



## IOWA'S PROGRAM IMPROVEMENT PLAN (PIP) QUARTER 6 (JANUARY 1, 2013 – MARCH 31, 2013)

### EXECUTIVE SUMMARY

#### **Introduction:**

The DHS' vision is that all children grow up safe from abuse and with permanent family connections. To achieve this vision, the DHS aligns child welfare resources, through utilizing a customer focus and a dedication to excellence, accountability, and teamwork.

Iowa's child welfare system focuses on the three CFSR domains of safety, permanency, and well-being:

- **Safety**
  - Children are, first and foremost, protected from abuse and neglect.
  - Children are safely maintained in their homes whenever possible and appropriate.
- **Permanency**
  - Children have permanency and stability in their living situations.
  - The continuity of family relationships and connections is preserved for children.
- **Child and family well-being**
  - Families have enhanced capacity to provide for their children's needs.
  - Children receive appropriate services to meet their educational needs.
  - Children receive adequate services to meet their physical and mental health needs.

#### **Quarter Six PIP Activities:**

<b>Outcome/Systemic Factor:</b>	<b>Quarter 6 Targeted Strategies/Activities:</b>
Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.	<ul style="list-style-type: none"> <li>• Community Partnership for Protecting Children (CPPC)</li> </ul>
Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.	
Permanency Outcome 1: Children have permanency and stability in their living situations.	<ul style="list-style-type: none"> <li>• Plan, Do, Study, Act (PDSA)</li> <li>• Families for Iowa's Children (FIC) project</li> <li>• Joint Substance Abuse Protocol</li> </ul>
Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.	No activities during this quarter.
Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.	<ul style="list-style-type: none"> <li>• Caseworker Visits</li> <li>• Expand Parent Partners</li> </ul>
Well-Being Outcome 2: Children receive appropriate services to meet their educational	<ul style="list-style-type: none"> <li>• Enhance ability to address educational</li> </ul>

needs.	needs of children
Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.	<ul style="list-style-type: none"> <li>• Caseworker Visits</li> </ul>
Systemic Factor: Service Array and Resource Development	<ul style="list-style-type: none"> <li>• Align service array with safety, permanency, and well-being outcomes</li> <li>• Support development of children's mental health services</li> </ul>
Systemic Factor: Quality Assurance (QA) System	<ul style="list-style-type: none"> <li>• Quality Assurance (QA) system</li> </ul>

**Quarter Six PIP Accomplishments:**

***Community Partnership for Protecting Children (CPPC):*** Community Partnerships for Protecting Children (CPPC) is an approach that neighborhoods, towns, cities and states can adopt to improve how children are protected from abuse and/or neglect. It aims to blend the work and expertise of professionals and community members to bolster supports for vulnerable families and children with the aim of preventing child abuse, reducing the number of children experiencing repeat maltreatment, safely decreasing the number of out-of-home placements, and promoting timely reunification when children are placed in foster care.

During quarter six, the State CPPC Coordinator reviewed, verified, and compiled information from the CPPC sites' Progress Reports.

***Plan, Do, Study, Act (PDSA) for Placement Stability:*** Iowa Department of Human Services (DHS) staff chose to focus PDSA efforts on one sub-measure of placement stability, which is children in out of home placement between 12 and 24 months will have 2 or fewer placements.

The following tasks were completed in quarter six:

- Western Iowa Service Area prepared for and implemented a PDSA
- Quality assurance staff analyzed the PDSA results

***Families for Iowa's Children (FIC) Project:*** Families for Iowa's Children (FIC) was a three-year federally funded family finding and engagement demonstration project awarded to Four Oaks in collaboration with DHS. The focus was in the use of intensive family finding and engagement for children ages 0-17 who were in need of foster care and were referred to Iowa KidsNet for a non-emergency placement match. Children who were entering or re-entering family foster care were randomly assigned to the FIC project or to the control group. The project was limited to 26 counties between the Northern Service Area and the Cedar Rapids Service Area.

In quarter six, DHS staff studied the results of the FIC project in order to integrate lessons learned into practice while taking into account available resources.

***Joint Substance Abuse Protocol:*** In 2008, the Iowa General Assembly passed House File 2310 (HF2310). The purpose of HF2310 was to identify effective means of reducing the incidence and impact of child abuse, including denial of critical care and interventions with

families by the child welfare system caused, partially or wholly, by substance misuse, abuse, or dependency by a child's parent, guardian, custodian, or other person responsible for the child's care. The DHS, Iowa Children's Justice (ICJ), and the Iowa Department of Public Health (IDPH) worked together to develop a protocol for working with these families in the child welfare system. DHS, ICJ, and IDPH expanded the Joint Substance Abuse Protocol by implementing it in two additional counties. Counties having higher rates of abuse per 1,000 will be targeted and recruited.

During quarter six, Quality Assurance staff developed a plan to evaluate effectiveness of substance abuse training on staff knowledge and understanding of substance abuse issues, particularly as it relates to casework practice.

**Caseworker Visits:** DHS staff formed a group consisting of DHS and Juvenile Court Services (JCS) staff to complete tasks in the PIP regarding the quality, frequency, and documentation of caseworker visits.

In quarter six, the following tasks were completed:

- Implemented some workgroup recommendations approved by Service Business Team (SBT) meant to streamline work processes
- Identified data supports needed to support quality caseworker visit practice

**Expand Parent Partners:**

Parent Partners (PP) are individuals who previously had their children removed from their care and were successfully reunited with their children for a year or more. PP provides support to parents that are involved with the DHS and are working towards reunification. PP mentor one-on-one, celebrate families' successes and strengths, exemplify advocacy, facilitate training and presentations, and collaborate with the DHS and child welfare. Their efforts support placement stability for children in care, support timely reunification, and support successful reunification to prevent re-entry.

Tasks completed in quarter six were:

- Provided additional assistance to sites, as needed
- Midwest Child Welfare Implementation Center evaluated the program

**Enhance ability to address educational needs of children:** The Education Collaborative (Court system, Department of Education (DOE), and DHS), formed by the Children's Justice State Council, to address the education needs of youth in foster care, continues to meet; requirements (i.e., continuity of school setting, immediate and appropriate enrollment of the youth and transfer of school records within 5 school days when the youth moves from one school to another) are measured via case plan reviews and placement proximity to home, with continued encouragement to maintain youth in their current school as appropriate for increased permanency and well-being while the youth is in care.

In quarter six, the Education Collaborative completed the following tasks:

- Explored solutions for transportation to home school and transfer of credit issues
- Developed and provided practice guidance via an Issue Brief
- Examined the frequency of school change when a child enters foster care

- Explored determining baseline number of credits for children in foster care

**Align service array with safety, permanency, and well-being outcomes:** Iowa's child welfare providers are essential partners in improving Iowa's child welfare system. Continued collaboration between the DHS and service providers, especially regarding service array, will result in improved outcomes for Iowa's children and families.

During quarter six, DHS staff analyzed results of contract performance measures and information from quarterly contractor meetings.

**Support development of children's mental health services:** Iowa recognizes the need to redesign Iowa's mental health system for adults and children. The DHS' Division of Mental Health and Disability Services (MHDS) was designated to develop, implement, oversee, and manage the mental health services system for children, youth, and their families. Iowa's child welfare system will continue to collaborate with MHDS and other agencies to meet the intent of redesigning Iowa's mental health system.

In quarter six, DHS child welfare staff summarized collaborative efforts to date.

**Cultural competency/responsiveness of child welfare system:** To improve cultural competency/responsiveness of the child welfare system, DHS began to work with the University of Northern Iowa and established a multidisciplinary committee, Cultural Equity Alliance Committee, to oversee the child welfare system's efforts to improve culturally competency and responsiveness.

The following tasks were completed:

- Created and implemented plan to connect and collaborate with community minority members
- Implemented revised training and provided ongoing practice supports

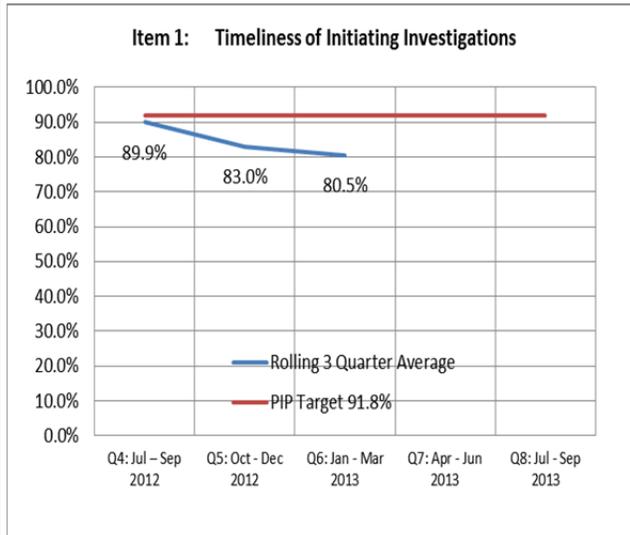
**Quality Assurance (QA):** Because of Iowa's 2003 CFSR, Iowa implemented and continuously operates an identifiable Quality Assurance and Improvement (QA&I) system. The QA&I system serves all of Iowa's 99 counties. The QA&I system evaluates the quality of services, identifies strengths and addresses prioritized need areas of the service delivery system, and provides relevant analysis and reporting of the performance of Iowa's child welfare system. The 2010 CFSR identified areas needing improvement in Iowa's QA system.

During quarter six, QA staff analyzed data from the case reading reviews.

Below are the findings for quarter six.

## Safety Outcome 1

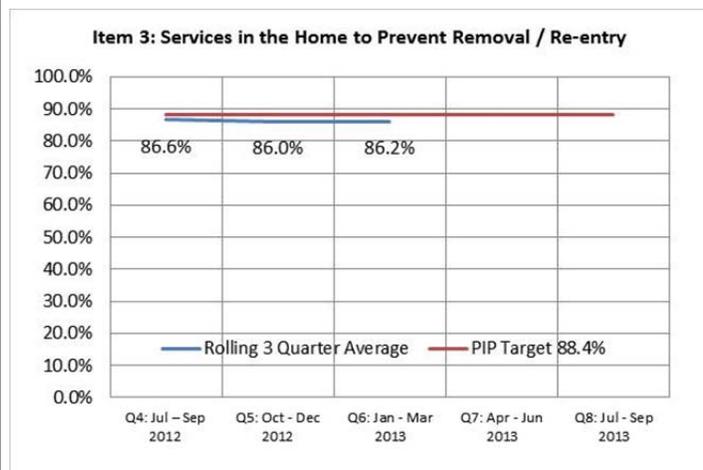
Item 1	Total # Met	Total # Cases	State Perf	Rolling 3 Quarter Average
Q2: Jan - Mar 2012	30	32	93.8%	
Q3: Apr - Jun 2012	25	30	83.3%	
Q4: Jul - Sep 2012	34	37	91.9%	89.9%
Q5: Oct - Dec 2012	29	39	74.4%	83.0%
Q6: Jan - Mar 2013	28	37	75.7%	80.5%
Q7: Apr - Jun 2013				
Q8: Jul - Sep 2013				
2010 OnSite Review	23	27	85%	



**Timeliness of Investigations (Item 1):** Nine cases were not in compliance regarding timeliness of face to face visits with the child(ren) alleged to be victims; all of these cases were assigned a 24-hour timeframe. Five of the nine cases were received after hours and assigned the following morning to a Child Protective Worker, reducing the amount of time available to locate and see the alleged victims. All of the investigations were initiated timely and some efforts were made to see the child(ren) involved, however the efforts were not successful and either lacked supervisory approval to extend the timeframe or were deemed to not be concerted efforts due to not acting earlier in the 24-hour timeframe. Protocol for after hours practice expectations will be reviewed and discussed with supervisors and workers to assure assignment is timely, and therefore adequate time available for CPWs to make face to face contact and/or reasonable efforts to do so during the assigned timeframe.

## Safety Outcome 2

Item 3	Total # Met	Total # Cases	State Perf	Rolling 3 Quarter Average
Q2: Jan - Mar 2012	46	54	85.2%	
Q3: Apr - Jun 2012	42	46	91.3%	
Q4: Jul - Sep 2012	41	49	83.7%	86.6%
Q5: Oct - Dec 2012	46	55	83.6%	86.0%
Q6: Jan - Mar 2013	50	55	90.9%	86.2%
Q7: Apr - Jun 2013				
Q8: Jul - Sep 2013				
2010 OnSite Review	33	43	77%	



**Services to Prevent Entry/Re-Entry into Foster Care (Item 3):** Although the rolling 3 quarterly average has remained flat, quarter 6 data show an increase in performance; if current performance is maintained one more quarter, Iowa would anticipate meeting this target in Quarter 7.

Item 4	Total # Met	Total # Cases	State Perf	Rolling 3 Quarter Average
Q2: Jan - Mar 2012	65	76	85.5%	
Q3: Apr - Jun 2012	62	75	82.7%	
Q4: Jul - Sep 2012	59	75	78.7%	82.3%
Q5: Oct - Dec 2012 <sup>1</sup>	56	75	74.7%	78.7%
Q6: Jan - Mar 2013 <sup>1</sup>	56	75	74.7%	76.0%
Q7: Apr - Jun 2013				
Q8: Jul - Sep 2013				
2010 OnSite Review	42	65	65%	

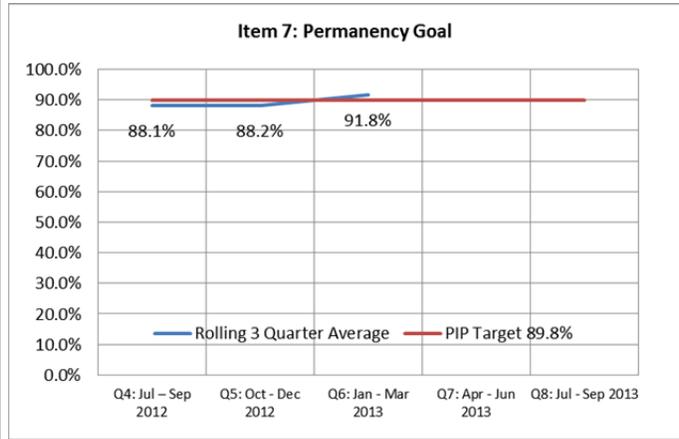


**Initial and Ongoing Safety and Risk Assessments (Item 4):** Performance on Item 4 remained stable compared to last quarter, with an overall downward trend of 3 points per quarter over the course of the PIP. Primary issue noted is lack of documentation of assessment of safety and risk upon case closure. Training on expectations regarding case worker visits with children and parents occurred in December 2012; assessment of safety and risk and how to document this throughout the life of the case – including case closure was one aspect of that training so it is expected to have a positive impact on multiple items including item 4. With only one quarters impact (25% of PUR) the 3 point decrease was avoided – and the same 3% per quarter change would bring performance nearly to the target by quarter 8.

Iowa case review sample consists of 75 randomly selected cases per quarter. Because quarter 2 included one extra case (76 rather than 75), the baseline period quarters 2,3 and 4 included 226 cases. But, because a correct/complete sample includes only 225, whenever the baseline N=226 and the current rolling 3 quarters = 225 – Iowa will consider the N adequate/complete and will not add an additional quarter's cases to meet baseline.

## Permanency Outcome 1

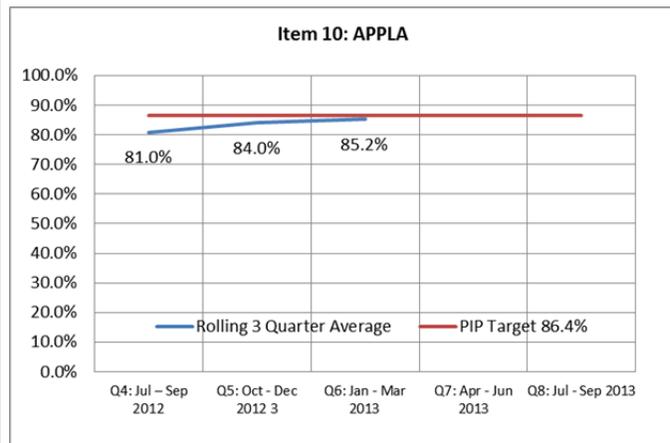
Item 7	Total # Met	Total # Cases	State Perf	Rolling 3 Quarter Average
Q2: Jan - Mar 2012	46	49	93.9%	
Q3: Apr - Jun 2012	42	52	80.8%	
Q4: Jul - Sep 2012	45	50	90.0%	88.1%
Q5: Oct - Dec 2012 <sup>2</sup>	78	85	91.8%	88.2%
Q6: Jan - Mar 2013	45	48	93.8%	91.8%
Q7: Apr - Jun 2013				
Q8: Jul - Sep 2013				
2010 OnSite Review	25	39	64%	



**Permanency Goals (Item 7):** Performance on Item 7 has continued its upward trend. In rolling quarter 6, Iowa performance exceeded the established PIP target of 89.8%. However, due to inadequate sample size as compared to the baseline sample size, assessment of completion of this item will occur in the Quarter 7 based on revised quarter 6 data (see below for additional information).

The baseline period for item #7 included 151 cases; the Quarter 5 rolling three month period includes 139 cases (q3=52, q4=50, q5=37). Since this is fewer cases than the baseline, Iowa is adding the Quarter 6 cases (q6=48) to the original 139 for a total N of 187 cases for the corrected Quarter 5 report. As future rolling 3-month periods are calculated, the original total for Quarter 5 (37) will be used rather than the adjusted N. This same process will be applied to Quarter 6 data.

Item 10	Total # Met	Total # Cases	State Perf	Rolling 3 Quarter Average
Q2: Jan - Mar 2012	7	9	77.8%	
Q3: Apr - Jun 2012	5	6	83.3%	
Q4: Jul - Sep 2012	5	6	83.3%	81.0%
Q5: Oct - Dec 2012 <sup>3</sup>	11	13	84.6%	84.0%
Q6: Jan - Mar 2013	7	8	87.5%	85.2%
Q7: Apr - Jun 2013				
Q8: Jul - Sep 2013				
2010 OnSite Review	5	10	50%	

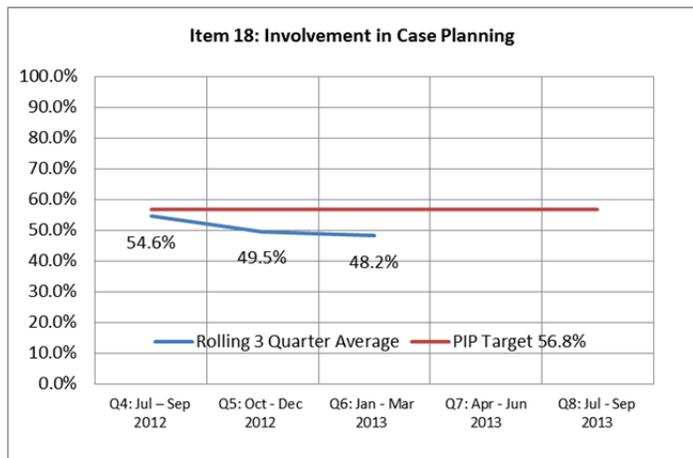


**Another Planned Permanent Living Arrangement (APPLA) (Item 10):** Performance on Item 10 continues to show a gradual upward trend since implementation of case reviews. Iowa is on track to meet this item within the next two quarters.

The baseline period for item 10 included 21 cases; the Quarter 5 rolling three month period includes 17 cases (q3=6, q4=6, q5=5). Since this is fewer cases than the baseline, Iowa added the Quarter 6 cases (q6=8) to the original 17 for a total N of 25 cases for the corrected Quarter 5 report. As future rolling 3-month periods are calculated, the original Quarter 5 N (5) will be used rather than the adjusted N. It is anticipated that this same protocol will need to be applied to Quarter 6.

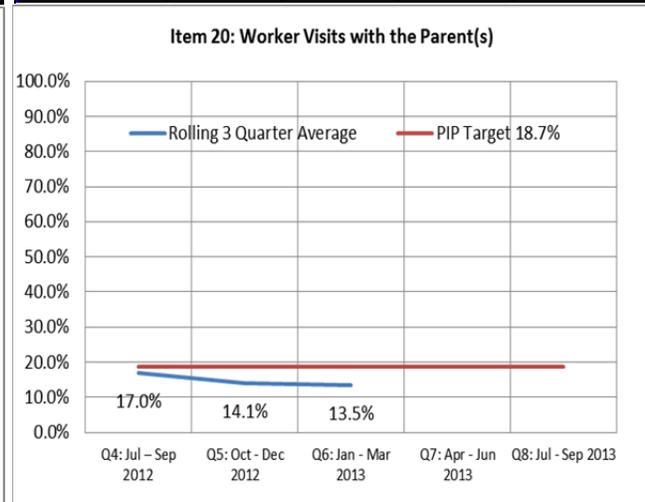
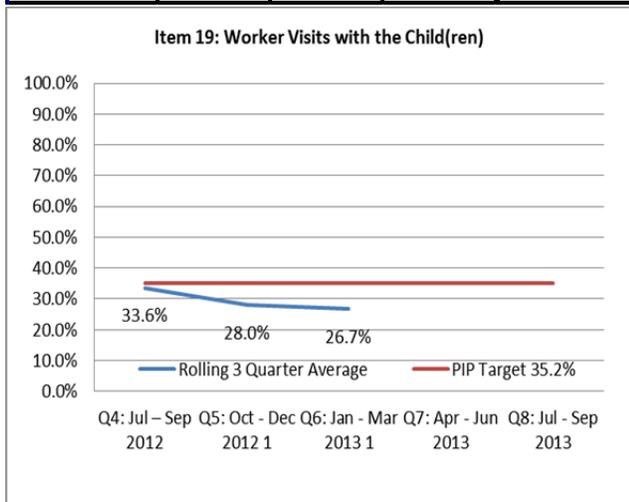
**Well-Being Outcome 1 (Items 18 – 20):**

Item 18	Total # Met	Total # Cases	State Perf	Rolling 3 Quarter Average
Q2: Jan - Mar 2012	46	73	63.0%	
Q3: Apr - Jun 2012	40	73	54.8%	
Q4: Jul - Sep 2012	32	70	45.7%	54.6%
Q5: Oct - Dec 2012	36	75	48.0%	49.5%
Q6: Jan - Mar 2013	37	73	50.7%	48.2%
Q7: Apr - Jun 2013				
Q8: Jul - Sep 2013				
2010 OnSite Review	30	61	49%	



**Child and Family Involvement in Case Planning (Item 18):** While rolling 3 quarter performance is not showing improvement, quarterly performance on Item 18 continues to show a slight upward trend the last 3 quarters. When reviewing the case data for causal factors, lack of involvement of the NCP is by far the primary issue. Efforts to identify and locate NCPs (whether mother or father) often involve limited use of available resources and, if the NCP location is known do not reflect concerted periodic effort to engage in case planning. Training on expectations regarding case worker visits with children and parents occurred in December 2012; and is expected to increase performance on multiple items, including item 18.

Item 19	Total # Met	Total # Cases	State Perf	Rolling 3 Quarter Average	Item 20	Total # Met	Total # Cases	State Perf	Rolling 3 Quarter Average
Q2: Jan - Mar 2012	31	76	40.8%		Q2: Jan - Mar 2012	13	65	20.0%	
Q3: Apr - Jun 2012	25	75	33.3%		Q3: Apr - Jun 2012	12	68	17.6%	
Q4: Jul - Sep 2012	20	75	26.7%	33.6%	Q4: Jul - Sep 2012	9	67	13.4%	17.0%
Q5: Oct - Dec 2012 <sup>1</sup>	18	75	24.0%	28.0%	Q5: Oct - Dec 2012	8	71	11.3%	14.1%
Q6: Jan - Mar 2013 <sup>1</sup>	22	75	29.3%	26.7%	Q6: Jan - Mar 2013	11	70	15.7%	13.5%
Q7: Apr - Jun 2013					Q7: Apr - Jun 2013				
Q8: Jul - Sep 2013					Q8: Jul - Sep 2013				
2010 OnSite Review	43	65	66%		2010 OnSite Review	23	54	43%	



Items 19 and 20 are both showing a downward trend based on the rolling 3 quarter average; Quarter 6 shows a slight increase in performance on both items. Training on worker visits with children and parents, quality criteria, and documentation requirements was provided in December 2012 to all social workers. In addition, supervisors are highlighting this area and working with staff as integration into practice continues. In quarter 7 Iowa will implement a review of the most recent 3 months of worker visit data to assess improvement, identify barriers, and to adjust strategies if needed. As items 19 and 20 involve a look back at 12 months, Iowa expects to see a very gradual impact until the months prior to the December 2012 training are aged out of the period under review.

Iowa case review sample consists of 75 randomly selected cases per quarter. Because quarter 2 included one extra case (76 rather than 75), the baseline period quarters 2,3 and 4 included 226 cases. But, because a correct/complete sample includes only 225, whenever the baseline N=226 and the current rolling 3 quarters = 225 – Iowa will consider the N adequate/complete and will not add an additional quarter's cases to meet baseline.

**Conclusion:**

In conclusion, Iowa's child welfare system completed the identified PIP benchmarks for quarter six. The benchmarks continue to build upon tasks completed in quarters one through five. The child welfare system will continue its promising practices throughout the PIP implementation period to improve Iowa's child welfare system.

For more information regarding the CFSR and the PIP, please contact Kara Lynn H. Regula at (515) 281-8977 or [kregula@dhs.state.ia.us](mailto:kregula@dhs.state.ia.us).