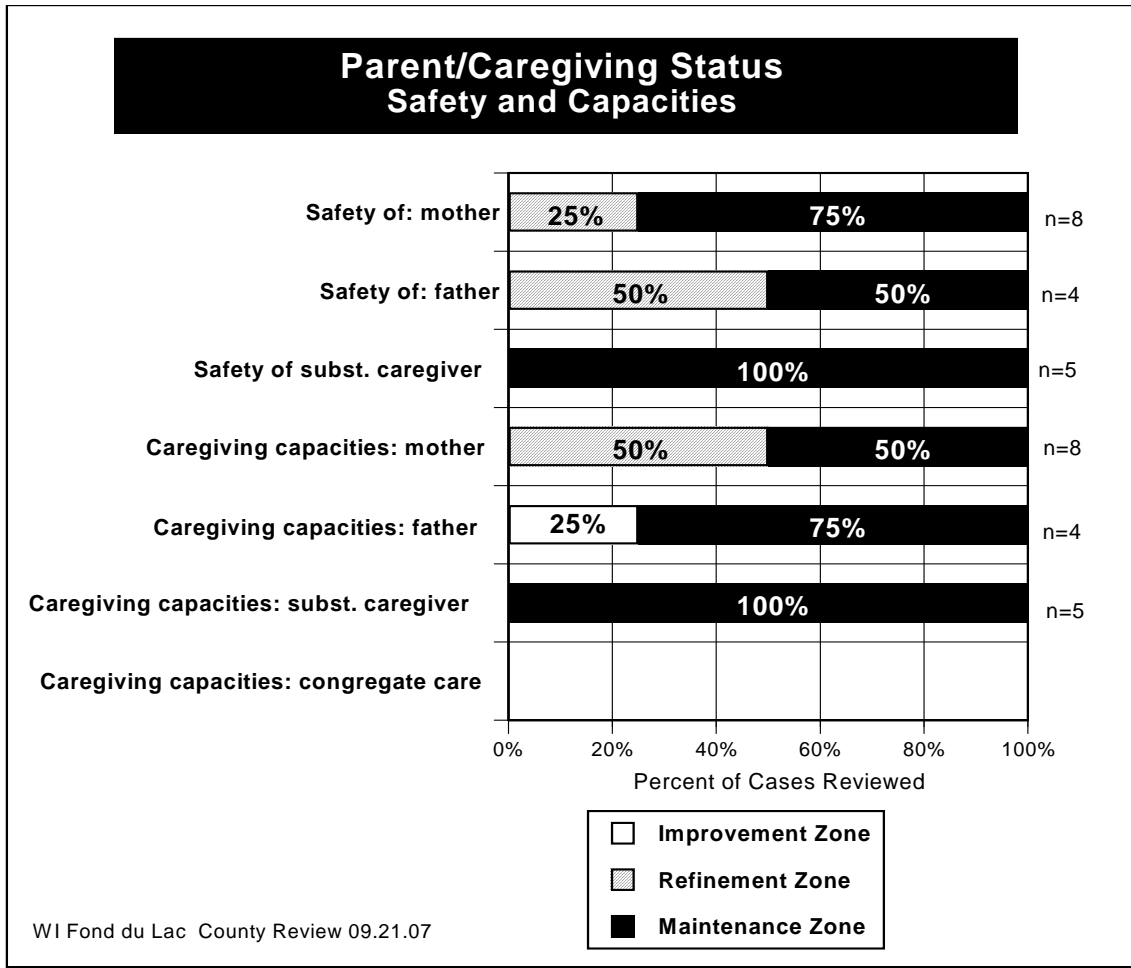
Only eight out of the twelve children were rated for this indicator which is assessing the child's risk of harm to themselves and risk of harm to others. Fifty percent of the children scored in both the maintenance zone and in the refinement zone as it relates to the risk the children pose to others. These scores are slightly different than from the risk to children pose to themselves. Sixty-two in the maintenance zone and thirty-eight percent in the refinement zone. A reviewer wrote of a child that scored in the refinement zone for behavioral risk to self and others that "All those interviewed agreed that the difficult areas for [the focus child] are her emotional and behavioral responses. Generally, [the focus child] is pleasant and cheerful. She has friends and enjoys typical activities with them such as movies and dances. However, approximately once per month, she has explosive episodes with her mother. She has cut herself, threatened suicide, and threatened to run away. She has thrown things and gotten into physical altercations with her younger brother."

Early Learning & Development (Under Age 5): To what degree is the young child's developmental status commensurate with his/her age and developmental capacities? Is the child's developmental status in key domains consistent with age-appropriate expectations?

Learning and Development (Age 5 and Older): Is the child (according to age and ability): 1) regularly attending school; 2) in a grade level consistent with age; 3) actively engaged in instructional activities; 4) reading at grade level or Individual Educational Plan (IEP) expectation; and 5) meeting requirements for annual promotion and course completion leading to a high school diploma or equivalent?

Comments:

Forty-seven percent cases reviewed scored in the refinement zone and fifty-three in the maintenance zone. Fond du Lac County had a lower percentage of cases scored in the maintenance zone and a higher percentage of cases falling in the refinement zone than the first 17 counties reviewed in Wisconsin. However, the county had no cases that scored in the improvement zone, where the first 17 counties had four percent scored in the improvement zone. Reading level was applicable for seven of the twelve children in the review. Three children were reading at assigned grade level; where two children were one level above their assigned grade level for reading and two children were one level behind.



Safety of the Parent/Caregiver: Is the parent/caregiver in the child’s household safe from manageable risk of harm at home? Is the parent/caregiver free from intimidations and reasonable fears of domestic violence in the home?

Comments:

The mothers scored seventy-five percent in the maintenance zone and twenty-five percent in the refinement zone. Safety of the fathers was split between the maintenance and refinement zones with only four of the twelve fathers scored for this indicator. Several fathers were not rated in accordance with the scoring protocol because they were absent (or not involved), do not have unsupervised interaction with the focus child, or there is not a goal of reunification. Parental rights had been terminated in one case. Substitute caregivers were assessed to be one hundred percent in the maintenance zone, supporting statements in focus groups that Fond du Lac County children are being cared for by quality foster homes.

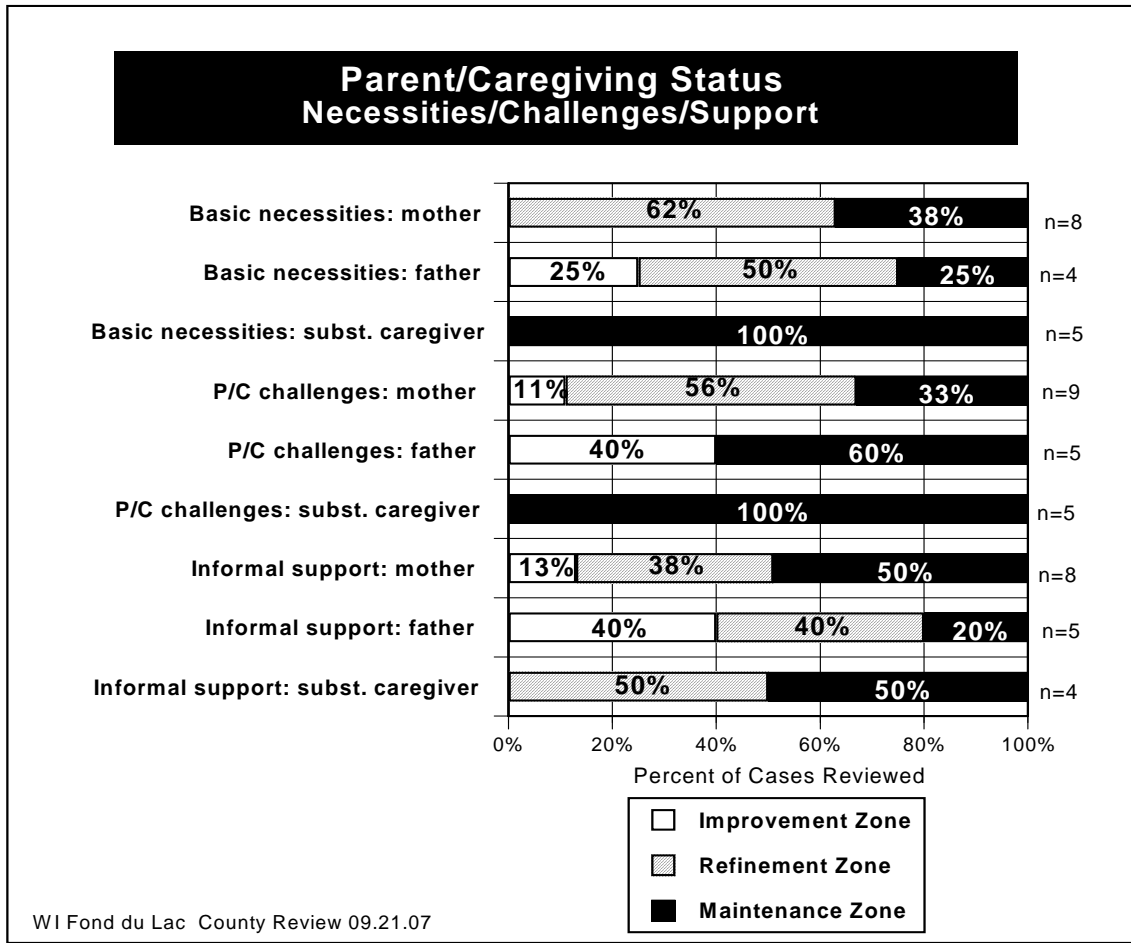
Caregiving Capacities (Home Settings): To what degree does the parent/caregiver demonstrate adequate caregiving capacities on a reliable daily basis commensurate with that required to provide the child(ren) with appropriate nurturance, guidance, protection, care, and supervision? If the child(ren) have special medical, emotional, behavioral, and/or developmental needs, does the caregiver have and use any special knowledge, skills, and supports that may be required to meet the needs of the child(ren)?

Caregiving Capacities (Congregate Settings): To what degree are the child's/youth's primary caregivers in the group home or facility supporting the education, development, and independence of the child/youth adequately on a consistent daily basis (as appropriate to age and need)?

Comments:

Mothers' scores were split in the maintenance and refinement zones. Seventy-five percent of fathers scored in the maintenance zone and twenty-five percent in the improvement zone. As previously stated, the parent(s) with a child whose permanency plan is reunification or unsupervised visitations were rated. The mothers and fathers who both scored in the maintenance zone were families that resided together and shared parenting responsibilities. One single mother scored in the maintenance zone. While the remaining mothers, who are parenting independent, scored in the refinement zone indicating need for additional support in daily nurturance, guidance, protection, care, and supervision of their child. Substitute caregivers all scored in the maintenance zone. The reviewers rated foster mother and father's parenting capacities in the maintain zone. "They have done an exceptional job in the raising of their five special needs adopted children plus [focus child] and her sister. They provide needed structure, consistent and appropriate discipline, love, and support to [focus child]."

There were no children in the congregate setting.



Basic Necessities: To what degree are the family’s earned income and/or economic supports adequate to cover the family’s basic living requirements (i.e., shelter, food, clothing, transportation, health care/medicine, childcare)? Is the parent/caregiver accessing, receiving, and adequately managing the economic supports to which he/she is entitled? Does the parent/caregiver have economic security and skills sufficient for meeting the family’s basic needs and maintaining a stable living arrangement for the children? Does the current living arrangement provide the family with adequate space and living conditions?

Comments:

Sixty-two percent of mothers' scored in the refinement zone and thirty-eight in the maintenance zone. The fathers' scored twenty-five percent in the improvement zone, fifty percent in the refinement zone and twenty-five percent in the maintenance zone. All substitute caregivers' scored in the maintenance zone.

In two cases reviewed, either the parent currently receives disability or did at one time. Also, parents that fell in the refinement zone were in low paying jobs and had mounting bills for serious, ongoing health concerns, legal representation or repayment of kinship payments. Families in Fond du Lac County were accessing financial support and aid. However, the long term availability of this support was in question. Specifically, for one

case reviewed, if the unemployed teen parent missed one more day of school she would lose her "grant and transportation". If this was lost, the mother in the end would lose the means to pay for her apartment along with daycare. In addition, transportation for the mother is set to expire in a few weeks and she has no alternative means of transportation.

Special Parenting/Caregiving Challenges: To what degree do parents/caregivers, with whom the child is currently residing or has a goal of reunification, present or experience a pattern of significant, ongoing challenges that limit or adversely affect the parent/caregiver's capacity to function successfully as an adequate caregiver for this child? Does the family have any special life challenges that interfere with or prevent them from living together safely and functioning successfully?

Comments:

Eleven percent of the mothers and forty percent of the fathers scored in the improvement zone, fifty-six percent of the mothers scored in the refinement zone. Thirty-three percent of the mothers and sixty percent of the fathers' scored in the maintenance zone. Two of the cases that scored in the refinement zone are parents dealing with serious mental illness diagnoses along with ongoing physical health ailments. One case revealed, "For Mother, the challenges are related to her ongoing bouts with substance abuse, depression, and suicidal thoughts, all likely related to early trauma (sexual and physical abuse) and inadequate care giving and protection by her mother." Within the cases reviewed, forty-two percent of parents were diagnosed with a mental illness, fifty-eight percent facing substance abuse/addiction and either were trauma exposed or a trauma victim. Only seventeen percent of parents had no co-occurring condition identified.

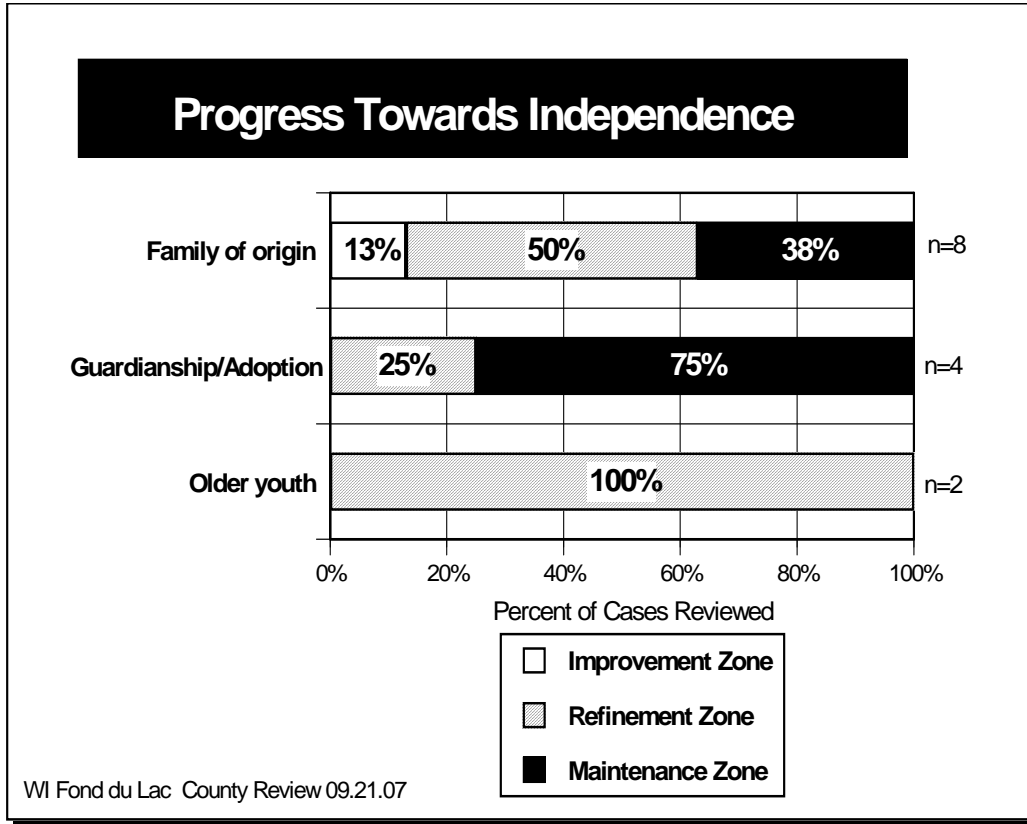
The substitute caregivers scored a hundred percent in the maintenance zone.

Informal Support System: To what degree is the family engaged with an informal support system that assists them with essential caregiving responsibilities? Do families having special needs children, recovery/relapse prevention plans, and/or family safety plans have adequate levels of informal support provided by family, friends, neighbors, or other supporters involved who will help them manage adequately on an enduring basis? When a family has a child with special needs (physical, developmental, emotional, behavioral), do parents/caregivers have opportunities to exchange experiences, strategies, and successes with parents/caregivers of similar circumstances?

Comments:

This was one area where all substitute caregivers did not score in the maintenance zone. The substitute caregivers and the mother both scored fifty percent in the maintenance zone. Thirty-eight percent of mothers scored in the refinement zone with fifty percent for the substitute caregivers. Also, fourteen percent of the mothers scored in the improvement zone. Informal supports for the fathers appears to be bleaker, forty percent scored in the improvement and refinement zone where only twenty percent scored in the maintenance zone.

V. PROGRESS INDICATORS



Progress to Independence (Family of Origin): To what degree is the family making progress toward their permanency goal of maintaining the child safely at home and/or successful reunification? As necessary to reunify/preserve the family, to what degree have: 1) protective provisions necessary for keeping children safe been established and maintained within the home; 2) necessary parent/caregiver behavior changes been made, demonstrated, and sustained; and 3) necessary and sustainable conditions and supports been established within the home and family situation (e.g., housing, childcare, income, health care)?

Comments:

Thirty-eight percent of cases scored in the maintenance zone, fifty percent in the refinement zone, and thirteen percent in the improvement zone. One child's case in the review scored in the improvement zone because the child's primary permanency goal is reunification with a concurrent goal of guardianship and placement with a fit and willing relative. The child has resided with her grandparents, who are her guardians, for the majority of her life. There has never been any substantial progress on reunification of the child by either parent. Yet, reunification remains the child's primary permanency goal. The mother has expressed in interest in voluntarily terminating her parental rights to allow the paternal grandparents to adopt the child. The father has stated that he is unable to care for the child due to responsibilities of two younger siblings and the caseworker will be approaching the father about the possibility of his parents adopting the child.

However, the QSR is looking at the case during a specific timeframe, which guides the reviewers to score the case in the improvement zone.

Progress to Permanency (Guardianship/Adoption): To what degree is the child living in an environment that supports achievement of permanency through guardianship or adoption? Has the permanent family been identified? To what extent has this child and family: 1) accepted new members and formed realistic expectations; 2) moved through family formation and adaptation stages with necessary adjustments made, demonstrated, and sustained; 3) established sustainable conditions and supports within the home and family situation (e.g., childcare, health care, respite, crisis support, in-home assistance) necessary to meet any special care requirements that the adoptive child presents in the home and family situation?

Comments:

Twenty-five percent of cases scored are in the refinement zone and seventy-five percent are in the maintenance zone. The case that scored in the improvement zone has no timeline established in regards to filing the TPR petition. The caseworker submitted the request in late 2006 and it has yet to be filed due to legal concerns raised about the adjudication and location of the child's father. While it is critical in ensuring that all avenues to explore a permanency option with the child's father are exhausted, it is equally as important and in the best interest of this child to achieve permanency as quickly as possible. The child is beyond Adoption and Safe Families Act (ASFA) requirements and there is no timeline or plan in place on how to engage and work with the father who is incarcerated.

Progress to Independence (Older Youth): To what degree has the youth been making progress toward living safely and functioning successfully independent of agency services over the past six months? Is the youth demonstrating a developing ability to live safely and function successfully without outside supervision, assuming that any necessary supports continue after reaching the age of majority? Is the youth developing long-term connections that will support him/her into adulthood?

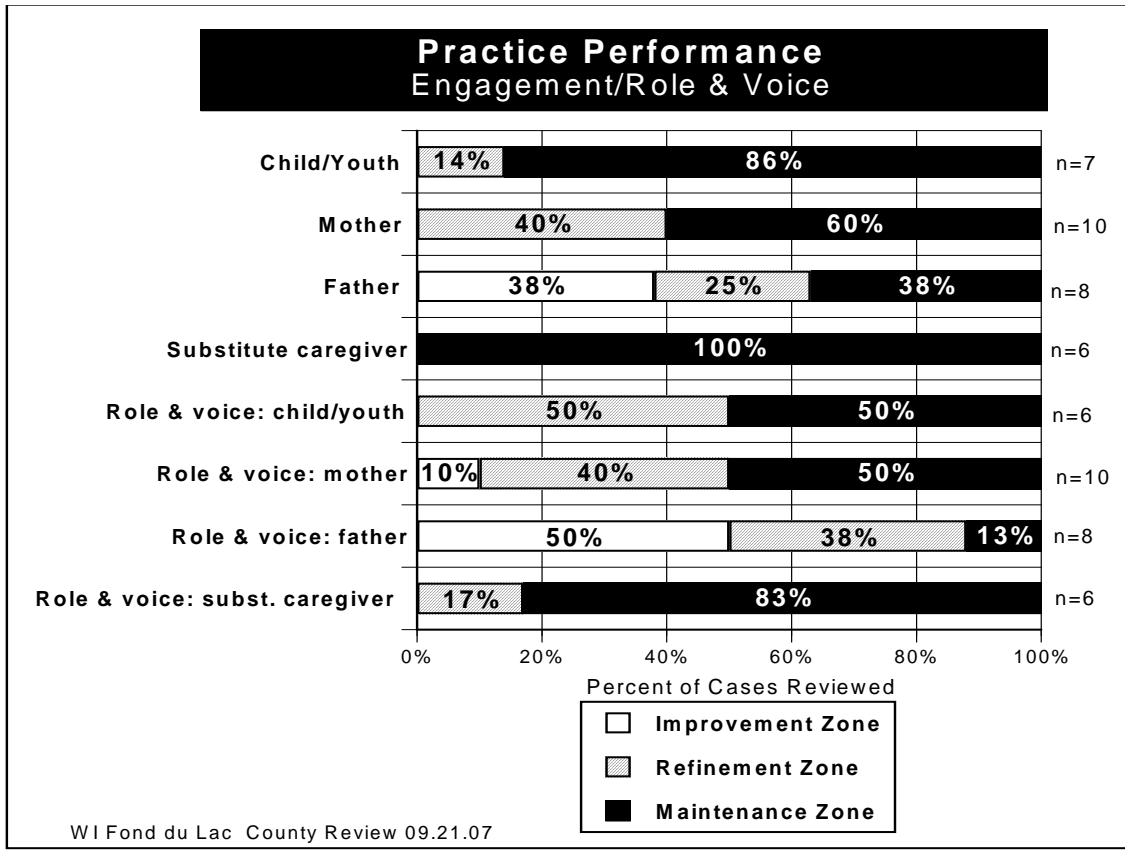
Comments:

The two youth who were scored for this indicator are in the refinement zone. In one case, the youth resides in the parental home and is not expected to do any tasks around the household, which is limiting the opportunities to learn independent living skills. The second case is a 16-year old youth residing in a treatment foster home, whose main goal is to live on her own. However, there is no understanding on the youth's part of what is needed for this to successfully occur. Also, that development of the case plan as it relates to independent living must be incorporated with the youth's IEP team. Based off history, there are concerns regarding the youth's decision making skills which will directly impact her future. Currently, the youth is behind in credits in order to graduate on time.

VI. THE ELEMENTS OF CASE PRACTICE (THE MICRO VIEW)

The Quality Service Review (QSR) case practice model contains evidence based elements of best practice. The elements are found in the QSR protocol and were applied in rating the twelve cases that were reviewed. There is an ample body of research that documents the efficacy and contribution in helping families develop, pursue, and complete successful strategies of change. The scores on practice performance are presented to point out strengths in case practice that should be maintained, as well as opportunities where the agency can focus efforts in improving outcomes for children and families served.

QSR Interpretative Guide for Practice Indicator Ratings		
<p>Maintenance Zone: 5-6</p> <p>Performance is effective. Efforts should be made to maintain and build upon a positive practice situation.</p>	<p>6 = OPTIMAL PERFORMANCE. <u>Excellent, consistent, effective practice</u> for this person in this function area. This level of performance is indicative of <u>exemplary practice and results</u> for the person. [6 month sustained pattern]</p> <p>5 = GOOD PERFORMANCE. At this level, the system function is <u>working dependably</u> for this person, <u>under changing conditions and over time.</u> Effectiveness level is <u>consistent with meeting long-term needs and goals</u> for the person. [3 month sustained pattern]</p>	<p>Acceptable Range: 4-6</p>
<p>Refinement Zone: 3-4</p> <p>Performance is minimal or marginal and maybe changing. Further efforts are necessary to refine the practice situation.</p>	<p>4 = FAIR PERFORMANCE. This level of performance is <u>minimally or temporarily sufficient to meet short-term need or objectives.</u> Performance may be time-limited, somewhat variable, or require adjustment soon due to changing circumstances. [1 month continuing pattern. Some refinement is indicated]</p> <p>-----</p> <p>3 = MARGINAL PERFORMANCE. Practice at this level may be <u>under-powered, inconsistent or not well-matched to need.</u> Performance is <u>insufficient for the person to meet short-term needs or objectives.</u> [With refinement, this could become acceptable in the near future.]</p>	
<p>Improvement Zone: 1-2</p> <p>Performance is inadequate. Quick action should be taken to improve practice now.</p>	<p>2 = POOR PERFORMANCE. Practice at this level is <u>fragmented, inconsistent, lacking necessary intensity or off-target.</u> Elements of practice may be noted, but it is <u>incomplete/not operative on a consistent basis.</u></p> <p>1 = ADVERSE PERFORMANCE. Practice may be <u>absent or not operative.</u> Performance may be <u>missing (not done).</u> - OR - Practice strategies, if occurring in this area, may be <u>contra-indicated or may be performed inappropriately or harmfully.</u></p>	<p>Unacceptable Range: 1-3</p>



ENGAGEMENT OF CHILD & FAMILY: Are those interveners involved with the family using engagement strategies, including special accommodations with any difficult-to-reach family members, to increase family engagement and participation in the service process? Are interveners building a trust-based working relationship with the child, family, and/or others to support ongoing assessment, understanding, and service decisions? Are interveners relying on a mutually beneficial partnership with the child, family, and/or others that is sustaining their interest in and commitment to the change process?

Comments:

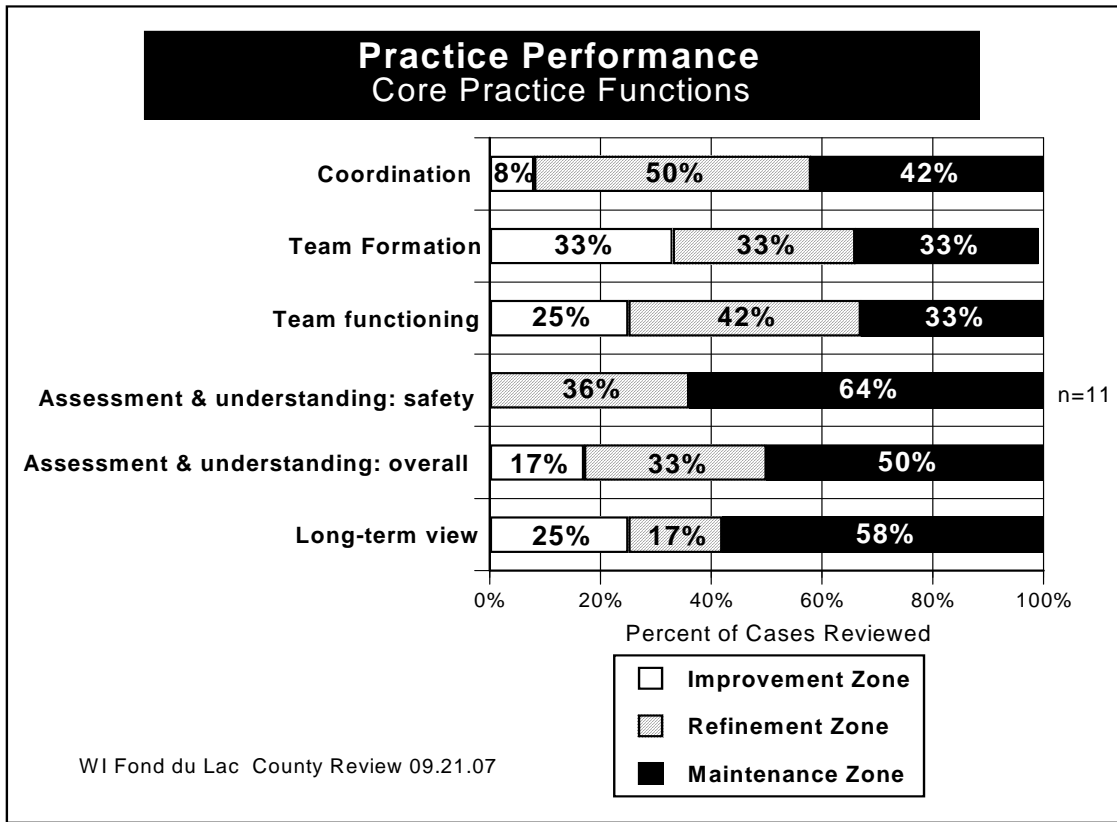
All substitute caregivers fell in the maintenance zone. Eighty-six percent of children scored in the maintenance zone. Of the cases reviewed, forty-percent of the mothers and twenty-five percent of fathers are in the refinement zone and and thirty-eight percent of fathers are in the improvement zone. A core principle of the QSR is engagement. This is seen as a critical piece in successfully working with families. Engagement is building a trusting collaborative relationship with families in order to promote behavioral changes in a nonthreatening manner. As one case demonstrated that for a mother “...the worker’s overall supportive and non-judgmental stance has helped her continue to try to make more positive choices” and “Effective engagement has contributed to increasing trust and improving Mother’s capacity to take more ownership in decision-making, as evidenced by her choice to have a female outpatient therapist.”

ROLE & VOICE IN DECISIONS: To what degree are the child’s parents significant, ongoing participants (e.g. having a significant role, voice, influence) in decisions made about child/family change strategies, services, supports, and results? (Role and voice in recent meetings).

Comments:

There was one family that the child, mother and father all scored in the maintenance zone. “They described the communication as open and felt that they play a large role in shaping decisions and overall planning.” and “The reviewers noticed how the caseworkers allowed the family to take a major lead in the case while stepping in to provide structure, guidance, resources and ensure safety. The biological mother in particular is a strong advocate who is willing to ask for what her son or family needs. Her ‘role and voice’ were important in shaping decisions around the discharge from Lad Lake, schooling, therapy and other resources.” In the maintenance zone, children and mothers scored fifty percent, and fathers scored thirteen percent. While substitute caregivers scored eighty-three percent in the maintenance zone and seventeen percent in the refinement zone. Children scored fifty percent in the refinement zone where forty percent of mothers fell in the refinement zone and fifty percent of fathers are in the improvement zone.

Quite a few of the fathers in this review had limited to no contact with the family prior to Child Protection Services (CPS) involvement and their whereabouts were unknown, which creates difficulty in facilitating a relationship that allows for the paternal side of the child’s family to participate in planning. Also, if the parent was incarcerated, this created another barrier in engagement and communication between the worker and family. One case reviewer explained that once the mother became incarcerated, the mother’s role and voice appeared to be forgotten. “...Reviewers felt she was in many ways dropped as a client and had a ‘missing or silent role,’ despite there still being a concurrent goal of reunification up until May 2007.”



COORDINATION: To what degree are there: A single point of coordination and leadership necessary for convening and facilitating effective family change planning and service decision processes for this child and family? Effective coordination, integration, and continuity in the assessment, planning, organization, and provision of services to this child and family?

Comments:

This indicator looks at if there is a plan in place that demonstrates cohesive efforts across all of the individuals involved with the family, including county staff, service providers, school personnel, family members, and others. Although the lead communicator or single point-of-coordination can be anyone, it frequently is the county caseworker who guides service coordination as demonstrated in one case where “The social worker is doing an outstanding job in leading and coordinating services, as everyone knew who was the single point of contact was for this case. The social worker is very thorough and inclusive; she has formed a [family] team that meets regularly to check status, progress, and resolve issues.” Coordination scored in the maintenance zone for this case.

Forty-two percent of the cases scored in the maintenance zone, fifty percent in the refinement zone and four percent in the improvement zone. These scores were very similar to the outcomes in the first 17 counties reviewed in Wisconsin, where forty-six percent of cases were in the maintenance zone, fifty percent in the refinement zone and four percent in the improvement zone. Overall, effective coordination often relies on shared decision making and a unified communication process, which is enhanced through

a teaming process. Therefore, not surprisingly in the cases where coordination was scored as an area for improvement, team formation and functioning scored similarly.

TEAM FORMATION: To what degree: (1) Have the people who provide support and services for this child and family formed a working team that meets, talks, and plans together? (2) Does the team have the skills, family knowledge, and abilities necessary to organize effective services for a child and family of this complexity and cultural background?

TEAM FUNCTIONING: To what degree: (1) Do members of the family team collectively function as a unified team in planning services and evaluating results? (2) Do actions of the family team reflect a coherent pattern of effective teamwork and collaborative problem solving that benefits the child and family?

Comments:

The mixed results from this indicator demonstrate that this is an area of development for DSS. Teaming is a core principle and value of the QSR case practice model. When there is strong team formation and functioning, other areas of practices are enhanced such as assessment, planning, tracking and adjustment. Effective teaming improves outcomes for children and families. Formation is asking if all key participants in the family's life are present at the team, this would be formal and informal supports. Functioning is inquiring if the team operates together; is there a shared big picture understanding of the goals, strengths, needs of the family and the strategies in place. The team, not just the caseworker, are assessing, planning, tracking and adjusting as needed to assist the family in achieving desired outcomes.

One case demonstrates how an ineffective team formation and functioning can lead to miscommunication and undesired outcomes. A reviewer wrote, "Some members of the team are in good communication with each other and keep each other updated. However, there has not been an attempt to meet with all members of the team to establish goals, evaluate, and plan. Members such as police, school, relatives, father, and stepfather could be helpful additions to the team. For example, the police are part of the safety plan, yet they do not respond in the manner expected by the agency or Mother, when called. In addition, some relatives support Mother's authority with [focus child] and others do not. An example may be [focus child] who is grounded, goes to grandparents, and really gets to do whatever she wants."

Team formation and functioning for this case is poor because key people are missing from the group. In addition, there is no communication between everyone in obtaining input and agreements. The police are included in the safety plan yet are not at the table or contacted in the planning of the safety plan. The grandparents are accessed for support when needed and are not included in the planning. Yet, the expectation is that the grandparents will follow rules and guidelines for the focus child.

Another case reviewed has a team established. However, the scores suffered because the functioning was lacking. A reviewer wrote, "A team is formed and meets quarterly to

update and report on progress. However, the team does not meet regularly to plan, evaluate, and adapt. In addition, a school personnel does not appear to be engaged in the team process. The foster mother is concerned that the school and the home do not apply the same consequences for misbehavior.”

DSS’ scores in formation were thirty-three percent of cases were in the maintenance zone, fifty percent in the refinement zone and eight percent in the improvement zone. Scoring for functioning was similar in that thirty-three percent of cases scored in the maintenance zone. Forty-two percent of cases scored in the refinement zone and twenty-five percent in the improvement zone.

ASSESSMENT & UNDERSTANDING - SAFETY: To what degree: Is there a shared big picture understanding of the child and family’s strengths, needs, risks, and diminished parent/caregiver protective capacities that must change to assure child safety? Are these understandings reflected in the process used for helping the family achieve a safe home (via protective provisions in the home, demonstrated parent/caregiver protective capacities, and sustainable family supports)?

Comments:

Assessing and understanding safety is one of the primary tasks for CPS agencies. DSS is doing well in this area with the majority of the cases reviewed falling in the maintenance zone." One case reviewed highlights the challenges in assessing and developing an effective, comprehensive safety plan. There needs to be a clear understanding of the family’s strengths, needs and what strategies the family will access to control for safety. The reviewer wrote, "It also appears that some key information may be missing in the family assessment and understanding. [The focus child] continues to exhibit uncontrollable behavior and Mother continues to ignore the safety plan and assistance of service providers. Until the most recent allegation, Mother was quite adamant that she uses correct discipline. She had not acknowledged her role as a safety threat to [the focus child]." This indicator provides a foundation to continue to building on. Sixty-four percent of the cases were in the maintenance zone and thirty-six percent scored in the refinement zone.

One case revealed solid assessment and understanding of safety when there is a good understanding of safety throughout the team and this knowledge is used to guide other aspects of the case such as visitations. “Safety threats in this case have been assessed and are understood and being addressed. The lack of good decisions on the part of both the mother and [the focus child] are known by all involved in the case. The social worker and other providers are aware of how the mother’s parenting issues impact on visitation and concern for child safety.”

ASSESSMENT & UNDERSTANDING - OVERALL: To what degree: Is there a shared big picture understanding of the child and family's strengths, needs, risks, and underlying issues that must change for the child and family of origin or adoptive family to live independent of agency supervision? Are these

understandings reflected in the family change process used for helping the family achieve permanency and well-being (via demonstrated parental behavior changes, sustainable family supports, and concurrent alternatives pursued for achieving permanency with another family, if necessary)?

Comments:

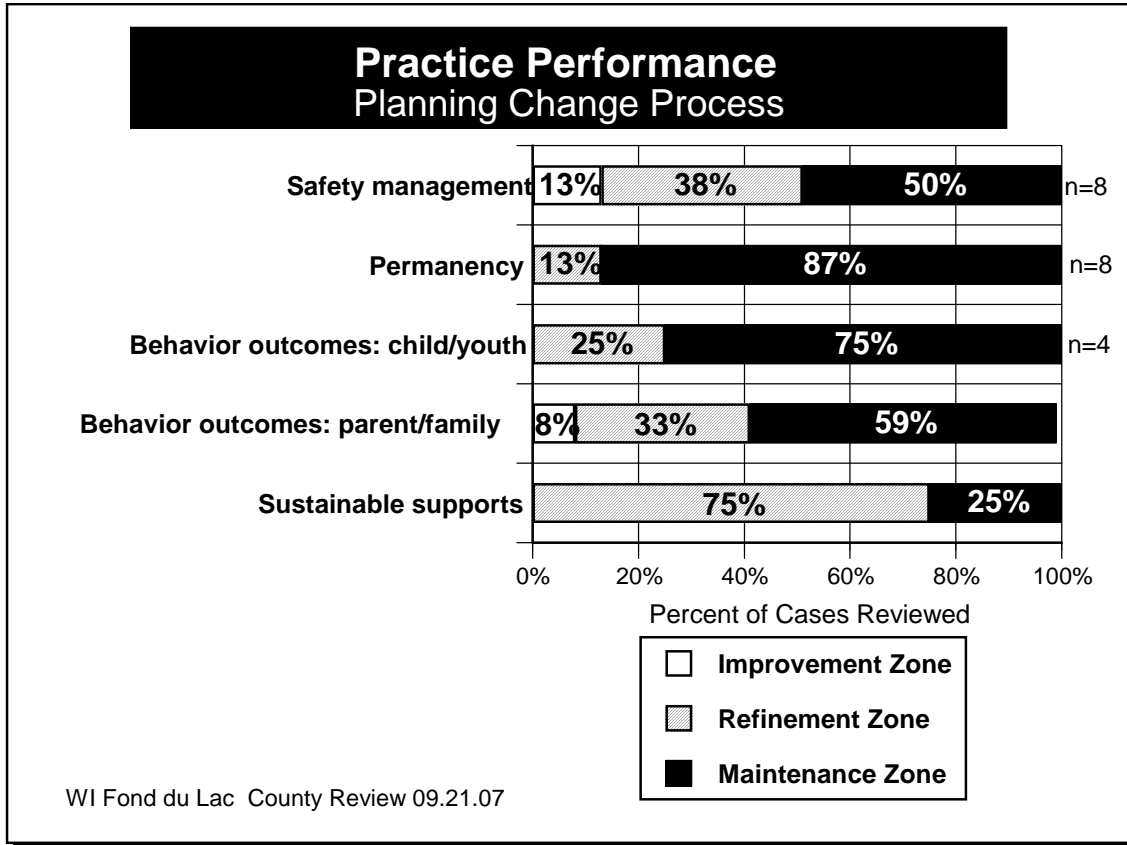
Fifty percent of cases scored in the maintenance zone, thirty-three percent in the refinement zone and seventeen percent in the improvement zone. It is critical when working with children and parents to complete a comprehensive assessment of the family strengths and underlying needs. Families are dealing with numerous external and internal challenges that greatly impact their daily functioning. The family team needs to have a clear understanding of the family's underlying needs to implement the most appropriate, least intrusive intervention to sustain behavioral changes. Otherwise, incorrect strategies are implemented and as in a case reviewed, there is no understanding of what is causing the problematic behaviors. "It appeared that some of the information was there, but it was not linked together in a manner that made sense and provided 'the big picture.' For example, it seemed unknown as to why the focus child was so angry in the first place, what was driving the aggressive behaviors, and how alcohol and other drug use tied in. The focus child has had a history of traumatic loss in his life; about five years ago a friend of his committed suicide and another friend was murdered. It's unclear how or to what extent these losses affected the focus child."

LONG-TERM VIEW FOR SAFE CASE CLOSURE: To what degree are there defined, understood, and agreed-upon conditions for Safe Case Closure that specify what: Protective provisions must be present in the home to keep children and parents safe? Permanency issues must be resolved and outcomes attained? Behavioral patterns must be demonstrated and sustained in the home by the parent? Sustainable conditions and supports must be present in the home and family situation to preserve the family, reunify the family, support the adoptive family or youth while transitioning to independent living so that external supervision may be safely concluded with the family or youth being independent of the system?

Comments:

The scores from this indicator suggest DSS has a good foundation to build on improving this area of practice. Identification of what needs to be present in a family in order to achieve safe closure early on increases the likelihood of achieving those outcomes. A case which scored in the high maintenance zone in long-term planning had early on identified reunification as the goal. A teaming model was implemented in planning, assessing, tracking, and adjusting for the case. Team members were all on the same page as it relates to the goal and what specific behavioral changes needed to be sustained to move to safe case closure. The child and his sibling were returned home and now after a year of supervision, the case is scheduled to close. Overall, fifty-eight percent of the cases scored in the maintenance zone, seventeen in the refinement zone and twenty-five in the improvement zone.

One specific case identified the problems that will arise when the long-term view is not shared among team members, especially the family and the county. “Long-term view scored low in the refinement zone due to the agency’s possible move to extend the case without consultation with the parents about the issue. Mother and father are not aware that the case may be extended and this has the potential of straining the engagement process at hand. In addition, there is also confusion between case participants as to what case closure means. Mother believes that all she needs to do is have clean drug screens and father stated that all he needs to do is complete a psychological evaluation and resume consistent visitation with his son.”



PLANNING A PROCESS FOR SAFETY MANAGEMENT: To what degree is a well-reasoned, ongoing process being used for controlling and managing impending danger threats to child safety while strategies and actions are developed and implemented for the family change process via enhancing parent/caregiver capacities that lead to: Attainment of protective conditions for safety in the home? Acquisition/demonstration of required parent behavior changes? Securing sustainable family supports?

Comments:

Only eight of the twelve cases were scored for planning a process for safety management. While half the the case reviewed scored in the maintenance zone; this is an area that needs to be addressed in that three cases were in the refinement zone and one case was in

the improvement zone. The case that scored in the improvement zone had no safety plan around the child's father and it was possible that he may have access to the child and mother. The family came to the attention of CPS when the child was seen in the emergency room for an injured arm. The referral was unsubstantiated. However, the child was living with her father and his girlfriend at the time of the injury and there was no explanation of the cause of the injury and the girlfriend had past CPS involvement with her own children. The father has not been involved in any aspect of the case planning and his exact whereabouts are unknown. The mother and other family members were very concerned about the father's temper and his possible contact with the mother and his child.

PLANNING A CHANGE PROCESS FOR PERMANENCY [For a child removed from his or her home]: To what degree is a well-reasoned planning process used to drive strategies and actions for the family change process that provides, as needed, for: Reunifying the child and parent, replacing the entering parent with another, or achieving independence for a youth? Searching for, findings, eliminating, and approving a relative or another replacement to be the permanent caregiver? Resolving any legal barriers to permanency? Supporting and evaluating the stability and success of the child and family in a potentially permanent home to ensure family sustainability as a condition for Safe Case Closure?

Comments:

Out of the twelve cases reviewed, this indicator was applied to four cases. The majority of the cases scored in the maintenance zone. One case scored in the improvement zone due to unresolved legal issues in filing a TPR petition for a child. "Termination of Parental Rights (TPR) was requested in October 2006. However, this request was not filed due to some systemic changes in the District Attorney's (DA's) office and some legal barriers identified by the DA after the biological father was identified and located. The DA is now requesting that the agency file a revision petition to set conditions for the biological father."

The delay in legal matters has caused the child to remain in foster care rather than achieve permanency in a timely manner as expected under ASFA. The delays were not seen as the "fault" of DSS. "In fact, the DA acknowledged the caseworker's perseverance and determination in attempting to move things along quicker."

PLANNING A CHANGE PROCESS FOR BEHAVIOR OUTCOMES: To what degree is a well-reasoned, ongoing planning process being used to drive strategies and actions for a behavior change process that provides, as needed, for: Acquisition and demonstration of knowledge and skills necessary for parenting? Reduction of behaviors and/or symptoms that interfere with protective and caregiving capacities? Demonstration that behavior changes are effective in parenting, protecting children, and maintaining stability of the home and family situation? Demonstration that behavior changes are sustainable over time and likely to continue following return and Safe Case Closure?

Comments:

Seventy-five percent of the children scored in the maintenance zone and twenty-five percent in the refinement zone. The parent/family scored fifty-nine percent in the maintenance, thirty-three percent in the refinement zone and eight percent in the improvement. The results support that there is some planning for behavioral changes for the children and their parents. Over the last two years, a focus child has moved from institutional living to a family setting including transitioning from day treatment to regular education with support as needed by special education. This is a child with numerous diagnoses of Reactive Attachment Disorder, Conduct Disorder and Attention Deficit Hyperactivity Disorder. His behavior can be physically aggressive and include biting and hitting. Yet with the appropriate supervision and planning from his team, he has been able to safely live within a family setting and the community. The team is currently awaiting approval from the focus child's insurance to obtain an updated assessment to assist with continued planning for the child's behavioral outcomes.

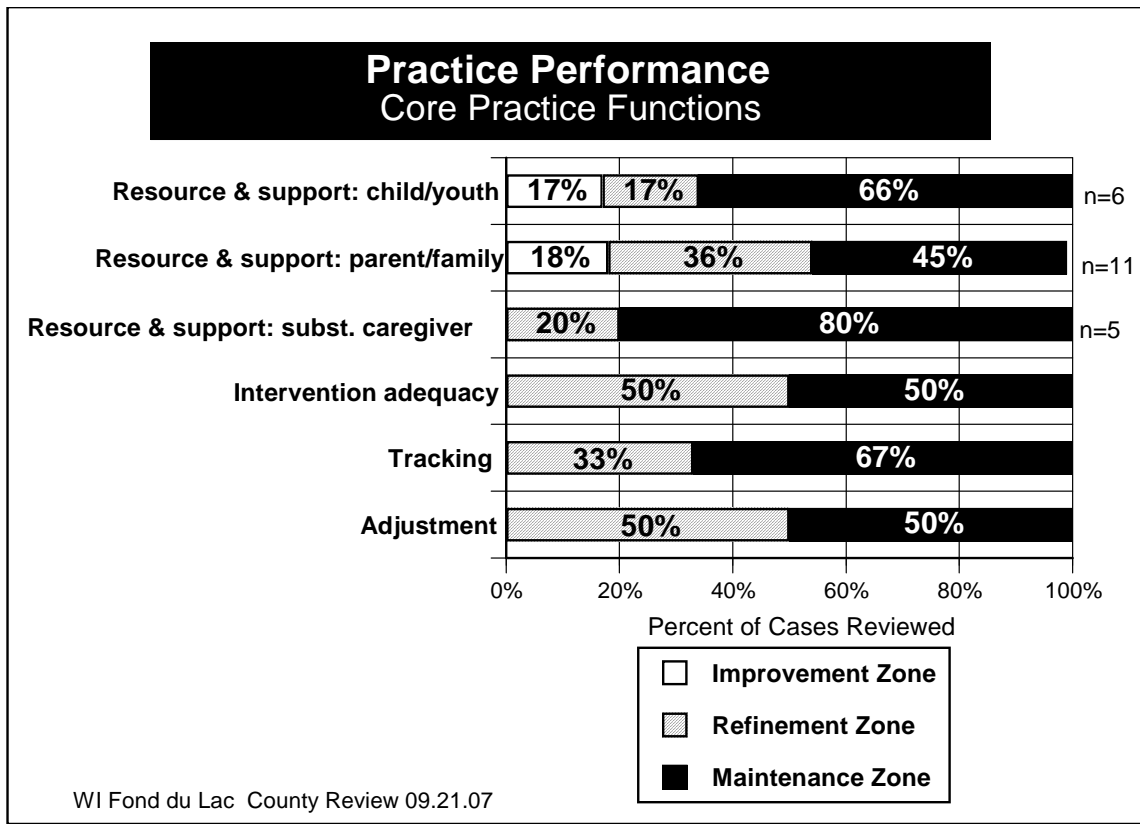
A case which scored in the refinement zone for both the parent and the child shared that "Clarification is needed regarding what behavioral outcomes need to be achieved for both mother and [focus child] in order to reach safe case closure. Mother believes that done is when the court order expires at the end of this year. She does not acknowledge a need to demonstrate new parenting behaviors. [Focus child] does not accept responsibility to manage her behavior during mood swings or at times when she simply cannot manage her behavior. Both seem to accept "that this is just typical teen mood swings."

PLANNING A CHANGE PROCESS FOR SUSTAINABLE SUPPORTS: To what degree is a well-reasoned, ongoing planning process being used to drive strategies and actions for sustainable supports for the family that provides, as needed, for: Meeting basic necessities of life? Ongoing supports necessary for recovery and relapse prevention? Informal social supports necessary to sustain the family following Safe Case Closure?

Comments:

The results from this indicator demonstrate a clear opportunity for improvement in this area of practice. Only one of the twelve cases scored in the maintenance zone, which is the same case that scored in the maintenance zone for planning a change process for behavioral outcomes. The remaining eleven cases scored in the refinement zone.

While there are numerous services for children and families in Fond du Lac County, the establishment of sustainable supports, both informal and community supports that will continue with the family following safe case closure, was an identified area of need for the families in the review sample. The results from the sample demonstrate that not only mothers and fathers are lacking sustainable supports but substitute caregivers are as well. Of the 17 individuals (eight mothers, five fathers and four substitute caregivers) who were rated for Informal Supports (Parent and Caregiver Status), only seven individuals scored in the maintenance zone, while seven individuals scored in the refinement zone and three individuals scored in the improvement zone.



RESOURCE & SUPPORT USE: To what degree is/are the family and/or out-of-home caregiver actively being provided the training, in-home support, supervision, resources, support-development assistance, and relief necessary to provide a safe and stable living arrangement for the child that meets the child’s daily care, development, and parenting needs? If the child presents special needs with more extensive care requirements, to what degree is the family/out-of-home caregiver provided specialized support commensurate with that required to meet the child’s needs while maintaining stability of the home and family commitment to the child?

Comments:

Substitute caregivers in Fond du Lac County are able to access and obtain the necessary support and training to meet the physical, emotional, medical, and educational needs of those residing in their home, specifically the foster child (ren). Eighty percent of substitute caregivers scored in the maintenance zone and twenty percent in the refinement zone. The focus groups information had a common theme that foster children in Fond du Lac County are living with safe and appropriate foster parents, who are able to receive the support and training needed.

Focus groups participants shared that there is a diverse array of services in Fond du Lac County; however, there is not the capacity to meet the needs of the consumer in a timely manner. Seventeen percent of children reviewed scored in the refinement and improvement zones for resources and support use. Their parents fared worse in that

eighteen percent fell in the improvement zone, thirty-six in the refinement zone. In the cases reviewed, families were dealing with a number of economic challenges that jeopardized the stability of the family even with accesses community supports such as Special Supplemental Nutrition Program for Women, Infants and Children (WIC), Wisconsin Works (W-2), food stamps, daycare, etc. These scores were also similar in that children scored sixty five percent or under in the maintenance zone for their emotional development, behavioral functioning, and behavioral risk to self and others.

INTERVENTION ADEQUACY FOR CHANGE: To what degree are the change-related interventions, actions, and resources provided to the child and family of sufficient power (precision, intensity, duration, fidelity, and consistency) to produce desired results and make timely progress necessary to meet Safe Case Closure requirements and to sustain family independence from the service system following closure?

Comments:

Fifty percent of cases scored the maintenance zone. Intervention Adequacy for Change is assessing family's ability to receive and obtain resources, supports and services at the appropriate level in helping the family facilitate and sustain positive behavioral changes. A case that initially began as an out-home-case revealed how resources implemented at the appropriate power and duration allowed for the child's return to the biological home. The family team now is planning for safe case closure at the end of 2007. "In the last six months these supports have been able to slowly remove themselves from the family unit, though appropriate interventions and supports remain in place. The mother still sees her individual therapist on an infrequent basis. She knows how to access the supports that have already terminated after case closure, and it was felt by all interviewed that she is willing and capable of accessing these services on her own. The persons interviewed felt that this family is at an optimal level of functioning. The services in the home have been tapered at an appropriate speed for the family."

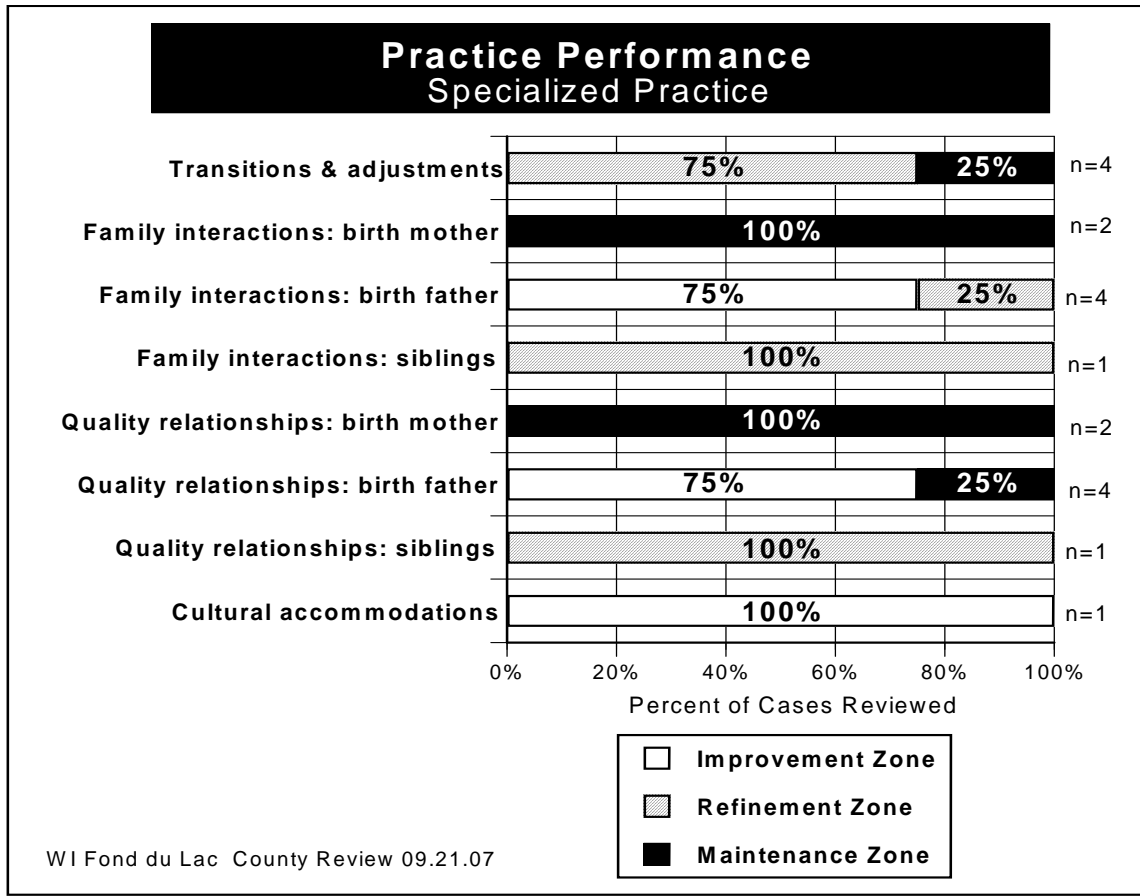
However, this is an area on which to build as the other half of cases reviewed scored in the refinement zone. One case is struggled in that "The interventions aimed to prepare for TPR and Adoption seemed adequate given the particular needs of the focus child and the foster parents. The interventions aimed at addressing the concurrent goal, reunification, did not seem adequate. Again, once the biological mother was incarcerated her services stopped, despite still having the goal of reunification"

TRACKING AND ADJUSTMENT: Are the child and family status, intervention process, and change results routinely followed along and evaluated? Are strategies and services modified to respond to the changing needs and to apply knowledge gained about strategies and results to create a self-correcting service process for finding what works for the child and family?

Comments:

Sixty-seven percent of cases for tracking scored in the maintenance zone and thirty-three percent in the refinement zone. Percentages for cases in the area of adjustment were

split; fifty percent of the cases scored each in the maintenance and refinement zones. Tracking is “ongoing situational awareness” regarding all the participants in the family case and with that knowledge, there is continued assessment and modification of case plans in order to better meet the needs of the family, which demonstrates solid adjustment. A case reviewed demonstrated good tracking and adjustment in that “When it became clear that additional clinical direction and intervention was necessary the pursuit of an appropriate facility was begun. The identified facility was engaged, the monetary resource was provided, and the report is being utilized to secure specific treatments.”



TRANSITIONS & LIFE ADJUSTMENTS: Is the current or next life change transition for the child being planned, staged, and implemented to assure a timely, smooth, and successful adjustment for the child and family after the change occurs? Are transitional staging plans/arrangements being made to assure a successful transition and life adjustment in daily settings? If the child is returning home and to school following a temporary placement in foster care, treatment, or detention, is the transition and life adjustment sequence working? Is there follow-along support for the adjustment period?

Comments:

Twenty-five percent scored in the maintenance zone and seventy-five percent in the refinement zone. Transitions and life adjustments are part of all children's development and growth. Life changes that are planned for appropriately and thoroughly can prevent or minimize emotional and physical harm children may experience during these times.

A 14-year old child recently returned to his biological home after two years of out of home placements in secure detention, psychiatric hospitals, incarceration and residential treatment facilities. Concerns were raised related to the child's adjustment and ability to function appropriately and safely in his parents' home and in his new school setting. He has been in the home only for the last four weeks. The new environments allow for more freedom and will most likely create new stressors for the focus child. "The focus child has not had much practice using his new skills in a public school setting where he will likely be exposed to social and peer situations that he has not had practice navigating. The focus child is responsible for seeking out help and support in his school setting and it is too early to tell if this plan will be adequate."

FAMILY INTERACTIONS: When children and family members are living temporarily away from one another, how well are specifically planned strategies and supports working to build and sustain family connections with meaningful interactions via frequent interaction and other means, unless compelling reasons exist for keeping them apart? To what degree are strategies and efforts being implemented to support the following between the child and his/her family members for: (1) Supporting frequent interactions via visitation and other means? And (2) Using varied and creative opportunities for family members to nurture one another?

QUALITY FAMILY RELATIONSHIPS: When children and family members are living temporarily away from one another, how well are specifically planned strategies and supports working to build and sustain good quality family relationships through various appropriate means, unless compelling reasons exist for keeping them apart? To what degree are current strategies and efforts enabling family members to improve and maintain the strengths and positive qualities of their relationships with one another?

Comments:

Two of the twelve mothers were scored in the maintenance zone for having family interactions and having those interactions that promote family bonding, relationships and connections. Four of the twelve fathers scored are struggling a great deal in obtaining family interactions which then prevents the father and the child in developing and sustaining a parental-child bond and emotional connections. Three fathers scored in the improvement zone and one father scored in the refinement zone for family interactions and quality of relationships.

Another area of improvement under family interactions and the quality of family relationships between siblings not residing in the same home. The one case for sibling

interactions fell in the refinement zone. The case has two assigned case managers, one case manager for the focus child and her twin sibling and another case manager for the three other siblings. "It appears that the coordination between both county workers could be improved to discuss maintaining regular visitation between the siblings. As a result of the interviews, reviewers learned the siblings have not visited all summer. Furthermore, the strategies and supports that build and sustain good quality relationships need refining. As noted above, sibling visits have been problematic to schedule. These visits have not been on a regular basis and nothing is in place to improve the current interaction plan. It appears that the quality of the family relationship is declining for [the focus child] and her older siblings."

SPECIALIZED CULTURAL ACCOMMODATIONS: How well have any major cultural issues of the child and family been identified and addressed in practice? If indicated, are specialized supports and services provided being made culturally appropriate via special accommodations in the family engagement, assessment, planning, and service delivery processes being used with this child and family?

Comments:

One out of the twelve cases was identified to have cultural accommodation and this case scored in the improvement zone. The case did not meet the criteria under the Indian Child Welfare Act (ICWA); however, the whole family identified themselves with the mother's ethnicity and accessed cultural supports and services. As suggested in a possible next step for the case "Consider incorporating the family's Native American culture/values into teaming and plans for safe case closure. It might make sense to ask the family how, if at all, they would like this aspect of their culture incorporated into planning, teaming, and the future." There appeared to be no incorporation of the family's culture in the coordination of planning and services within the case plan under the supervision of DSS.

VII. NEXT STEPS AND ACTION PLANNING

County staff, supervisors, and the director were encouraged to use the results of the review to formulate and implement an action plan to address enhancement of case practice and systems issues, which will ultimately result in improved outcomes for children and families in Fond du Lac County. Agency staff identified the following as areas of potential focus for system and practice improvement:

- Assessing safety and the appropriateness of continuing supervised visitations.
- Acquire IV-E funds for legal support to move TPR's.
- Trauma Education and Training
- Memorandum of Understanding signed with Domestic Violence partners
- DSS representation on Coordinated Response.
- CST training & implementation
- Better use of Connection Center (creative supervised family interaction plans).
- Volunteers from community involved internal CQI Team.
- Cultural Competency

- Recruitment of more diverse staff

The final “next steps” meeting of the review was used by the director, deputy director, and supervisors to identify areas in which the agency should first focus on improving. State of Wisconsin Department of Health and Family Services CQI Section Manager and Site Leader Harry Hobbs outlined the post-QSR training and assistance that is available to DSS. He also introduced DHFS facilitator, Jodee Grailer-Liedtke, who will aid the county in the development and implementation of an Action Plan. Ms. Grailer-Liedtke advised DSS of her role as a facilitator and provided a general overview of how she can be a resource to the agency in the development of their Action Plan. The agency leadership expressed a desire to include workers and court staff in the process. Before the close of the “next steps” meeting, the agency staff had scheduled their next meeting with the facilitator to begin working on the Action Plan for DSS.

VIII. SUMMARY

The results of Fond du Lac County’s first Quality Services Review offer information about the strengths and opportunities to enhance child protective service case practice. The scores from the first qualitative review serve as a baseline from which the agency will measure progress in future reviews. Though the practice model underpinning the QSR raises the bar for evaluating case practice, it encourages review participants to participate in the process of system change. More specifically, the practice model represents a set of values and standards that promote provision of strategic, dynamic, and high quality services to keep children and families safe.

Fond du Lac County’s overall child status scores indicate that the county is able to provide for their children’s safety, well-being, and permanency. Fifty-eight percent scored in the maintenance zone and forty-two percent in the high refinement zone. Another factor contributing to the positive overall scores for children is that the children in foster care are residing in safe foster homes with competent, safe caregivers. The substitute caregiver’s overall status was hundred percent in the maintenance zone.

The overall status scores for mothers and fathers suggest there are challenges facing parents. Mothers scored eleven percent in the improvement zone, fifty-six percent in the refinement zone and thirty-three percent in the improvement zone. While fathers scored higher in maintenance zone with sixty percent for overall status, their remaining scores fell in the improvement zone at forty-percent.

Overall Practice Performance scores were mixed in that forty-two percent of cases were in the maintenance zone, fifty percent fell in the refinement zone, and eight percent were in the improvement zone. The wide spectrum in overall scores is similar to the first 17 counties reviewed in Wisconsin where overall practice performance was twenty-eight percent in maintenance, sixty-eight percent in refinement and four percent in the improvement zone. Furthermore, the baseline data gained from the county’s participation in their first QSR serves as a great starting point from which they can continue to build in

their efforts to establish positive outcomes for the children and families of Fond du Lac County.