



PINNACLE PLAN MEASURES

SEMI-ANNUAL SUMMARY REPORT

August 2017

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Overview

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

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

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

Measurement Notes

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

Organization of the Report

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

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

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

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

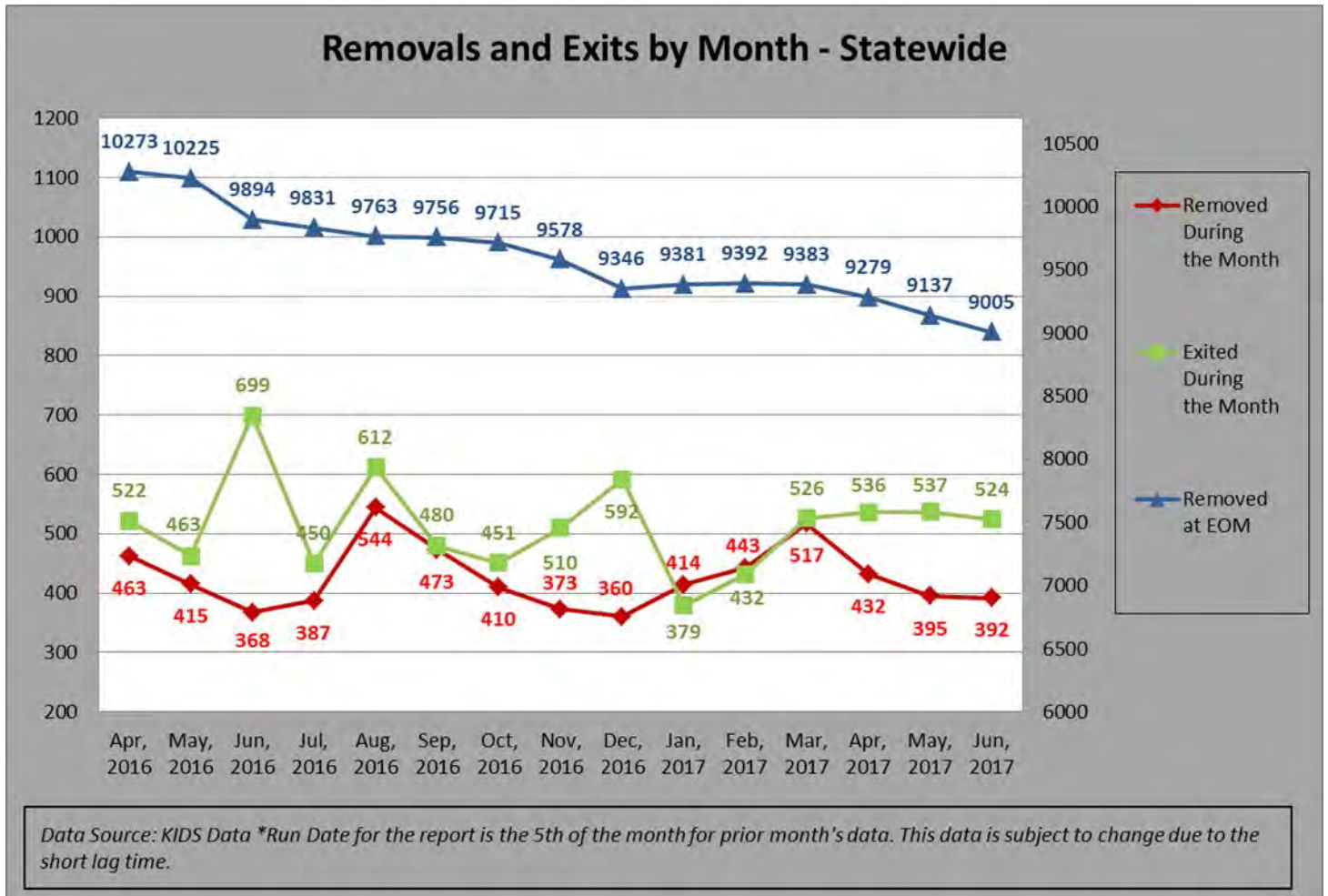
SECTION 2: Child outcomes. This section reports on metrics related to safety and permanency outcomes for children in care. These include indicators pertaining to **maltreatment in care, frequency of worker contacts, placement stability, shelter placement, and permanency.**

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

SECTION 1. Contextual Information

Entry and Exit Trends

DHS began Pinnacle Plan implementation in July 2012, six months after the Settlement Agreement was reached. In July 2012, just over 9,000 children were in care, and this number continued to rise before peaking at 11,303 in October 2014. In November 2014, the number started to decline for the first time since Pinnacle Plan implementation began. As of June 2017, the number of children in care reached 9,005, a 20.3 percent decrease since October 2014, continuing the reduction in the number of children in care. Section 1, Graph 1 shows the number of children removed and the children who exited care during each month from April 2016 through June 2017. During SFY 2017, the total number of children exiting care outnumbered the children removed leading to the decrease in the number of children in care.



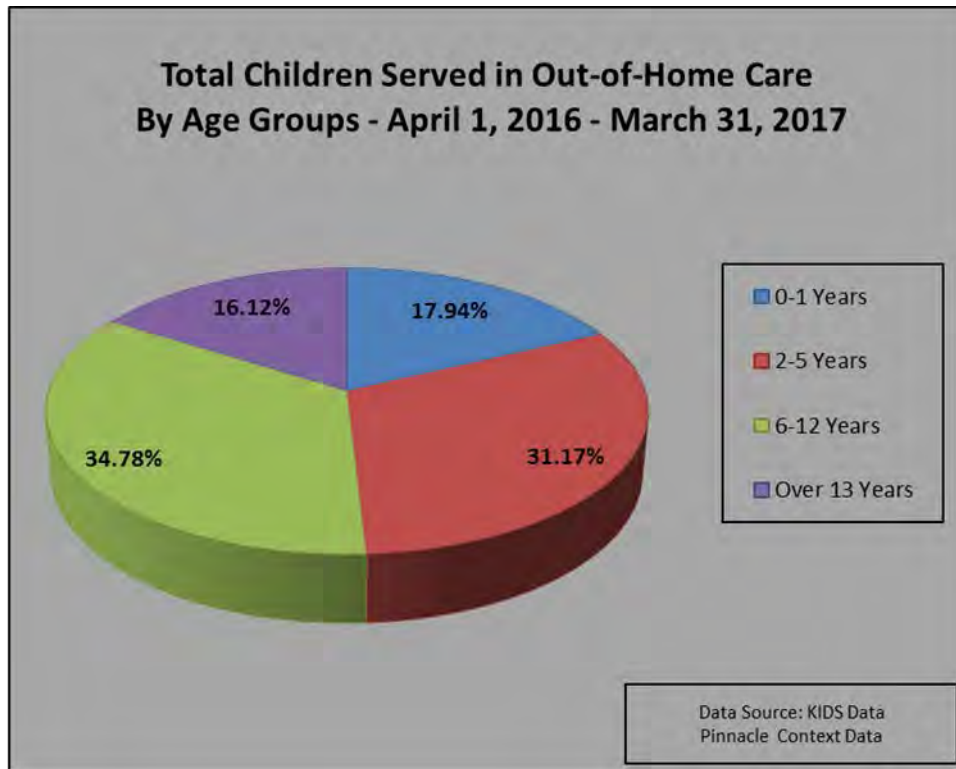
Section 1, Graph 1

Demographic Information by Reporting Period

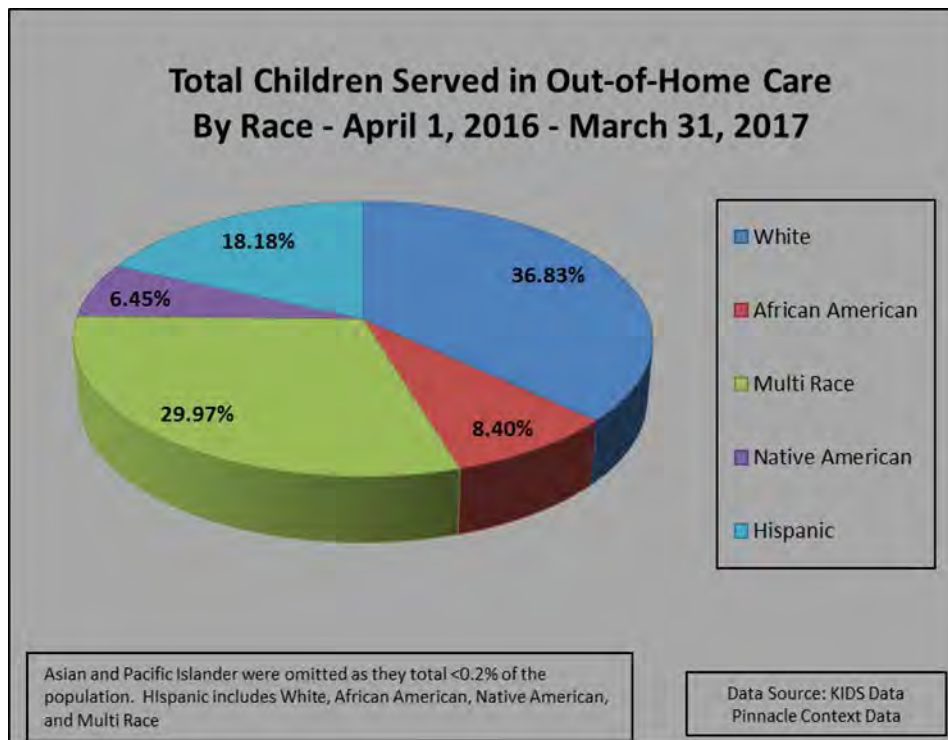
During the reporting period of April 1, 2016 through March 31, 2017, DHS served 15,753 children. The "served" population includes all children who were in care for at least 24 hours. This number also includes children in tribal custody. For the purposes of Pinnacle Plan reporting, children in tribal custody are not included in the measures, except for the Absence of Maltreatment in Care measure that includes all children served.

Section 1, Charts 1, 2, and 3 shows the children's demographics by age, race, and placement type as of 3/31/2017. For race, when a child claims more than one race, the child is counted in the Multi-Race category. Hispanic or Latino origin is not counted as a primary race, so when a client indicates that he or she is Hispanic, regardless of any other race

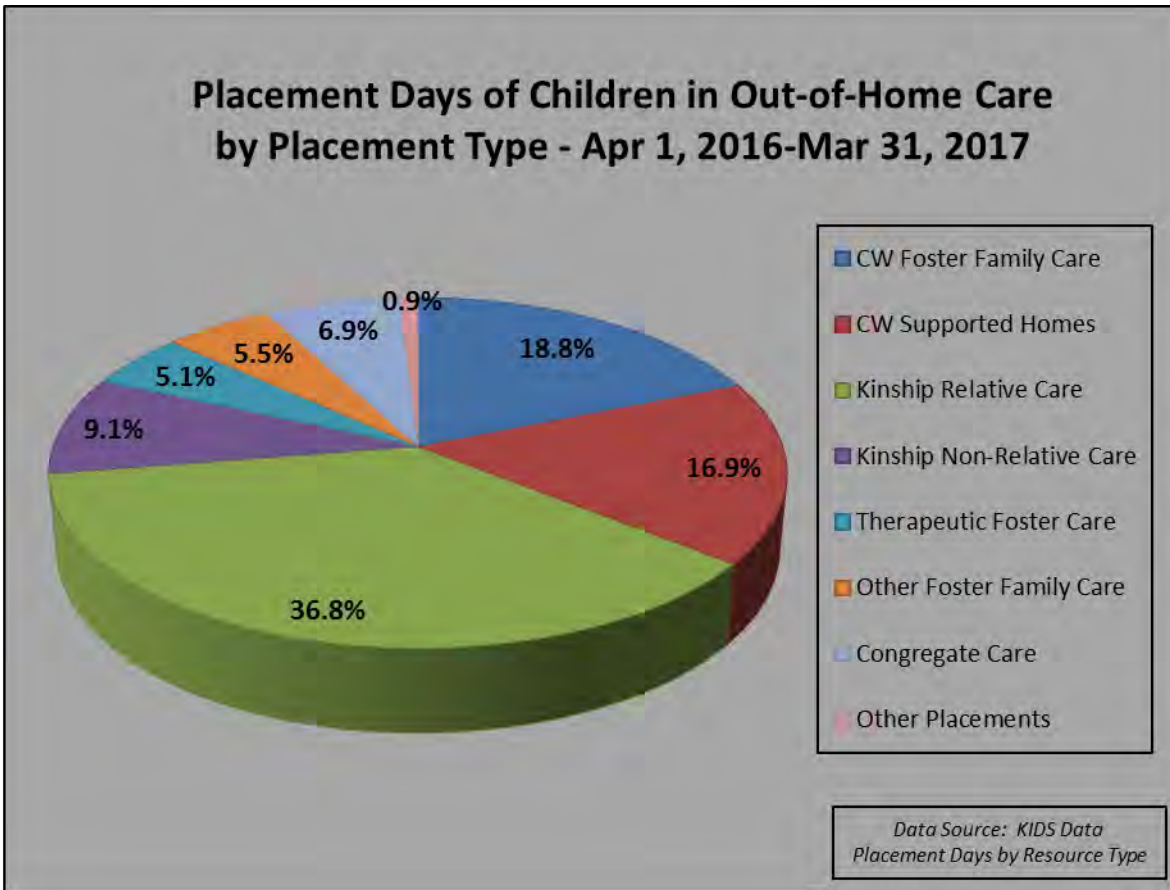
selected, the client is reported in the Hispanic category. The other races, White, African American, Multi-Race, and Native American, are all Non-Hispanic.



Section 1, Chart 1



Section 1, Chart 2



Section 1, Chart 3

SECTION 2. Child Outcomes

1.1: Absence of Maltreatment in Care by Resource Caregivers

Operational Question

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

Data Source and Definitions

For the Semi-Annual Report, Oklahoma uses the logic from the official federal metric. This measure is a 12-month period based on the federal fiscal year (FFY) of October 1 through September 30. Oklahoma uses the two official state-submitted Adoption and Foster Care Analysis Reporting System (AFCARS) (17A & 16B) files combined with a non-submitted annual National Child Abuse and Neglect Data System (NCANDS) file covering AFCARS 17A & 16B periods to compute the measure. The NCANDS file used for this report is calculated the same as the file submitted to the federal government, which includes running the data through the official validation tool. However, the official submission to NCANDS occurs only once annually and is due yearly by January 31, so NCANDS data is subject to change until that date.

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

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

Description of Denominator and Numerator for this reporting period

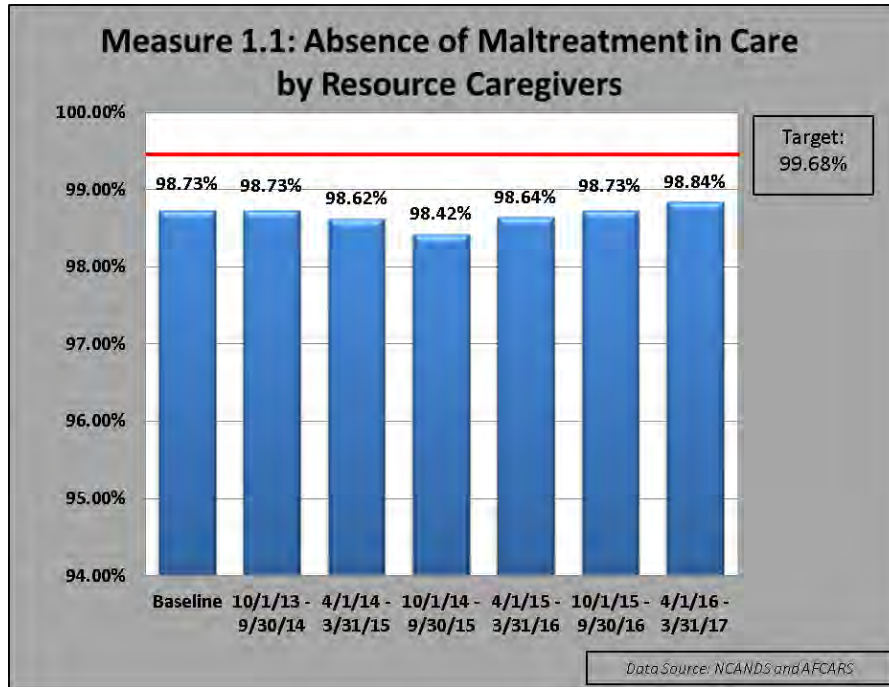
Denominator: All children served in foster care from 4/1/2016 through 3/31/2017.

Numerator: The number of children served in foster care from 4/1/2016 through 3/31/2017 who did not have any substantiated or indicated allegations of maltreatment by a foster parent or facility staff member during that period.

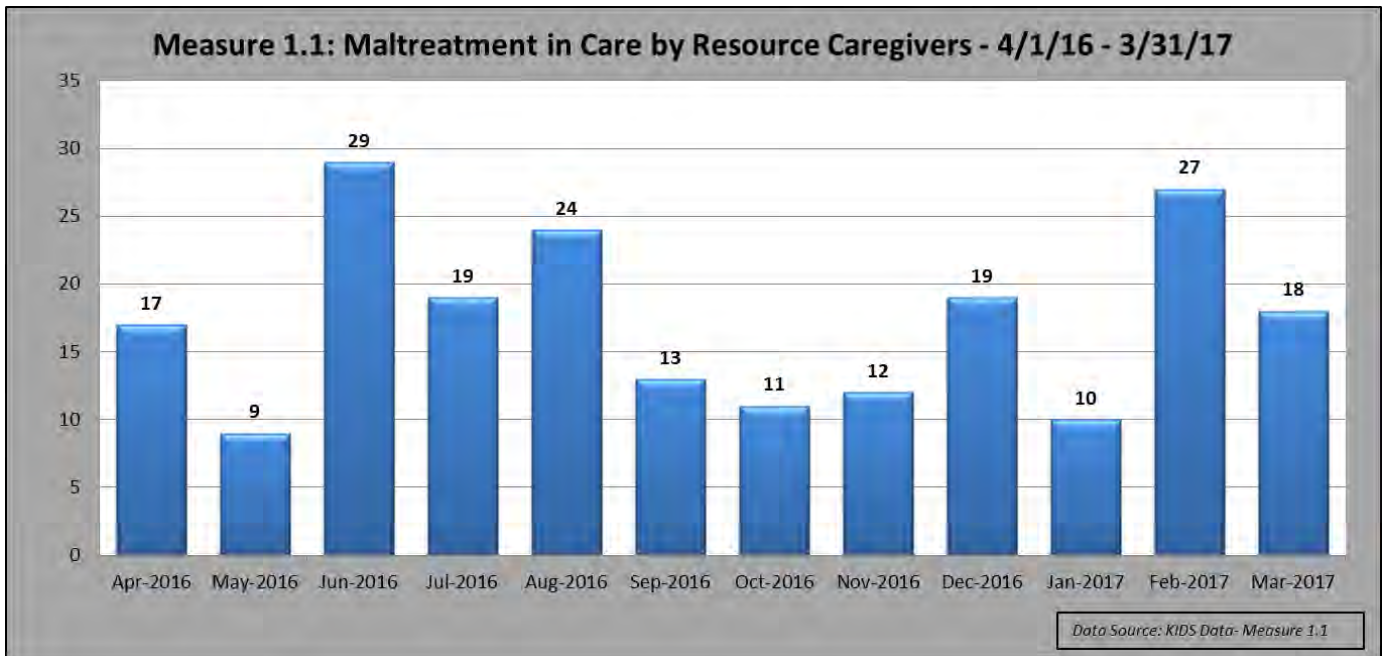
Trends

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

Section 2, Table 1.1-1



Section 2, Graph 1.1-1



Section 2, Graph 1.1-2

Screen-Out Consultations on Out-of-Home Referrals			
Referral Month	Total Screen-out Referrals	Screen-out Referrals with Screen-out Consultation	% in Compliance
Sep-16	115	73	63.5%
Oct-16	112	72	64.3%
Nov-16	123	83	67.5%
Dec-16	97	74	76.3%
Jan-17	104	83	79.8%
Feb-17	92	85	92.4%
Mar-17	120	104	86.7%
Total	763	574	75.2%
<i>Data Source: Y1790B - Out-of-Home Screen-out Detail; Run Date: 6/19/17</i>			

Section 2, Table 1.1-2

10-day Staffing on Out-of-Home (OOH) Investigations			
Referral Month	Total OOH Referrals Assigned	Referrals with 10-day Staffing	% in Compliance
Sep-16	128	127	99.2%
Oct-16	138	136	98.6%
Nov-16	110	109	99.1%
Dec-16	94	94	100.0%
Jan-17	140	140	100.0%
Feb-17	136	136	100.0%
Mar-17	152	152	100.0%
Total	898	894	99.6%
<i>Data Source: Y1751 - Out-of-Home Investigations; Run Date: 6/19/17</i>			

Section 2, Table 1.1-3

Commentary

This indicator is based on the federal measure for maltreatment in care and produces representative information about the incidence of maltreatment in care (MIC). The MIC rate for this semi-annual reporting period has decreased; the data shows the total number of victims decreased in the most recent six month time period as well.

For the reporting period April 1, 2016 - March 31, 2017, 208 substantiations of maltreatment while in out-of-home care were reported in the monthly MIC Pinnacle Plan Measure. These 208 victims were included in 113 separate referrals: 84 referrals for children in foster care and 29 referrals to the Office of Child Advocacy (OCA). Of the 208 victims, 164 were placed in foster care settings and 44 were placed in congregate care settings:

Foster Family Care Types:

- 82 children were in a Kinship Foster Care Home Relative (39.4%);

- 15 children were in a Kinship Foster Care Home Non-Relative (7.2%);
- 31 children were in a Traditional Foster Home (14.9%);
- 23 children were in a Traditional Child Welfare (CW) Foster - Supported Home (11.1%);
- 9 children were in a Therapeutic Foster Care Home (TFC) (4.3%);
- 1 child was in an Adoptive Placement (0.5%);
- 1 child was in a Contracted Foster Care Home (0.5%); and
- 2 children were in Tribal Approved Foster Care (0.9%).

Congregate Care Placement Types:

- 29 children were in a Level D, D+, or E Resource Facility (13.9%);
- 8 children were in an Acute Psychiatric Hospital or Psychiatric Residential Treatment Center (3.9%);
- 2 children were in an Oklahoma Department of Human Services (DHS) Shelter (1.0%);
- 4 children were in a Youth Services Shelter (1.9%); and
- 1 child was in Detention (0.5%).

For NCANDS reporting, 182 victims were reported. The difference between the two measures is explained in Data Source and Definitions.

Children in Out-of-Home Care					
April 1, 2016 - March 31, 2017					
Placement Type	Placement Days	Percent	Placement Type	MIC	Percent
CW Foster Family Homes	624,394	18.9%	CW Foster Family Homes	31	14.9%
CW Foster - Supported Homes	558,991	16.9%	CW Foster - Supported Homes	23	11.1%
Kinship Foster Care - Relative	1,219,588	36.8%	Kinship Foster Care - Relative	82	39.4%
Kinship Foster Care Non-Relative	301,922	9.1%	Kinship Foster Care Non-Relative	15	7.2%
Therapeutic Foster Care Homes	168,411	5.1%	Therapeutic Foster Care Homes	9	4.3%
Congregate Care	227,603	6.9%	Congregate Care	44	21.2%
Other Foster Family Care	182,706	5.5%	Other Foster Family Care	4	1.9%
Other Placements	28,397	0.9%	Other Placements	0	0.0%
Total	3,312,012	100%	Total	208	100%

Data Source, Pinnacle MIC Data for 12 months ending March 31, 2017 and Placement Days by Resource Type; Run date: 6/12/17

Section 2, Table 1.1-4

In Section 2, Graph 1.1-1, data shows positive trending over the three previous reporting periods. In the current reporting period, 98.84 percent of children had an absence of MIC by resource caregivers.

Several activities are in place to target and reduce MIC. By focusing efforts on various target areas, children should remain safe in foster care.

MIC Regional Workgroup

The MIC Regional Workgroup divided into three smaller groups to tackle areas related to MIC. The three groups are working on the following items: (1) a quality assurance (QA) process for worker visits; (2) a QA process for 10-day staffing and screen-out consultations; and (3) consistent approval of child welfare and criminal history. The small groups continued to meet and work on the outcomes during this reporting period. The DHS Office of Performance Outcomes and Accountability (OPOA) are assisting the small groups and designated Business Process Engineers to focus the groups

and facilitate the processes. The QA process for the Quality Worker Visits created an initial tool to evaluate the quality of worker visits. The Business Process Engineers shadowed the CORE training to understand the training content on worker visits and intend to shadow workers in the field to witness what is or is not occurring during the worker visit process. Also, OPOA staff participated in 10-day staffing phone calls and screen-out consultations to witness first-hand what occurs during these processes. OPOA staff mapped out the two processes and proposed some time frames to provide better follow-up. More work is needed in the small groups to progress and make some headway. Meetings were held and discussion occurred around the various reviews in progress. In consideration of all the reviews field staff are conducting regarding quality worker visits, it was determined that several reviews evaluate the quality of worker visits. The Child and Family Services Review (CFSR) Program Improvement Plan (PIP) proposed monthly supervisor case reviews using the On-site Review Instrument (OSRI). To make progress in this area without creating an additional process that overburdens the field, the PIP proposal needs to be evaluated further.

General MIC Activities

On 1/11/2017, the MIC Lead spoke to members of the child welfare leadership team at Child Welfare Services (CWS) Quarterly Leadership. The MIC Lead reviewed the updated strategy and discussed safety in foster care. District directors who serve on the MIC Workgroup provided examples to the leadership team of their experiences with MIC and what they have learned. Discussion was held emphasizing the need to take a moment to consider: all information and the children impacted before clicking off on approvals; the totality of the information and not just the incident focused on; and all individuals who are in the foster home providing care for the children. Data related to MIC was presented to the group for information sharing. The MIC Lead provided a case timeline based on true circumstances for group work to identify areas where intervention could have occurred prior to an MIC incident. The mock case/timeline had several points in time where intervention or further exploration could have taken place. Discussion was held after the group work and CWS leadership members were tasked with thinking about how they could best impact MIC and the safety of children in their district. Since this meeting with leadership contained all members of the Regional MIC Workgroup and so much discussion was centered on MIC, the Workgroup did not meet again the following week.

On 1/30/2017, the MIC Lead participated in the CFSR Final Report Meeting. MIC was discussed as part of the National Data Performance. In this area, the state's performance was compared to the national performance. Following this meeting, work began on a PIP targeting areas of CFSR outcomes Safety Outcome 1, Children are, first and foremost, protected from abuse and neglect, and Safety Outcome 2, Children are safely maintained in their homes whenever possible and appropriate. Safety Outcome 2, Item 3, is Risk Assessment and Safety Management. Item 3 cases are assessed to determine if the Child Welfare Services (CWS) made concerted efforts to assess and address risk and safety concerns related to the child(ren) in their own homes or while in foster care. Participation in a PIP that impacts these safety outcome areas will impact MIC as well. The final PIP was submitted and is in the negotiation process.

In November 2016, the MIC Lead began the ongoing review process of every substantiated out-of-home (OOH) foster care investigation and the sampled unsubstantiated OOH investigations. The reviews give a glimpse into current practices and trends present in OOH foster cases. These reviews continue monthly on the substantiated and unsubstantiated investigations. In November 2016, members of the Continuous Quality Improvement (CQI) QA Team began assisting the MIC Lead in the reviews. In January 2017, the TFC provider group was trained on the review process and learned which questions should be asked during a 10-day staffing or screen-out consultation. In March 2017, 11 members from the two Quality Assurance units, the CFSR unit, and the Contract Performance Review (CPR) unit underwent training from the MIC Lead and participated in a review as practice to determine if they were able to identify MIC-related issues. In March 2017, those individuals began assisting in the reviews on the substantiated and unsubstantiated OOH investigations and debriefing the results with the MIC Lead. This process has now been shared with the units that will most influence case practice as the PIP continues.

KIDS/SACWIS Updates

In October 2016, Oklahoma's Statewide Automated Child Welfare Information System, known as KIDS, released an update which allowed resource contacts and the file cabinet to be visible in all matching resources. This allows for better information retrieval when working on a resource home. Prior to this change, a worker would need to review the

contacts in each separate resource to get to all of the information. The change means all contacts and file cabinet of matching resources are visible in each resource, thereby looking at one resource would provide information for all matching resources. In December 2016, a change was made to the Therapeutic Foster Care (TFC) resources so the written plan of compliance (WPC) screen can be opened to track WPCs in TFC homes. In March 2017, corrections were made to the WPC supervisory approval and the WPC indicator was added on the resource and permanency planning workload in KIDS. This allows a worker to see which case has children placed in a home with an open WPC or how many of his or her assigned homes have open WPCs. A feature to right click on the WPC from workload brings up any children placed in the home. This provides a visual control and information that prompts the worker to review the WPC and address in their contacts. Additional plans are in place to notify the permanency worker at the time of placement if he or she is making a placement into a home with an open WPC.

During this time period, work and validation continued on the MIC dashboard including reformatting in March and April 2017. The MIC dashboard is now broken into a supervisor view that can be used as a management tool to identify trend and focus targeted efforts. The program view gives an overview and descriptors of practice; includes the number of victim count for the current and previous month; and displays the percentage of children not maltreated in out-of-home care as well as screen-out information. The dashboard became available in June 2017. A guide was also developed to assist in using the MIC dashboard.

Foster Home Assessments and Approval

In January 2017, Foster Care and Adoptions program staff began training all resource family assessment (RFA), TFC, and resource family partner (RFP) subcontractors for the annual RFA Update. The training focused on areas in the RFA needing clarification and further assessment. The training was offered six times in various locations throughout the state from January to April 2017 and emphasized assessment relates to MIC. The RFA Contract Monitor also began quarterly meetings with the five RFA contract agencies in January 2017 to discuss contract requirements, assessment barriers, and areas for improvement in the RFA process.

In March 2017, the Annie E. Casey Foundation provided critical thinking training to the leadership of RFP contract agencies. The training centered on enhancing staff usage of critical thinking skills, assessing risk, and identifying safety threats during the resource approval process as well as noting the characteristics of adult protective capacities to consider when assessing potential resource families.

In April 2017, Foster Care and Adoptions program staff began training all resource staff for assessing concerns in resource homes. The training was also offered to RFP, TFC, and tribal partners. Over the course of April and May 2017, the training was offered eighteen times in various locations statewide. The training identified how various concerns in resource homes are to be addressed along a continuum and emphasized documentation and resolution of these concerns. The training provided information about the use of forms, reporting of a violation of rules in a CWS resource home, and written plan of compliance. A new form, ***Request for Exception to Resource Requirements***, was introduced during training and is used by staff to document all exceptions to policy that are made regarding a resource's approval. This form identifies staff approving the exception and requires justification for the decision. The training included practical application of these documents through scenarios and group work.

In April 2017, Foster Care and Adoptions staff began joint reviews of 50 approved resources with the Co-Neutrals. The resources were randomly selected from kinship, traditional, therapeutic, and supported resources that were recently approved. The first 25 reviews will be completed by 6/30/2017 and the last 25 will be completed in the upcoming months. Following the review of a supported resource in May 2017, the RFA Contract Monitor provided additional training to one RFP agency on 5/17/2017. The specialized training focused on improvement areas and skills development to assist in completing quality assessments. Field managers were trained on the resource review process and review tool on 5/31/2017 to ensure consistent reviews are completed by staff. Field managers assisted with the first 25 reviews and will also participate in the last 25 reviews.

In April 2017, the RFA Contract Monitor established guidelines for the RFA referral process, supervisor content approval process, and new role of the RFA reader. Currently eight readers are employed statewide whose role is to review and approve the content of every RFA completed by a contract agency. The RFA QA process will shift the readers' role to a "reviewer", and they will provide a level of QA by completing reviews of RFA's and the assessment process on recently approved resources. They will review traditional, kinship, therapeutic, and supported resources. On 4/13/2017, all RFA readers were informed of the proposed change. On 4/25/2017, the second quarterly contractor meeting was held with all RFA contract agency supervisors who were notified of the upcoming implementation of the RFA QA process.

In May 2017, Foster Care and Adoptions staff created three new tools for resource staff to use as part of the assessment and approval process.

- **Records Check Guide** assists resource staff in the assessment and approval of child welfare and criminal records for resource applicants. This tool outlines what information should be included on the records check documentation form and the process for approval or denial of requests as related to background information.
- **Initial Kinship Checklist** assists resource staff in ensuring all initial kinship requirements are met prior to the placement of custody children in the kinship resource. This tool outlines the initial kinship assessment process and requires supervisory approval prior to children being placed in the resource.
- **Resource Approval Checklist** assists resource staff in ensuring all requirements are met by applicants for full resource approval. This tool is completed by the assigned supervisor prior to approving the applicants as a paid resource home and outlines the information necessary to make a decision regarding approval or denial.

These tools were presented to resource supervisors in a meeting on 5/8/2017 with instruction on how to best utilize the tools. Supervisors were also given information on the RFA QA process and upcoming changes. Instruction was provided regarding RFA referrals to contracted agencies, addendums to RFAs, and staff expectations for RFA approvals. This information was provided to all resource staff via email on 5/25/2017.

The RFA QA process began on 6/1/2017 in five counties in Region 2: Cleveland, Garvin, Lincoln, McClain, and Pottawatomie Counties. This area was selected for implementing the new process because the counties have strong leadership and diverse rural and metropolitan populations. The combination of both rural and metro counties allows for feedback from resource staff regarding the process, modifications needed, and barriers for their specific work environment. Resource supervisors, support staff, and the field manager in these five counties were trained on 5/26/2017 regarding changes to the referral process, supervisor approval process, and workflow. On 6/2/2017, the Region 2 readers were trained on their new role in the QA process as reviewers, the operation of resource screens in the KIDS system, and completing RFA and resource approval reviews. Due to unforeseen circumstances and one reader not able to continue reading RFA's to approve content, the remainder of Region 2 supervisors, support staff and field manager were trained on the referral process, supervisor approval process, and work flow on 6/21/2017. Effective 6/22/2017, all Region 2 supervisors were reading RFA's from their agency, Marie Detty Youth and Family Services, for content and approval. The reader position was eliminated from the process. The Region 2 readers are now able to become "reviewers" and will only be reviewing recent resource approvals. A plan is presently being developed regarding implementation of the RFA QA process statewide.

The TFC program established a protocol that if a home is on a WPC due to issues concerning risk and safety that need to be resolved, new placements into the TFC home will not occur until the issues are addressed and resolved. The TFC program administrator and the MIC Lead conduct telephone conferences with the TFC contractors when issues are identified that might contribute to MIC and after a substantiated or unsubstantiated out-of-home investigation is reviewed. Identified issues or patterns of behavior that need to be addressed are done so through this conference call. This allows the TFC contractors and CWS to provide additional information to each other and learn from the information presented. All parties who participate in the call propose solutions or interventions to keep children safe while placed in these TFC homes. The TFC program administrator developed performance-based contracts for State Fiscal Year (SFY) 18 that address MIC and placement stability. The performance-based contract establishes a group learning review process between CWS and the TFC contractors as an effort to prevent MIC from occurring within the TFC program.

Data Evaluation

A large data set spanning several years was provided to Chapin Hall as well as the Research and Evaluation Manager at DHS OPOA. Several years of data on children and resource homes are being analyzed to provide a good descriptor of MIC as a whole. A release date for this analysis has not been established. The process will provide descriptive statistics on all children, using the child's information on referral history, removal history, and placement information including that of the resource, such as basic, demographic, preferences, experience, training, referrals, investigations, screen outs and substantiations, and on the substantiated population of children who experienced MIC. Work continues on the data evaluation processes.

Section 2, Table and Graph 1.1-1 indicate during this reporting period, the children who remained safe in care rose to 98.84 percent. Section 2, Graph 1.1-2 displays the number of victims per month over time. Section 2, Table 1.1-4 shows the percent of substantiations as well as the percent of resource type children are placed in when in foster care. Kinship foster care continues to have a high percentage of substantiations; however, kinship foster care is also the highest placement type with 39.4 percent of children placed in kinship relative foster care.

The data shows positive trending over the last three previous reporting periods. In the most recent reporting period, 98.84 percent of children had an absence of MIC by resource caregivers. The Screen-Out Consultation on Out-of-Home Referrals displays the number of total screened OOH referrals and how many of those show a screen-out consultation was conducted. From September 2016 to February 2017, each month shows progress in the percentage of screen-out consultations in compliance. March 2017 showed a slight decline; however, marked progress was made since screen-out consultations were initiated. The 10-day staffing on OOH Investigations shows significant progress leading to 100 percent compliance since December 2016.

Policy, Practice, and Technical Enhancements

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

Implementation of the Assessing Safety in Residential Settings Contact Guide began 10/1/2016. Efforts to support its use and implementation included information to both the permanency planning level trainings in January 2017 and in the group home referral packet in April 2017. During this reporting period, further work on refinement of the Specialized Placement and Partnerships (SPPU) Facility Services Plan (FSP) screens and reports in KIDS occurred as a result of feedback obtained during screen functionality testing in January 2017. This further testing resulted in unforeseen delays of the release in KIDS with the official release occurring in June 2017. Case reviews, using the substantiated and unsubstantiated case review tools for facilities, began in March 2017. Monthly, all substantiated referrals involving youth in DHS custody placed in CWS-contracted facilities are reviewed and a random selection of unsubstantiated referrals are reviewed. While additional work on this process remains, areas of concern identified during the completed reviews to date were followed up on and addressed. Furthermore, efforts were undertaken by DHS and facility leadership to strengthen the communication process on concerns identified by the SPPU staff that were unable to be addressed at the local level. These efforts included re-emphasizing to staff, in staff meetings and regular supervisory conferences, the protocol regarding elevation of concerns and clarification of roles and responsibilities surrounding duties while at facilities. Additionally, clarification was provided to SPPU supervisors regarding their authority to address concerns with facilities at the local level while providing assurance that DHS leadership may be contacted and would be responsive when issues are unable to be resolved.

Contract Enhancements

Use of the standardized forms and reports by providers began 1/1/2017, in conjunction with and support of, the single model of behavior management within the group home level of care, known as Managing Aggressive Behavior (MAB), which also began 1/1/2017. The initial provider performance report cards, based on data and reports from 1/1/2017 to 3/31/2017, are being compiled and will be shared with providers at the next group home administrator meeting on 8/11/2017. Over the next year, the data gathered in the report cards will assist in establishing baselines related to

provider performance for the tracked areas. Further refinement and work related to use of the information obtained from the reports cards is ongoing.

Since the MAB implementation in January 2017, SPPU, through the Trauma-Informed Care Project (TICP) with the National Resource Center for Youth Services (NRCYS), provided MAB supportive services to facility staff in efforts to build organizational capacity, support the internalization of the training concepts within each agency, provide direct care staff with competent on-site coaches, and build a statewide trainer network. As a result, a strong focus on the development of individual MAB trainers has developed within the facilities. Specific efforts in this regard include:

Co-training with New Trainers. TICP staff is available to co-train with new, less experienced trainers as they become more comfortable in their role as agency trainers.

Trainer Development Plans. TICP is working to develop trainer development plans for all contracted agency MAB trainers. The plan is developed with the identified trainer to improve their ability to train MAB with fidelity. TICP's goal is to complete a trainer observation and development plan for every trainer by the end of December 2017. TICP staff work to maintain consistent contact with their assigned trainers to check on upcoming training, share any upcoming training opportunities, and answer any questions they may have.

Trainer Action Learning Sets. TICP provides opportunities for trainers to participate in quarterly Action Learning Sets (ALS). The ALS is a small, formal, focus group designed to promote professional growth and learning of its members through collective problem solving of real challenges experienced in the work place. Action learning is defined as a process that relies upon the combined knowledge and skills of a small group of people, which in this case is professional youth workers, and uses skilled questioning to create innovative solutions to real challenges faced in the day-to-day work of the individuals involved. In SFY 17, TICP piloted this model and offered three ALS sessions to trainers that were located on the state's west side. Trainers from five contracted agencies took part in at least one of these with three agencies attending all sessions. Topics discussed included team building, coaching, documentation, and addressing staff uneasiness with new skills. This ALS was responsible for the development of the MAB Trainer Tips fact sheet. In SFY 18, the western ALS will continue with quarterly meetings and another ALS will be launched on the east side of the state.

Targeted MAB Trainer Newsletter. These newsletters are focused on providing additional information that can support the major components of the MAB training: Foundations, Prevention, Intervention, and PostVention. Each edition includes links to research articles, suggested activities, and reminders about upcoming training that can support MAB concepts.

Webinars and Conference Calls. On at least a quarterly basis, TICP provides structured virtual learning opportunities. To date, sessions provided include MAB refresher courses and "Promising Practices in Reducing the Use of Restraint."

On-going Availability for Technical Assistance. TICP staff is available to agency staff, trainers, and SPPU staff by phone or email to answer questions or assist in problem-solving difficult situations.

Trauma-Responsive Skills Practice Sessions. TICP staff offers regularly scheduled "Trauma-Responsive Skills Practice Sessions" throughout the year and allows participants safe practice time to hone new skills. TICP staff also shared this format with agency trainers to use at their individual facilities.

Professionalizing Youth Work in Oklahoma Conference. In its twelfth year, the one-day Professionalizing Youth Work in Oklahoma Conference provided an opportunity for youth workers from a variety of settings to come together to network and learn about promising approaches to professional child and youth care practice. Participants are given the opportunity to hear from nationally-recognized trainers and choose from nearly 20 workshops covering topics, such as Engaging the Senses in De-escalation, Fostering Inclusive Culture for Transgender and Gender-

Nonconforming Youth, Secondary Traumatic Stress, The Adventure of a Common Language: Developing Equity Through Collaborative Norm Setting, Engaging Parents as Partners, and Creative Expression: How the Arts Can Impact Trauma-Informed Work with Youth. This year's conference included a full-day pre-conference, The Art of Supervision, specifically designed for supervisors and administrators that focused on how supervision plays an integral role in shaping quality care.

Heightened Monitoring

Specific activities and detailed processes related to the selection of and work completed with facilities in need of heightened monitoring based upon five initial data sets were summarized in previous semi-annual reports. This reporting period includes heightened monitoring activities based upon the sixth and seventh maltreatment data sets received.

During this reporting period, monthly Heightened Monitoring Team (HMT) conference call updates were held 10/5/2016, 11/2/2016, 12/7/2016, 2/2/2017, 3/7/2017, 4/5/2017, 5/3/2017, and 6/7/2017. A monthly HMT conference call did not occur in January 2017 due to issues with the established conference call line. Despite this call not occurring in January 2017, the HMT program field representative (PFR) did provide informal updates regarding progress to other HMT members during regularly occurring heightened monitoring meetings with each facility. During the monthly calls, action plans are reviewed and action plan updates are suggested based on information from weekly on-site monitoring by SPPU liaisons, bi-monthly visitation by the SPPU PFR assigned to HMT activities, DHS Child Care Licensing (CCL) feedback, Office of Client Advocacy (OCA) feedback, and provider input.

The sixth maltreatment data set, October through December 2016, was received January 2017. Review of this data set identified three resources in need of heightened monitoring from the group home and shelter level of care and three resources at the Residential Treatment Center (RTC) and acute level of care. Of the three resources identified at the group home and shelter level of care, one was previously identified as a resource in need of heightened monitoring and as a result had already completed the program assessment process in addition to an initial action plan. Despite this, CWS staff indicated the need for a subsequent action plan to be developed to support ongoing sustainable change in the facility's practice and culture. Progress on the subsequent action plan was minimal and resulted in a notice to comply (NTC) and corresponding WPC issued to the provider in April 2017. These contractual actions included a hold on new placements, reduced reimbursement, increased monitoring by SPPU staff, and weekly progress reporting. Provider progress and compliance was observed and as a result, the NTC was ended. Monitoring is ongoing to ensure sustainability of progress realized during the NTC time frame.

The second identified resource in need of heightened monitoring at the group home and shelter level of care completed the initial HMT meeting on 1/19/2017 and the program assessment on 2/2/2017. The third identified resource in need of heightened monitoring at this level completed the initial HMT meeting on 1/27/2017 and the program assessment on 2/9/2017. Of the three resources identified at the RTC and acute level of care in this data set, one had previously been identified as a resource in need of heightened monitoring and participated in an initial heightened monitoring meeting. At this meeting, the provider declined the offer of completing a program assessment and to engage in the heightened monitoring process. As a result, an initial heightened monitoring meeting was not held with this provider, but notice was given that one of their resources was again identified as a resource in need of heightened monitoring. The second identified resource at this level of care completed the initial HMT meeting on 2/13/2017. This resource declined to participate in the program assessment and heightened monitoring process, but indicated they ordered the Trauma-Informed Toolkit information and intend on having five additional staff trained as START trainers in hopes of internally improving trauma-responsive care in their program. The third identified resource at this level of care completed the initial HMT meeting on 1/31/2017 and declined to participate in the program assessment and heightened monitoring process.

The seventh maltreatment data set, January through March 2017, was received April 2017. During the data set review, the only resource from the group home and shelter level of care found to have a substantiated report of maltreatment was the same resource issued the NTC and WPC, discussed above. As a result, heightened monitoring activities for this

resource consisted of follow-up regarding the NTC and WPC. All of the identified providers from the acute and RTC level of care had resources previously identified as in need of heightened monitoring and participated in initial heightened monitoring meetings, but declined to participate in the program assessment and heightened monitoring process.

In addition to the above-heightened monitoring activities, other significant contractual actions occurred during this reporting period. These actions involved three providers at the group home and shelter level of care and one provider at the RTC and acute level of care. Actions taken involving the first provider at the group home and shelter level included a NTC and corresponding WPC issued on 4/18/2017 for one resource. This ultimately led to contract termination of this resource effective 7/15/2017. The provider's other resource was issued NTCs and corresponding WPCs on 4/18/2017 and 6/15/2017. The contractual actions included a hold on new placements, reduced reimbursement, increased monitoring, and weekly reporting. Oversight of the second NTC is ongoing. Action taken involving the second provider at the group home and shelter level of care consisted of acceptance of contract termination for one of their resources effective 3/22/2017. Action taken involving the third provider at the group home and shelter level consisted of acceptance of contract termination for both of the provider resources effective 6/30/2017. Contractual actions taken involving the provider at the RTC and acute level of care were implemented by the Oklahoma Health Care Authority (OHCA) and consisted of notice of the Medicaid contract termination for three of the provider's contracts effective 7/31/2017. As a result, CWS placed a hold on youth admittance in the impacted resources and established an ongoing monitoring plan for youth currently placed in these resources.

Core strategy initiatives designed to impact MIC in higher-level settings continue. Positive trending is occurring and is evidenced by a decrease of fifteen child MIC victims in all congregate care settings compared to data in the previous semi-annual report. Furthermore, targeted efforts towards those facilities identified as in need of heightened monitoring appears to be positively impacting the majority of involved resources. Of the eight group home resources identified as in need of heightened monitoring in the third, fourth, and fifth data periods, only one had any victims of MIC during the sixth data period. This resource is the one that successfully completed the WPC in June 2017 and whose ongoing monitoring for observed, sustained progress is continuing. Of the eleven acute and RTC level resources identified as in need of heightened monitoring in the third, fourth, and fifth data periods, only one had an MIC victim during the sixth data period. That resource is the one impacted by the contractual actions taken by OHCA.

Children with Substantiations of Abuse or Neglect while in Out-of-Home Care- OCA Heightened Monitoring Facilities									
	Group Homes								TOTAL
	Group Home 1	Group Home 2	Group Home 3	Group Home 4	Group Home 5	Group Home 6	Group Home 7	Group Home 8	
Apr-2016	1								1
May-2016									0
Jun-2016	1			1					2
Jul-2016									0
Aug-2016	3		3						6
Sep-2016							3	2	5
Oct-2016									0
Nov-2016			3			1			4
Dec-2016					1				1
Jan-2017									0
Feb-2017									0
Mar-2017			2						2
TOTAL	5	0	8	1	1	1	3	2	21

Data Source: KIDS Data Measure 1.1 MIC- Run Date: May 31, 2017 -Numbers indicate children with substantiations while in DHS custody and placed at Facility. Substantiations for children in DHS custody only.

HMF - 3th period	HMF - 4th period	HMF - 5th period	HMF - 6th period
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Section 2, Table 1.1-5

Children with Substantiations of Abuse or Neglect while in Out-of-Home Care- OCA Heightened Monitoring Facilities												
	Hospitals											TOTAL
	Acute / RTC 1	Acute / RTC 2	Acute / RTC 3	Acute / RTC 4	Acute / RTC 5	Acute / RTC 6	Acute / RTC 7	Acute / RTC 8	Acute / RTC 9	Acute / RTC 10	Acute / RTC 11	
Apr-2016												0
May-2016												0
Jun-2016					1							1
Jul-2016												0
Aug-2016												0
Sep-2016						1						1
Oct-2016											1	1
Nov-2016									1			1
Dec-2016												0
Jan-2017												0
Feb-2017												0
Mar-2017		1										1
TOTAL	0	1	0	0	1	1	0	0	1	0	1	5

Data Source: KIDS Data Measure 1.1 MIC- Run Date: May 31, 2017 -Numbers indicate children with substantiations while in DHS custody and placed at Facility. Substantiations for children in DHS custody only.

HMF - 3th period	HMF - 4th period	HMF - 5th period	HMF - 6th period
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Section 2, Table 1.1-6

1.2: Absence of Maltreatment in Care by Parents

Operational Question

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

Data Source and Definitions

For the Semi-Annual report, Oklahoma uses the same logic as Data Element XI. Children Maltreated by Parents while in Foster Care on Oklahoma's Federal Data Profile. This element uses a 12-month period based on the time frame of October 1 through September 30. Oklahoma used the two official state-submitted AFCARS (17A & 16B) files combined with a non-submitted annual NCANDS (Covering AFCARS 17A & 16B periods) file to compute the measure. The NCANDS

file used for this report is calculated the same as the file submitted to the federal government, which includes running the data through the official validation tool. The official submission to NCANDS occurs only once annually and is due yearly by January 31, so the NCANDS data is still subject to change until that date.

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

The federal data element includes all victims of substantiated abuse or neglect by a parent while in care, even when the reported abuse occurred prior to the child coming into care. Whereas in the monthly metric, children disclosing abuse that occurred prior to coming into care are excluded.

Description of Denominator and Numerator for this reporting period

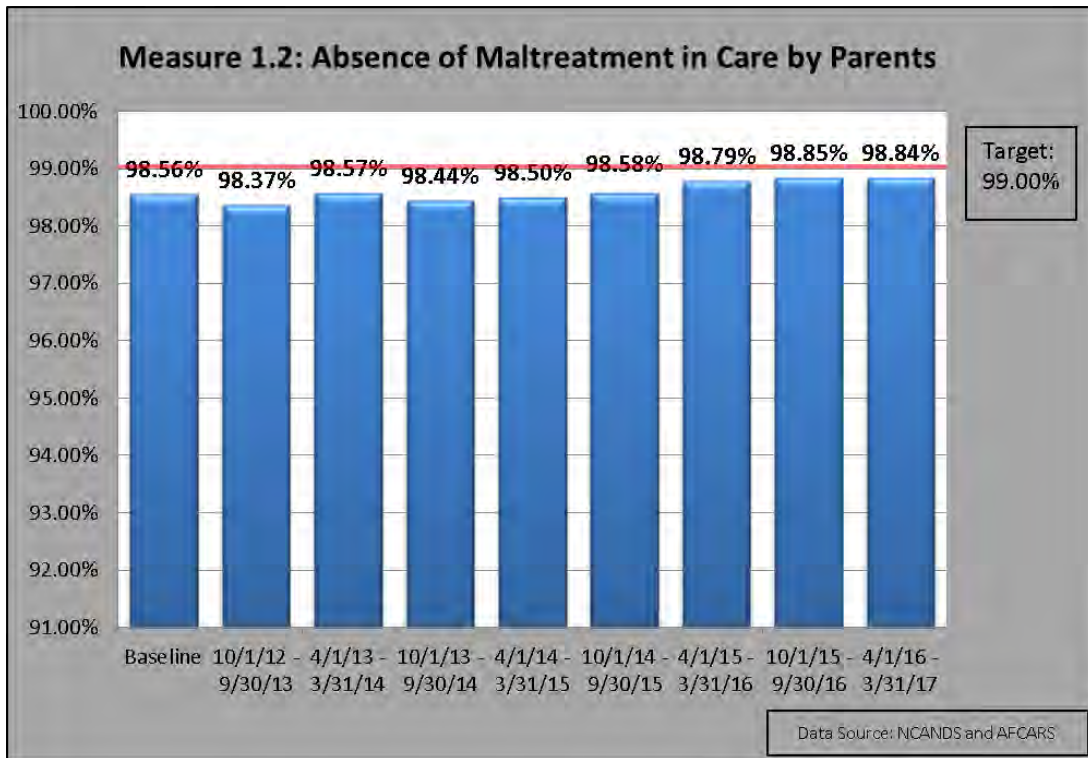
Denominator: All children served in foster care from 4/1/2016 through 3/31/2017.

Numerator:

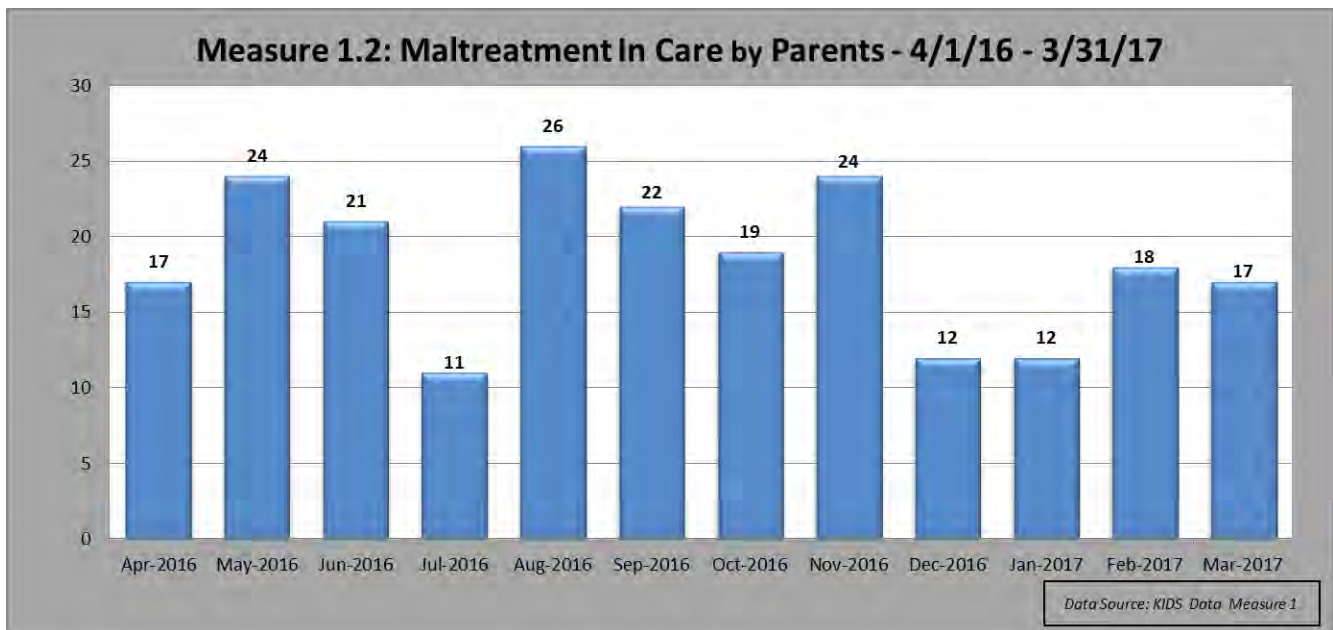
Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2010 – 9/30/2011	All children served from 10/1/2010 - 9/30/2011	12,352	12,533	98.56%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013	14,800	15,045	98.37%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014	15,580	15,806	98.57%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014	16,018	16,272	98.44%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015	16,390	16,640	98.50%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015	16,571	16,808	98.58%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016	16,348	16,548	98.79%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 -- 9/30/2016	16,057	16,244	98.85%
4/1/2016 – 3/31/2017	All children served from 4/1/2015 - 3/31/2016	15,570	15,753	98.84%
Target				99.00%

Section 2, Table 1.2-1



Section 2, Graph 1.2-1



Section 2, Graph 1.2-2

Commentary

Section 2, Graph 1.2-1 is based on the federal indicator for maltreatment in care (MIC) and produces representative information about the incidence of MIC by parents. The data above shows that the rate of maltreatment in care has improved from the baseline. In the most recent reporting period, 98.84 percent of children in out-of-home care were not abused or neglected by a parent. Focus on the safety of children through safety assessments throughout the time children are in out-of-home care is still a priority. Other targeted areas, such as quality worker visits by the primary

worker also impact safety assessment. Ongoing analyses occur to understand where and when these incidents are occurring. Current evaluation efforts and strategy development are focused on parts of the state who represent outliers in the data.

For the reporting period April 1, 2016 - March 31, 2017, a total of 223 substantiations of maltreatment while in out-of-home care by parents were reported in the monthly MIC Pinnacle Plan Measure. The 223 victims were included in 135 separate referrals. In the prior monthly reporting, 81 of these victims were excluded based on the alleged abuse/neglect occurring prior to the child coming into out-of-home care; however, these victims are still reported to NCANDS.

Of the **223** victims in out-of-home care by parents:

- 110 were in Trial Reunification (49.3%);
- 39 were in Kinship Foster Homes (17.5%);
- 48 were placed in Foster Homes (21.5%);
- 22 were placed in Above Foster Care or other type settings (9.9%); and
- 4 were placed in other placements (1.8%).

3.1: Frequency of Worker Contacts

Operational Question

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

Data Source and Definitions

This measure is calculated using the criteria for the federal visitation measure. However, the measure differs from the federal measure since this measure does not include children in tribal custody.

- The data reflects the total number of required monthly contacts due to children in out-of-home care over the course of 12 months and the number of total required monthly contacts made for those visits.
- Only one monthly contact per month is counted even though multiple visits may have occurred.

Description of Denominator and Numerator for this reporting period

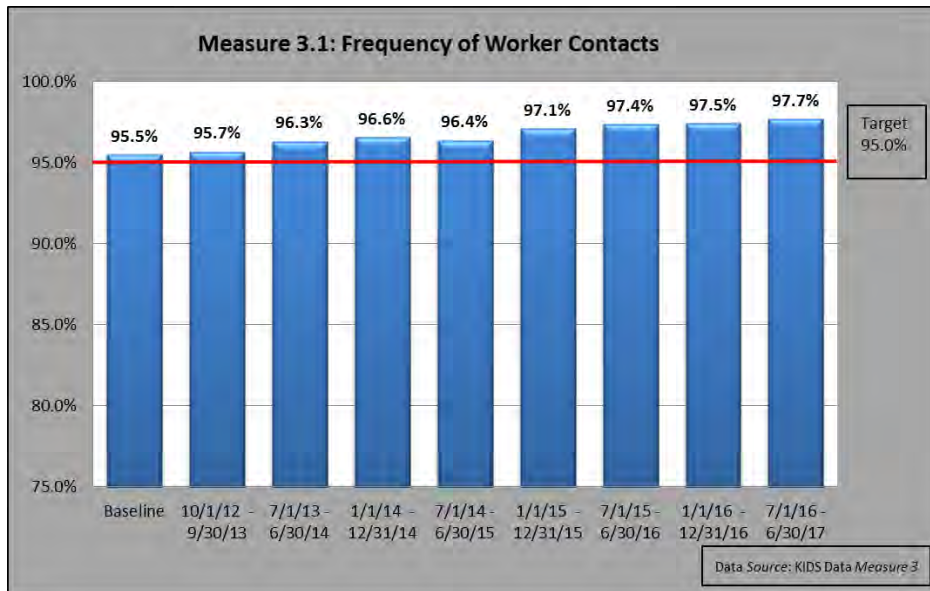
Denominator: The number of required monthly contacts due from 7/1/2016 through 6/30/2017.

Numerator: The number of qualifying required monthly contacts made.

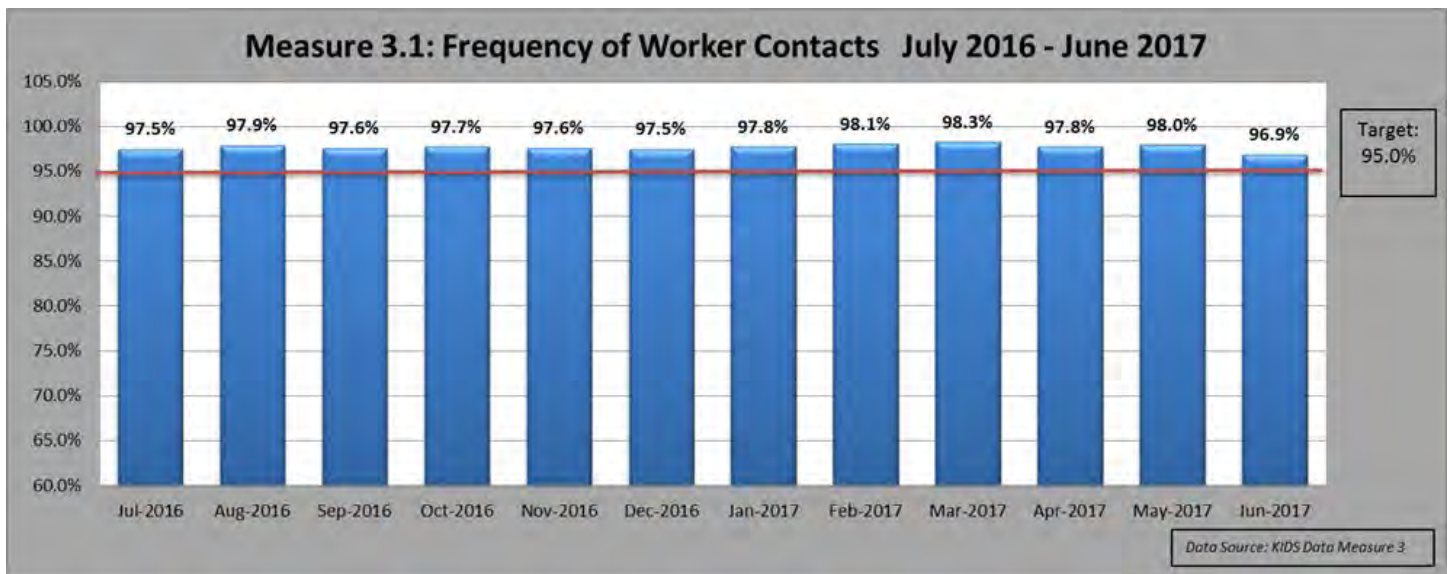
Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 7/1/2011 – 6/30/2012	All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012	90,355	94,639	95.5%
10/1/2012 – 9/30/2013	All children due a visit who were in care at least a full calendar month from 10/1/2012 – 9/30/2013	105,868	110,673	95.7%
7/1/2013 – 6/30/2014	All children due a visit who were in care at least a full calendar month from 7/1/2013 – 6/30/2014	118,824	123,343	96.3%
1/1/2014 – 12/31/2014	All children due a visit who were in care at least a full calendar month from 1/1/2014 – 12/31/2014	124,355	128,745	96.6%
7/1/2014 – 6/30/2015	All children due a visit who were in care at least a full calendar month from 7/1/2014 – 6/30/2015	123,596	128,173	96.4%
1/1/2015 – 12/31/2015	All children due a visit who were in care at least a full calendar month from 1/1/2015 – 12/31/2015	121,799	125,417	97.1%
7/1/2015 – 6/30/2016	All children due a visit who were in care at least a full calendar month from 7/1/2015 – 6/30/2016	117,879	120,998	97.4%
1/1/2016 – 12/31/2016	All children due a visit who were in care at least a full calendar month from 1/1/2016 – 12/31/2016	111,659	114,567	97.5%
7/1/2016 – 6/30/2017	All children due a visit who were in care at least a full calendar month from 7/1/2016 – 6/30/2017	106,218	108,704	97.7%
Target				95.0%

Section 2, Table 3.1-1



Section 2, Graph 3.1-1



Section 2, Graph 3.1-2

Commentary

The baseline for this measure was 95.5 percent and the target is to sustain 95.0 percent. Over the 12-month period from July 1, 2016 - June 3, 2017, 108,704 monthly contacts were required and 106,218 monthly contacts were completed which resulted in a rate of 97.7 percent. Performance in this area continues to be above the baseline and exceeds the target.

3.2: Frequency of Primary Worker Contacts

Operational Question

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

Data Source and Definitions

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

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

Description of Denominator and Numerator for this reporting period

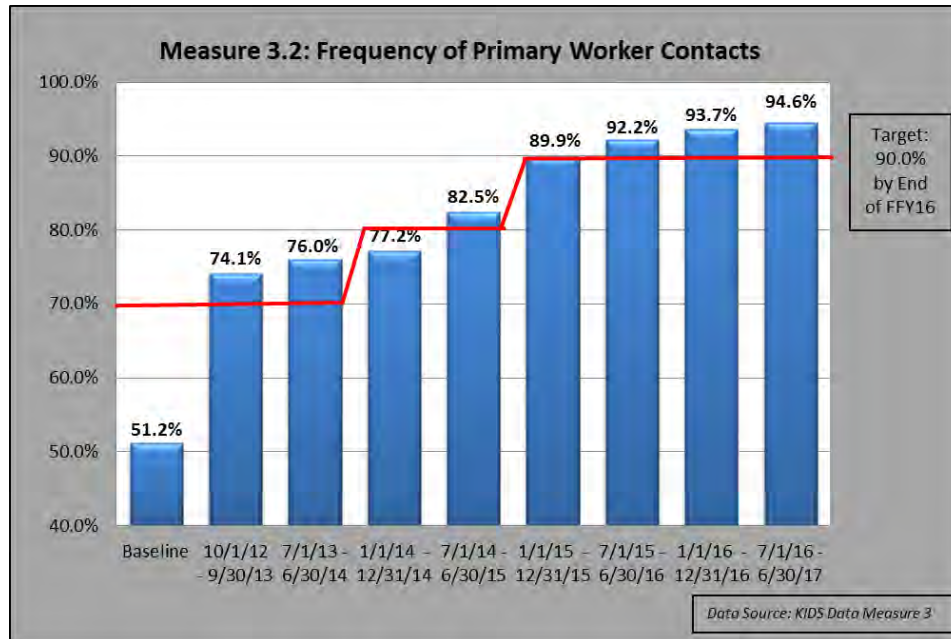
Denominator: The number of required monthly contacts due from 7/1/2016 through 6/30/2017.

Numerator: The number of qualifying monthly visits made by a primary worker.

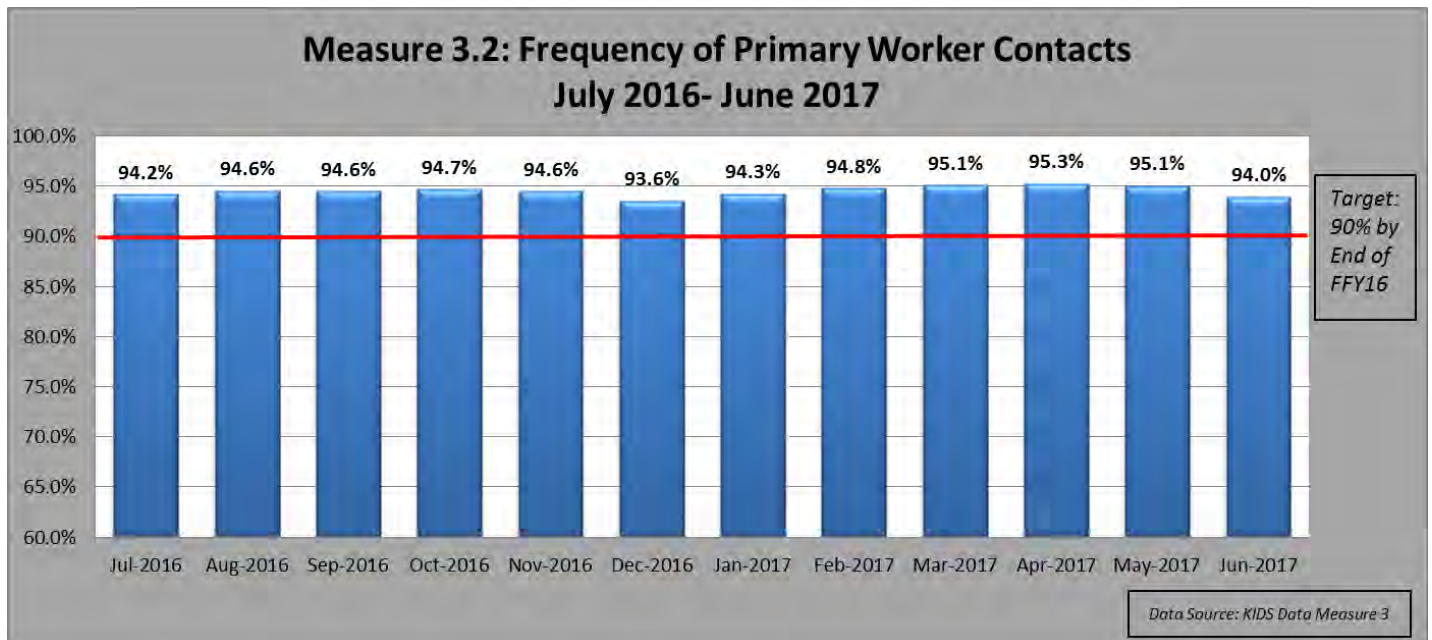
Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 7/1/2011 – 6/30/2012	All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012	48,497	94,639	51.2%
10/1/2012 – 9/30/2013	All children due a visit who were in care at least a full calendar month from 10/1/2012 – 9/30/2013	81,971	110,673	74.1%
7/1/2013 – 6/30/2014	All children due a visit who were in care at least a full calendar month from 7/1/2013 – 6/30/2014	93,760	123,343	76.0%
1/1/2014 – 12/31/2014	All children due a visit who were in care at least a full calendar month from 1/1/2014 – 12/31/2014	99,358	128,745	77.2%
7/1/2014 – 6/30/2015	All children due a visit who were in care at least a full calendar month from 7/1/2014 – 6/30/2015	105,749	128,173	82.5%
1/1/2015 – 12/31/2015	All children due a visit who were in care at least a full calendar month from 1/1/2015 – 12/31/2015	108,859	121,024	89.9%
7/1/2015 – 6/30/2016	All children due a visit who were in care at least a full calendar month from 7/1/2015 – 6/30/2016	107,763	116,834	92.2%
1/1/2016 – 12/31/2016	All children due a visit who were in care at least a full calendar month from 1/1/2016 – 12/31/2016	103,881	110,830	93.7%
7/1/2016 – 6/30/2017	All children due a visit who were in care at least a full calendar month from 7/1/2016 – 6/30/2017	99,699	105,424	94.6%
Target				90.0%

Section 2, Table 3.2-1



Section 2, Graph 3.2-1



Section 2, Graph 3.2-2

Commentary

The baseline for this measure was 51.2 percent and the final target is 90.0 percent to be met by the end of June 30, 2016. Over the 12-month period from July 1, 2016 - June 30, 2017, 105,424 primary monthly contacts were required and 99,699 of those were monthly contacts made by the primary worker for a rate of 94.6 percent. This measure has shown continual improvement in every reporting period. Performance in this area continues to be above the baseline and exceeds the target. This is the third consecutive reporting period above the target of 90 percent.

Initial efforts to improve the number and percentage of worker visits completed by the primary worker were ending secondary assignments and decreasing workloads. Ongoing efforts to sustain improved performance in this measure include caseload management through use of reports by district directors and supervisors. Strategies implemented to improve new worker hiring, staff retention, and reduction of workloads were also implemented to impact Measures 3.1, 3.2, and 3.3.

3.3: Continuity of Worker Contacts by Primary Workers

Operational Question

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

Data Source and Definitions

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

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

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

Description of Denominator and Numerator for this reporting period

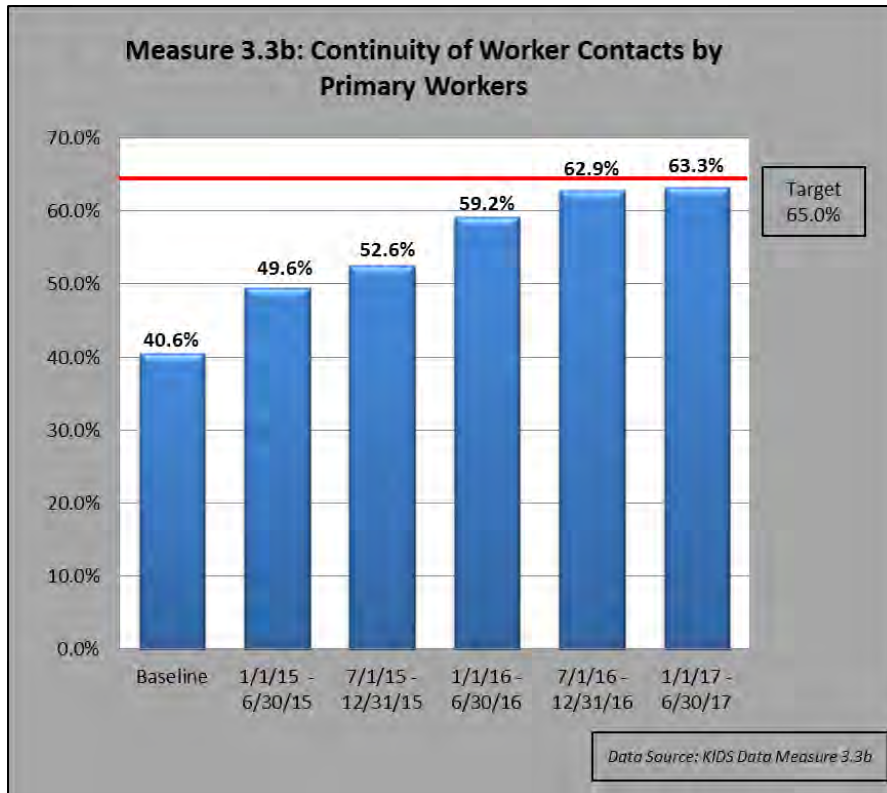
Denominator: Number of children in custody for at least six consecutive months from 1/1/2017 through 6/30/2017.

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

Trends

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

Section 2, Table 3.3-1



Section 2, Graph 3.3-1

Commentary

This is the fifth reporting period for the Worker Continuity measure and there was a 0.4 percent increase over the last reporting period. The baseline was set at 40.6 percent. From January 1, 2017 – June 30, 2017, 63.3 percent of the children in care were seen by the same primary worker for six consecutive months. The target for this measure is 65.0 percent and as of 6/30/2017, CWS is 1.7 percent away from the target. CWS continues to show positive trending on this performance measure with a 22.7 percent increase since the baseline reporting.

Efforts to improve performance in this measure include caseload management through use of reports by district directors and supervisors. Strategies implemented to improve hiring, staff retention, and reduction of workloads are also implemented to impact Measures 3.1, 3.2, and 3.3.

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

Operational Question

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

Data Source and Definitions

Timeliness and Permanency of Reunification – AFCARS 17A and 16B

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

Description of Denominator and Numerator for this reporting period

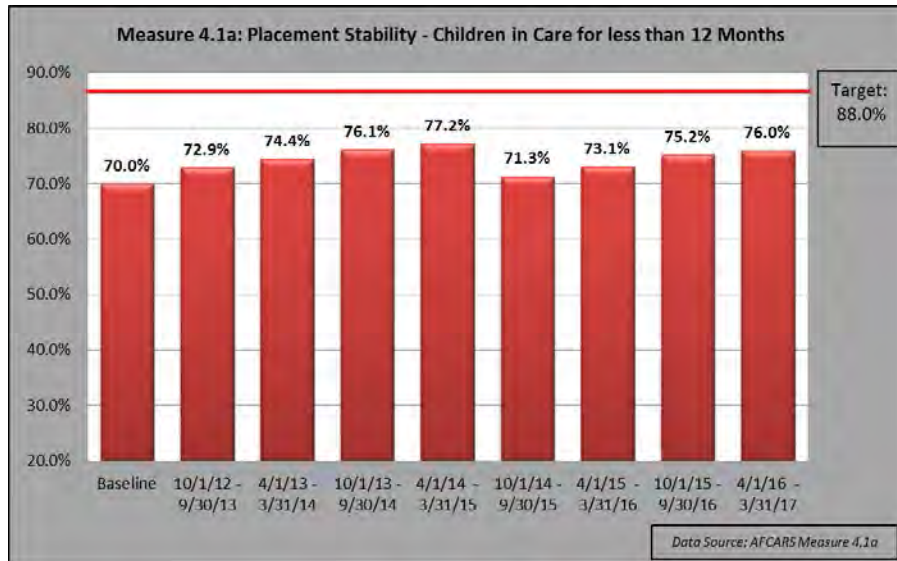
Denominator: All children served in foster care from 4/1/2016 through 3/31/2017 whose length of stay (LOS) as of 3/31/2017 was between (b/w) eight days and 12 months.

Numerator: All children served in foster care from 4/1/2016 through 3/31/2017 whose length of stay as of 3/31/2017 was between eight days and 12 months **and** who had two or fewer placement settings as of 3/31/2017.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS b/w 8 days and 12 months			70.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS b/w 8 days and 12 months	4,396	6,031	72.9%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS b/w 8 days and 12 months	4,564	6,136	74.4%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS b/w 8 days and 12 months	4,513	5,933	76.1%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS b/w 8 days and 12 months	4,297	5,564	77.2%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS b/w 8 days and 12 months	3,981	5,585	71.3%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS b/w 8 days and 12 months	4,048	5,537	73.1%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS b/w 8 days and 12 months	4,106	5,462	75.2%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS b/w 8 days and 12 months	4,271	5,617	76.0%
Target				88.0%

Section 2, Table 4.1a-1



Section 2, Graph 4.1a-1

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

Operational Question

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

Data Source and Definitions

Timeliness and Permanency of Reunification – AFCARS 17A and 16B

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

Description of Denominator and Numerator for this reporting period

Denominator: All children served in foster care from 4/1/2016 through 3/31/2017 whose length of stay (DOS) as of 3/31/2017 was between 12 months and 24 months.

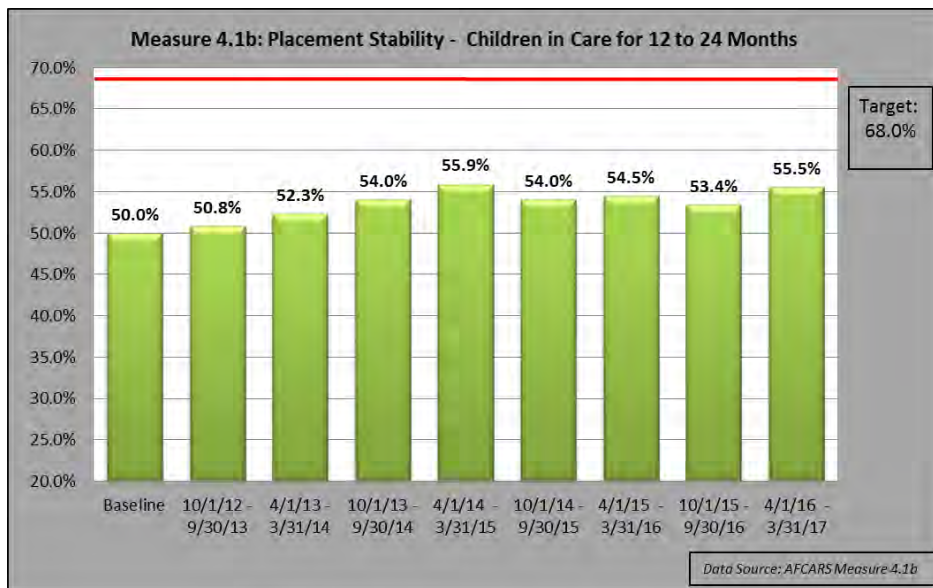
Numerator: All children served in foster care from 4/1/2016 through 3/31/2017 whose length of stay as of 3/31/2017 was between 12 months and 24 months **and** who had two or fewer placement settings as of 3/31/2017.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS between 12 and 24 months			50.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS between 12 and 24 months	2,292	4,514	50.8%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS between 12 and 24 months	2,569	4,909	52.3%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS between 12 and 24 months	2,795	5,174	54.0%

4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS between 12 and 24 months	3,034	5,430	55.9%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS between 12 and 24 months	2,844	5,271	54.0%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS between 12 and 24 months	2,710	4,977	54.5%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS between 12 and 24 months	2,636	4,935	53.4%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS between 12 and 24 months	2,620	4,717	55.5%
Target				68.0%

Section 2, Table 4.1b-1



Section 2, Graph 4.1b-1

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

Operational Question

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

Data Source and Definitions

Timeliness and Permanency of Reunification – AFCARS 17A and 16B

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

Description of Denominator and Numerator for this reporting period

Denominator: All children served in foster care from 4/1/2016 through 3/31/2017 whose length of stay as of 3/31/2017 was 24 months or longer.

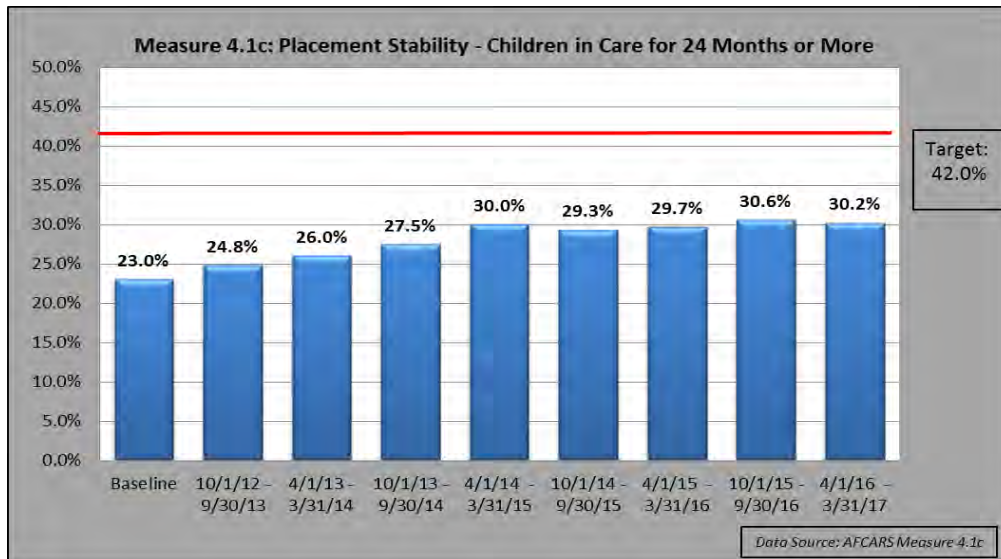
Numerator: All children served in foster care from 4/1/2016 through 3/31/2017 whose length of stay as of

3/31/2017 was 24 months or longer **and** who had two or fewer placement settings as of 3/31/2017.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS 24 months or longer			23.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS 24 months or longer	1,002	4,035	24.8%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS 24 months or longer	1,112	4,277	26.0%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS 24 months or longer	1,303	4,731	27.5%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS 24 months or longer	1,576	5,260	30.0%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS 24 months or longer	1,632	5,572	29.3%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS 24 months or longer	1,688	5,677	29.7%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS 24 months or longer	1,676	5,486	30.6%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS 24 months or longer	1,524	5,051	30.2%
Target				42.0%

Section 2, Table 4.1c-1



Section 2, Graph 4.1c-1

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

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

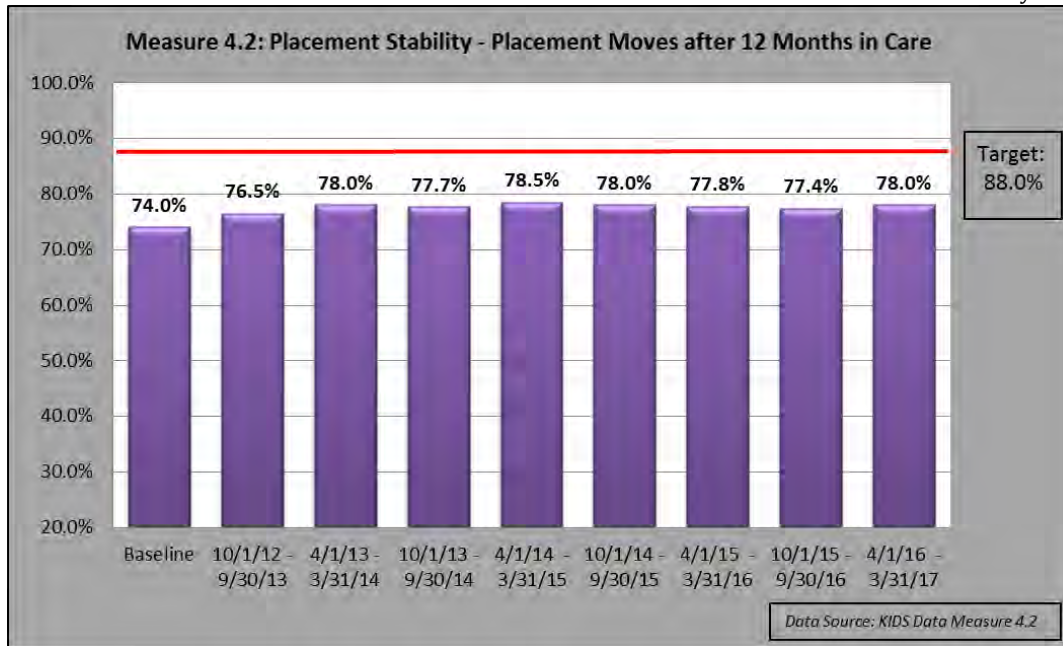
Denominator: All children served in foster care from 4/1/2016 through 3/31/2017 whose current removal was prior to 3/31/2017 and remained in care at least 12 months.

Numerator: All children served in foster care from 4/1/2016 through 3/31/2017 whose current removal was prior to 3/31/2017 and remained in care at least 12 months **and** had two or fewer placement settings.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS at least 12 months			74.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS at least 12 months	6,404	8,374	76.5%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS at least 12 months	7,026	9,002	78.0%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS at least 12 months	7,590	9,763	77.7%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS at least 12 months	8,263	10,522	78.5%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS at least 12 months	8,334	10,691	78.0%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS at least 12 months	8,122	10,445	77.8%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS at least 12 months	7,871	10,172	77.4%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS at least 12 months	7,479	9,583	78.0%
Target				88.0%

Section 2, Table 4.2-1



Section 2, Graph 4.2-1

Commentary

Child Welfare Services (CWS) continues to gain a better understanding surrounding placement stability for children in out-of-home care. CWS understands how placement stability increases safe and timely permanency for children, impacts staff and resource parent retention, and decreases MIC and shelter usage. CWS continues to make progress in key Pinnacle Plan measures that likely have a positive impact on placement stability. The measures include 86.5 percent of child welfare (CW) specialists met workload standards, 94.6 percent of children were seen by their primary CW specialist for six consecutive months, and an increase in the number of children that exited to permanency. In addition, CWS conducted quantitative and qualitative analyses related to placement stability that led to data-driven strategies to impact placement stability for children in out-of-home care.

During this reporting period, CWS continued to increase in Measure 4.1a to 76.0 percent. This is a 6 percent overall positive growth since the baseline data. This makes three consecutive reporting periods for positive trending. An increase occurred in Measure 4.1b by two percent for a total of 55.5 percent. This is a 5.5 percent overall positive growth since the baseline. CWS fell slightly in Measures 4.1c by 0.4 percent. Even with a slight decrease, Measure 4.1c has had a 7.2 percent overall increase from the baseline data. Measure 4.2 did improve to 78.0 percent. This is a 4 percent overall positive increase from the baseline data. In all of the 4.1 and 4.2 Measures, performance has never fallen below the baseline since reporting began.

In January 2017, the Co-Neutrals approved new strategies that supplement initial placement stability strategies. The strategies focus on qualitative and quantitative analysis, utilizing child safety meetings as a forum to identify the best first placement, resource parent check in calls, child and resource family support plans, and training enhancements. CWS began implementing the approved refined strategy by training all CWS leadership in January 2017. The placement stability leads provided support to their regions on the refined strategy, but they anticipated that staff would need an in-depth follow-up. Therefore, CWS provided follow-up training to all supervisors at each regional CW supervisor quarterly meetings in April 2017.

CWS led supervisors through the process of how data-driven decisions were used to develop the refined strategy. CWS provided supervisors with the findings of the qualitative and quantitative analyses and how those findings supported the refined strategy. Supervisors were provided with the placement trajectory information for children who were placed in traditional and kinship foster care. CWS highlighted to supervisors the number of children who are placed in traditional foster care and then moved to kinship on their second placement. CWS underscored that children are less likely to have

a second placement when they are initially placed with kinship. Additionally, CWS stressed the number of lateral moves that occur from traditional foster home to traditional foster home. This information underscored the significance of: placement selection process after the decision has been made to remove in the child safety meeting (CSM); resource parent check-in call; initial meeting; need to develop a child and resource parent support plan; and ongoing follow-up related to the child and resource parent support plan. Supervisors now see the need to identify kinship when kinship is a viable option for children regardless of the placement move.

Videos were created that model for staff how to conduct different types of discussions about enhanced placement. The modelling videos support learning for all CW staff regarding the refined strategy. At this time, 66 percent of all CW staff has viewed the modeling videos. The videos, as a teaching tool, permit watching and learning as a group activity. The data captured in the Learning Management System (LMS) does not reflect when these videos were viewed as a group. CWS believes the majority of CW staff viewed the modeling videos to enhance their practices surrounding Core Strategy (CS) 7. In addition, resource parents can access to the modeling videos on the Bridge Resource LMS.

CWS acknowledged the refined strategy has practices that needed to be captured to ensure CS 7 is positively impacting placement stability for children in out-of-home care. Additionally, CWS needed a way to hold staff accountable to engage in the practices set forth in CS 7. Therefore, a placement stability report was created to capture information surrounding the number of children removed that had a CSM, the placement recommendation from the CSM, the first placement resource parent check-in call, and the initial meeting. The resource parent check-in call is documented in KIDS with the purpose of support plan. For that reason, in this report the Date "Support Plan" Contact column reflects the check-in call. At this time, CWS is unable to collect information related to the Non-Kinship Approval and the Quarterly Child and Family Resource Support plan, but is working on capturing the Non-Kinship Approval and Quarterly Child and Resource Family Support Plan.

CWS projected documentation related to CS 7 would be limited in the beginning months as it is a refined strategy with new activities. Accordingly, CWS chose February 2017 - April 2017 to be the baseline for the refined strategy. 13.2 percent of resource parent check-in calls and 10.5 percent of initial meetings were documented during February 2017 - April 2017. During this same time period, 89.4 percent of children had a CSM, with 49.3 percent with a recommendation type of kinship and 23.6 percent traditional foster care. From the CSM placement recommendations, 37.7 percent of first placement was in a kinship and 50.1 percent was in traditional foster care.

The Placement Stability-Two Move Data Report continues to be a vital report for CWS. In January 2017, the placement stability team added two columns for the child-specific behavior that led the resource parent to ask for the child to be moved due to behavior and what could CWS have done better to support the child and the resource family. Every supervisor that has a child on the report is expected to contact the resource family and ask those two questions when a child was moved due to behaviors. During January – June 2017, 691 children entered their third placement, with the majority of the children moved because the resource parent asked that the child be moved due to behavior and the placement provider requested change of placement. With so many children moving due to behaviors, the Placement Stability Team decided that each district director lead is responsible for reviewing two cases selected from the Two-Move Report where the placement provider requested a child be moved from their home due to the child's behavior. The Placement Stability Team discussed what information is needed in the review and how to capture information in a consistent manner. The Team had concerns that each district director would look at case information differently which may result in challenges for data collection and identifying statewide trends across the state. Therefore, the Team edited the Placement Stability Core Strategy Review Instrument that was used by the CQI team to complete the Placement Stability Review previously.

In March 2017, the Placement Stability Team met to edit and review each question on the placement stability instrument. Additionally, the team met in March 2017 to ensure each team member agreed on the questions and how the team answered the questions. By the end of the review, the Placement Stability Team had a strong understanding on how to locate information and answer each question on the review. Since March, each district director lead has

completed two case reviews per month. Furthermore, a strategic communication plan was developed on how the information is shared to ensure a learning opportunity for all partners involved in placement stability. The communication plan involves the regional leads, district directors, and field managers. The Team believes this information transfer will encourage learning that in turn will impact practice.

In addition to the ongoing reviews, the Placement Stability Team completed additional reviews in May 2017. The Team met for two days to review cases to augment the small sample that was used to write the placement stability analysis in the last report. Furthermore, the placement stability leads brought peers, program staff, district directors, field managers, and RFP partners to assist in the reviews. The Team felt this would be a great learning experience and help with the expansion of the reviews to other district directors and eventually supervisors.

The reviews completed through June were used to write a second placement stability analysis. This analysis captures an adequate sample size to ensure the current refined strategy is the right strategy to impact placement stability. Seventy children were reviewed, but due to data documentation issues 15 children were excluded from the analysis. Seven more children were omitted because the placement stability leads were unable to make contact with foster parents to complete foster parent interviews. After the exclusions, 48 children were included in the **Placement Stability Report** analysis.

The analysis identified several key findings. Children who had a child safety meeting were significantly more likely to be placed in a kinship home at the first placement than those who did not have this meeting. Children who had one or more kinship connections contacted by CWS before the first or second placement were significantly more likely to be placed in a kinship home. Resource families often receive limited to no information related to the child.

CWS strongly believes as resource parent check-in calls and initial meetings continue to be implemented across the state, foster families will receive more information and be more equipped to care for the children placed in their home. The findings support the practices changes outlined in the refined strategy.

The Placement Stability Team has a strong understanding of placement stability and believes the reviews provide vital information that needs to be communicated to all staff. The placement stability leads are committed to share all information learned from the reviews with their regional leadership teams. The expectation is that the shared information is communicated back to the individual teams to impact placement stability.

Through the review process, the Placement Stability Team identified areas where CWS can self-correct to make more of an impact on placement stability. CWS needs to transition the reviews to include the CW specialist supervisor and/or specialist. To do so, CWS will need to reduce the number of questions in the Placement Stability Review Instrument. The review process pointed out that CWS struggles to initially identify kinship placement options. It is well known that outcomes for children placed in kinship placements are better and CWS must find the barriers to identifying kinship families at the case's beginning.

CWS learned barriers to identifying family connections begin when a referral is called into the Hotline, continue through the investigation, and last into the permanency case. The practice set forth in CS 7 highlights the need to engage families in the family tree to identify family connections during the investigation stage of the case. During the CSM, once the decision is made to remove the child, the CSM team reviews the family tree and utilizes the placement guidance to assist and ensure the best placement is selected during the placement selection process. CWS acknowledges the need to ensure all staff understands the importance of family connection, especially Hotline and child protective services (CPS) staff. CWS is at the beginning stages of implementing a practice related to Actively Seeking Kin (ASK). ASK will assist and ensure CWS staff at every step engages family in identifying family connections. Hotline and CPS staff will implement ASK to alleviate barriers to identifying family connections.

Over the next reporting period, CWS is partnering with the Annie E. Casey (AEC) Foundation to provide two exciting and unique training opportunities for all CW supervisors, district directors, and field managers. AEC is utilizing Guided

Application Practice (GAP), a technique for learning how to integrate and connect placement stability outcomes with day-to-day practice. Session participants are able to look at the practices set forth in the placement stability strategy and develop plans to enhance placement stability for children within their units. Through GAP, supervisors, district directors, and field managers will see their role and how they can impact placement stability within their district, region, and state. These sessions aim to enhance knowledge surrounding placement stability and how stability correlates to staff and resource parent retention, decrease in MIC, decrease in shelter usage, and increased safe and timely permanency for children in out-of-home care. In addition, CWS will continue to take the information learned from the reviews to self-correct and continue to facilitate a learning organization.

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

Operational Question

Of all children ages 0-1 year old with an overnight shelter stay from 1/1/2017 – 6/30/2017, how many nights were spent in the shelter?

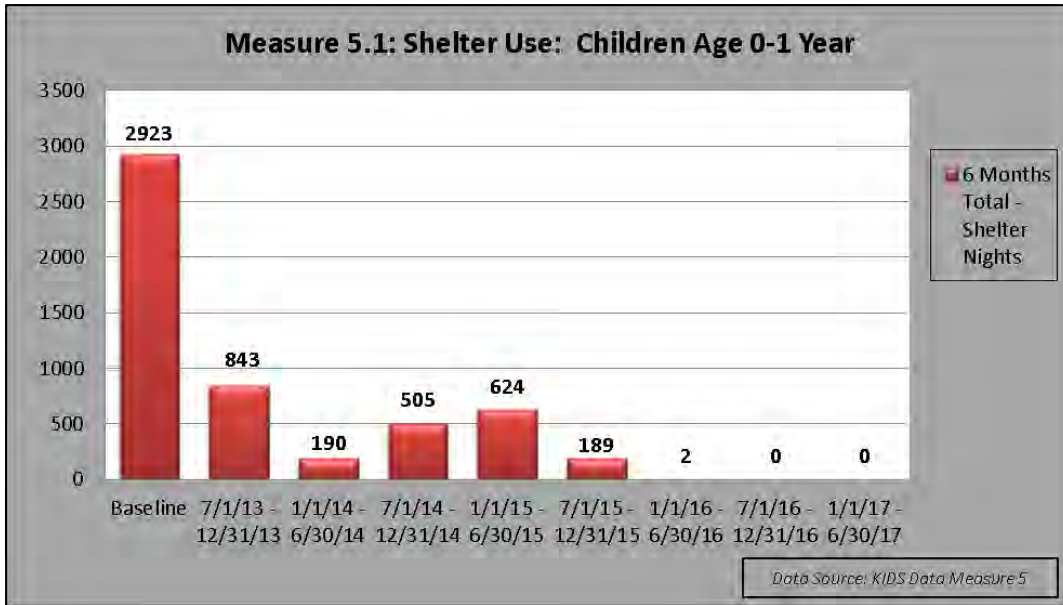
Data Source and Definitions

Data shown is the total number of nights children ages 0-1 year old spent in the shelter during the time period from 1/1/2017 through 6/30/2017. The baseline for this measure was 2,923 nights with a target of 0 nights by 12/31/2012. Automatic exceptions are made when the child is part of a sibling set of four or more or when a child is placed with a minor parent who is also in DHS custody. Note: Children who meet automatic exceptions are still included in the count of total nights spent in the shelter.

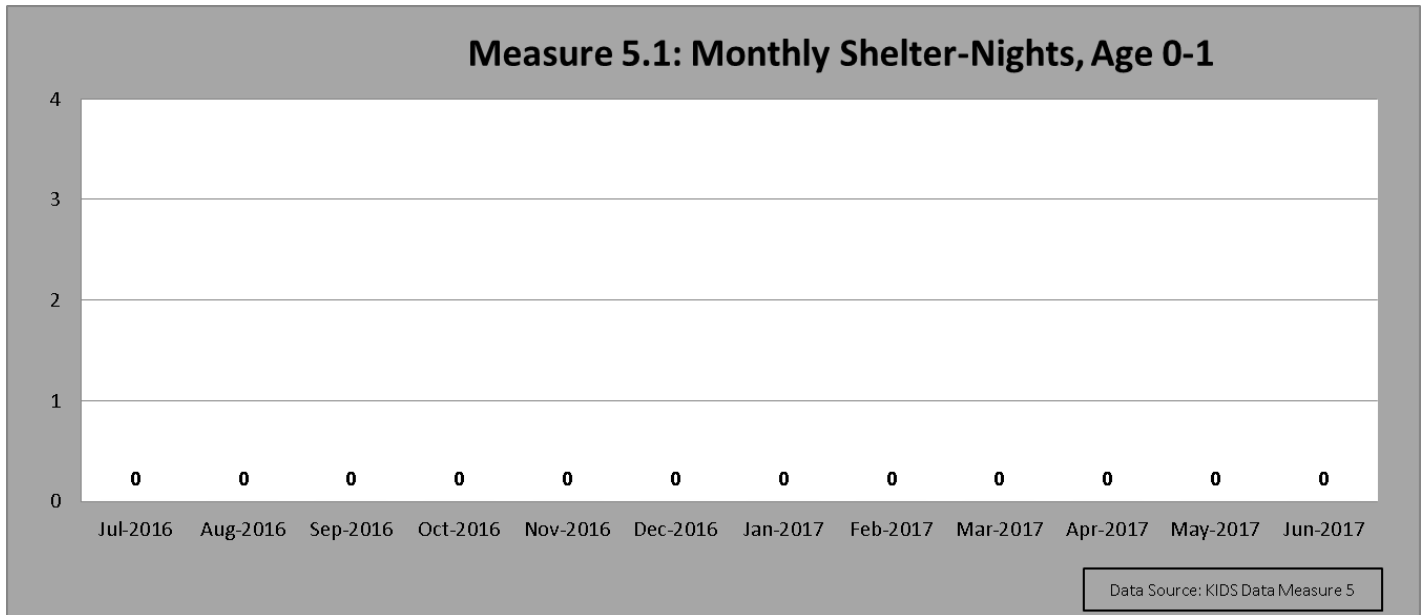
Trends

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

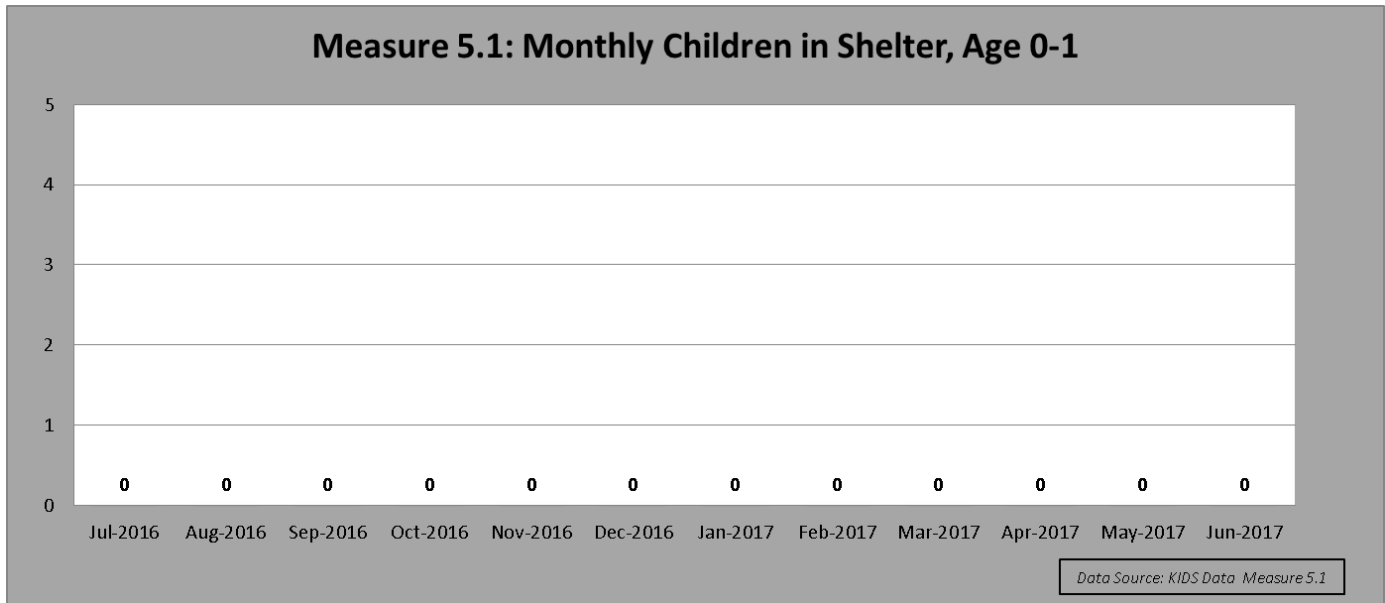
Section 2, Table 5.1-1



Section 2, Graph 5.1-1



Section 2, Graph 5.1-2



Section 2, Graph 5.1-3

Commentary

A total of 0 children ages 0-1 year old spent 0 nights in the shelter from January 1, 2017 – June 30, 2017. During this time period, 2,736 children ages 0-1 year were in care and 100 percent of those children did not have a shelter stay. A child under the age of 2 years old has not been placed overnight in the shelter since January 2016.

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

Operational Question

Of all children ages 2-5 years old with an overnight shelter stay from 1/1/2017 – 6/30/2017, how many nights were spent in the shelter?

Data Source and Definitions

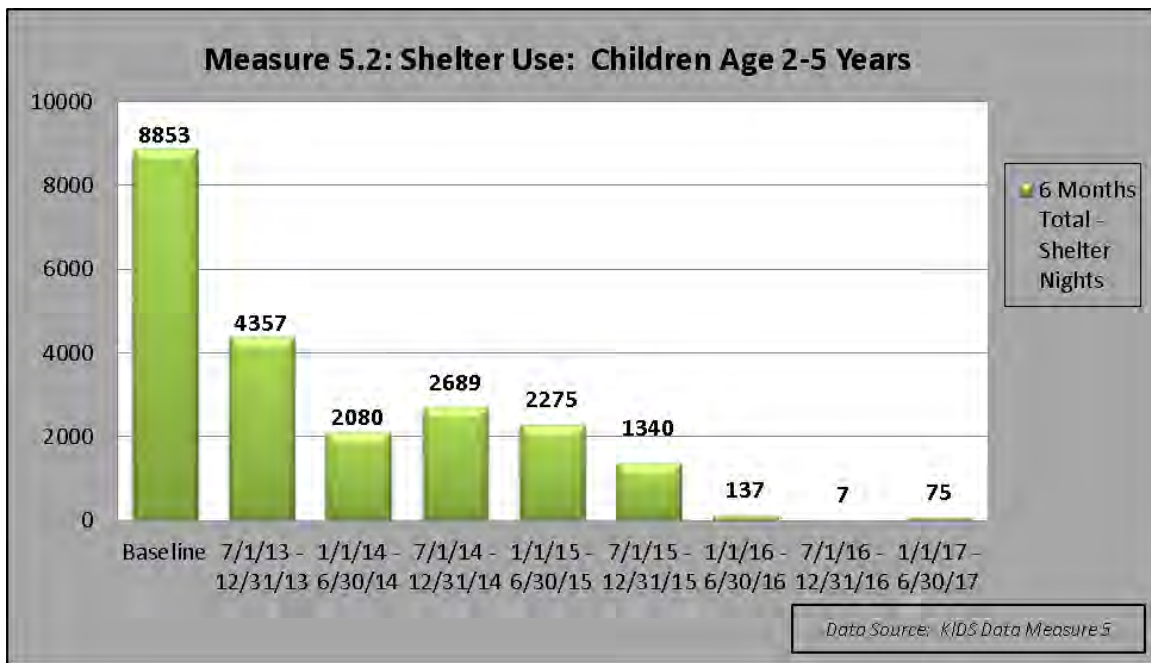
Data shown is the total number of nights children ages 2-5 years old spent in the shelter during the time period from 1/1/2017 – 6/30/2017. The baseline for this measure was 8,853 nights with a target of 0 nights by 6/30/2013. Automatic exceptions are made when the child is part of a sibling set of four or more or a child is placed with a minor parent who is also in DHS custody. Note: Children who meet automatic exceptions are still included in the count of total nights spent in the shelter.

Trends

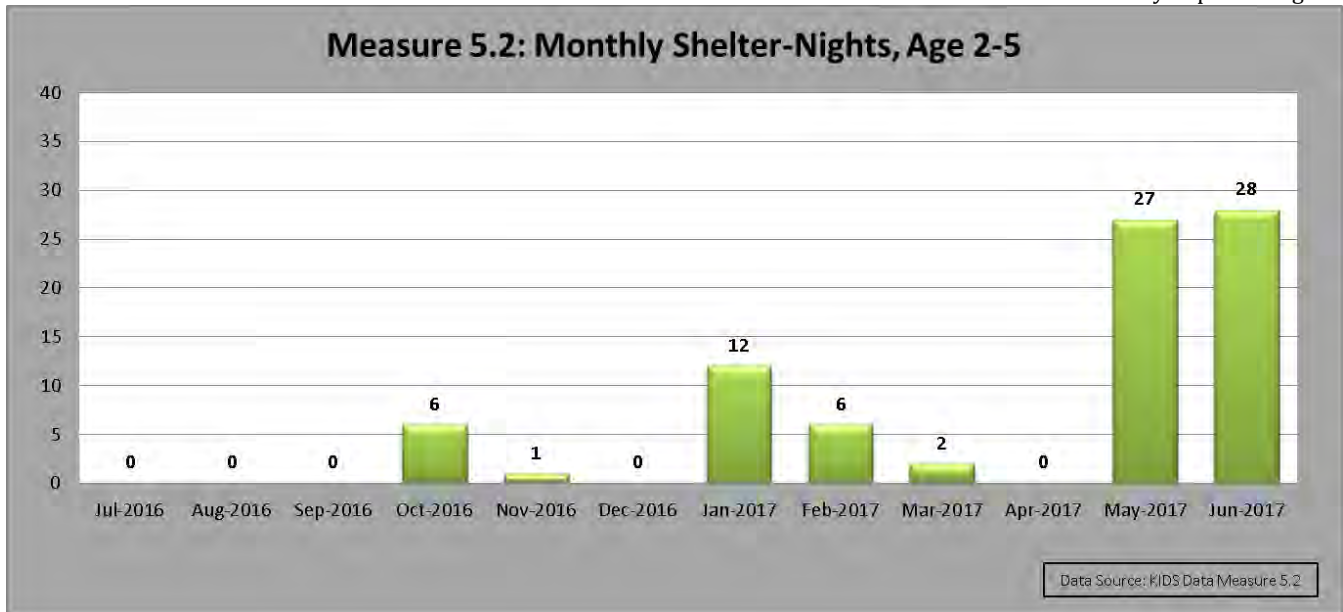
Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 2-5 years with an overnight shelter stay from 1/1/2012 – 6/30/2012	8,853 Nights
7/1/2013 – 12/31/2013	All children age 2-5 years with an overnight shelter stay from 7/1/2013 – 12/31/2013	4,357 Nights
1/1/2014 – 6/30/2014	All children age 2-5 years with an overnight shelter stay from 1/1/2014 – 6/30/2014	2,080 Nights
7/1/2014 – 12/31/2014	All children age 2-5 years with an overnight shelter stay from 7/1/2014 – 12/31/2014	2,689 Nights

1/1/2015 – 6/30/2015	All children age 2-5 years with an overnight shelter stay from 1/1/2015 – 6/30/2015	2,275 Nights
7/1/2015 – 12/31/2015	All children age 2-5 years with an overnight shelter stay from 7/1/2015 – 12/31/2015	1,340 Nights
1/1/2016 – 6/30/2016	All children age 2-5 years with an overnight shelter stay from 1/1/2016 – 6/30/2016	137 Nights
7/1/2016 – 12/31/2016	All children age 2-5 years with an overnight shelter stay from 7/1/2016 – 12/31/2016	7 Nights
1/1/2017 – 6/30/2017	All children age 2-5 years with an overnight shelter stay from 1/1/2017 – 6/30/2017	75 Nights
Target		0 Nights

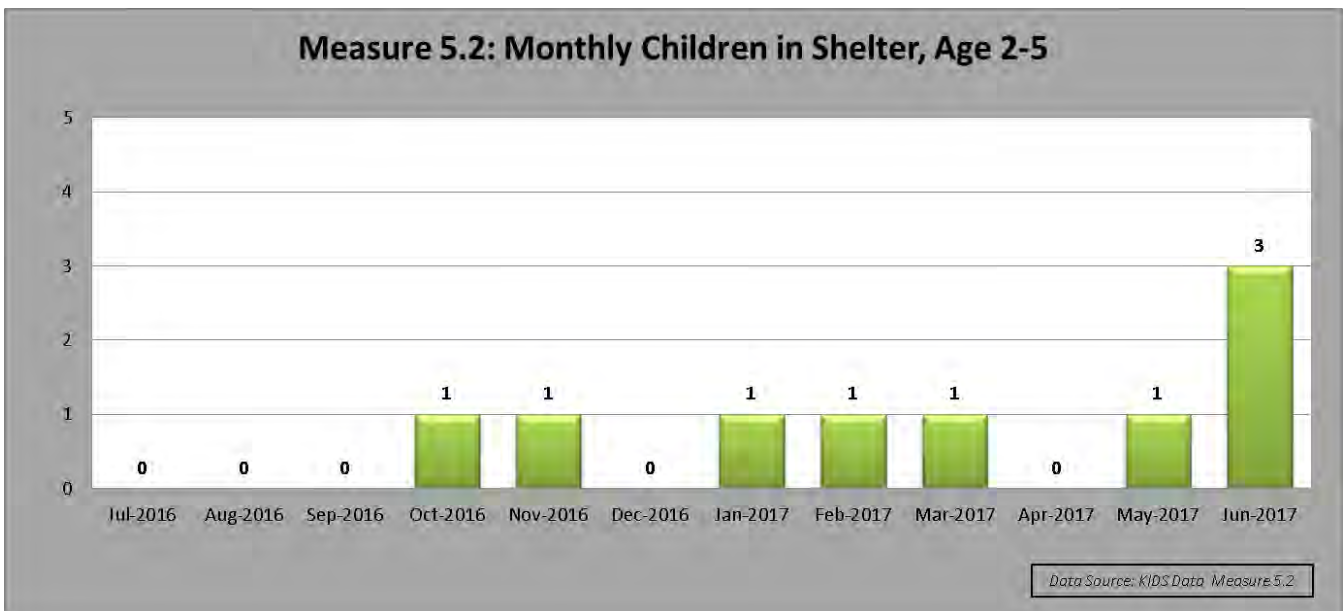
Section 2, Table 5.2-1



Section 2, Graph 5.2-1



Section 2, Graph 5.2-2



Section 2, Graph 5.2-3

Commentary

A total of 5 distinct children ages 2-5 years old spent a total of 75 nights in shelter care from January 1, 2017 – June 30, 2017. Section 2, Graph 5.2-3 identifies 7 children spending time in shelters between January and June 2017, although 2 of these children were in more than 1 month as the shelter stay extended more than 1 month. Of the 5 children who spent time in a shelter, 3 were placed in a shelter so that they could remain with older siblings and 1 had special needs complicating placement search. During this time period, 4,690 children ages 2-5 years were in care and 99.9 percent of those children did not have a shelter stay.

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

Operational Question

Of all children ages 6-12 years old with an overnight shelter stay from 1/1/2017 – 6/30/2017, how many nights were spent in the shelter?

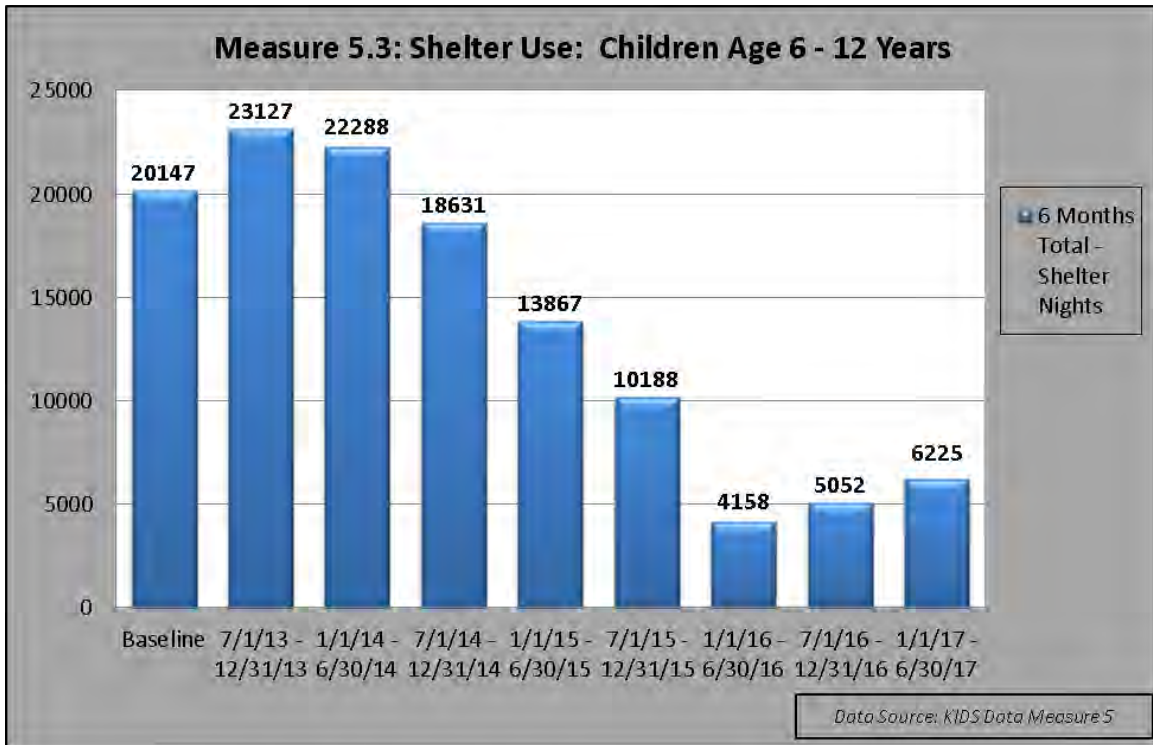
Data Source and Definitions

Data shown is the total number of nights children ages 6-12 years old spent in the shelter during the time period from 1/1/2017 – 6/30/2017. The baseline for this measure was 20,147 nights with an interim target of 10,000 nights by 12/31/2013. An automatic exception is made when the child is part of a sibling set of four or more. Note: Children who meet an automatic exception are still included in the count of total nights spent in the shelter.

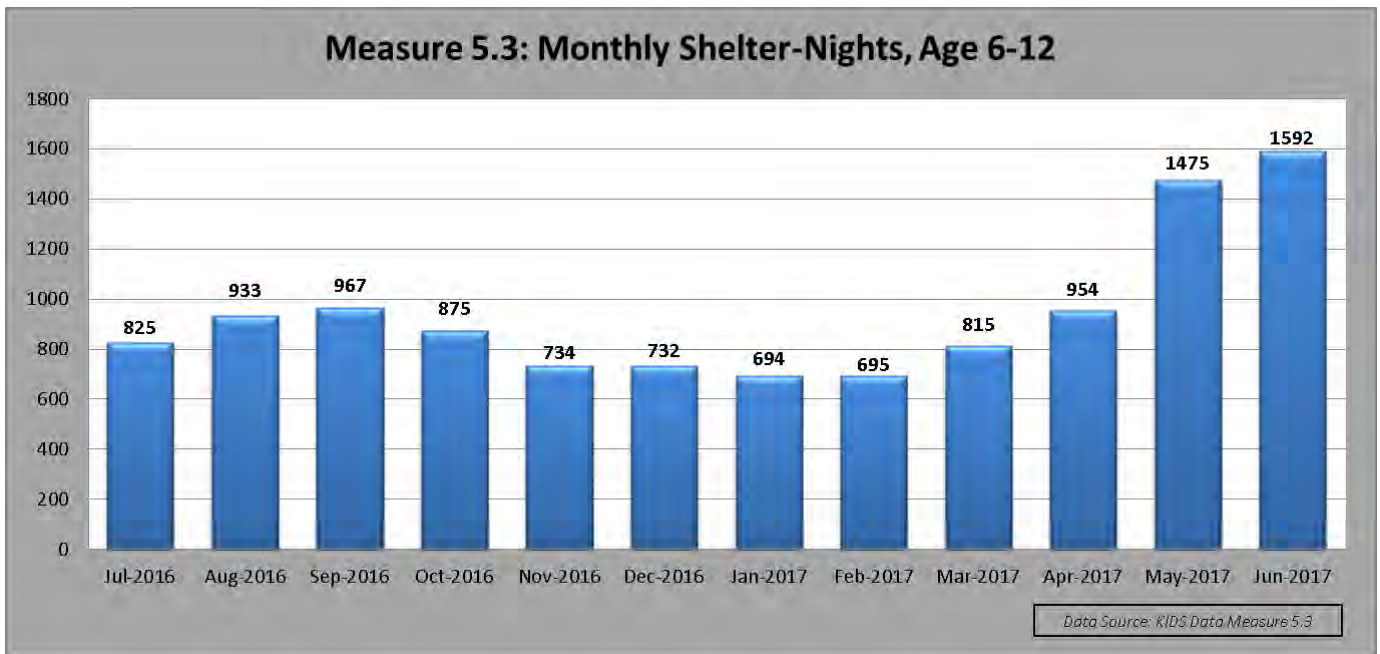
Trends

Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 6-12 years with an overnight shelter stay from 1/1/2012 – 6/30/2012	20,147 Nights
7/1/2013 – 12/31/2013	All children age 6-12 years with an overnight shelter stay from 7/1/2013 – 12/31/2013	23,127 Nights
1/1/2014 – 6/30/2014	All children age 6-12 years with an overnight shelter stay from 1/1/2014 – 6/30/2014	22,288 Nights
7/1/2014 – 12/31/2014	All children age 6-12 years with an overnight shelter stay from 7/1/2014 – 12/31/2014	18,631 Nights
1/1/2015 – 6/30/2015	All children age 6-12 years with an overnight shelter stay from 1/1/2015 – 6/30/2015	13,867 Nights
7/1/2015 – 12/31/2015	All children age 6-12 years with an overnight shelter stay from 7/1/2015 – 12/31/2015	10,188 Nights
1/1/2016 – 6/30/2016	All children age 6-12 years with an overnight shelter stay from 1/1/2016 – 6/30/2016	4,158 Nights
7/1/2016 – 12/31/2016	All children age 6-12 years with an overnight shelter stay from 7/1/2016 – 12/31/2016	5,052 Nights
1/1/2017 – 6/30/2017	All children age 6-12 years with an overnight shelter stay from 1/1/2017 – 6/30/2017	6,225 Nights
Target		0 Nights

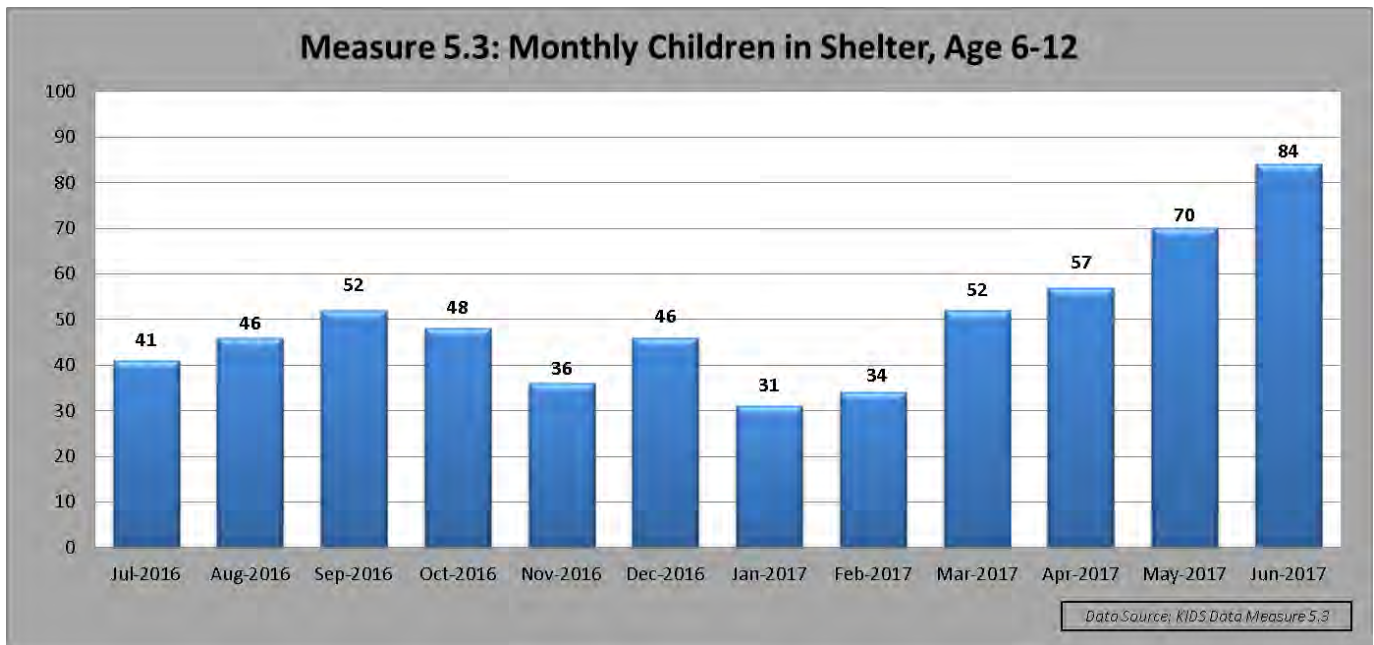
Section 2, Table 5.3-1



Section 2, Graph 5.3-1



Section 2, Graph 5.3-2



Section 2, Graph 5.3-3

Commentary

A total of 150 distinct children ages 6-12 years old spent a total of 6,225 nights in the shelter from January 1, 2017 through June 30, 2017. Section 2, Graph 5.3-3 identifies 328 children spending time in shelters from January through June 2017. In some cases, the child's shelter stay extended across two months, thus the child is included in the count for both months. During this time period, 5,203 children ages 6-12 years old were in care and 97.1 percent of those children did not have a shelter stay.

5.4: Shelter Use—Children ages 13 and older

Operational Question

Of all children ages 13 years or older with an overnight shelter stay from January 1, 2017 through June 30, 2017, how many nights were spent in the shelter?

Data Source and Definitions

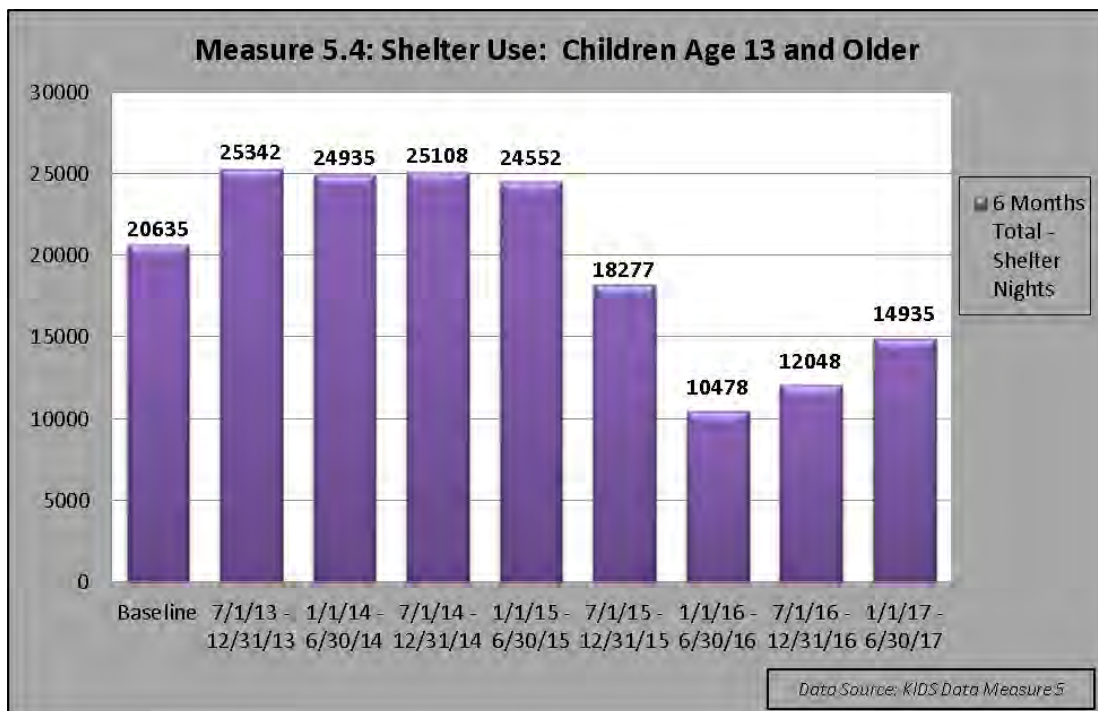
Data shown is the total number of nights children ages 13 years or older spent in the shelter during the time period from 1/1/2017 – 6/30/2017. The baseline for this measure is 20,635 nights with a target of 13,200. Of the children 13 years and older placed in a shelter during this period, the target is 80 percent of the children will meet the criteria of Pinnacle Plan Point 1.17. An automatic exception is made for children when the child is part of a sibling set of four or more. Note: Children who meet and automatic exception are still included in the count of total nights spent in the shelter.

Trends

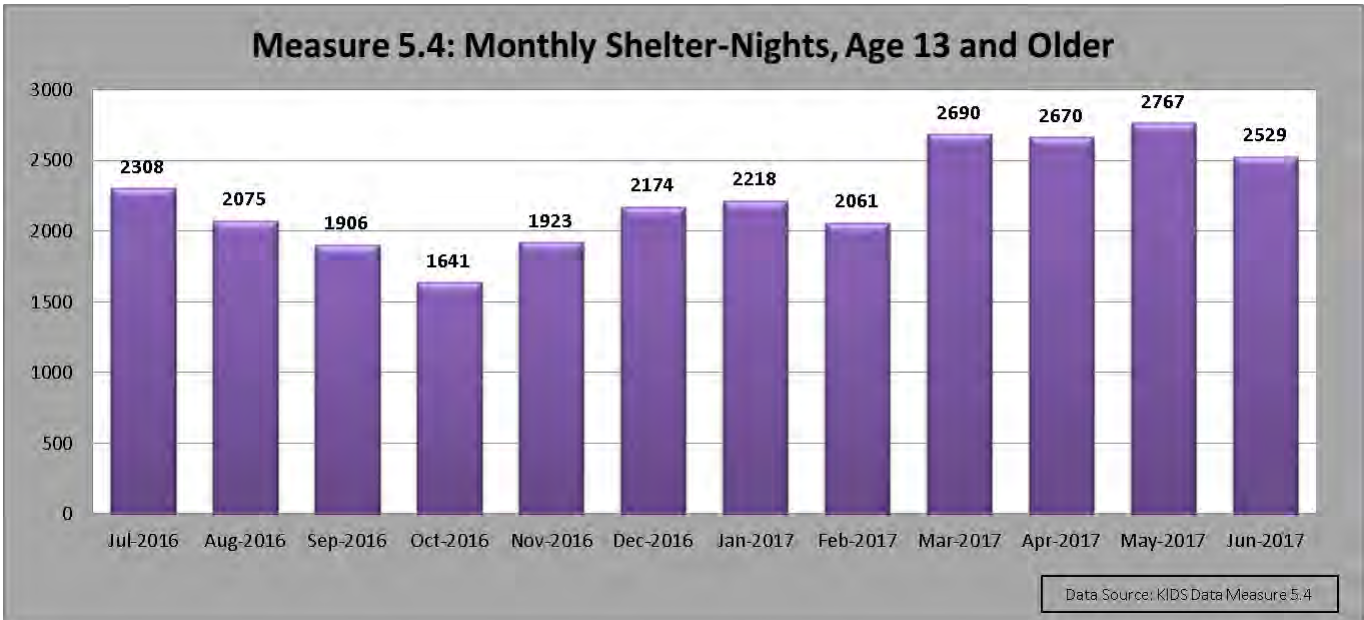
Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 13 or older with an overnight shelter stay from 1/1/2012 – 6/30/2012	20,635 Nights
7/1/2013 – 12/31/2013	All children age 13 or older with an overnight shelter stay from 7/1/2013 – 12/31/2013	25,342 Nights
1/1/2014 – 6/30/2014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

7/1/2014 – 12/31/2014	All children age 13 or older with an overnight shelter stay from 7/1/2014 – 12/31/2014	25,108 Nights
1/1/2015 – 6/30/2015	All children age 13 or older with an overnight shelter stay from 1/1/2015 – 6/30/2015	24,552 Nights
7/1/2015 – 12/31/2015	All children age 13 or older with an overnight shelter stay from 7/1/2015 – 12/31/2015	18,277 Nights
1/1/2016 – 6/30/2016	All children age 13 or older with an overnight shelter stay from 1/1/2016 – 6/30/2016	10,478 Nights
7/1/2016 – 12/31/2016	All children age 13 or older with an overnight shelter stay from 7/1/2016 – 12/31/2016	12,048 Nights
1/1/2017 – 6/30/2017	All children age 13 or older with an overnight shelter stay from 1/1/2017 – 6/30/2017	14,935 Nights
Target		13,200 Nights

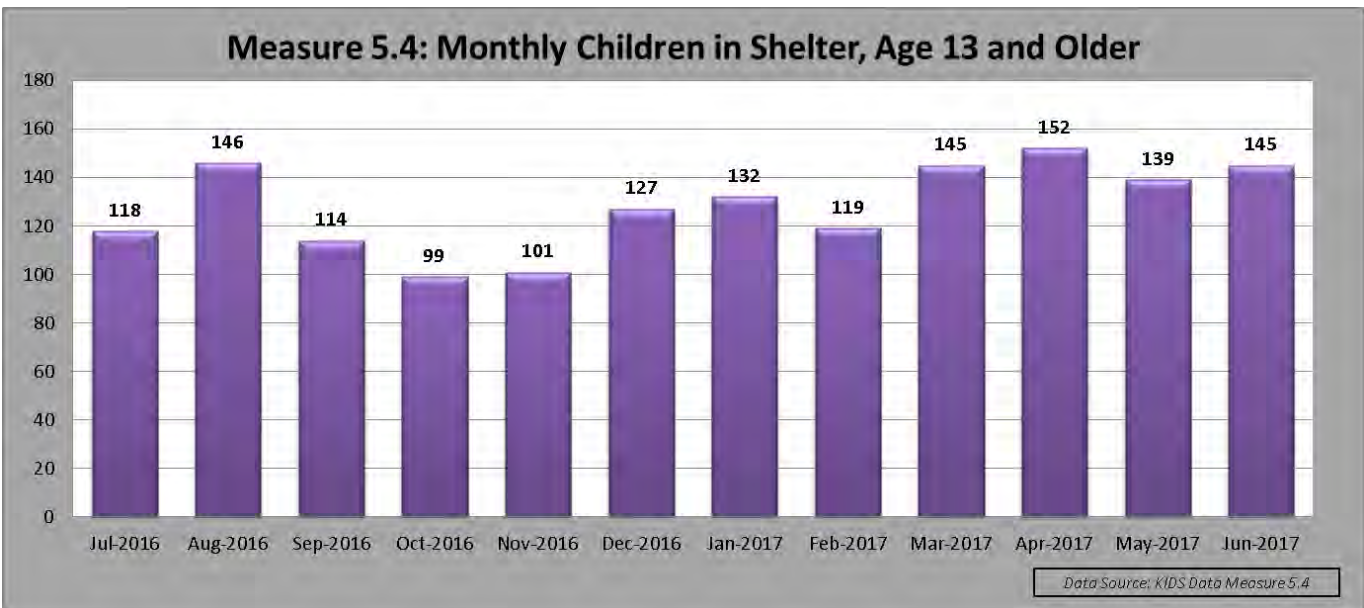
Section 2, Table 5.4-1



Section 2, Graph 5.4-1



Section 2, Graph 5.4-2

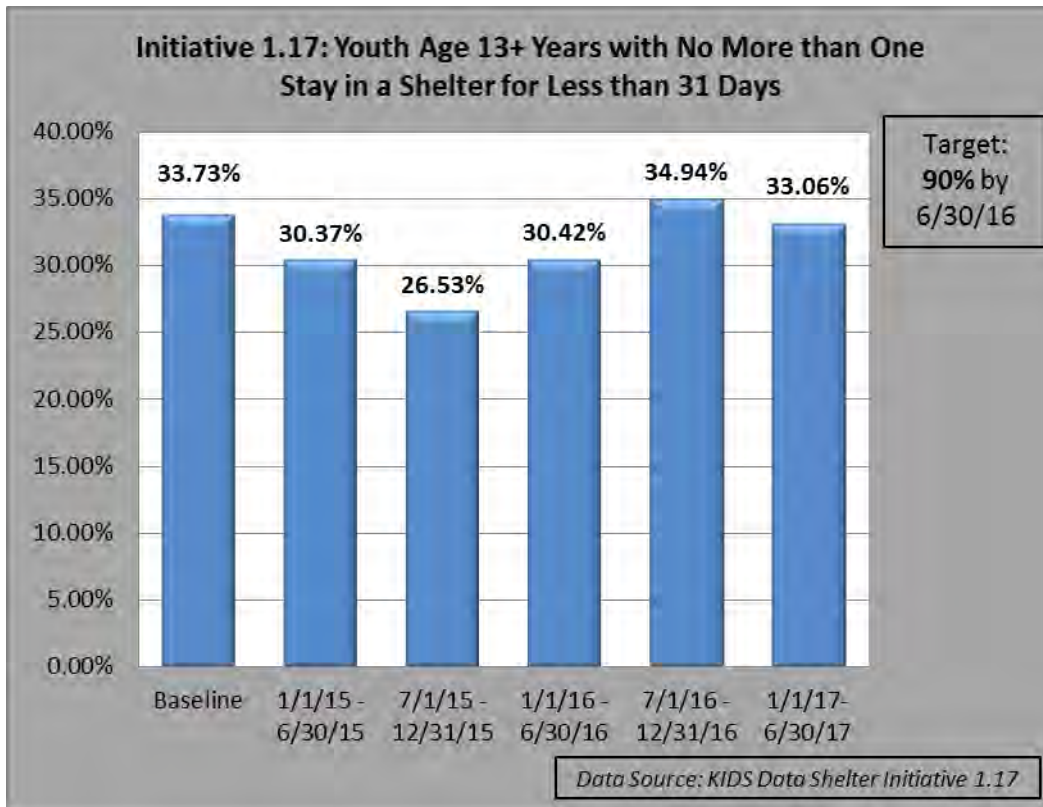


Section 2, Graph 5.4-3

Commentary

A total of 366 distinct children ages 13 years or older spent a total of 14,935 nights in shelter care from January 1, 2017 through June 30, 2017. Section 2, Graph 5.4-3 identifies 832 children spending time in shelters from January through June 2017. In some cases, the child's shelter stay extended across two months thus, the child is included in the count for both months. During this time period, 2,418 children ages 13 years or older were in care and 84.9 percent of those children did not have a shelter stay. Overall, 15,047 children were in care and 96.6 percent of all children in care did not have an overnight shelter stay during the reporting period.

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



Commentary

For the six-month period ending 6/30/2017, DHS experienced a slight decrease from the prior reporting period of 1.88 percent. Of the 366 children age 13 and older who had a shelter stay during the time frame, 121 children, 33.06 percent, had one shelter stay lasting less than 31 days. However, of the 366 children age 13 and up who had a shelter stay: 91 children, 24.86 percent, had 1 stay that lasted longer than 31 days; 31 children, 8.47 percent, had two or more stays that lasted less than 31 days; and 123 children, 33.61 percent, had two or more stays that lasted more than 31 days in the shelter.

Child Welfare Services (CWS) strategically focused efforts to reduce shelter utilization during the past few years resulting in the systems’ strengthened ability to ensure children are placed in family-like settings. Authorization for a child to be admitted to any shelter setting is required by the CWS Director or a Deputy Director. This practice enforces the need to ensure that all efforts to secure a placement in a family-like setting were exhausted prior to placement consideration in a shelter.

Building on early success to reduce the number of children in shelters, the decision was made in January 2015 to close the two state-operated shelters, Pauline E. Mayer (PEMS) in Oklahoma City and the Laura Dester Children's Center (LDCC) in Tulsa. CWS experienced great success in reducing shelter care at a fairly steady rate since implementation efforts began. To date, the successes include complete elimination of shelter utilization for children under the age of 2 and the closure of PEMS in Oklahoma City, an area of the state that historically utilized the shelter for all children initially entering into the system. This success confirms that Oklahoma has transitioned to a system where its youngest of children are consistently placed with families and continues to transition to a system where every child is placed with a family.

Notable during this review period, is that the system faced unforeseen challenges in this area resulting from positive movement in other parts of the system. These challenges resulted in both the number of children spending nights in

shelter and the number of nights they stay to increase. The primary contributing factor to the increase during this review period was a significant decrease in the number of placement resources available for higher needs children. The decrease in placement resources in these higher-level settings is directly related to the positive work of the department to reduce maltreatment in care (MIC) of children. An increase in heightened monitoring at the highest risk facilities occurred along with contractual changes requiring the facilities to move to a consistent behavioral modification model. As a result, several group home contracts were terminated leading to a reduction of 64 group home beds within a four month time period during this review period. Since 7/01/2015, the system experienced an overall reduction in group home bed capacity of 37 percent. Current group home capacity is at 192 beds statewide. Additionally, the contract was terminated for one of the state's largest providers of residential treatment care and acute care for children. Although the work focusing on MIC reduction ultimately resulted in fewer placement resources for children and placed a significant strain on the entire system, it is the right work for the system to be engaging in on behalf of children in care and will continue.

Laura Dester Children's Center (LDCC)

Throughout the past few years, CWS engaged in efforts to end operations at LDCC, but due to a lack of readily available needs-based placements, this specific state-operated shelter continues to serve children with the most significant medical, developmental, intellectual, and behavioral health needs in the state. Placement at LDCC is used as an absolute last resort and requires approval for admission by the CWS Director. Although continuing operations at this facility was not the planned goal, LDCC plays a significant role in filling the placement gap for many children whose needs are so great that they were turned away by all other statewide placement providers. These needs are uniquely diverse and significantly complex, which increases the challenge of securing needs-based placements for this specific population.

In this reporting period, CWS saw an increase in the number of children served at LDCC. As a result, extensive work has occurred to ensure the right amount and types of resources are available to support the needs of children in care at LDCC. Ongoing assessment of needs has resulted in a significant increase in the number of staffing resources at the shelter to ensure that the children with some of the highest needs in the state receive the right type of supervision and care for successful preparation and transition to family-like settings. Because of the ability to provide flexibility in the resources available to children placed at LDCC, many children experienced stabilization to the point where they have or are able to transition to family settings. The population served changes from week to week; therefore, it is necessary to continue to assess the facility's needs to ensure safety and well-being of all children. CWS is in the process of adding even more staffing resources due to the rise in population and the types of needs of children currently placed at LDCC.

Multi-Disciplinary Shelter Staffings

As shelter utilization decreased for a significant period of time, CWS determined that in order to ensure sustainability, the shelter staffing process needed to reside in the regional offices. CWS made the transition from an overall statewide approach to a more localized effort by giving each regional office team lead an opportunity to participate in a case staffing held at the regional level to learn the staffing process. They were given the staffing tool that was previously developed for use in their specific region and were encouraged to modify this form to better meet their needs going forward. All regions assigned a specific person to lead these staffing efforts, and those individuals were provided ongoing consultation from the shelter staffing team when needed. Each region developed its own individual process for staffing children utilizing shelter care. Some select regions established a strong process focused not only on reducing the length of time children were staying in shelters, but also on shifting their focus towards achieving permanency goals. This focus remains a steady trend and is reflected in the reduced number of children served in shelter care from their specific regions. Extensive review of the regional shelter staffing processes indicates the remaining regions not experiencing the same level of success in decreased shelter utilization could benefit from some minor changes to their staffing process to increase accountability and decrease the need for ongoing shelter use. When shelter care began to rise, a decision was made to reinvest in dedicated resources to focus on shelter care. A program field representative (PRF) position was dedicated to focus solely on movement of children from shelters. The newly assigned shelter PRF is working directly with the regional shelter leads to offer consultation and process improvement strategies to refocus efforts on reducing shelter utilization. CWS notes that shifting the shelter staffing process to the regional level

presented some challenges in specific areas, but continued work at the local level is the most effective way to continue the long-term focus on shelter utilization.

CWS remains committed to keeping very young children from utilizing shelters and has successfully kept all children under 2 years of age out of shelter care during the last eighteen months. For Measures 5.2, 5.3, and 5.4, CWS experienced another slight increase in shelter utilization during this reporting period. Although not drastic, the trend is moving in the negative direction. This can be attributed to a variety of different reasons, but one primary issue includes the reduction of placement capacity at all levels of care. After further assessment, the data indicates that a large portion of the children utilizing shelter care are from very distinct areas of the state. These areas continue to struggle with reducing shelter use despite an implemented ongoing staffing process. As noted before, some minor changes to the shelter staffing process will occur with additional support and consultation from state office.

Oklahoma Association of Youth Services (OAYS)

CWS continues to work in collaboration with the Office of Juvenile Affairs (OJA) and the Oklahoma Association of Youth Services (OAYS) regarding the ongoing use of the youth services shelters for children in DHS custody. During February 2017, OJA and CWS reviewed agency data from both systems to better understand shelter utilization in the private shelter locations. The data indicated that many of the youth services shelters statewide were not utilized to their full capacity resulting in a high number of vacant beds at these facilities, while at the same time there was a steady increase in the number of children admitted to LDCC. In March 2017, CWS and OJA presented the new information to a select set of self-identified youth services providers who indicated they were interested in discussing new ways to serve special populations in their shelters across the state. After explaining the present and future needs of OJA and CWS to the group, open discussions were held to further explore how this process might be arranged if a youth services provider were interested in developing something further. The interested agencies were asked to submit proposals addressing how they could serve different populations represented at LDCC. To date, no formal proposals were developed or presented for further review. OJA and CWS identified placement and service gaps within each of the existing systems, which led to ongoing discussions surrounding potential contract modifications during the upcoming state fiscal year. As each of these state agencies continues to struggle through a multitude of budget challenges, it is critical to determine how the ongoing partnership will proceed from here to meet ongoing placement needs for children and youth served by these two systems.

Enhanced Training with Youth Service Providers

During the last two reporting periods, CWS continued its collaboration with OJA to expand training opportunities for direct care staff employed in the youth service shelters across the state. Since these individuals work directly with children who have increased needs, CWS developed a set of specialized trainings to improve the quality of care children receive in the shelter setting. Two training modules were previously completed, "Trauma-Informed Care in the Direct Care Setting" and "Cultural Competency," with two additional modules to come. In May and June 2017, CWS introduced the third training module, "Caring for Children with Intellectual and Developmental Disabilities," as many of the youth service providers are beginning to see children placed in their shelters with these specific needs. Five training sessions were offered in three locations across the state to accommodate staff from all youth service providers. The fourth training module was slated for completion during this reporting period, but CWS was only able to secure funding for one training module during the last quarter of State Fiscal Year (SFY) 17. CWS will deliver the final training module during the first quarter of SFY 18 focused on understanding common medical issues and the use of psychotropic medications in the shelter setting. All four training modules were developed at the request of the direct care staff, as they believed this additional training would assist them in caring for children as part of their daily job responsibilities. Once fully completed, these opportunities will have provided an additional 16 hours of in-service training to those staff working daily with children in shelters. CWS believes the investment that was made to ensure this training partnership occurred, will have long-term impacts on the ongoing quality of care children receive in youth service shelters.

6.2a: Permanency Within 12 Months of Removal

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

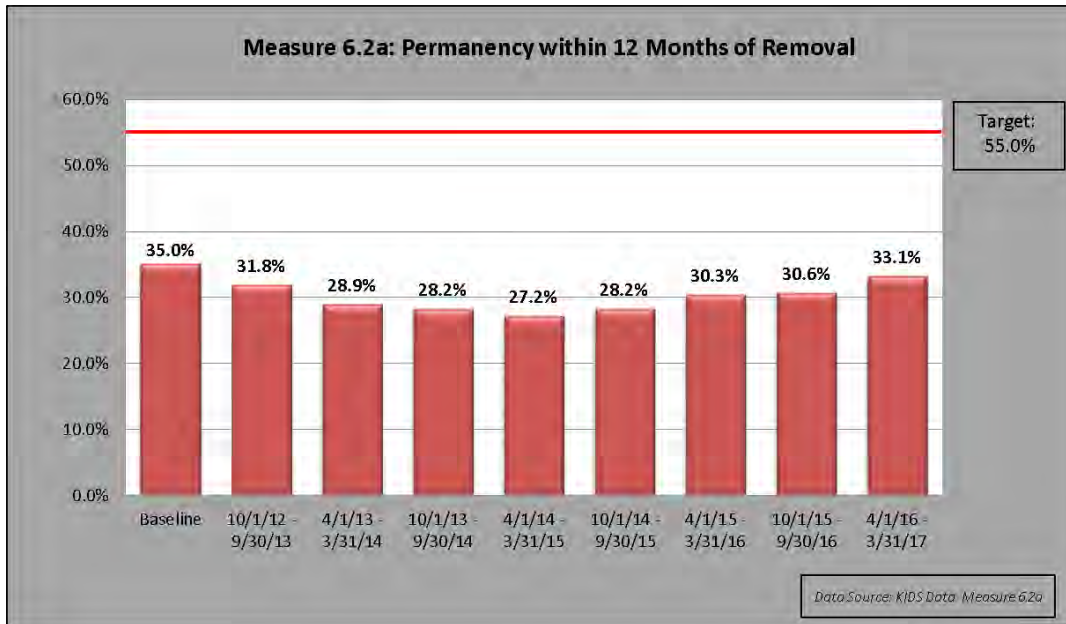
Denominator: All children who entered foster care from 10/1/2015 through 3/31/2016.

Numerator: The number of children who entered foster care from 10/1/2015 through 3/31/2016 and exited to a permanent setting within 12 months of removal.

Trends

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

Section 2, Table 6.2a-1



Section 2, Graph 6.2a-1

6.2b: Permanency Within 2 Years of Removal

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

Denominator: All children who entered foster care from 10/1/2014 through 3/31/2015.

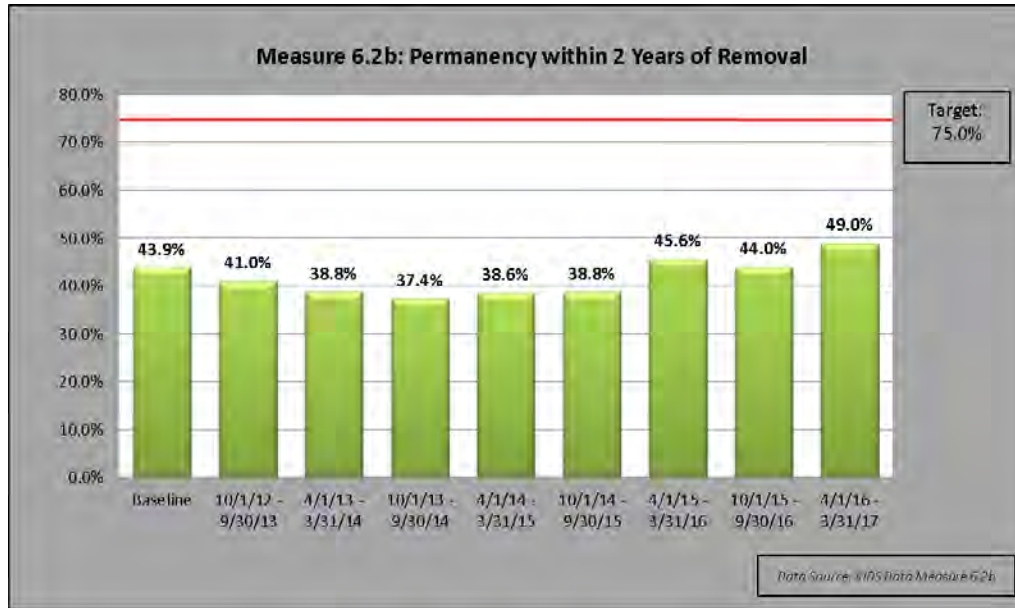
Numerator: The number of children, who entered foster care from 10/1/2014 through 3/31/2015, were removed at least 12 months, and exited to a permanent setting within 24 months of removal.

Trends

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

4/1/2015 – 3/31/2016	All admissions from 10/1/2013 – 3/31/2014	886	1,944	45.6%
10/1/2015 – 9/30/2016	All admissions from 4/1/2014 – 9/30/2014	821	1,865	44.0%
4/1/2016 – 3/31/2017	All admissions from 10/1/2014 – 3/31/2015	769	1,570	49.0%
Target				75.0%

Section 2, Table 6.2b-1



Section 2, Graph 6.2b-1

6.2c: Permanency Within 3 Years of Removal

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

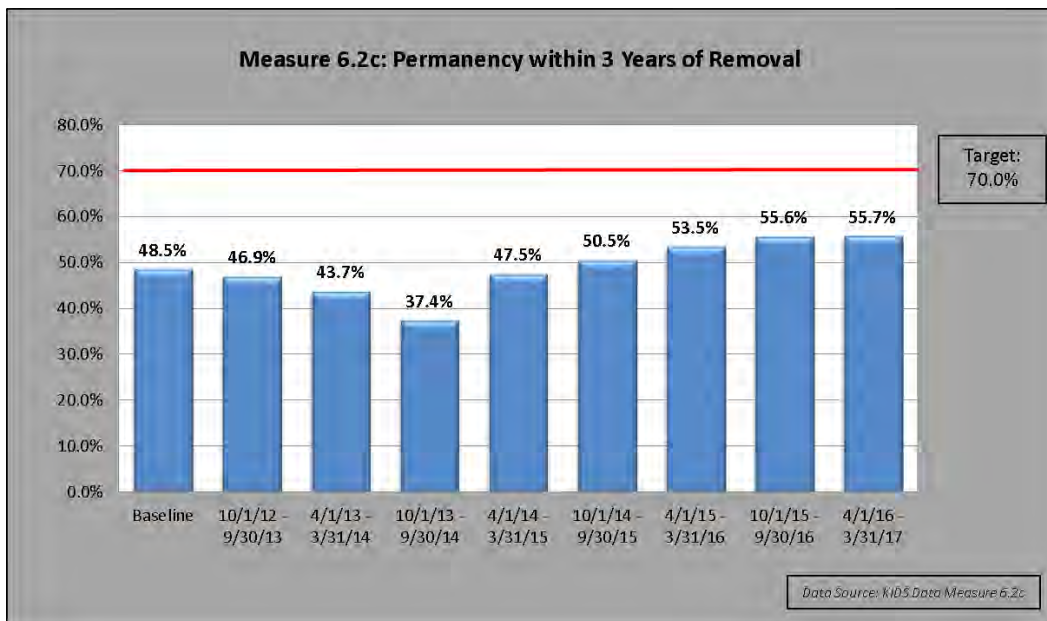
Denominator: All children who entered foster care from 10/1/2013 through 3/31/2014.

Numerator: The number of children, who entered foster care from 10/1/2013 through 3/31/2014, were removed at least 24 months, and exited to a permanent setting within 36 months of removal.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2009 – 9/30/2009			48.5%
10/1/2012 – 9/30/2013	All admissions from 4/1/2010 – 9/30/2010	350	746	46.9%
4/1/2013 – 3/31/2014	All admissions from 10/1/2010 – 3/31/2011	286	654	43.7%
10/1/2013 – 9/30/2014	All admissions from 4/1/2011 – 9/30/2011	346	924	37.4%
4/1/2014 – 3/31/2015	All admissions from 10/1/2011 – 3/31/2012	414	872	47.5%
10/1/2014 – 9/30/2015	All admissions from 4/1/2012 – 9/30/2012	552	1,094	50.5%
4/1/2015 – 3/31/2016	All admissions from 10/1/2012 – 3/31/2013	586	1,095	53.5%
10/1/2015 – 9/30/2016	All admissions from 4/1/2013 – 9/30/2013	653	1,174	55.6%
4/1/2016 – 3/31/2017	All admissions from 10/1/2013 – 3/31/2014	558	1,002	55.7%
Target				70.0%

Section 2, Table 6.2c-1



Section 2, Graph 6.2c-1

6.2d: Permanency Within 4 Years of Removal

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

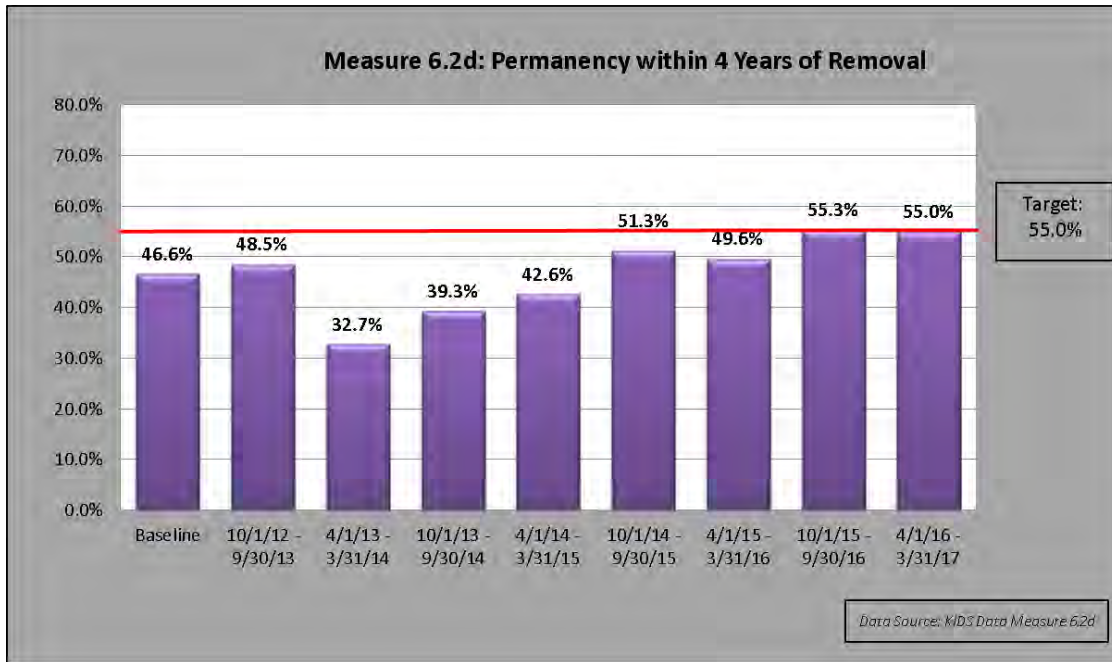
Denominator: All children who entered foster care from 10/1/2012 through 3/31/2013.

Numerator: The number of children, who entered foster care through 10/1/2012 through 3/31/2013, were removed at least 36 months, and exited to a permanent setting within 48 months of removal.

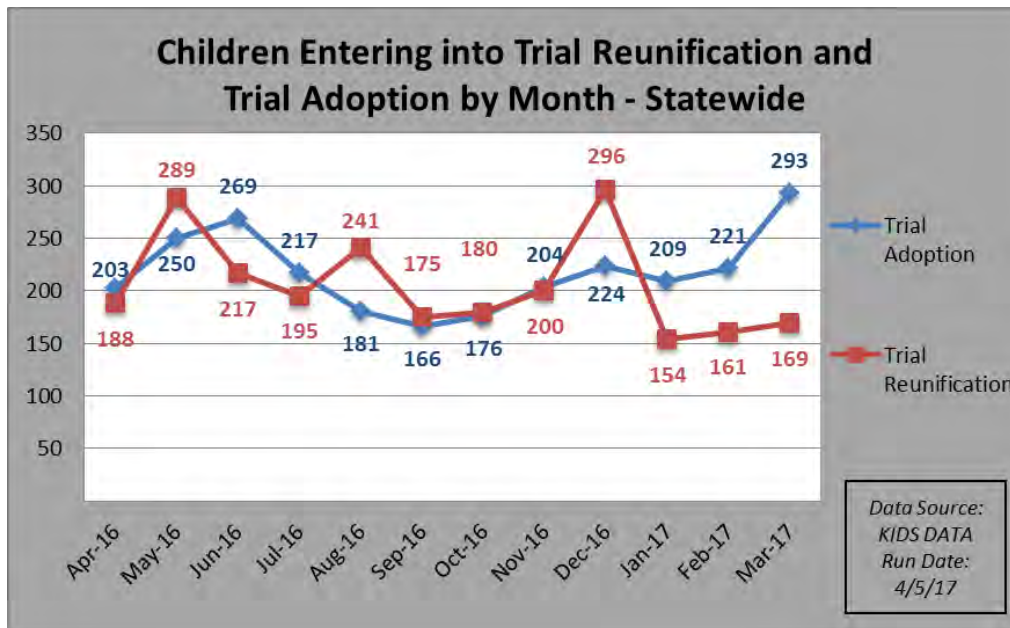
Trends

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

Section 2, Table 6.2d-1



Section 2, Graph 6.2d-1



Section 2, Graph 6.2d-2

Permanency Safety Consultations with Goal of Reunification	
Children in Care 90+ Days with Goal of Reunification	3,914
Children with Permanency Safety Consultation	3,446
% with Permanency Safety Consultation	88.0%
<i>Data Source: KIDS Data Y1104; Run Date: 6/30/17</i>	
<i>*Data only includes children that have been in care at least 90 days</i>	

Section 2, Table 6.2d-2

Section 2, Graph 6.2d-2 is an unduplicated count of children who entered Trial Adoption or Trial Reunification for each month during the last 12 months ending March 2017. This is not a summary count of all children placed in Trial Adoption or Trial Reunification during the month. Although not a Pinnacle Plan measure, Child Welfare Services (CWS) tracks performance in these two areas, as it is reflective of real time progress on moving children to permanency.

Commentary

Performance on Measures 6.2a, b, and c increased during this reporting period. Measure 6.2a increased by 2.5 percent from the last reporting period and showed positive trending the last four reporting periods, despite still being below the original baseline. Performance Measure 6.2b increased by 5.0 percent from the last reporting period and is the highest the measure has been since Pinnacle Plan reporting on this measure began. Performance in Measure 6.2c increased by 0.1 percent and is 7.2 percent above the original baseline. Measure 6.2c has trended positively for the last five reporting periods. Measure 6.2d did have a slight decrease by 0.3 percent since the last reporting period; however, the measure is still meeting the target of 55.0 percent.

During this reporting period, three of the four measures in 6.2 increased in their performance, with the other remaining measure still meeting the target. Measures 6.2a and 6.2c continued to see positive trending for four of the last reporting periods. An additional 677 children achieved permanency after the target dates, but prior to the writing of this report. As of 3/31/2017, 923 children were in trial reunification and 498 children in trial adoption for a total of 1,421 children close to achieving permanency. As of 6/30/2017, 3,446 children had a permanency safety consultation (PSC) completed out of 3,914 children eligible with the goal of reunification. Of the 468 children with no PSC completed 195 are currently in trial reunification and do not need one completed due to achieving permanency. For the next reporting period, 273 children with pending PSCs are scheduled.

PSCs, a rapid permanency case review targeting children with the case plan goal of reunification, continue to be used to impact outcomes in these measures. PSCs were initially completed for children with the longest lengths of out-of-home stay. The results of these early PSCs are seen initially in Measures 6.2c and 6.2d. After receiving input from the district directors, field staff, and permanency leads, a new protocol for PSC completion was implemented in February 2017. PSCs are now completed for children who have been in out-of-home care for 90-calendar days or more. Ongoing PSCs are completed for each child who has been in out-of-home care at 3, 6, 9, and 12 months from the date of removal. Specifically selecting those time frames will help ensure that cases have regular PSCs throughout the first 12 months of removal and continue to expedite safe, timely permanency.

As part of the quality assurance (QA) process, the PSC Coordinator continued to visit different regions on a monthly to support district directors with PSCs. A pre-call with each district director is conducted prior to the Coordinator's site visit. The calls are ongoing and occur prior to the Coordinator attending the district's PSCs. During the call, the Coordinator and district director review the district's data to determine which children need a PSC that month based on the 3, 6, 9, and 12 month intentional case selection method. The call also allows the district director to discuss any identified barriers when completing the PSCs, such as staff engagement or the quality of conversations and knowledge surrounding safety and planning for timely permanency. By doing this, the Coordinator has an idea of how to better support the district in improving practice during the PSC site visit.

Additional supportive efforts include holding a debriefing phone call or face-to-face meeting following the Coordinator's site visit. The Coordinator discusses with the district director any observed trends as well as suggestions for the district director to help with future PSCs in an effort to achieve consistency across the state. The information from the pre-call and debriefing session with the district director is tracked and sent to the regional deputy directors on a monthly basis. This information is used to make ongoing revisions to policy, training, and staff guidance. It is also utilized to provide coaching and mentoring to a district when practice areas that need strengthening are identified.

Ongoing collaboration between PSC program staff and QA staff resulted in the development of the PSC Practice Guidance and the Fidelity Review Tool that are included in a PSC Guidebook. The guidebook was disseminated to staff in each region along with training provided by the Coordinator that focuses on PSC model fidelity and quality practice

during the consultation using the PSC Guidance and Review Tool. The PSC Guidebook supports the district director in facilitating PSCs to achieve the best outcomes. The Coordinator and designated regional staff use the Fidelity Review Tool during the monthly site visits to evaluate the quality of PSCs conducted in each region, as well as identifying areas needing improvement to maximize outcomes for children and families. Collecting and sharing the qualitative information from the debriefings and fidelity reviews provides the necessary feedback loop for the regions so that quality permanency practice can continue to improve.

An additional project designed to improve permanency, placement stability, and maltreatment in care (MIC) outcomes is the development and implementation of a Safety through Supervision Framework. CWS is working in collaboration with the Capacity Building Center for States (CBCS) to prepare and implement a statewide supervision framework. The Safety through Supervision Framework includes guidance and expectations for supervisors regarding ongoing, intentional supervision of frontline staff. Work on the Framework began in early 2016. Throughout 2016, DHS collaborated with CBCS to develop the Safety through Supervision Framework as well as the supporting guides and tools for supervisors to use day-to-day. The Framework includes intentional guidance for supervisors to implement three supervision strategies of field observation, case staffing, and monthly work conferences. The Framework sets expectations for quarterly field observation and case staffing on all cases as well as monthly worker conferences between supervisors and their staff. Tools for each strategy were developed for supervisors to utilize during supervision to ensure the quality of work completed by frontline staff is sufficient to meet the safety, permanency, and well-being of children and families involved with CWS. The Framework is currently being tested in three districts in Region 1 that includes data collection through ongoing surveys and focus groups with staff testing the framework to make adjustments and enhancements prior to statewide implementation. When modifications and enhancements are complete, staggered statewide implementation will continue over the next year. Implementation will include best practice training, state office technical support, ongoing process evaluation, and coaching/mentoring as needed.

In addition to the efforts listed above, CWS offers multiple services to families to support timely permanency. Reunification and parent support services are provided through a program known as Comprehensive Home-Based Services (CHBS), which gives extra supports in the home on a weekly basis. This contracted service uses an evidenced-based model, SafeCare, comprised of four education modules for caregivers on health, home safety, parent-child interactions, and problem-solving and communication. A service completed by a paraprofessional through CHBS, known as Parent Aide Services (PAS) also teaches basic parenting skills to caregivers. CHBS is the single largest service contract serving families whose needs encompass reunification, voluntary preventive services, services to maintain placements, and parent aide services. All CHBS services are available statewide.

Systems of Care (SOC) is a comprehensive spectrum of behavioral health and other support services that are organized into coordinated networks to meet the multiple and changing needs of children, adolescents and their families with a serious emotional disturbance. This is accomplished by providing community-based, family-driven, youth-guided, and culturally-competent services statewide. Service coordination and wraparound services are provided underneath the SOC umbrella. Services to help achieve timely reunification are offered through CHBS, PAS, and SOC. During trial reunification, CHBS and SOC services support the parents as children are reintroduced to their own homes. This support is offered statewide.

During this last Pinnacle Plan reporting period, Oklahoma conducted a qualitative and quantitative examination on children achieving timely permanency. The qualitative analysis included an analysis of 125 Child and Family Services Reviews (CFSR) completed by the DHS Continuous Quality Improvement (CQI) team for the review period of October 1, 2015 through March 31, 2016. This information was combined with a quantitative analysis of a number of different data sets from the Oklahoma child welfare information system (KIDS) spanning the last 5 years of practice. The examination also included a qualitative and quantitative analysis of data collected October 1, 2016 through March 31, 2017 by the Permanency staff assigned to evaluate the Permanency Safety Consultation (PSC) core strategy.

This overall examination revealed several items that are directly related to both the successful achievement of timely permanency as well as some of the barriers that Oklahoma faces. The findings from this analysis are congruent with reviews conducted for other CORE strategies. Family engagement in treatment planning and adequate assessment of needs of the child, resource providers, and the family are areas of practice that need to be strengthened. The analysis also revealed that other barriers to timely permanency include timely establishment of permanency goals and then delays in achieving the goal once established. Some of the strengths discovered through this examination were that children who were predominantly placed with kin achieved permanency quicker and were more stable in their placements than children who were not placed in kinship placements. These findings help support the correctness of ongoing efforts and strategies that are in place as well as those currently being implemented as part of the core strategies and as part of Oklahoma’s federal program improvement plan (PIP).

6.3: Re-entry Within 12 Months of Exit

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

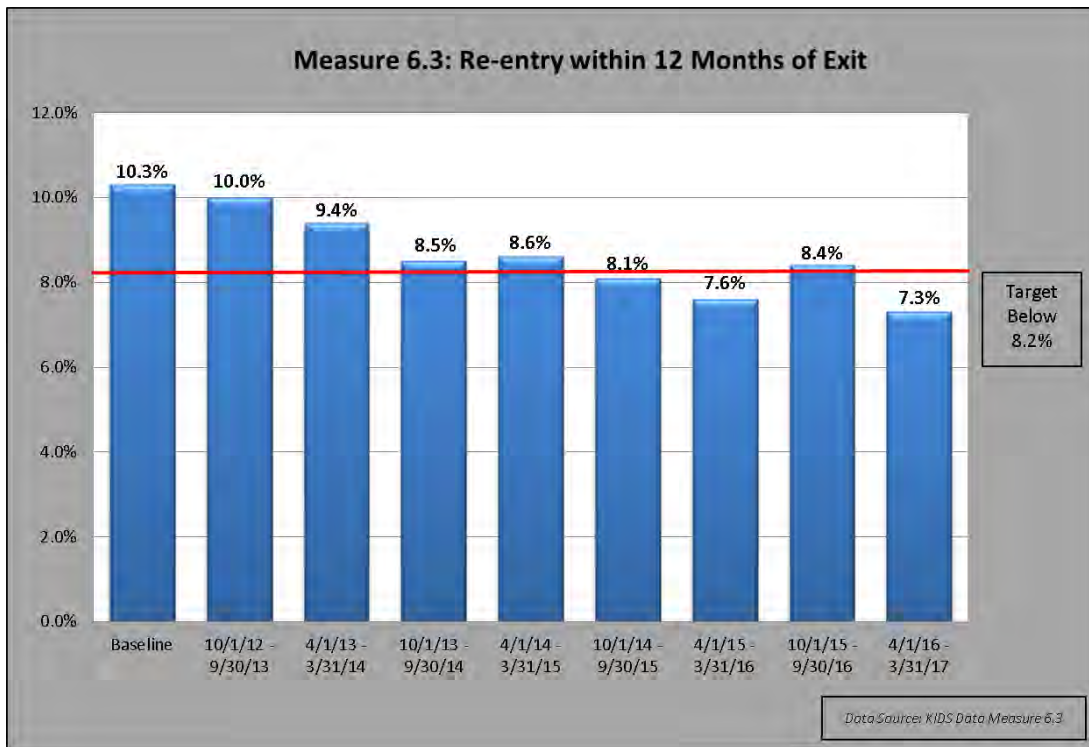
Denominator: All children who exited foster care from 4/1/2015 through 3/31/2016.

Numerator: All children who exited foster care from 4/1/2015 through 3/31/2016 and re-entered care within one year of exit.

Trends

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

Section 2, Table 6.3-1



Section 2, Graph 6.3-1

Commentary

The number of children re-entering out-of-home care within a 12-month period decreased by 1.1 percent and is now at 7.3 percent, which is again below the set target of 8.2 percent. This is the best performance on the measure since Pinnacle Plan reporting began.

Performance in this measure continues to exceed the baseline seven out of the last eight reporting periods and exceeds the target three out of the last eight reporting periods. The permanency safety consultations (PSCs) were modified to include a requirement for the completion of an assessment of child safety (AOCS) within 30-calendar days of a reunification recommendation. Specific actions steps and follow-up activities are developed and documented during the PSC to support the family throughout the reunification process. The supervisory framework and expectations outlined in Measure 6.2 of this report are intended to impact decisions around safe reunification planning through heightened supervisor oversight and coaching. Child Welfare Services (CWS) will continue to monitor this measure and engage in activities to ensure that performance in this measure consistently exceeds the baseline and meets the target.

6.4: Permanency for Legally-Free Teens

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

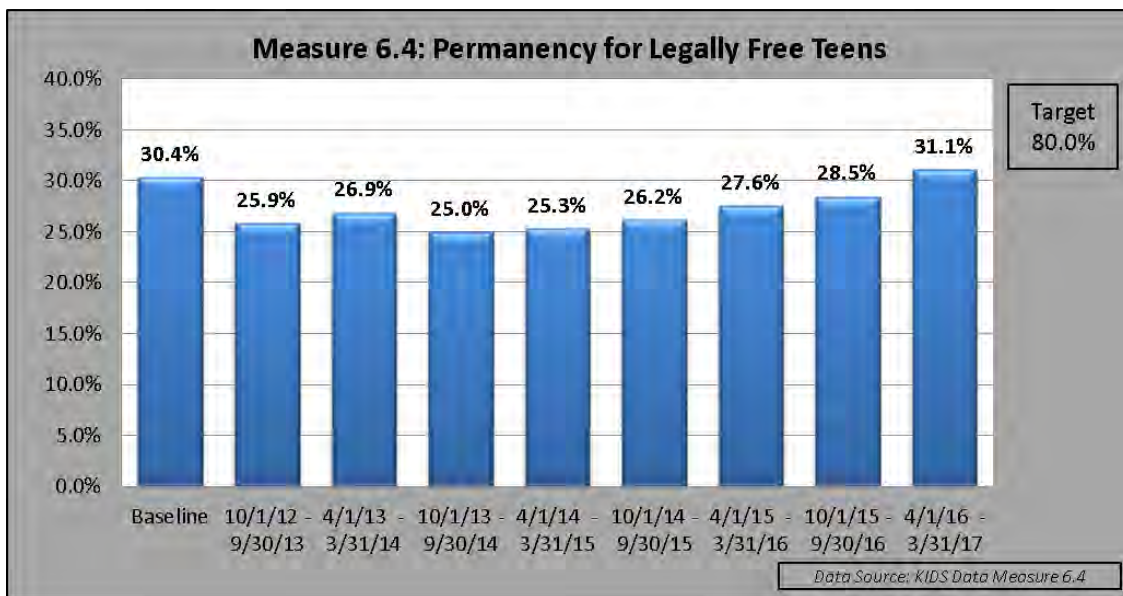
Denominator: All children in care who turned 16 from 4/1/2014 through 3/31/2015 and were legally free at the time they turned 16.

Numerator: The number of children, who turned 16 from 4/1/2014 through 3/31/2015, were legally free at the time they turned 16, **and** reached permanency prior to their 18th birthday.

Trends

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

Section 2, Table 6.4-1



Section 2, Graph 6.4-1

Commentary

From 4/1/2016 through 3/31/2017, a total of 132 legally-free youth turned 16 years of age. Of those youth, 41 exited to permanency with 32 youth or 24.2 percent through adoption and 9 youth or 6.8 percent through guardianship or custody to relative. Of the remaining 91 youth, 71 exited care prior to reaching permanency with 67 or 50.8 percent of youth through emancipation/aging out and 4 or 3.0 percent of youth exited to other type exits. The remaining 20 or 15.2 percent of youth were still in care on the last day of the reporting period 3/31/2017.

Although performance continues to remain below the target, positive trending occurred over the last five reporting periods. This last reporting period showed the largest increase between reporting periods for an increase of 2.6 percent. The performance is the highest of all reporting periods at 31.1 percent and the first reporting period to show performance exceeding the baseline percentage.

Efforts continued to support Measure 6.4 to increase the number of legally-free youth ages 16-17 exiting care to permanency before their 18th birthday and to decrease the number of youth in this population that are in out-of-home care. In October 2016, DHS developed and implemented one statewide plan as requested by the Co-Neutrals. This statewide plan replaced the five individualized regional plans. The statewide plan was created jointly between each of the five regional permanency leads and state 6.4 Team.

- District directors staff all referrals which involve the possible removal of youth 13 years of age and older. The district director or their designee documents the staffing in a KIDS contact.
- Additionally, a multi-level staffing that includes the district director occurs on all youth who do not have the goal of reunification. This staffing occurs within 30-calendar days of the youth's 15th birthday and the district director or their designee documents the staffing in a KIDS contact.
- A follow-up staffing occurs monthly between the worker and supervisor until the youth exits care and the supervisor documents the staffing in a KIDS contact. During the monthly staffing the Teen Permanency Planning tool is utilized to guide the staffing and create action steps for the identified youth. The Teen Permanency Planning Guide was created as a means to guide permanency staff and addresses topics that include permanency, case plan goal, well-being and mental health, youth placement, and exit planning. District directors also participate in the follow-up staffing and document the results every 6 months until the youth exits care.

- Family team meetings (FTM) are conducted with all youth within 30-calendar days of their 17th birthday to address barriers to achieving permanency and identify steps needed to ensure the youth is on a progressive track to permanency. The supervisor or designee documents the FTM in a KIDS contact.

To maintain accountability for the statewide plan implementation, a tracking tool for the regional leads was developed. The tool tracks the work done with youth that are part of the Measure 6.4 cohort. The **6.4 Tracking Log** documents the supportive efforts occurring in each activity of the statewide plan. It also includes supportive efforts made by the Permanency for Teens Coordinator (PTC) who oversees the efforts made for youth. The tracking tool is submitted monthly by the regional leads to ensure accountability and oversight.

The PTC has monthly conference calls with the regional leads, as well as meetings in person once every quarter. The calls and meetings provide support and discussion around any issues or barriers the regional field staff are encountering in statewide plan implementation, with the Permanency Expeditors (PE), and achieving permanency for legally-free youth. These calls and meetings provide continued opportunities for the PTC to understand what is occurring in each region and for the regional leads to support one another by sharing implementation methods that worked in their regions. The monthly contact also continues to provide opportunities to share the positive efforts carried out in each region that influence the work being done.

The Adoption Transition Unit (ATU) conducted permanency informational meetings (PIMs) from February through March 2017 in each of the regions where the largest number of 6.4 youth were located that were not in a group home setting. The meetings allowed youth and their caregivers to receive information on permanency options and for permanency planning staff to participate in hands-on-training for these types of conversations. Any youth that was not able to attend the region's meeting was visited individually by the assigned ATU specialist.

In May 2017, CWS implemented a group of PEs to be detailed to legally-free youth ages 16-17 with the case plan goal of planned alternative permanent placement. PEs are assigned to make concerted permanency efforts for the assigned legally-free teens. They work in conjunction with and build the capacity of the assigned child (CW) specialist to achieve permanency for legally-free teens on their caseload. PEs meet regularly with each of their assigned youth to engage in ongoing conversations about permanency and their plans for the future. PEs will continue to make contact with assigned youth every 60-calendar days to build upon permanency discussions and model how topics of permanency should be navigated for the assigned CW specialist. They also work with the CW specialist to ensure diligent searches were completed. The PE dispels myths about permanency and assists the youth in discussion of what the benefits of permanency are and what permanency can look like for him or her. PEs provide oversight, coordination, and support/mentoring to the assigned CW specialist.

In June, the topic of permanency was infused into this year's Teen Conference held for foster youth ages 16-21. Six breakout sessions were held with two group leaders for each small group and a permanency expert who was available to answer questions and guide the discussion, when needed. The small groups discussed how permanency is different than foster care, the difference between legal permanency and relational permanency, myths surrounding permanency, and what permanency means to each youth individually. Youth were also able to listen to a panel of former foster youth who spoke about the form of permanency they achieved while in care, as well as how they personally benefitted from achieving permanency. During the last breakout session, each teen in attendance created a postcard to send to his or her assigned CW specialist. On the postcard, each teen listed three action steps related to permanency they would like for the CW specialist to initiate on his or her behalf. At the conference's conclusion, each of the ten small groups gave a presentation to community partners and agency leaders on what permanency means to them, to their workers, to foster families, to the courts, and to the community.

CWS continues to work with Youth Villages (YV), a public/private partnership providing resources and services to support permanency outcomes for legally free youth in out-of-home care. YV LifeSet is a comprehensive community-based program that helps at-risk young people successfully transition to adulthood. The program will serve

approximately 400 youth per year when statewide and currently has the capacity to serve approximately 200 youth per year.

6.5: Rate of Adoption for Legally-Free Children

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

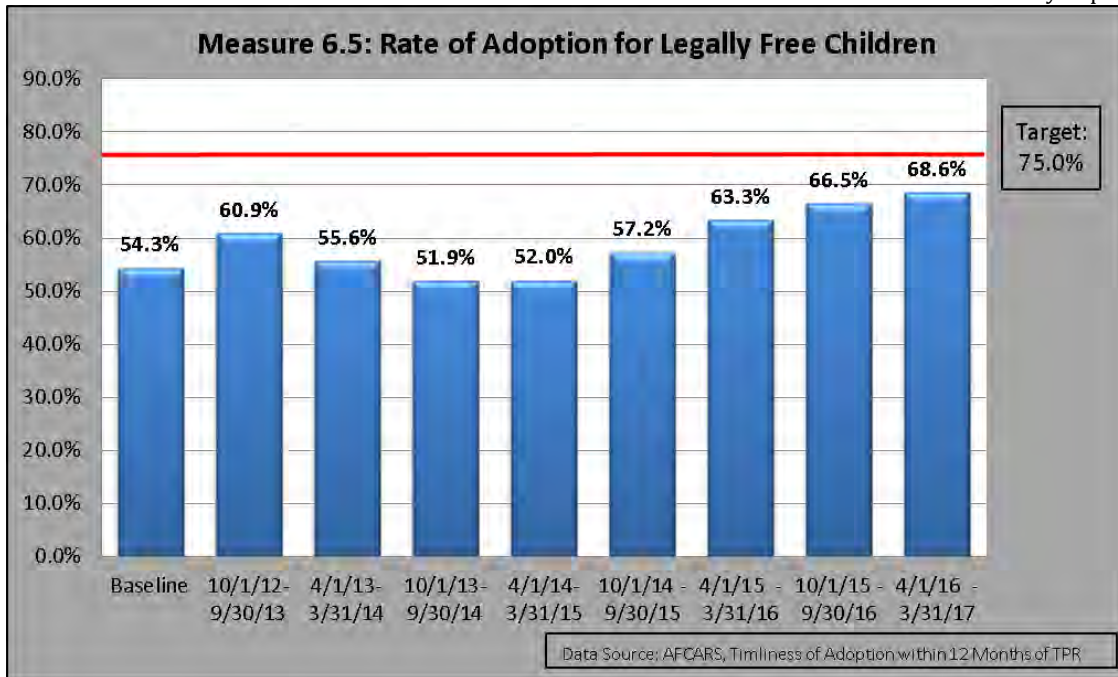
Denominator: All children who became legally free for adoption from 4/1/2015 from 3/31/2016.

Numerator: The number of children who became legally free for adoption from 4/1/2015 from 3/31/2016 **and** were discharged from care to a finalized adoption in less than 12 months from the date they became legally free.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children who became legally free from 10/1/10 - 9/30/2011			54.3%
10/1/2012 – 9/30/2013	All children who became legally free from 10/1/11 - 9/30/2012	898	1,474	60.9%
4/1/2013 – 3/31/2014	All children who became legally free from 4/1/12 - 3/31/2013	857	1,540	55.6%
10/1/2013 – 9/30/2014	All children who became legally free from 10/1/12 - 9/30/2013	839	1,618	51.9%
4/1/2014 – 3/31/2015	All children who became legally free from 4/1/13 - 3/31/2014	935	1,797	52.0%
10/1/2014 – 9/30/2015	All children who became legally free from 10/1/13 - 9/30/2014	1,200	2,099	57.2%
4/1/2015 – 3/31/2016	All children who became legally free from 4/1/14 - 3/31/2015	1,459	2,304	63.3%
10/1/2015 – 9/30/2016	All children who became legally free from 10/1/14 - 9/30/2015	1,567	2,355	66.5%
4/1/2016 – 3/31/2017	All children who became legally free from 4/1/15 - 3/31/2016	1,754	2,558	68.6 %
Target				75.0%

Section 2, Table 6.5-1



Section 2, Graph 6.5-1

Commentary

Child Welfare Services (CWS) continues to see an increase in the number of children becoming legally free for adoption. A 2.1 percent increase occurred from the last reporting period in the number of children who were discharged from care to a finalized adoption within 12 months from the date they became legally free. CWS has now achieved a 14.3 percent increase from the original baseline. This measure has improved for the last five reporting periods.

Ongoing work through the regional Adoption Timeliness Accountability Teams (ATATs) continues to have impact with positive trends in reducing the length of time between becoming legally free for adoption and adoption finalization. With each region meeting on a regular basis, development of specialized reporting for tracking purposes, and guided regional reviews of children identified by the Strategy Lead, CWS continues to see measurable improvement by identifying and resolving barriers to timely permanency for legally-free children.

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

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

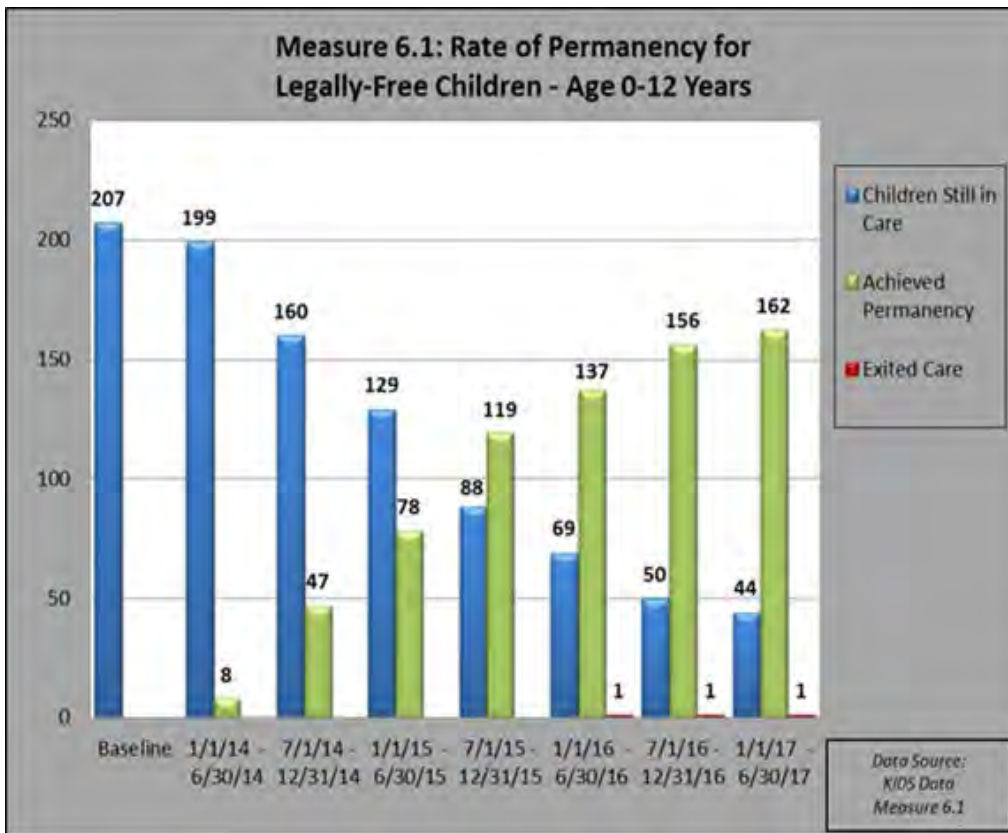
Denominator: All Quad 2 children with a case plan goal of adoption as of 1/10/2014.

Numerator: The number of Quad 2 children with a case plan goal of adoption who achieved permanency.

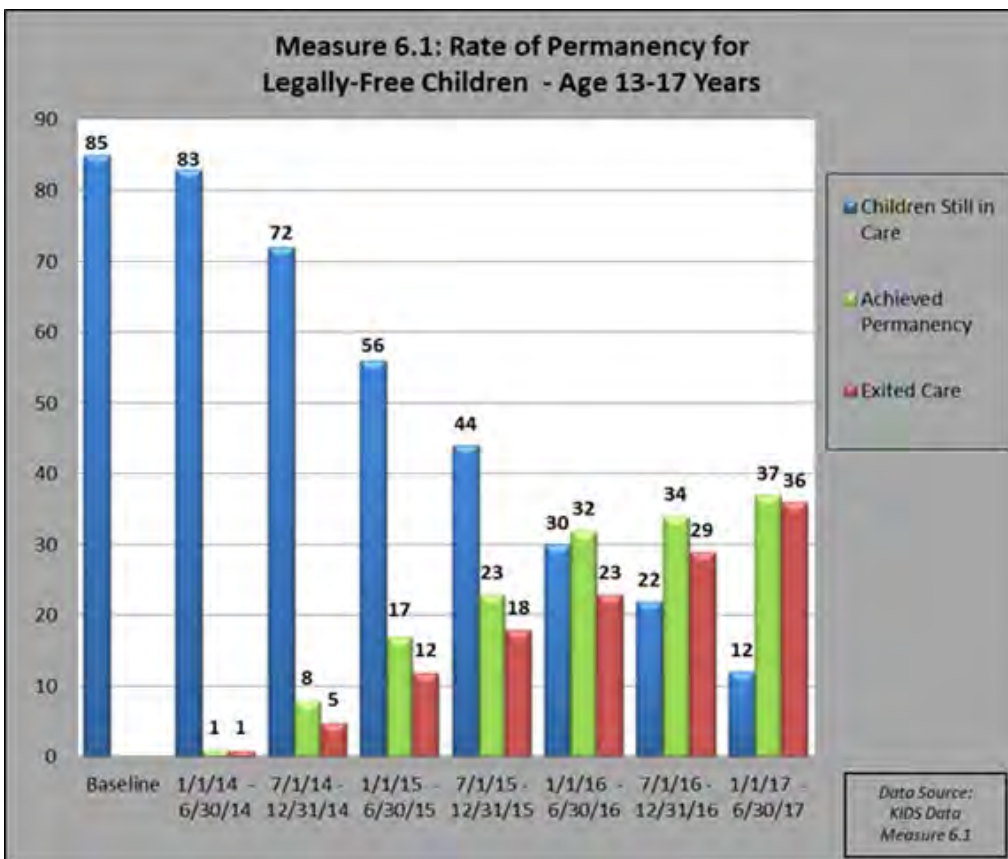
Trends

Reporting Period	Population	Numerator	Denominator	Result
Cohort Baseline 1/10/14				292 Children
1/10/2014 – 6/30/2014	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	8	207	3.9%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	1	85	1.2%
7/01/2014 – 12/31/2014	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	47	207	22.7%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	8	85	9.4%
1/01/2015 – 6/30/2015	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	78	207	37.7%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	17	85	20.0%
7/01/2015 – 12/31/2015	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	119	207	57.5%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	23	85	27.1%
1/01/2016 – 6/30/2016	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	137	207	66.2%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	32	85	37.6%
7/01/2016 – 12/31/2016	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	156	207	75.4%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	34	85	40.0%
1/01/2017 – 6/30/2017	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	162	207	78.3%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	37	85	43.5%
Target		90.0% (Age 0-12)	80.0% (Age 13+)	

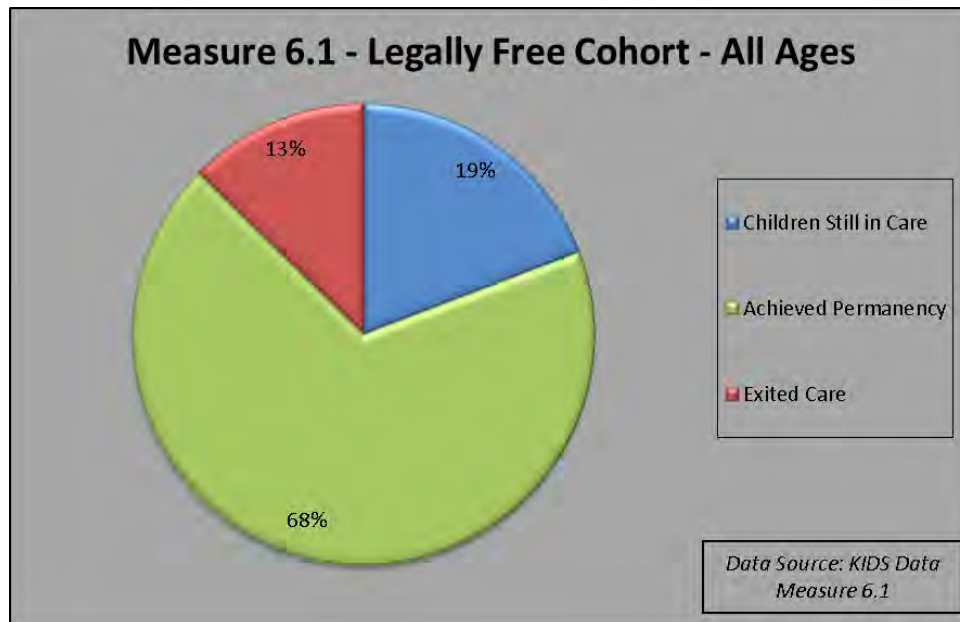
Section 2, Table 6.1-1



Section 2, Graph 6.1-1



Section 2, Graph 6.1-2



Section 2, Chart 6.1-1

Commentary

As of 6/30/2017, 199 children or 68.2 percent achieved permanency and 37 children or 12.7 percent exited care out of the 292 children that were included in the original cohort as of 1/10/2014. For the cohort of 207 children ages 0-12 who were legally free without an identified placement, 162 or 78.3 percent reached permanency.

For the cohort of 85 youth aged 13 or older who were legally free without an identified placement, 37 or 43.5 percent reached permanency. Of the remaining 56 children in care, 4 children are currently placed in trial adoption and 1 child is placed in trial reunification. Of the children under the age of 5 from the original cohort, 100 percent (25 children) achieved permanency through adoption. In the same period, 36 cohort youth age 13-17 exited care without permanency.

Adoptions Transition Unit (ATU) staff are assigned to each Quad 2 child and youth to diligently assist in achieving permanency. **Adoption Transition Efforts for 12+ Youth** provides the monthly permanency efforts for older youth in the cohort during this reporting period. Increased oversight by ATU supervisors on documentation of permanency efforts improved the quality and timeliness of KIDS documentation. The Y1823 Ongoing Quad 2 report continues as a primary management tool for ATU leadership and is helpful in both identifying trends within the Quad 2 cohort such as placement types and specialized recruitment needs, as well as needs within each supervisory group and within the team as a whole.

During this reporting period, ATU completed its eighth month as an exclusively allocated team with staff only carrying ATU caseloads. Since the numbers of Quad 2 children and youth increased during this time, ATU was allotted new full-time positions to meet children's ongoing needs. Eight months after the integration of Foster Care and Adoptions, processes for adoption event preparation, statewide staffing follow-up, and adoption efforts staffings are being streamlined.

ATU's partnerships with the following groups continue to be critical in achieving permanency for Quad 2 children and youth:

- Oklahoma Fosters Initiative, America's Kids Belong, Oklahoma Heart Gallery, and CWS/ATU. This partnership resulted in the creation of 82 videos of children waiting for adoptive families that can be used throughout different media sources and social media sites, such as Facebook, Adoption Exchange,

AdoptUsKids, and AdoptOKKids, and are specifically located on the Oklahoma Heart Gallery website. Video shoots were held in February and June 2017, resulting in photographs and videos of 49 children and youth.

- Oklahoma Heart Gallery website and physical traveling displays feature photos and/or videos of children who are legally free and awaiting an adoptive family. They are updated frequently based on the status of featured children and youth.
- Local television stations in Lawton (KSWO), Oklahoma City (KFOR), and Tulsa (KTUL), who feature stories at least weekly on waiting children.
- CWS recruitment and development specialists, who collaborate with ATU to recruitment specifically for identified children and youth within the community.
- Oklahoma Successful Adulthood and permanency planning programs.
- Mental health consultants from the Oklahoma Department of Mental Health and Substance Abuse Services, who contract with CWS to provide family and child-specific supports needed by adoptive families.

As a result of these ongoing partnerships, from 1/1/2017 through 6/30/2017, the Foster and Adoptive Parent Support Center received 1,081 documented inquiries from the following sources during this timeframe:

AdoptUSKids	1
Adoptive family	8
Facebook	2
Faith community	2
Foster family	25
Friend	21
Generalized internet source	955
Generalized television source	10
Information session	5
OKFosters	12
Life.Church	9
Newspaper	2
OKDHS	20
Radio	1
Relative	8

In the coming months, CWS will implement an adoption efforts staffing for baseline children and youth, and those with longer stays in care. This effort is currently in the planning phase and following further development will begin in August 2017 guided by a practicum student. This effort includes an evaluative piece and plans for sustainability and continues through May 2018.

To reinvigorate conversations with perpetually permanency-challenged youth, ATU called upon their existing partnership with Oklahoma Successful Adulthood to hold a young adult panel. ATU will be further partnering with resource staff to assist with discussions with both kinship and other resource parents of Quad 2 children and youth on barriers to providing permanency to youth.

Engagement in meaningful conversations with relatives and kin that provide placement to Quad 2 youth and those who care for youth with very special needs is being explored and developed for the upcoming months. The purpose of the conversations is to identify and bust barriers to permanency. Continuing efforts by ATU and other partners to further identify people important in the youth's life will be incorporated into new programmatic processes currently in the works to increase permanency possibilities for children and youth within the Quad 2 cohort.

6.6: Trial Adoption Disruptions

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

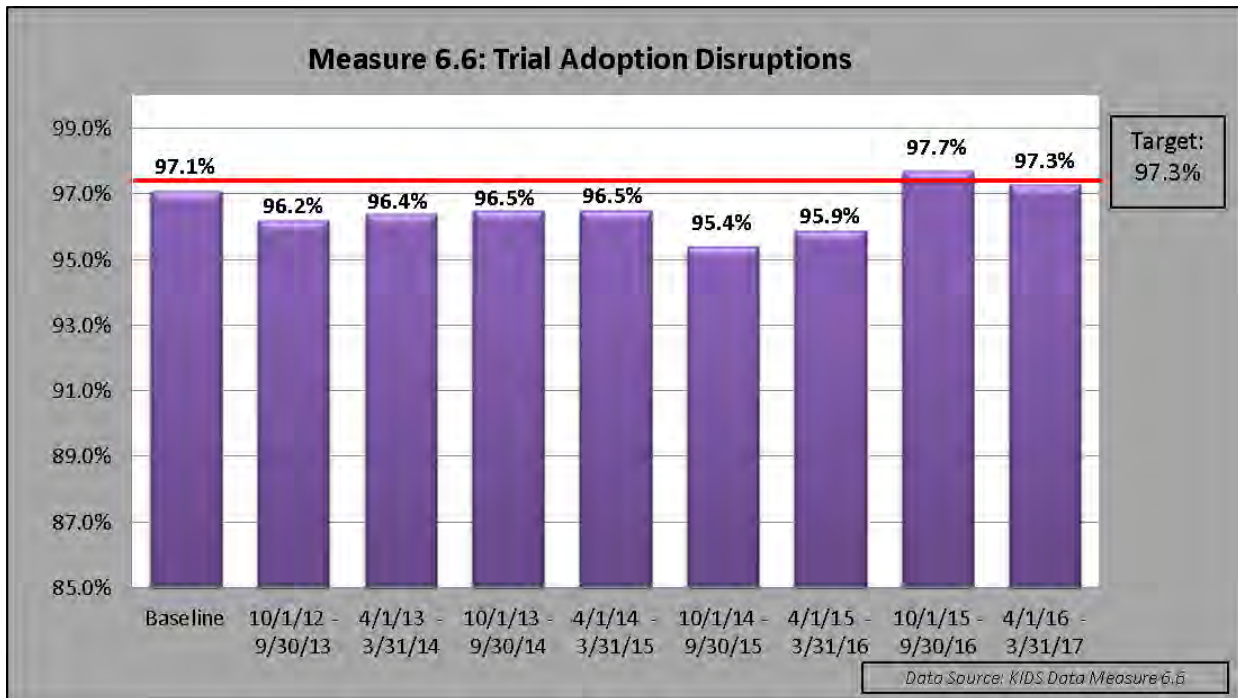
Denominator: Number of children that entered trial adoption from 4/1/2015 through 3/31/2016.

Numerator: Number of children that entered trial adoption from 4/1/2015 through 3/31/2016 and the trial adoption did not disrupt within 12 months.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children who entered TA from 10/1/2010 – 9/30/2011			97.1%
10/1/2012 – 9/30/2013	All children who entered TA from 10/1/2011 – 9/30/2012	1,433	1,489	96.2%
4/1/2013 – 3/31/2014	All children who entered TA from 4/1/2012 – 3/31/2013	1,366	1,417	96.4%
10/1/2013 – 9/30/2014	All children who entered TA from 10/1/2012 – 9/30/2013	1,197	1,241	96.5%
4/1/2014 – 3/31/2015	All children who entered TA from 4/1/2013 – 3/31/2014	1,252	1,297	96.5%
10/1/2014 – 9/30/2015	All children who entered TA from 10/1/2013 – 9/30/2014	1,477	1,549	95.4%
4/1/2015 – 3/31/2016	All children who entered TA from 4/1/2014 – 3/31/2015	1,938	2,020	95.9%
10/1/2015 – 9/30/2016	All children who entered TA from 10/1/2014 – 9/30/2015	2,138	2,189	97.7%
4/1/2016 – 3/31/2017	All children who entered TA from 4/1/2015 – 3/31/2016	2,337	2,403	97.3%
Target				97.3%

Section 2, Table 6.6-1



Section 2, Graph 6.6-1

Commentary

Child Welfare Services (CWS) continues to meet the target of 97.3 percent for this measure, although there was a slight decrease of 0.4 percent this reporting period. For the current reporting period, 2,403 children entered into TA, which is 214 more children entering TA than the last reporting period, with 2,337 or 97.3 percent not disrupting while in TA placement.

Post-Adoption Services processes family requests made by the resource worker to assist with identifying needs and resources to support the adoptive family. Post-Adoption Services developed a field worker position who works with identified families providing assistance to facilitate the end goal of adoption.

6.7 Adoption Dissolutions

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

Denominator: All children who had a legalized adoption during the 24 months ending 3/31/2015.

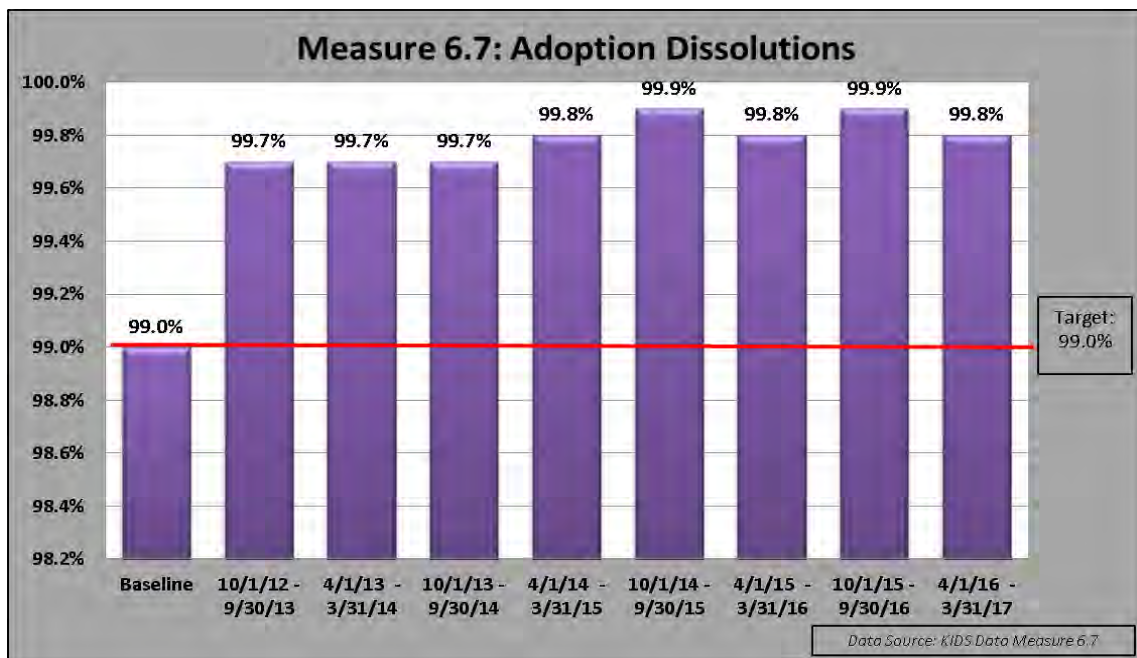
Numerator: All children who had a legalized adoption during the 24 months ending 3/31/2015 that did not dissolve in less than 24 months.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children with a legalized adoption from 10/1/2008 - 9/30/2010			99.0%

10/1/2012 – 9/30/2013	All children with a legalized adoption from 10/1/2009 - 9/30/2011	2,969	2,979	99.7%
4/1/2013 – 3/31/2014	All children with a legalized adoption from 4/1/2010 - 3/31/2012	3,055	3,063	99.7%
10/1/2013 – 9/30/2014	All children with a legalized adoption from 10/1/2010 - 9/30/2012	2,856	2,865	99.7%
4/1/2014 – 3/31/2015	All children with a legalized adoption from 4/1/2011 - 3/31/2013	2,945	2,950	99.8%
10/1/2014 – 9/30/2015	All children with a legalized adoption from 10/1/2011 - 9/30/2013	2,846	2,849	99.9%
4/1/2015 – 3/31/2016	All children with a legalized adoption from 4/1/2012 - 3/31/2014	2,697	2,702	99.8%
10/1/2015 – 9/30/2016	All children with a legalized adoption from 10/1/2012 - 9/30/2014	2,737	2,741	99.9%
4/1/2016 – 3/31/2017	All children with a legalized adoption from 4/1/2013 - 3/31/2015	3,086	3,093	99.8%
Target				99.0%

Section 2, Table 6.7-1



Section 2, Graph 6.7-1

Commentary

CWS continued to exceed the goal of a 99.0 percent success rate for adoption stability with less than 0.2 percent in dissolutions. There were 3,093 children with a legalized adoption during the 24 months ending 3/31/2015 and 3,086 or 99.8 percent of those adoptions did not dissolve in less than 24 months. During this reporting period, an additional 352 children had finalized adoptions. Seven children disrupted from five separate adoption finalization cases.

To prevent future dissolutions, Post-Adoption Services meets with the identified family prior to finalization to provide resources and services. This supportive process contributes to the effective maintenance of the baseline of 99.0 percent placement success rate.

SECTION 3. Capacity Indicators

2.1: New Family Foster Care Homes

Operational Question

How many new foster homes, including Foster Family Homes and Supported Foster Homes were opened during SFY 17?

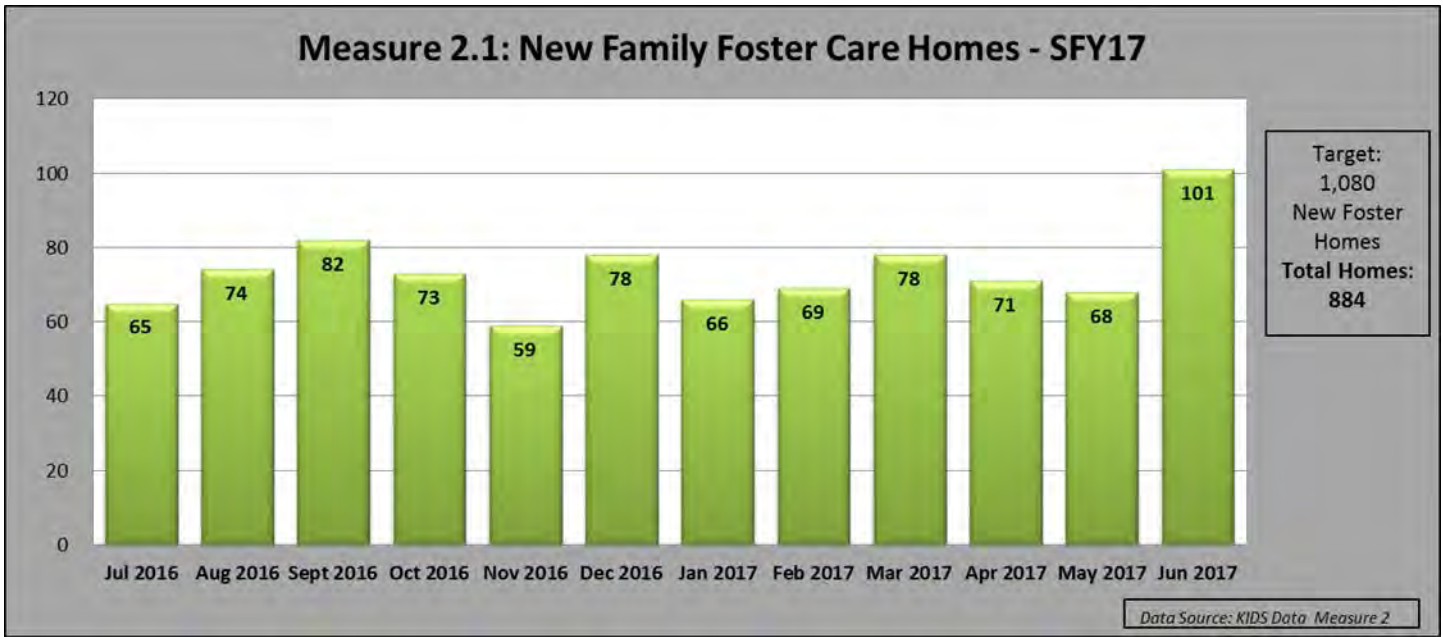
Data Source and Definitions

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

Trends

Reporting Period	Population	Result	
SFY 17 Baseline		2,349 Foster Homes open as of 7/1/2016	
7/1/2013 – 12/31/2013	All CFC, Foster Family Homes, EFC, SHH, and Supported Foster Homes opened during the first half of SFY 14	346 Homes	763 Total Homes opened in SFY 14
1/1/2014 – 6/30/2014	All CFC, Foster Family Homes, EFC, SHH, and Supported Foster Homes opened during the second half of SFY 14	417 Homes	
7/1/2014 – 12/31/2014	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 15	409 Homes	780 Total Homes opened in SFY 15
1/1/2015 – 6/30/2015	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 15	371 Homes	
7/1/2015 – 12/31/2015	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 16	387 Homes	1,080 Total Homes opened in SFY 16
1/1/2016 – 6/30/2016	All Foster Family Homes and Supported Foster Homes opened during the Second half of SFY 16	693 Homes	
7/1/2016 – 12/31/2016	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 17	431 Homes	884 Total Homes opened in SFY 17
1/1/2017 – 6/30/2017	All Foster Family Homes and Supported Foster Homes opened during the Second half of SFY 17	453 Homes	
Target		1,080 New Foster Homes opened by 6/30/2017	

Section 3, Table 2.1-1



Section 3, Graph 2.1-1

Commentary

As of 6/30/2017, Child Welfare Services (CWS) opened 884 CWS Foster Family Homes and Supported Foster Homes that were counted as new according to the Pinnacle Plan criteria. The target for new homes by the end of State Fiscal Year (SFY) 17 was 1,080 homes. As of 6/30/2017, CWS achieved 81.9 percent of the SFY 17 target for new homes. 2,349 homes were open as of 7/1/2016. During SFY 17, 1,021 homes were opened and 1,228 homes were closed, leaving 2,142 homes open as of 6/30/2017 for a net loss of 207 homes. Net gain only counts unique homes even though a resource family may provide more than one type of foster care. This measure also excludes any out-of-state foster homes or homes open to provide respite-only care.

CWS understands the continued importance of recruiting and developing foster families who will best serve the children in need of placement. A new Foster Home Needs Analysis was completed in June 2017 to determine the needs for SFY 18. The analysis again looked at the children in care and how many of those children were currently placed in foster homes. Each day that a child was placed in a foster home counted as a "bed day". Over a one year period, the total number of bed days spent in foster care was totaled to determine the current need.

To project future need, trending data over the last three years was also factored in. The analysis took into account that the average number of beds in an approved home increased from 1.9 to 2.2, which is attributed to efforts of staff to update resource cases as to the number of children for whom the home is approved. Additionally, the number of children in care decreased 6.4 percent over the last SFY. The following contributing factors were still considered: waiting lists for appropriate level of care; separation of siblings; children placed outside of their primary county; choice factor; placement type; home utilization; and closure rates. CWS is working with the Co-Neutrals to finalize the SFY 18 target and working with CWS recruitment staff and the resource family partner (RFP) agencies to establish individual targets.

To better understand the high rate of foster home closures, staff was given guidance in April 2017 on how to select the most accurate reason the resource family chose to close their home. Program staff worked with KIDS to develop a picklist of closure reasons that more accurately reflected why foster homes close. With the 6/10/2017 KIDS release, the new, more specific, closure reasons are available for staff to begin using. Staff were provided with a comprehensive list of **Updated Resource Closure Reasons**, along with definitions, on 7/31/2017. CWS also made a significant effort to address homes without a placement in more than 150-calendar days. The families were contacted about their readiness to provide care to a child in need of placement. CWS and RFPs' staff shared information about the children currently

needing placement, to help the family determine if they were truly interested in remaining open to take placement. This resulted in many homes closing. CWS is currently taking a more in-depth look into homes that closed over the past six months, including those that never took a placement, to identify efforts needed to retain foster families.

CWS continues to have designated recruiters statewide. The recruiters actively hold events to recruit new foster families and work with families through the approval process. Data from SFY 17 showed that while the number of traditional foster families increased, the number of kinship families decreased. CWS understands the importance of placing children with kinship families in order to reduce trauma, increase placement stability, and aide in timely reunification. Foster Care and Adoptions leadership identified a need for more intense work to be done to locate kinship options for children and are in the process of implementing a new initiative to focus on locating kin. The Actively Seeking Kin (ASK) initiative will begin in August 2017 and involve current recruitment staff. Recruiters will use intentional interviews with biological parents and children to identify potential kin for placement as well as supportive connections. Recruiters will attend training on ASK and intentional interviewing prior to the rollout. The role of the recruiter in seeking kin options does not take the place of the role of the assigned caseworker. Instead, it supplements it. CWS leadership is currently discussing opportunities for a more comprehensive process to identify kin beginning with the first contact with a family.

Targeted Recruitment

Targeted recruitment remains a priority both within CWS as well as with external agency partners. The Foster Care and Adoptions Deputy Director issued monthly challenges to CWS and external agency partners during 2016; however, the challenges did not continue in 2017 as the effectiveness appeared to diminish by the end of 2016.

CWS partnered with Annie E. Casey Foundation (AEC) to provide specific targeted recruitment training from February 2017 through April 2017. AEC provided training on the following topics:

- overview of targeted recruitment;
- recruitment plan development;
- recruiting for teens;
- social media and recruitment;
- community-based recruitment;
- recruiting in the Hispanic, African American, and Native American Community; and
- beyond recruitment.

The trainings were open to all CWS, RFP, therapeutic foster care (TFC) staff, and tribes.

CWS recruitment staff partners with Developmental Disability Services (DDS) to recruit homes to serve children/youth that could be best served through specialized foster care (SFC) or an agency companion (AC) home. Initially, three recruitment staff were assigned to focus on this specialized recruitment. CWS leadership has since decided to dedicate a unit of five staff and a supervisor to this specialized work and is presently working out details regarding the unit's structure.

Each regional DDS/Recruitment team meets once a month to discuss the children approved for SFC or AC and to determine what type of home can best meet their needs. A quarterly group meeting is held with all DDS/Recruitment staff to discuss what SFC or AC homes are available and what type of traditional foster homes might be able to meet the children's needs. A meeting is held once a month at the JD McCarty Center to discuss the DHS custody children placed there. Recruitment staff also visited the Laura Dester Children's Center and met the children in need of placement to do some targeted recruitment for them. Challenges continue in finding applicants willing to consider SFC, and with being able to provide specific information to applicants regarding the services they will receive, including payment information. Three families were recruited for SFC and/or AC homes.

Barriers

Recruitment staff make weekly follow-up calls to families in the resource approval process. These calls are helpful to identify barriers the family experiences and remedy those barriers as quickly as possible. The calls also provide an added benefit for the family as they report feeling more supported by the worker and CWS. Bi-weekly calls between the foster care and adoptions leadership staff and RFP agencies offer another opportunity to identify trends or barriers and allow for discussion of potential new recruitment ideas. Foster care and adoptions field managers assigned to the recruitment units complete weekly calls with recruitment supervisors. These calls increase accountability for recruitment staff and RFP agencies to approve homes timely. The Foster Care and Adoptions Support Center staff also contact families in the approval process to identify any possible barriers. Previously, staff contacted families in the approval process for over 60-calendar days, but in March 2017 the decision was made to transition from 60 to 90-calendar days in the approval process. This decision was based on information provided by families indicating that the vast majority of families choose to move through the process slowly rather than a barrier or issue slowing down the process. No other trends were identified through these calls and quite often the families are complimentary toward the agencies.

Oklahoma Fosters

Oklahoma Fosters continues to support the efforts of increasing awareness of the need for foster and adoptive homes in Oklahoma. On 3/14/2017, the Harkins Theater hosted a recruitment day where current families brought an interested family to hear a presentation and then enjoy a free movie and popcorn. The event was sold out. CWS made a presentation and provided materials to interested families. A partnership with the YMCA that offers a 50 percent discount in membership and activity fees to current foster families rolled out in March. This partnership includes childcare, summer camps, and gym memberships overall. All families received an official letter of this rollout and there was a formal press engagement with Governor Fallin, CWS, RFP agencies, and the YMCA.

Oklahoma Fosters promoted a statewide 'Call to Action' recruitment event on 4/20/2017. This event included internal recruiters and external agency partners who set up over 90 individual recruitment events throughout the state. Events were held at local donut shops, malls, restaurants, churches, libraries, and DHS offices. The recruiters reported they felt the events raised significant awareness about foster care and adoption in Oklahoma, the need for more resource families, and ways for families to get involved.

Oklahoma Fosters supports other specialized efforts internal to CWS and with community partners. Oklahoma Fosters is creating strategic campaign marketing plans related to recruitment for DDS and SFC type homes. Support was and will be provided to the Foster Care and Adoptive Association of Oklahoma, FCPA, and Tulsa Coalition for the Protection of Children, during events including a walk in June, a walk in September, and fall conferences. Oklahoma Fosters works to continually engage print media about the foster care need and assists the RFP agencies in coordinating marketing and social media plans for recruitment.

A specialized unit was created within Oklahoma Fosters that consists of five dedicated staff and a supervisor who will assist with coordination of statewide recruitment activities. The unit will collaborate with external partners to create a larger presence in rural Oklahoma, build relationships with business partners, and enhance media presence statewide.

Lean Six Sigma Green Belt Project

A Lean Six Sigma Green Belt Project was initiated in January 2017 to review the current placement process in Region 3 and create solutions to identified inefficiencies. The Green Belt Team consisted of four child welfare employees from foster care and adoption as well as technology and governance. The team gathered information from foster care and adoption, permanency planning and child protective service workers to gain insight as to how the placement process operated in Region 3. Each Resource Family Partner Agency was also contacted to gain their perspective as well. From this information, four root causes of inefficiency were identified. They are: 1) inaccurate foster home vacancy report, 2) unproductive placement conference calls, 3) the lack of a standard placement search notification, and 4) a non-electronic placement tracking method. The implementation phase began May 2017 and the following solutions were applied: 1) vacancy report is updated timely and is utilized appropriately, 2) unproductive conference calls that delayed placement of children for up to 6 hours were eliminated, 3) a standard placement search notification was implemented,

and 4) an electronic placement tracking method was executed. The implementation phase will continue and be monitored through December 2017. Preliminary results show that placement of children in a foster home is taking less time, trauma for children is minimized, and time for field staff is more efficiently managed.

Communication and Supports

The collaboration between CWS and the faith community through the Care Portal continues to see great success. Two additional counties, Nowata and Washington, launched the Care Portal early in 2017. From January 2017 through June 2017, 957 children were served by churches and small groups statewide with donated goods at an estimated value of \$69,000. The Care Portal is now active in the following counties: Stevens, Cherokee, Craig, Mayes, Nowata, Oklahoma, Rogers, Tulsa, and Washington.

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

For the purposes of improving customer service and communication, each supervisor and field manager contact two open foster families from a random sample provided each month. Through the monthly customer service phone calls, information is gathered from foster parents providing direct insight into the current service they receive from DHS or the RFP agency. A total of 570 surveys were completed for January - June 2017 and survey analysis indicated a consistent 90 percent or higher rating of excellent, good, or fair, as seen in the:

- ***Foster Care Customer Service Survey January 2017;***
- ***Foster Care Customer Service Survey February 2017;***
- ***Foster Care Customer Service Survey March 2017;***
- ***Foster Care Customer Service Survey April 2017;***
- ***Foster Care Customer Service Survey May 2017;*** and
- ***Foster Care Customer Service Survey June 2017.***

The results from each month's survey are provided to the Foster Parent Support Workgroup where the results are reviewed and any needs identified are then addressed by the Workgroup. The foster families provided specific suggestions for training that they would like to see offered, which is being addressed through a subgroup of the Foster Parent Support Workgroup. In October 2016, three new training videos were created in partnership with Deaconess Adoption Agency and placed on the Oklahoma Fosters website. The trainings included Redefining Time Out, a Parenting Toolbox, and the Role of Play. Since October the training videos were viewed 239 times, 196 times, and 77 times respectively. In May 2017, a training video with information regarding Post-Adoptions was created and made available on the Oklahoma Fosters website and was viewed 39 times.

During the past six months, the Foster Parent Support Workgroup initiated multiple projects in an effort to provide ongoing support to foster parents. The Workgroup identified new areas of need and additional subgroups were created to address ongoing in-service training topics: clarification on worker roles within the agency; in-depth information on the Indian Child Welfare Act and how it applies to foster parents; and a need for statewide resources to be accessible in one easy location. The Workgroup met monthly through April and is now on hiatus as most of the subgroups have completed their assigned tasks. The subgroup addressing ongoing in-service training topics will continue to meet monthly to identify current training available to families and what additional training topics are needed. The previously completed projects, such as the information sharing sheet and the respite care flyer, are being distributed and reviewed at the regional quarterly supervisor meetings during the months of August and May. This same information will also be provided to foster families.

The National Resource Center for Youth Services (NRCYS) at the University of Oklahoma maintains coordination for the five CWS Family Support Network groups currently located in three regions. The original groups established in Sequoyah, Pottawatomie, and Tulsa Counties thrive under the NRCYS oversight and foster parents consistently provide

positive feedback regarding the groups. The average monthly attendance between the five groups is 62 participants. NRCYS is in the process of assessing the potential need for Family Support Network groups in Oklahoma County. Additional support groups are present in local communities statewide and are often attended by foster care and adoptions staff to support the families.

The online pre-service training pilot was offered to foster and adoptive families in Region 1 beginning in January 2017. Following the success of the pilot with Region 1, additional regions were given the opportunity to use the online training. Currently foster care and adoptive families in Regions 1, 2, 4, and 5 all have access to the online training. The online training will roll out in Region 3 on 8/15/2017. NRCYS trained RFP agency staff during June and July to handle the follow-up calls to their families. The online training was made available to RFP families once training for RFP staff was completed. From January to June 2017, 299 participants enrolled in online training. 117 individuals completed the training, 63 withdrew, and 119 individuals are still in the process of completion. Feedback continues to be positive and families report that the training is interactive and useful.

CWS agreed to serve as one of eight states working with the Center for Adoption Support and Education (CASE) non-profit to pilot a standardized, web-based training to build the capacity of child welfare (CW) professionals and behavioral health practitioners to better understand and address the behavioral health needs of children, youth, and their families in the foster care system, including those moving toward or having achieved permanency through adoption or guardianship. The training was developed through the National Training Initiative (NTI). The CW Professional curriculum is 20 hours and focuses on casework practices to promote child well-being and family stability. CW supervisors will receive an additional three hours of training and a coaching and activity guide to support staff in applying the learning in daily practice. CWS and CASE, along with other community partners, had an informational kick-off meeting 3/23/2017. Foster Care and Adoptions leadership is committed to having its staff complete the training during the current calendar year. The Behavioral Health Practitioner curriculum, currently under development, is 25 hours and provides clinical skills and therapeutic approaches for work with adoptive and foster families and guardianship families, including child welfare, private/domestic, and inter-country adoptions. The Behavioral Health Practitioner curriculum will pilot early in 2018. CWS and CASE, in partnership with Deaconess Pregnancy and Adoption Services, started the process of engaging behavioral health providers that will pilot this training.

Capacity

Although the recruitment goal for SFY17 was not achieved, the progress remains remarkable. At the end of SFY12, the last time a similar number of children were placed in out of home care, the system had 1,308 foster homes open. These homes included 2,310 approved beds. As of the end of SFY17, there were 2,272 foster homes available, which included 5,627 approved beds. This is a 73.7% increase in the number of foster homes available since SFY12 and a 143.6% increase in the number of approved beds available.

Resource Data for State	SFY12	SFY13	SFY14	SFY15	SFY16	SFY17
Removed Children						
# Removed at End of SFY	9,132	10,233	11,562	11,072	9,988	9,058
# Removed at End of SFY Excluding TR	8,120	8,941	10,272	9,923	8,950	8,144
CW Foster Family Care						
# of Homes Approved During the SFY	573	769	858	987	1,301	1,103
# of Homes Closed During the SFY	477	565	587	813	819	1,275
# of Homes Open at the End of the SFY	1,308	1,512	1,782	1,957	2,439	2,272
Approved Beds	2,310	2,602	3,142	3,727	5,173	5,627
<i>Data Source: YI758, run date 8/18/17. Totals include CW Foster Homes and Supported Foster Homes</i>						

2.3: New Therapeutic Foster Care Homes

Operational Question

How many new Therapeutic Foster Care homes were opened in SFY 17?

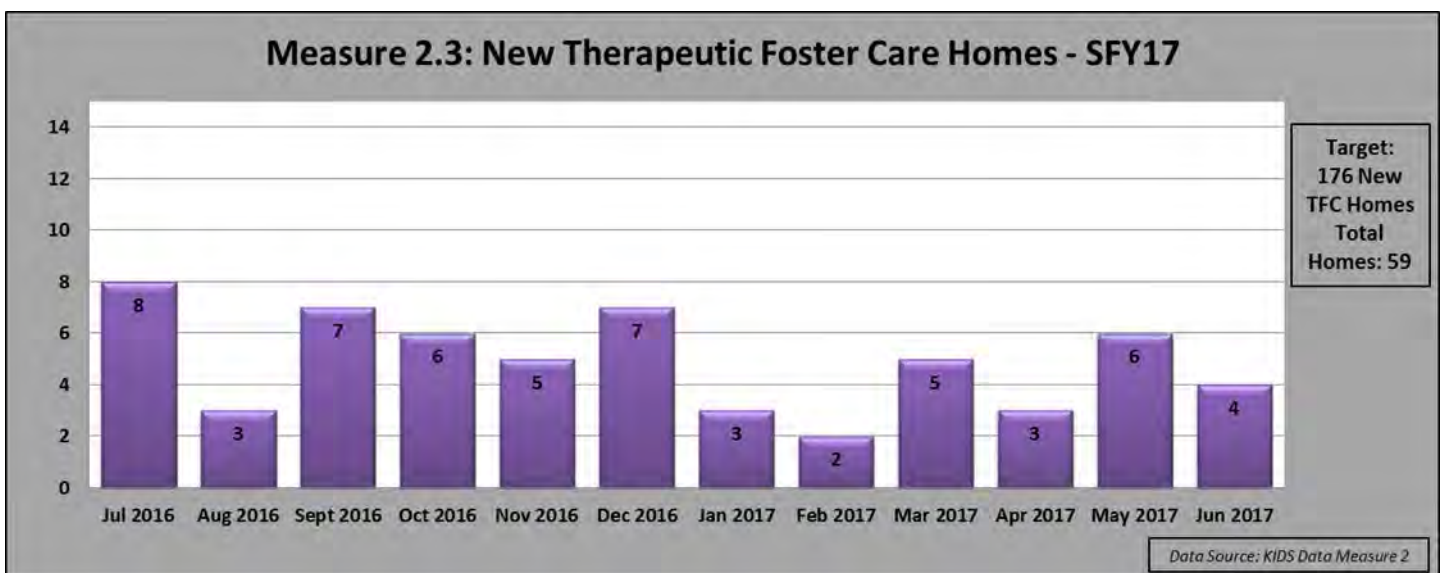
Data Source and Definitions

Total count of new Therapeutic Foster Homes (TFC) includes all new TFC Homes, by month that they were opened using the agreed upon criteria.

Trends

Reporting Period	Population	Result	
Baseline		366 TFC homes open as of 7/1/2016	
7/1/2013 – 12/31/2013	All new TFC homes opened in the first half of SFY 14	55 TFC Homes	107 Total TFC Homes opened in SFY 14
1/1/2014 – 6/30/2014	All new TFC homes opened in the second half of SFY 14	52 TFC Homes	
7/1/2014 – 12/31/2014	All new TFC homes opened in the first half of SFY 15	66 TFC Homes	137 Total TFC Homes opened in SFY 15
1/1/2015 – 6/30/2015	All new TFC homes opened in the second half of SFY 15	71 TFC Homes	
7/1/2015 – 12/31/2015	All new TFC homes opened in the first half of SFY 16	43 TFC Homes	105 Total TFC Homes opened in SFY 16
1/1/2016 – 6/30/2016	All new TFC homes opened in the second half of SFY 16	62 TFC Homes	
7/1/2016 – 12/31/2016	All new TFC homes opened in the first half of SFY 17	36 TFC Homes	59 Total TFC Homes opened in SFY 17
1/1/2017 – 6/30/2017	All new TFC homes opened in the second half of SFY 17	23 TFC Homes	
Target		176 New TFC homes opened by 6/30/2017	

Section 3, Table 2.3-1



Section 3, Graph 2.3-1

Commentary

As of 7/1/2016, 366 Therapeutic Foster Care (TFC) homes were open statewide. During State Fiscal Year (SFY) 17, 103 TFC homes were opened and 191 TFC homes were closed, leaving 278 homes open as of 6/30/2017, for a net loss of 88 homes. The net gain only counts unique homes even though a resource family may provide more than one type of foster care. Of the 103 TFC homes that opened during SFY 17, 59 of these TFC homes met the criteria to be counted as new homes according to the Pinnacle Plan.

Child Welfare Services (CWS), in partnership with the contracted TFC providers, continued to expand on significant culture and programmatic changes throughout all areas of the TFC program. As in any system structure, program change enforced onto long-standing policies, practices, and expectations can be difficult to understand or embrace while in the midst of change. Programmatic changes served as a challenging experience for not only the child welfare (CW) system, but also the private TFC providers, as it required all parties to think differently about the work they do on a daily basis. Once CWS had a greater understanding of the incredible strengths and identified needs present in the existing TFC program, it was clear that new and enhanced core strategies were needed to guide ongoing program modifications. In January 2017, Phases 2 and 3 were adopted as enhanced core strategies for the TFC program. The enhanced strategies focus on changes to program areas, such as increased safety protocols, child and family needs assessments, recruitment and retention efforts, the KIDS data system, and performance-based contracts. These noted programmatic changes came about after completing the TFC program evaluation during the summer of 2016. Key activities were implemented and provided a strong infrastructure by which long-term strategic planning for the program will be built upon. CWS continues to navigate the rapid change process alongside the TFC agency providers. Together, the TFC program is emerging as an area within the placement continuum where children receive a higher quality care with the opportunity to experience overall positive outcomes.

Safety Enhancements and Maltreatment in Care (MIC)

During the program assessment and evaluation process, CWS determined a need to focus intense efforts on a better understanding of the type and severity of safety issues that occur within TFC resource homes. As in any operating system, a view into the systemic reasons why child maltreatment occurs at this level of care was also needed in order to develop program and policy changes specifically geared towards preventing risk at every possible opportunity. With a new direction for the TFC program evolving, CWS established clear expectations and guidelines for operations moving forward. In October 2016, CWS began a heightened focus on maltreatment in care (MIC) for children served in the TFC program. CWS recognizes these children are at an increased risk for MIC due to their heightened mental and behavioral health needs. CWS put into place several mechanisms to address safety issues in an ongoing manner, which include addressing all referrals made to the Child Abuse and Neglect Hotline regarding children placed in TFC resource homes. Since implementing this process in October 2016, both TFC programs staff and the TFC agency providers have embraced the different MIC activities that come with truly focusing on safety as the key foundation of any strong child welfare (CW) program.

The TFC program staff have participated in 10-day investigation staffings since October, and started to conduct the consultations on the screened-out referrals in February 2017. The TFC field manager does not allow new placements, over placements, or utilization of a home as a respite provider in a TFC resource home when a resource family has an open written plan of compliance (WPC) or development plan that needs to be addressed. Additionally, all WPCs and development plans must be staffed with the TFC field manager prior to making the home available again for the placement of new children. This new process also focused on the overutilization of TFC resource homes, which led to limiting the intake capacity to two TFC children in the home and requiring an approval from the TFC field manager to exceed the limit. This process has lessened overfilling TFC resources beyond their capacity, which ultimately could lead to an increased risk of an MIC episode.

CWS recognized that to ensure minimal occurrence of MIC, a strong focus on safety as a key component requires constant monitoring and continual program adjustments as trends and patterns begin to emerge. To solidify the desire to reduce MIC in TFC resource homes, changes were made to the newly created performance-based contracts that went into effect 7/1/2017 to better address this identified need. Overall, CWS experienced a reduction in MIC for TFC during

this reporting period. The data implies that measures taken to enhance safety practices within the program are having a positive impact because children are experiencing MIC at a reduced rate when placed in a TFC home. Although there is more work to be done in the coming months, the TFC program is off to a strong start by recognizing and responding to child maltreatment in thoughtful and proactive ways.

Child-Focused Needs Assessment - *Application for Therapeutic Family Care*

The TFC program made multiple changes to various programmatic operations during this reporting period. The development, training, and implementation of the child-focused needs assessment, also known as the *Application for Therapeutic Family Care*, is the one activity that already shows indications of truly impacting ongoing practice change within the overall TFC program. The *Application for Therapeutic Family Care* was developed as a partnership between CWS, Oklahoma Health Care Authority (OHCA), and the TFC provider agencies to enhance the overall understanding of a child's true need when presented for authorization into the TFC program. The assessment was initially developed in December 2016 as a way to ensure all parties, CWS, TFC providers, and OHCA, were able to utilize the information gathered within the current operating system. A specific set of guided questions were developed to gather more information regarding a child's abuse/neglect experiences, family and placement history, medical and/or behavioral-health interventions, and to use some specific characteristics of the child and resource family to make a strong placement match. CWS received feedback from multiple experts in a variety of different practice areas to ensure the questions developed for the new process were trauma-responsive and uniquely laid out in order to gather detailed information for all providers involved.

Prior to this process change, CWS staff were required to contact OHCA to have a child "gate kept" for TFC level of care. OHCA would make a determination whether or not a child met the identified criteria for admission into the TFC program. If the child qualified for this level of care, the CW specialist would then begin making daily telephone calls to the TFC provider agencies in search of a placement in a TFC resource home. This process continued daily since TFC resources were limited and not all children were able to be served, which further expanded the TFC waiting list. This process placed significant strains on the TFC provider agencies, as they had to have available staff to receive the hundreds of TFC placement request calls per day. The existing TFC placement process meant five hours a week of a CW specialist's work time was spent on the phone attempting to secure placement for a child.

As a joint decision, CWS, the TFC providers, and OHCA agreed upon a new placement process that includes the CW specialist contacting the TFC programs staff to complete a scheduled, 45 minute telephone interview where the *Application for Therapeutic Family Care* is completed and then sent to OHCA for authorization. If the child meets TFC placement criteria, TFC programs staff now send the same information already collected in the interview to the TFC agency providers requesting placement of the identified child in a resource home that best matches with the child's identified needs. If a child does not meet or appears to exceed the criteria for TFC authorization, an email is sent to the Mental Health Consultants for service referral and coordination. The *Application for Therapeutic Family Care* was completed and training on the enhanced TFC protocol was given to all district directors and supervisors across the state in April 2017. The enhanced TFC protocol went into effect 5/1/2017 and is already impacting how children are served in the TFC program.

TFC Waiting List

By the end of this reporting period, the enhanced TFC placement process had been in place for 60-calendar days and the average length of time a child now spends on the TFC waiting list is less than 30-calendar days. When the enhanced TFC protocol was implemented in May 2017, changes had to occur as to how the TFC waiting list was managed as a secondary implication to the development of the new process. Historically, children in need of TFC placement would get authorized by OHCA and then would remain on the TFC waiting list until a resource home became available. When Phases 2 and 3 strategy activities were developed, CWS was set to utilize the Mental Health Consultants to ensure children placed on the TFC waiting list were provided services while waiting for placement in a TFC home. Once the enhanced TFC process was implemented, CWS identified that children already engaged in behavioral health services in their current placement setting were the children who were approved for TFC level of care. In order for OHCA to approve TFC level of care, lower level service interventions must be attempted before consideration for TFC placement

can occur. Children authorized for TFC level of care are the only children placed on the TFC waiting list; therefore, these children already have behavioral health services in place. In lieu of utilizing the Mental Health Consultants for the children on the current TFC waiting list, CWS determined that the Mental Health Consultants would conduct service coordination for children who were denied TFC level of care. This ensures their needs are met in their existing placement setting. Due to previous inconsistent tracking of available and unavailable TFC resources, when the time came to implement the enhanced TFC protocol, a major overhaul was required for managing the TFC waiting list and resource vacancy rates. Children are now only placed on the TFC waiting list when they are authorized for the TFC level of care and were sent to the TFC agency providers in need of placement. The TFC waiting list is now accurate at all times, due to this "one-stop" streamlined process where TFC program staff are the only individuals who can place a child on the TFC waiting list.

The TFC waiting list is monitored daily and is used for weekly TFC conference calls that are held between the TFC provider agencies and the TFC program staff. These weekly calls were implemented in May 2017 and serve as an opportunity for information sharing to occur between CWS and the TFC provider agencies. During these calls, children who are currently awaiting placement into a TFC resource home are staffed by their CW specialist in an effort to secure a placement. This call allows for exploration as to why a child is unable to secure an immediate placement into the TFC program and how as a team can the barriers be eliminated to meet a child's specific needs. TFC program staff utilizes vacancy reports that were developed to accurately identify the TFC resources that are available for placement. By matching children in need of placement with available TFC resources, the TFC waiting list has consistently been reduced and the length of time a child remains on the waiting list has also seen a significant reduction. In the previous reporting period, on any given day approximately 120 children would be on the TFC waiting list. Due to the significant programmatic changes, 30-60 children are currently waiting for a TFC placement on any given day. As additional TFC resource families become available, partnered with the enhanced focus on treatment outcomes and permanency goals, it appears possible that ultimately the TFC waiting list can continue to be reduced over time. A better understanding of how the TFC waiting list had been used, how it could be improved, and then using it to serve as a vehicle to move children into the program helped more children get matched with an available family more quickly.

Green Belt Project

In January 2017, four members of the CWS team embarked on the journey of investing a significant amount of time in the Lean Six Sigma program to complete a green belt project focused on overall system changes needed within the TFC program. This project consisted of multiple weeks of classroom training, post-classroom work with the resources and tools needed to improve processes, and ultimately the opportunity to make systematic changes to the assigned projects and present these cost and time-saving projects to the Oklahoma Department of Human Services (DHS) agency leaders. CWS put together a strong team that was able to utilize Lean Six Sigma to make some significant changes to the TFC program, including updating and making changes to KIDS to improve the data usage for the TFC waiting list, vacancy reports, and ultimately the creation of a management tool, known as the TFC Dashboard, for ongoing use moving forward. This project included very detailed data mining efforts to better understand the following things, such as the average length of time before a TFC foster family seeks a physical break in services, why TFC resource families are closing their homes, and how the lack of moving children to permanency quickly impacts a TFC resource family's ability to help children get well in a more swift and meaningful way. The project's intent was really to focus on overall TFC process changes; however, a few substantial program changes, such as the implementation of the Application for Therapeutic Family Care, had significant impact in just a short period of time.

Another component the Green Belt project explored was the time frames and reasons why children in TFC care were experiencing a high rate of placement disruption. The information CWS was able to obtain indicated that the TFC resource families lack the skills and abilities to meet the higher acuity needs of the children currently qualifying for TFC. This was imperative information to know because CWS began to understand that the training model used for behavior management was outdated and continued to allow the use of therapeutic holds. Once that information was better understood, CWS partnered with the Annie E. Casey Foundation (AEC) to begin exploring alternative options for behavior management training programs that are highly utilized nationwide and proven to produce positive results for children in the TFC level of care. The TFC program is committed to moving towards a new behavior management

training program within the coming year that does not support the use of therapeutic restraint or holds. CWS was able to narrow down a few key training models that are going to be examined further for potential use within the TFC program in Oklahoma. The goal is for the existing training model to be phased out during State Fiscal Year (SFY) 18, and a new program implemented during SFY 19. CWS scheduled follow-up calls in the coming months with the program developers of the training models being considered. CWS will continue to work on this enhanced process throughout the next reporting period.

Initially, CWS planned to execute a parallel process to the Green Belt project with the private TFC providers and OHCA, as a way to explore how all parties could improve their processes to enhance the flow through the TFC program. After getting started with the CWS portion of the Green Belt project, it was determined that the TFC program would be better served if the projects were completed in a series following the completion of the initial project. To adequately produce strong results from engaging in this process, a significant amount of time and resources is required to complete a process improvement project of this magnitude. With reduced TFC program staff, a decision was made that the next phase of this project would occur in the upcoming months. Throughout the next review period, CWS will begin these efforts with a select set of TFC providers who could benefit from added supports surrounding process improvement strategies.

TFC Updates-KIDS

Over the last year, CWS identified that limited access in KIDS for tasks associated with the TFC program were unavailable for use or completely underutilized. For many years, the TFC program was the only privatized foster care program in Oklahoma, which implied that the TFC agency providers were responsible for keeping up with their own resource family information. Since the TFC program was housed under the Specialized Placements and Partnerships Unit (SPPU), the input of information into KIDS was not congruent with the information that was entered for resource families of other types, such as kinship and traditional foster care. Although making changes to KIDS is a substantial, time-sensitive process, the use of the information for program management activities could have been greatly increased. When the TFC program was evaluated in Fall 2016, the KIDS program was identified as needing changes made to include aspects of the TFC program that could be used for tracking and monitoring purposes. In December 2016, a KIDS release was issued and a variety of screens were made available for data entry that would better support the TFC program.

Prior to the KIDS changes becoming available in December 2016, the TFC programs team had identified the areas where data could not be entered into the system and set goals to get that information uploaded throughout the current reporting period. Data was now able to be uploaded, including completing the resource family profile, number of preferred children in the home, child/resource placement characteristics, input of the most recent resource family reassessment (annual home study update) or a new assessment if it is a newly certified TFC resource, the ability to enter and track written plans of compliance, management of the TFC waiting list, and the information to monitor TFC resource vacancies. The TFC program is trying to align as many policies and protocols as possible with the traditional, kinship, and supported foster care program, as this allows for consistency among all CWS foster care programs. With all this information now entered into the KIDS system, the TFC program is better able to utilize the available data to guide program decisions, while focusing on increased monitoring abilities by just having this information on the TFC resource families available for use. Continued enhancements to KIDS will occur as additional areas are identified for improvements.

The final data-driven change that occurred during this reporting period includes the development of the web-based TFC Dashboard for monitoring and tracking the three main areas of TFC practice. This includes using the Dashboard for up-to-date, real-time data on the TFC waiting list, TFC resource vacancies, and the average length of stay of children currently served in the TFC program. This Dashboard function also focuses on a red, yellow, and green color monitoring system that allows for those areas to represent desired metrics towards the overall goal. For example, the internal goal for the TFC waiting list is that children do not spend more than 30-calendar days on the waiting list in need of a placement. The TFC Dashboard breaks up the real-time data into the identified metrics and ties them with identified colored charts. This includes the total number of what is being measured, a calculated percentage of the different metrics within each goal area, and then the visual color tool to indicate how well any area is functioning at that given

time. Each area is then connected to the raw data, so with a click on one of the selected areas, a list is generated of the children or resources that make up the percentage of the targeted metric being reviewed. The TFC Dashboard is a great tool to monitor the key areas of the TFC program in a quick and efficient way.

Recruitment and Retention of TFC Resource Homes

Throughout the duration of the Oklahoma Pinnacle Plan, the TFC program was challenged every year to increase the number of available TFC resources for placement of children in need of this level of care. Every year, the TFC program has fallen short of reaching the identified and agreed upon goal, which has ultimately reduced the amount of children the TFC program can serve at any given time. The TFC provider agencies are given an annual goal to reach and to spend time, money, and effort on to increase their pool of available TFC resources. During this last year, the TFC program engaged in significant data reconciliation, which involved closing many TFC resources who had not accepted placement of a child in a set number of days. Initially, the TFC program focused on families who had not accepted placement of a child in at least 150–calendar days, but over the year continued to scale back the time frame to now review families who have not taken a placement in at least 90-calendar days. CWS recognizes that all resource families need scheduled, and unscheduled, breaks from caring for children with high needs to rest and rejuvenate or need time to handle personal or medical issues should they arise. A determination was made that if after 90-calendar days the TFC resource home has not accepted placement, then the resource home is closed until the family is ready to proceed with accepting placements again. The decision to engage in this reconciliation effort seriously impacted the overall net gain for the TFC program during SFY 17, but it needed to occur in order to better understand how many TFC resources at any given time are truly available and willing to accept a TFC eligible child into their home.

With a significant goal of certifying 176 new TFC resource homes in SFY 17, CWS challenged TFC providers to complete Resource Recruitment and Retention plans in December 2016. CWS recognizes that establishing new TFC homes is just one piece of the puzzle, and that retention efforts are just as important when developing a strong pool of available placement options. TFC providers were asked to establish six strategies within their plan to focus on recruitment of new homes - two strategies, retention activities for their existing homes - two strategies, ways to address the TFC waiting list while decreasing the under-utilization of current resource homes - one strategy, as well as one strategy that focuses on community partnerships and collaboration to support TFC providers, foster families and the children in their homes - one strategy. Ten of the eleven TFC agencies submitted plans and actively worked on those efforts throughout the entire reporting period. Many of the TFC provider agencies have seen the benefits of a focused plan for recruitment and retention and use them to guide their recruitment activities. During SFY 18, new recruitment and retention goals will be identified and each TFC agency provider will develop an enhanced recruitment and retention plan.

The TFC program ended SFY 17 certifying 103 TFC homes, but only 59 of those homes met the criteria to be counted as new TFC homes. Although the overall new home recruitment and net gain goal was not achieved, it should not be considered the sole indication of program success or failure. As in any major restructuring or renovation project, making changes in other program areas must occur prior to improving specific objectives, which can ultimately create more barriers in an already challenged system if not done in a meaningful way. As the TFC program enters into the second year of substantial programmatic changes, a key focus will be on the quality of recruitment that is occurring with each of the TFC provider agencies.

During this last reporting period, CWS, in partnership with AEC, provided a series of recruitment "boot camp" trainings to the TFC agency providers. This series of trainings were highly specialized and used as a teaching and learning opportunity to discuss new and innovative recruitment strategies within their current operating programs. These trainings included skill-based learning activities focused on recruiting homes for teenagers, sibling groups, children with special needs, and the need for homes that are culturally diverse to serve children in out-of-home placement. CWS believes that enhancing the providers' skill set is a direct way to impact overall recruitment and retention efforts. In June 2017, AEC provided an opportunity for the TFC agency providers to share in a peer exchange event. Two different TFC agencies from other areas of the country came to Oklahoma to share their insight on how their agencies operate and what makes them successful in what they do. Engaging in this event was a great learning opportunity for the TFC agency providers to begin thinking about creative ways to enhance and develop their own programs going forward.

CWS believes these training opportunities will drive program decisions for each of the TFC agencies as TFC enters into SFY 18. As additional improvements are made to the TFC program, the impact of these system changes will continually direct ongoing recruitment and retention efforts.

Performance-Based Contracts

During the last year, CWS strategically thought about reintroducing performance-based contracts within the TFC program. Since a significant amount of data and information was collected and reviewed over the last year, CWS felt confident in the practice areas that could benefit from being measured through performance metrics to accomplish intended outcomes for children in TFC care. The TFC program had previously implemented a performance-based contract and lessons learned from that experience were incorporated to develop a better product this time around. Foster Care and TFC leadership began working on restructuring the current contracts in August 2016, as the plan was to establish commonalities among the two different program contracts and find a way to streamline them as much as possible, as many of the agency providers contract as both resource family partner (RFP) and TFC. Some consistent changes were made, such as requiring Guiding Principles as the only acceptable pre-service training model, the utilization of the same CWS required forms, and sharing common expectations regarding the content and quality needed within the resource family assessments. This was done to establish some parallel processes within both programs and to assist resource families when transferring or moving between the different program levels.

Beyond making the consistent changes to both types of foster care contracts, the TFC program determined specific changes needed to be made to impact the expectations for providers who care for children with higher level needs. Some of the general items that changed in the contract include limiting the amount of time a child can receive therapeutic intervention in the school setting, establishing a multi-dimensional review process when a child is placed in a therapeutic hold, and increasing the monitoring of psychotropic medication use for children in TFC care. These changes were the result of identified trends and patterns that emerged throughout the year. CWS discussed the upcoming implementation of performance-based contracts with the TFC providers for many months. CWS wanted this contract to be implemented differently than it had been before, so two key areas are highlighted in this second attempt at a performance-based approach - enhanced focus on reducing MIC and increasing placement stability.

In June 2017, a meeting was held between the TFC providers and CWS to collectively come up with solutions for addressing the two key areas needing improvement. CWS challenged the TFC agency providers to come up with solutions to these issues and to develop performance metrics that could measure change in those areas. Feedback and suggestions to the contracts were given by all parties involved and CWS was able to develop two performance metrics that meet child welfare needs while at the same time create a true learning environment. The performance-based contract establishes a group learning review process between CWS and the TFC agency providers as an effort to prevent MIC from occurring within the TFC program. When a TFC resource family experiences a substantiated finding of abuse or neglect, all TFC agency directors will come together and participate in a case review discussion to draw on lessons learned and practices that could be improved going forward. This allows for the environment to be one that is conducive to learning from one another's challenges and experiences and to making adjustments to policy, practices, or protocols that may be impeding safety for children in TFC resources. If the same TFC agency provider receives another substantiated finding, CWS will place a hold on new placements into that specific agency while a full audit is completed. CWS will review systemic challenges that may be occurring within the TFC agency to determine what structure, supports, or services may need to be modified.

Placement stability is the other performance area where significant improvements need to be made. The TFC provider agencies have historically struggled with maintaining placement stability and have a disruption rate that is well over 40 percent. Financial incentives were provided during the last round of performance-based contracts, but unfortunately, it did not yield the desired results. CWS established financial sanctions surrounding placement disruptions that will be applied on a monthly basis when the number of placement disruptions exceeds the number of positive placement discharges to lower levels of care, kinship, traditional or supported foster care, trial adoption, trial reunification, coordinated foster care, and placement with siblings, within each TFC provider agency. CWS wants to support good clinical outcomes, successful movement of children into lower levels of care, and reducing the significant number of

placement disruptions that occur within the TFC program. Over the next year, additional performance areas are being considered for changes to the SFY 19 contract. CWS will continue to explore these other performance options and determine the direction of implementation as different practice trends begin to emerge. The newly developed performance-based contracts were offered to nine of ten TFC agency providers in late June 2017. The remaining TFC provider agency was offered the same contract, but only for a six month probationary period. CWS is providing ongoing technical assistance and support services to remediate this specific TFC agency provider.

90-Day Multi-Disciplinary Reviews

As part of the existing TFC program structure, all children placed in TFC are required to have a review of their clinical progress every 90-calendar days. This protocol is not new to the TFC program, but has not been strictly enforced for many years. The desired outcome is that the assigned CW specialist is more actively engaged in the review process and would be able to provide updated information on the current court status and permanency goals and objectives. For far too long, CW staff has signed treatment plans for children in TFC, yet have not focused on whether or not these treatment goals are actually being met. The intended approach to this strategy activity was that the TFC liaisons would serve as 90-day review coordinators to ensure CW staff are fully engaged and present for these mandatory meetings. Unfortunately, due to unforeseen challenges, this is the only strategy activity that has yet to be fully implemented. CWS seeks to fully implement this process with all TFC agencies during the upcoming reporting period. The TFC agency providers indicate that when there is intense focus on CW engagement in this review process, TFC resource parents and the assigned clinical team feel as though they are part of the team and are more aware of the events occurring in the child's life.

Ongoing Engagement and Work Groups

The TFC agency providers and TFC programs team continue to meet very frequently, generally every month, but some months multiple meetings occurred in order to ensure all parties remain current on any program modifications or enhancements. TFC programs staff continues to meet with internal and external partners connected to the TFC program in a variety of different ways. This includes meetings with OHCA regarding programming changes, contract modifications, and service needs and expectations for all placements across the continuum. Other workgroups include a foster care and specialized recruitment workgroup engaged in updating recruitment and other foster care-related materials, as well as strategizing how to increase the recruitment of families wanting to serve the special needs population. The TFC program also participated in a monitoring meeting held every other month that is used to discuss various programmatic changes in the higher level and specialized placement settings. For CWS to begin connecting different program areas to develop a true continuum of care, all of these vested parties must continue to effectively collaborate in order for the needs to be met for all of the children served in DHS custody.

Overall, CWS made vast enhancements to the TFC program during this reporting period. The difficult work does not stop there, but rather will continue to increase surrounding activities that will advance the program into the next phase of growth and development. CWS experienced numerous challenges during this most recent reporting period, but that has not deterred efforts towards making positive strides to improve the program. Part of embracing system change includes the expectation that there may be some fluidity in the implementation, as a program has to respond to external challenges that present themselves at any given time. Although some of the Phases 2 and 3 activities were not completed by the anticipated timeframe, they were still achieved within this reporting period. CWS determined that in the coming months, key activities within the TFC program will be focused on working towards permanency goals for children in the TFC program, establishing a strong protocol for reviewing children's treatment progress with all TFC agency providers, and implementing some of the significant changes that were made to the SFY 18 contracts. The TFC program is focused on improving overall outcomes for children with a strong emphasis on expanding high quality care within the various program dynamics.

7.1 Worker Caseloads

Operational Question

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

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

Denominator: The number of all child welfare workers in Adoptions, Foster Care, Family-Centered Services, Investigation, and Permanency Planning that were case-load carrying eligible on the last day of the reporting period with at least one assignment on their workload.

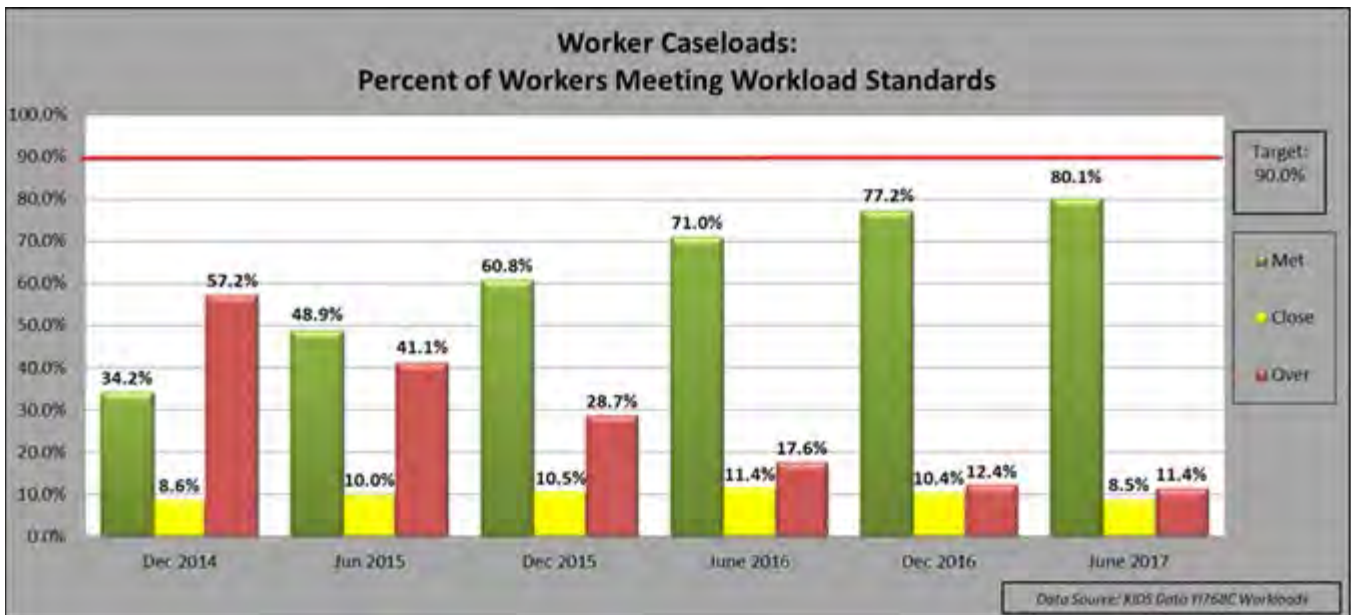
Numerator: Number of worker days where workers met the standard carrying a caseload of 100 percent or less of their calculated workload capacity.

Trends

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

7/1/2016 – 12/31/2016	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1274 Workers	1651 Workers	77.2%
1/1/2017 – 3/31/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1212 Workers	1644 Workers	73.7%
4/1/2017 – 6/30/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1299 Workers	1621 Workers	80.1%
Target				90.0%

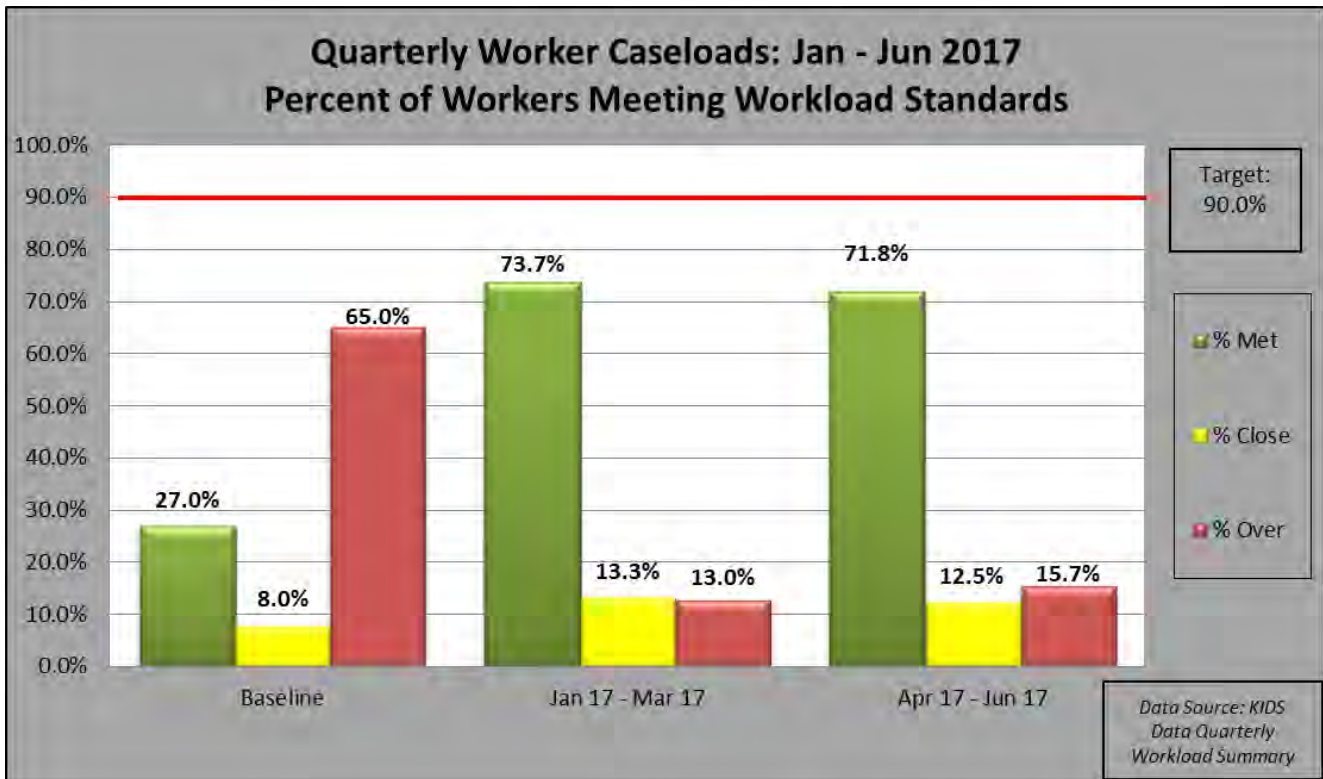
Section 3, Table 7.1-1



Section 3, Graph 7.1-1

Commentary

A one-day snapshot of the workload data is represented in Section 3, Graph 7.1-1. As of 6/28/2017, using the point-in-time Y1768C Workload data report, the percentage of child welfare (CW) workers meeting the standard is 80.1 percent, with 8.5 percent close, and 11.4 percent over standard. Of the 1,621 workers, 1,299 workers were meeting workload standards, 138 workers were close, and 184 workers were over the standard.



Section 3, Graph 7.1-2

QUARTERLY WORKLOAD STANDARDS REPORT				
Apr 1, 2017 - Jun 30, 2017				
Worker Type	Worker Days	% Met	% Close	% Over
ADOPTION SPECIALIST	5618	82.2%	10.6%	7.2%
RESOURCE FAMILY SPECIALIST	17556	69.6%	17.4%	13.0%
COMPREHENSIVE	11713	73.7%	9.4%	16.8%
PERMANENCY PLANNING	62166	75.8%	12.8%	11.4%
PREVENTIVE/VOLUNTARY	6549	91.6%	4.4%	4.0%
INVESTIGATION	37819	61.1%	13.8%	25.0%
RECRUITMENT	3887	99.0%	1.0%	.0%
ATU	2430	18.9%	11.3%	69.8%
STATEWIDE TOTAL	147738	71.8%	12.5%	15.7%

Data Source: KIDS Data Quarterly Workload Summary ending 6/30/17

Section 3, Table 7.1-2

Commentary

In addition to the point in time reporting of workloads, a snapshot of each worker's workload is captured for every day during the quarter. The total days during the quarter that each worker is meeting, close, and over workload standards is then reported in the Quarterly Workload Standards Report. This number will differ from the point in time report taken from the YI768C, as this quarterly report reflects all days during the quarter. This report is counting the number of days workers were meeting, close, or over, workload standards, whereas, the YI768C report is reporting on the number of workers. For the quarter of 4/1/2017 – 6/30/2017, there were a total of 147,738 days worked during the period. Of

those days, workers were meeting workload standards 71.8 percent of the worker days, workers were close to workload standards 12.5 percent of the worker days, and workers were over workload standards 15.7 percent of the worker days.

Although Child Welfare Services as a whole continues its improvement, the barriers to maintaining or reaching standards for those districts that have not yet met standards and ensuring sustainability are the main focal points moving forward. Some districts are still struggling to meet standards and must continue to focus on hiring, retention efforts, and managing caseloads. To get more intense and individualized attention and direction, CWS is teaming up with Human Resource Management Division (HRMD) to create a review system to send experts out to offices facing challenges in order to identify core problems and to assist in creating an action plan to address and improve the situation in the office. Offices will receive the review and action plans based on that office's need and solutions will be created with sustainability in mind.

The reviews will be at the office level and not the district level. Because there are many more offices than districts, the process itself will take weeks for each office, so change may be slow. Although developing action plans takes time, the plans will address the exact problem areas and give individualized help as opposed to statewide initiatives that may or may not help these offices. Currently CWS and HRMD are working towards getting data needed for pre-visit analysis along with identifying the offices to start with. The biggest barrier to starting the visits is staff time as HRMD is rolling out an HR information system in January 2018. Some additional statewide analysis is needed as barriers are being identified that make staying above the 90 percent target difficult. For example, an individual is on FMLA, Military, or other extended leave from the office that prevents him or her from carrying a caseload. Over the next six months CWS will work to find ways to limit or eliminate the effect these types of conditions have on meeting standards.

7.1 Supervisor Caseloads

Operational Question

What percentage of child welfare supervisors meet caseload standards, are close to meeting workload standards, or are over workload standards?

Data Source and Definitions

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

Description of Denominator and Numerator for this reporting period

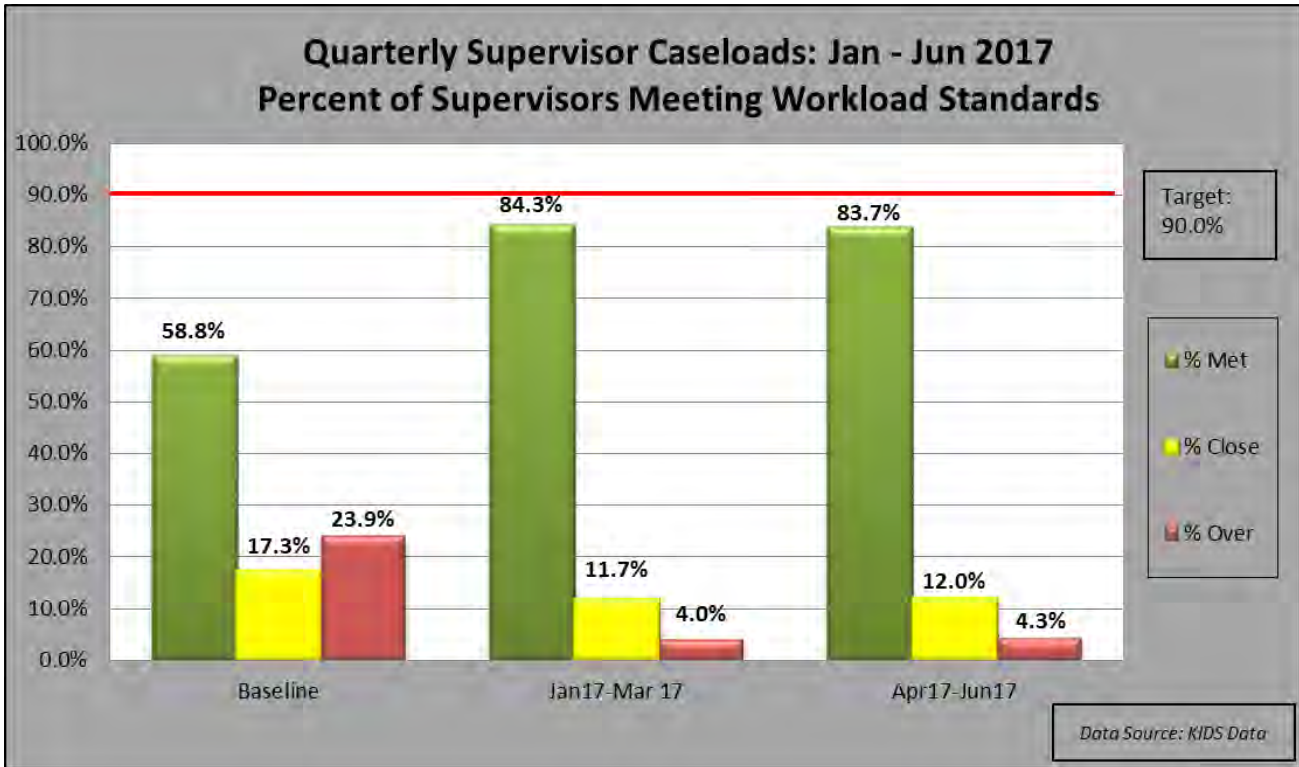
Denominator: All current supervisor units currently supervising caseload carrying workers in Adoptions, Foster Care, Family-Centered Services, Investigation, and Permanency Planning.

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

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 4/1/2014 – 6/30/2014	All supervisors with a unit currently supervising caseload carrying workers			58.8%
7/1/2014 – 12/31/2014	All supervisors with a unit currently supervising caseload carrying workers	217 - Met	306 Units	70.9%
1/1/2015 – 6/30/2015	All supervisors with a unit currently supervising caseload carrying workers	259 - Met	345 Units	75.1%
7/1/2015 – 12/31/2015	All supervisors with a unit currently supervising caseload carrying workers	297 - Met	372 Units	79.8%
1/1/2016 – 6/30/2016	All supervisors with a unit currently supervising caseload carrying workers	308 - Met	379 Units	81.3%
7/1/2016 – 12/31/2016	All supervisors with a unit currently supervising caseload carrying workers	330 - Met	387 Units	85.3%
1/1/2017 – 3/30/2017	All supervisors with a unit currently supervising caseload carrying workers	317 - Met	376 Units	84.3%
4/1/2017 – 6/30/2017	All supervisors with a unit currently supervising caseload carrying workers	314 - Met	375 Units	83.7%
Target				90.0%

Section 3, Table 7.1-3



Section 3, Graph 7.1-3

Commentary

For the current quarter, there are a total of 375 supervisor units, which are comprised of 1,738 CW Specialists I, II, and III's. This calculates to a statewide worker to supervisor ratio of 4.63. As of 6/28/2017, there were 314 supervisors that met the workload standard, 45 supervisors were close to meeting the standard, and 16 supervisors were over the standard. As part of this measure, the work assigned to supervisor's workloads must also be calculated into the workload standard. There were 51 supervisors with at least one assignment on his or her caseload and 15 of those supervisors had more than two assignments. In the previous semi-annual reporting period, 62 supervisors had at least one assignment and 20 of those had more than two assignments. In the most recent reporting period, the number of supervisors carrying countable work decreased 25 percent. However, during this period there are 12 less supervisor units from the last reporting period. With less supervisory units, supervisors are now carrying additional staff, with 42 supervisor units having six staff members and 12 having seven or more staff members. Even with the slight decrease this reporting period, overall the measure is up by almost 25 percent since the baseline was established.