

County Improvement Plan (CIP) Guide and Template

The preliminary findings from the Quality Service Review (QSR) are presented and provided to the county, QSR reviewers and any additional stakeholders the county invites to attend the Exit Conference at the conclusion of the on-site QSR. Following the Exit Conference, the QSR Local and State Site Leads work collaboratively on a second-level of quality assurance of the preliminary findings.

The county will receive a QSR Final Report approximately four weeks from when the Local and State Site Lead team submits the final QSR findings for analysis. The final results are then presented by the Local and State Site Lead team at the county's Next Steps Meeting.

The Next Steps Meeting is the kickoff to the development of the County Improvement Plan (CIP), which will outline the priorities the county chooses to focus on to improve specific outcomes as a result of a comprehensive review of their practice which includes the QSR findings and may also include a review of additional data such as the county data packages provided by the state, quantitative measures produced by the county, as well as the results of other qualitative data.

Following the Next Steps Meeting, the county works collaboratively to develop their CIP. The county must submit their CIP to the appropriate Office of Children, Youth and Families (OCYF) Regional Office Director and QSR Site Leads no later than 60 calendar days from the date of the Next Steps Meeting. The OCYF Regional Office will review the county's CIP in conjunction with the QSR State Site Leads. Following the review of the CIP, the OCYF RO will accept the plan within 10 calendar days of receipt. The acknowledgment to the county of acceptance of the CIP marks the effective start date of the CIP.

Once the CIP is accepted, the following documents will be posted to the Department of Public Welfare's website:

- County's QSR Final Report
- CIP

The attached CIP template has been designed to assist the organization in thinking about how to plan and implement improvements.

County Improvement Plan

County Name: Lackawanna

Date of Plan: November 16, 2012

Initial **X Update**

Section I. Sponsor Team Members *(List the members of the Sponsor Team):*

The members of Lackawanna County Children and Youth's (LCCYS) Administrative Team form the core Sponsor Team: William Browning, Executive Director; Kerry Browning, Court and Community Services Director; Adrian Maillet, Fiscal Officer; Kathy Snyder, Fiscal Administrative Officer II; Nancy Johnson, Casework Manager; Jason Kavulich, Casework Manager; and Amanda Helring, Quality Assurance Manager.

Section II. Background: *(Describe, in detail, the process of how you developed the plan. Who was involved in planning? How did you prioritize your outcomes? List any sources of information that helped in decision making.)*

LCCYS' second County Improvement Plan (CIP) was developed primarily by the Sponsor Team and built on our initial CIP. In order to identify our priority outcomes, we reviewed (1) our Licensing Inspection Summaries (LIS) from the past several years including the most recent dated April 2012; (2) the report dated May 2011 and June 2012 from our first and second Quality Service Reviews (QSRs) which included information from reviewer scoring and case summaries, LCCYS' data package which included Adoption and Foster Care Analysis and Reporting System (AFCARS) data, and four focus groups one each of caseworkers, supervisors, adolescent youth in foster care and participating in the agency's Independent Living (IL) education support group, and fathers who are clients of LCCYS and participating in the one of the agency's 24/7 fatherhood groups; (3) agency practice and our concentrated efforts over the past seven years to improve practice and outcomes for families; (4) agency policies and procedures; and (5) other agency initiatives. While the initial CIP was implemented in September 2011 and some of the action steps were already in process based on previously-identified needs, the time between implementation of the initial CIP and the second QSR did not allow measurable progress to occur. We expect that fair progress will be evidenced in the 2013 QSR with moderate to substantial progress evidenced in the 2014 QSR.

LCCYS is currently involved in several extensive projects/initiatives and is concurrently working on strengthening caseworkers' and supervisors' engagement and assessment skills as a foundation for enhancing practice, moving toward a trauma-informed treatment model, and improving measurable outcomes for children and families. While it would not be incorrect to include the details here, we decided not to for several

reasons: (1) the timeframes for completion of our initial three objectives was overly optimistic and the actions steps for these require continued attention, (2) our plans are well represented in other documents, (3) components of the needs regarding engagement skills and assessment skills are encompassed in the objective regarding engaging fathers, and (4) the foundational pieces of engagement and assessment support the work we are doing across domains and the needs of our various projects, including our CIP outcomes, are intricately interconnected. Implementation of several action steps for Outcomes #1 and #3 are related to revision of the agency's administrative staffing of permanency cases and policies regarding assessment.

Section III. Priority Outcomes: *(List and describe the overarching outcomes identified by the Sponsor Team. Outcomes should be limited to approximately three to four priority areas.)*

Outcome # 1: To consistently deliver Independent Living (IL) services to youth between the ages of 16 and 21 in substitute care through LCCYS with special focus on youth transitioning out of care and on informal IL assessment and service delivery beginning for children aged 15.5 years and in substitute care.

Outcome # 2: To build on the strengths which enable us to partner with other child- and family-serving systems to form teams around children and families to improve the functioning and communication of these teams.

Outcome # 3: To engage fathers in the assessment and planning process for their children at all levels of and points in the family's involvement with LCCYS.

Section IV. Findings *(Identify the findings that explain why each priority outcome was chosen. List any related findings: e.g., strength and gap trends, data, and connections to CF SR indicators of Safety, Permanency, and Well-Being and/or QSR Practice Performance indicators)*

Findings related to Outcome # 1: This outcome relates directly to QSR Child/Youth and Family Indicator 8: Pathway to Independence for which scores for relevant cases were the same in 2011 and 2012 with 50% rated as acceptable and 50% rated as unacceptable. This outcome further relates directly to Child and Family Services Review (CF SR) Well-Being Outcome 2: Children receive appropriate services to meet their educational needs and indirectly to CF SR Permanency Outcome 2: The continuity of family relationships and connections is preserved for children, relative to youth in care having opportunities to such connections since most youth transitioning out of care after age 18 seek to return to their family-of-origin and to their community.

LCCYS is in a transitional phase regarding addressing youth's IL needs throughout the life of the case for youth as young as 14 years old in foster care. LCCYS has recognized that focusing on youths' IL needs once they turn 16 years old may result in a delay in their achieving their IL goals, especially if their education needs had not been consistently monitored beginning with their entry into 8th grade. Because of their unique situations, youth in placement are more likely to have their needs overlooked. Assessment and planning at the point that intervention is most effective and timely will help these youth to focus on their education goals throughout their time in secondary education. Currently LCCYS offers a support/psychoeducational group with a primary focus on educational goals for youth 14 years or older in foster care.

LCCYS is integrating IL work into protective services caseworkers' domains. This move means that IL work can begin at age 14 and that caseworkers and supervisors will be able to more consistently monitor youth's IL needs throughout the life of the case. Caseworkers and supervisors will learn how important youth's IL needs are and will be able to connect those needs to the protective services work they are already doing with the family. Because IL activities have previously been conducted only by one dedicated IL worker, caseworkers and supervisors were disconnected from this piece of what youth need and viewed these activities as unimportant and irrelevant. Concurrently the agency is focusing on child and family well-being outcomes and these efforts will help caseworkers and supervisors understand the connection between the safety, permanency, and well-being. The dedicated IL caseworker will continue to work with youth once they are nearing a transition.

Additionally, internal assessments have identified a need for the agency's foster care practice to be adjusted and for focused efforts on permanency and IL needs for youth, mostly adolescents, who do not have a permanent resource identified. Many of these youth have a primary goal of adoption or Another Permanent Planned Living Arrangement (APPLA), have been in care for several years, and had their parents' parental rights terminated. Some of these children lingered in care because foster parents were unwilling to adopt them or become their Permanent Legal Custodian because any subsidy would cease once the child turned age 18. Due to Pennsylvania's 2012 implementation of the Fostering Connections to Success and Increasing Adoptions Act of 2008, some of these youth will be able to easily find permanency; however, some of these youth are difficult to find resources for due in large part to their multiple unique needs, some of which are caused by their having experienced multiple traumas. LCCYS will concurrently rebuild the foster care unit in order to practice from a strengths-based, solution-focused treatment model and develop a short-term concurrently planning unit which will work mostly with adolescents in placement in order to ensure that (1) these youth are in the least restrictive placement to meet their needs, (2) the youth have the services of the appropriate treatment, duration, and intensity in

order to successfully meet their physical, mental/emotional, behavioral, social, educational, and IL needs, (3) the youth form lasting connections and re-form family connections as safe, and (4) the youth are able to achieve the most desirable permanency option which best meet their needs. The concurrent planning unit will implement trauma-informed practice in order to be able to understand the basis for these youth's difficulties and in order to find the best permanent resource for them. Concurrently the new foster care unit will work on educating foster parents about the unique needs of adolescents in foster care, especially of those who have been in placement for lengthy periods of time, in order to make the best placement matches, increase placement stability, and optimize the resources available in order to find true permanency for these youth. As agency practice has changed significantly over the past seven years, LCCYS works more diligently early on in a case to ensure that if a permanency option other than reunification is needed that children are placed with foster parents who are committed to being permanent resources for that child as soon as possible. This has successfully reduced the number of "legal orphans", i.e., children with no permanency resources but whose parents no longer have their legal rights. Additionally, LCCYS very rarely changes a child's primary goal to APPLA as we do not feel that APPLA provides true permanency for youth. Because of these changes to practice, we anticipate that the concurrent planning unit will only need to operate for the next two years until permanency is achieved for all of the youth in these situations.

Findings related to Outcome # 2: This outcome relates directly to QSR Practice Performance Indicator 2: Teaming with the focus on team functioning rather than team formation. All QSR cases are rated on this indicator and scores were approximately the same between the 2011 and 2012 QSR with the functioning of teams being scored lower than the formation of teams. This data indicates that teams have been successfully formed but have not been functioning cohesively toward a shared goal for the family which could cause service gaps, overlaps, or incongruity. Although it is difficult to relate this outcome to a specific CFSR outcome, team functioning most directly affects both permanency and well-being. Having teams properly formed but lacking clear and consistent communication as well as a shared vision can result in a significant negative impact on all areas of a family's involvement with LCCYS and all other child- and family-serving systems, including, but not limited to, assessment, planning, and service delivery.

Although gaps in team functioning may exist between LCCYS and other child- and family-serving systems, the most significant gap appears to be between LCCYS and the education system. This was identified not only through the 2011 QSR reviewer interviews with school personnel, but also through the 2011 QSR focus groups with agency staff. Since implementation of a communication protocol between LCCYS and schools, agency staff in the 2012 focus groups reported anecdotal positive impacts

although the protocol was not in effect long enough before the 2012 QSR to show measurable differences in the scores. We believe that focus on the relationship between LCCYS and the educational system is important because school-related problems were identified as one of the top three child stressors of the 15 children who were QSR focus children. Additionally, this focus on teaming with the education system will help us to build the foundation for use of the educational stability screen which will be implemented statewide in the future.

Findings related to Outcome # 3: This outcome relates directly to Practice Performance Indicator 1b: Engagement with the focus on engaging fathers. For the 13 cases assessed for engagement of the mother, 69% were rated as acceptable whereas for the 9 cases assessed for engagement of the father(s), 44% were rated as acceptable. The percentage of cases with an acceptable rating for this indicator decreased significantly from 2011 for both parents which may be attributed to the sample including an overrepresentation by nearly a factor of four of adolescents who had been in placement for several years with at least two who had been discharged to foster care from a residential setting within one month before the QSR.

This outcome is related directly to CFSR Permanency Outcome 1: Children have permanency and stability in their living situations, Permanency Outcome 2: The continuity of family relationships and connections is preserved for children, and Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs. Similar to the gaps in team functioning, gaps in engaging fathers can result in a significant negative impact on all areas of a family's involvement with LCCYS, including, but not limited to, assessment, planning, and service delivery. This impact can negatively affect a child's permanency related to reunification, identification of kinship resources, and family relationships and connections along with a child's well-being related to accurate assessment of the father, the father's involvement in case planning, and the father receiving appropriate services to enhance his ability to meet his child(ren)'s needs.

Seven years ago LCCYS recognized that fathers had often not been engaged to participate in the agency's assessment or case planning, even when their children were in substitute care. Likewise, fathers were often not considered as resources for reunification or for identifying potential permanent kinship resources or connections for their children. Over the past five years, LCCYS has increased the engagement of fathers which began with implementation of a fatherhood group. This 26-week group is open to all fathers with fathers whose children have been placed into care being the vast majority of participants. Eventually we would like to expand this service so that all fathers are referred consistently. One of the challenges is helping caseworkers and supervisors to understand why it is important for fathers to be engaged throughout the life of the case and not only when the child is placed.

Since the vast majority of families headed by a single parent and involved with the agency are headed by single mothers, fathers are engaged disproportionately. In the 2012 QSR sample of in-home cases, 83% were headed by the biological mother while none were headed by the biological father. Because of these disproportionate numbers, if children are removed from their mother's care and reunification efforts focus solely or significantly on providing services to the original custodial parent, then fathers are far less likely to be engaged as a resource for reunification.

Although we have made much progress in engaging fathers, we have found that engagement of fathers is most consistent on cases involving placement and much less consistent on in-home cases. Our venture on this outcome is for fathers to be engaged consistently throughout the life of a case beginning at the point of intake. Feedback from fathers in a focus group during the 2012 QSR centered around (1) poor communication from the agency when a child is placed into care, (2) biases against fathers by agency staff and the courts, and (3) fathers' disproportionate knowledge of and involvement in community services and resources compared to mothers as their main barriers to being able to know what they need to do and to take the appropriate actions to be able to care for their children.

Section V. Strategies and Action Steps for each Outcome

The following should guide the development of specific strategies and action steps for each of the priority outcomes.

- a. Identify existing strengths
- b. Identify existing gaps
- c. Identify the root causes for the gaps
- d. Identify potential remedies for the root causes
- e. Identify which remedies can be quick wins, midterm, and long term

The following components should be included in the plan for each priority outcome:

Strategy: *The overall approach/plan to achieve the outcome. Several strategies may be identified for each, but should all connect to the particular outcome you are trying to achieve.*

Action Steps: *Clear and specific steps to be taken to achieve the strategy. There may be several action steps identified for each particular strategy.*

Indicators/Benchmarks: *These indicate how the strategies and action steps have impacted the outcome as well as indicating how progress is measured and monitored.*

Evidence of Completion: Evidence that verifies that each individual action step has been completed.

Persons Responsible: The individual who is responsible for completing each individual action step.

Timeframe: Expected time of completion for each individual action step.

Resources Needed: Resources needed to achieve the strategy or action step. May include, but is not limited to, financial resources, partnerships with technical assistance providers, and staff resources.

Status: Progress toward completion of each action step upon review of the County Improvement Plan.

Section V. Strategies and Action Steps for each Outcome

Outcome # 1: To consistently deliver Independent Living (IL) services to youth between the ages of 16 and 21 in substitute care through LCCYS with special focus on youth transitioning out of care and on informal IL assessment and service delivery beginning for children aged 15.5 years and in substitute care.							
STRATEGIES	ACTION STEPS	INDICATORS/ BENCHMARKS	EVIDENCE OF COMPLETION	PERSON(S) RESPONSIBLE	TIMEFRAME	RESOURCES NEEDED	STATUS
1. Educate protective services caseworkers and supervisors on the IL process and requirements and the need for IL to be addressed consistently for youth in care ages 15.5 to 21 years old even if the youth does not receive formal IL services.	1. Train protective services caseworkers and supervisors about the IL process.	1. Protective services caseworkers and supervisors understand the IL process and the importance of ongoing preparation of a youth for adulthood.	<p>Training report.</p> <p>Survey of staff to assess their understanding of the process and the need for their participation in the IL process.</p>	Improvement Team, Protective Services Caseworkers and Supervisors	By 11/18/2011	Updated policies and procedures, staff training	Completed August 2012. Training had been initiated in 2011 but needed to be revamped in order to meet the needs of the staff. Follow-up monitoring is needed.

	2. Reinforce the importance of consistent IL practice to ensure youth's needs are properly addressed.	2. Discussion at supervisor and group meetings. Conduct ongoing transfer of learning sessions.	Supervisor and group meeting notes, training report.	Improvement Team, Administrative Team, Protective Services Supervisors	By 02/10/2012	Updated policies and procedures	Completed August 2012.
	3. Ensure that youths' IL needs are addressed consistently even at times that they do not need formal IL services.	3. Caseworkers are consistently discussing youths' educational and life goals to determine if they are taking the correct steps to achieve their goals.	Documentation of ongoing communication with the youth, the resource parents, and the school counselor about the child's goals and needs. Review of a sample of youth eligible for IL services to ensure that their IL needs have been consistently addressed. Survey of youth to determine how they believe their IL needs were addressed.	Improvement Team, Protective Services Caseworkers and Supervisors	By 02/10/2012	Staff training, communication with school personnel Possible technical assistance from the CWTP	IL focus group conducted in February 2012 as part of the QSR. Practice and assessment are ongoing. Implementation of the Education Screen will support this objective. The Education Screen is pending final revision and release by OCYF. Agency staff were not trained in the initial version.

<p>2. Refine the agency's IL process, policies, and procedures.</p>	<p>1. Update the IL process to require a referral for an IL assessment for any youth from entering substitute care at ages 15.5 to 17 years old.</p>	<p>1. All youth entering care between the ages of 15.5 and 17 years old will receive an IL assessment.</p>	<p>Completed policies and procedures. Documentation of youth referred for IL services.</p>	<p>Improvement Team</p>	<p>By 11/18/2011</p>	<p>Staff time commitment to develop the new process, staff input</p>	<p>Completed August 2012.</p>
	<p>2. Staff IL referrals at internal administrative permanency case staffings.</p>	<p>2. All IL referrals are staffed by an administrator to determine what course of action best meets the youth's IL needs.</p>	<p>Documentation as a part of the agency's permanency packet.</p>	<p>Improvement Team, Caseworker Managers, IL Caseworker, Protective Services Caseworkers and Supervisors</p>	<p>By 11/18/2011</p>	<p>Development of a form for documentation specific to IL</p>	<p>An assessment of the process has determined that the entire structure for administrative permanency case staffings needs to be revised, a part of which includes IL discussions. The Director, Court Director, and QA Manager are conducting Administrative Placement Reviews (APR) in order to further assess the agency's needs relative to permanency. Upon completion strategic plan will be developed for</p>

							each unit and for the agency regarding permanency issues.
	3. Develop specific criteria required for the IL assessment so multiple individuals and/or agencies will complete the assessments in a consistent manner.	3. Consistent IL assessments will prevent gaps in services and will ensure a youth's needs are met within a timeframe that meets the urgency of the need.	Consistent IL assessment document and procedures.	Improvement Team	By 12/16/2011	Input from service providers and youth	In process as part of refining policies and procedures related to Independent Living. A focus group regarding implementation of the Ansell Casey Like Skills Assessment will occur by January 2013. Ongoing defining, assessing, and planning is occurring at this time.
	4. Access external services such as the Older Child Matching Initiative (OCMI) and SWAN units of service (e.g., child-specific recruitment/CSR) and internal services such as	4. Youth have the opportunity to renew and develop family relationships and kinship connections to be considered as permanency resources or to become life	Policies and procedures which specify when a referral to these services needs to be made.	Improvement Team	By 12/16/2011	Education of agency staff on these resources	Ongoing. The APRs have modeled practice for supervisors and helped staff to understand the connections between needs and services as well as how to determine which service might

	Family Finding to identify and develop connections for youth in substitute care and aged 15.5 to 21 years old.	connections and resources for the youth's transition to adulthood.					best fit a child's and family's needs. Upon completion of the APRs a structure for consistent staffing of permanency cases at key points. SWAN conducted a refresher training overview regarding the units of service. Additional training regarding other related services is under consideration.
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Improvement Team(s)/ Members *(List the members of the Improvement Team and identify co-chairs with an asterisk if applicable):*

Jason Kavulich, LCCYS, Chair
 Attorney Corinne Thiel, North Penn Legal Services, children's Guardian ad Litem for dependency cases, Co-Chair
 Attorney Pam Janus, North Penn Legal Services, children's Guardian ad Litem for delinquency cases
 Jim Pusateri, LCCYS
 Lisa Gruszewski, LCCYS
 Jane Leach, LCCYS
 Jill Moyle, United Neighborhood Centers
 Lorelei Johnson, Legal Services Initiative Coordinator

Outcome # 2: To build on the strengths which enable us to partner with other child- and family-serving systems to form teams around children and families to improve the functioning and communication of these teams.

STRATEGIES	ACTION STEPS	INDICATORS/ BENCHMARKS	EVIDENCE OF COMPLETION	PERSON(S) RESPONSIBLE	TIMEFRAME	RESOURCES NEEDED	STATUS
1. Engage school personnel to participate on the Improvement Team and provide input into the planning, training, communication, and problem resolution processes.	1. Contact personnel in county school districts to explain the QSR/CQI process and invite their participation on and input into the Improvement Team.	1. The Improvement Team is in communication with participating school personnel at least monthly for information sharing and exchange of ideas.	School personnel regularly attend Improvement Team meetings and plans reflect their input.	Improvement Team	By 11/04/2011	Time commitment from school personnel	Completed December 2011. Monitoring is needed.
2. Cross-education between the educational system and LCCYS on what each system's responsibility is when working with families	1. Overview training for LCCYS staff to learn how the educational system works and their practices for working with families involved with CYS.	1. LCCYS staff understands the process for how the educational system works with families involved with LCCYS and the process for the educational system's communication with LCCYS.	Training report.	Improvement Team, Protective Services Caseworkers and Supervisors, School Personnel	By 01/13/2012	Commitment from school districts to participate in the cross-training process	A plan for formal multi-system training was not able to be realized. Informal training and discussions have occurred regarding education and the link to the child well-being as measured in the CFSR outcome and QSR indicator. Further efforts will occur upon implementation of the Education Screen. Further defining and assessing will determine if formal cross-systems training

							is needed.
	2. Overview training of educational personnel on how the social services and child protective services systems work and what the regulatory requirements and case process are.	2. Educational staff understand how the child protective services system functions and what its scope is.	Training report.	Improvement Team	By 01/13/2012	Staff identified to train school personnel	A plan for formal multi-system training was not able to be realized. LCCYS has worked to informally educate the educational system about child protective services, including having a liaison in ongoing contact with school districts and conduct brief trainings for school personnel. LCCYS has four school liaisons who focus on referring families to preventative services before they need to become involved in the court system, juvenile probation, or child protective services. In addition a caseworker from the agency's clinical unit conducts training for schools and other providers regarding reporting child abuse. The presentation includes information about what the child welfare system can and cannot do, what services the agency offers, and the importance of prevention before a situation rises to the level where children are neglected or abused.

<p>2. Develop a process in collaboration with school districts to ensure that knowledge about the child is provided to the individuals directly involved with the child.</p>	<p>1. Survey school districts to determine their policies on how they communicate with LCCYS.</p>	<p>1. Information from all county school districts on their process for communication with LCCYS.</p>	<p>Survey report.</p>	<p>Improvement Team</p>	<p>By 11/18/2011</p>	<p>Collaboration with school districts</p>	<p>Completed December 2011.</p>
	<p>2. Review of school policies to identify which processes might be barriers to communication from LCCYS and how identified issues can be resolved.</p>	<p>2. Identification of barriers. Communication with the school districts about possible resolutions.</p>	<p>Survey report.</p>	<p>Improvement Team</p>	<p>By 12/09/2011</p>	<p>Communication with school districts, input from school districts</p>	<p>Completed January 2012.</p>
	<p>3. Develop policies and procedures for caseworkers to communicate with schools taking into consideration the school's process.</p>	<p>3. Caseworkers consistently provide and obtain information about children involved with LCCYS. Caseworkers consistently attend educational</p>	<p>Completed policies and procedures.</p>	<p>Improvement Team</p>	<p>By 02/17/2012</p>	<p>Input from the school districts</p>	<p>Completed January 2012. Monitoring is needed.</p>

		meetings for children they are providing services to.					
	4. Regular communication between administrative staff at LCCYS and the school districts to assess and address any communication issues as they arise.	4. Issues which arise in communication between LCCYS and the educational system is addressed and resolved in a timely manner.	Documentation of meetings. Survey of agency personnel, school personnel and families with CYS-school interagency teams to determine if increased collaboration and problem-solving is occurring.	Improvement Team, Administrative Team	By 11/18/2011	Commitment from the school districts Possible technical assistance from the CWTP regarding survey	Completed January 2012. A monthly meeting in which LCCYS and the school can staff a case. Monitoring is needed.

Improvement Team(s)/ Members *(List the members of the Improvement Team and identify co-chairs with an asterisk if applicable):*

Nancy Johnson, LCCYS, Chair
 Debbie Marichak, LCCYS, Co-Chair
 Jennifer Carroll, LCCYS
 Tammy Reiprich, LCCYS

Bryan Walker, LCCYS
 Judy Castrogiovanni, North Pocono School District
 Jessica Leitzel, Scranton School District

Outcome # 3: To engage fathers in the assessment and planning process for their children at all levels of and points in the family's involvement with LCCYS.							
STRATEGIES	ACTION STEPS	INDICATORS/ BENCHMARKS	EVIDENCE OF COMPLETION	PERSON(S) RESPONSIBLE	TIMEFRAME	RESOURCES NEEDED	STATUS
1. Engage fathers at the point of assessment/ investigation	1. Obtain information about the father(s) from the referral source at the point of call intake.	1. Each referral has documentation of efforts to obtain information about the father and his location.	All referrals have the father of each child identified with his demographic and contact information or documentation of why that information is missing.	Improvement Team, Screening Unit and Supervisor	By 10/17/2011	Updated policies and procedures	In process as part of refining policies and procedures related to call intake.
	2. Train agency staff on what information to obtain about fathers, how to document their efforts to obtain information and locate fathers, and how and when to complete diligent search requests.	2. All protective service caseworkers and supervisors are trained and understand the process of obtaining information about fathers and initiating diligent search requests.	Training report.	Improvement Team, LSI Paralegals, Protective Services Caseworkers and Supervisors	By 12/02/2011	Staff and LSI paralegal time commitment	Completed November 2012.

	<p>3. Efforts are made to locate fathers whose information or whereabouts are unknown.</p>	<p>3. Contact with family members and friends to obtain information about the father's whereabouts.</p> <p>A diligent search request to locate the father.</p>	<p>Documentation in case files of efforts to locate fathers, including requests for diligent searches and the results.</p> <p>Supervisor reviews document directives on obtaining information and locating fathers.</p>	<p>Improvement Team, LSI Paralegals, Protective Services Caseworkers and Supervisors</p>	<p>By 12/09/2011</p>	<p>Updated policies and procedures</p>	<p>Currently only completed consistently on cases involving a placement. Revision of the agency's administrative permanency staffings will continue to address this need.</p>
	<p>4. Contact the father during the assessment/ investigation to inform him of the process, to obtain information on his history and his situation, and to engage him in the assessment process.</p>	<p>4. Information obtained from fathers is included on safety assessments, risk assessments, and in family assessments.</p> <p>Information from collateral resources is obtained relative to fathers.</p> <p>Fathers have input into the assessment.</p>	<p>Documentation in the case file of interviews with fathers and collateral resources.</p> <p>Supervisor reviews document engagement efforts.</p>	<p>Improvement Team, Protective Services Caseworkers and Supervisors</p>	<p>By 01/13/2012</p>	<p>Updated family assessment process, updated intake policies and procedures</p>	<p>In process as part of refining the family assessment process for cases being opened for protective services. Due to additional needs identified in the QSR and APRs, the family assessment process has not yet been revised. Implementation of the new process is expected to occur in July 2013 concurrent to implementation of at least one structured screening tool; however, the family assessment will continue to be</p>

							revised over the next two years as the agency focuses on using evidence-based, structured screens and assessments.
2. Engage fathers throughout the time the case is open for protective services.	1. Discuss the status determination with the father at the conclusion of the intake and include the father when sending a letter to close a case or to open the case for protective services.	1. Fathers are informed of the status of the case and given an opportunity to ask questions.	Copies of letters to fathers are included in the file. Documentation of contacts with fathers in the case file.	Improvement Team, Protective Services Caseworkers and Supervisors	By 01/13/2012	Updated policies and procedures	Will be implemented after the call intake and intake assessment/investigation procedures are refined so as to avoid situations in which a father is notified of the status determination without having been contacted during the assessment/investigation.
	2. Engage the father to participate in the development of the Family Service Plan (FSP) or Child's Permanency Plan (CPP) - inform the father of the process and send a letter ahead of time inviting him to	2. Fathers participate in the development of objectives and tasks for the FSP/CPP for themselves and their children. Fathers participate in FGDM to develop their Plan.	Objectives and tasks on the FSP/CPP are specific to the risk factors and absent or diminished protective capacities relative to fathers. Documentation that fathers were informed in advance of the opportunity for	Improvement Team, Protective Services Caseworkers and Supervisors, FGDM Caseworker(s)	By 01/13/2012	Updated policies and procedures, additional training	Same as above. Also, as part of the Demonstration Project, the agency is assessing its referral process for FGDM. Most referrals center on placement and staff members sometime have difficulty understanding why a

	participate. Inform the father of the opportunity to participate in Family Group Decision making (FGDM) and what the process entails.		FSP/ CPP/ FGDM participation and input.				FGC could be a powerful preventative tool.
	3. Refer fathers to the agency's fatherhood group more regularly on in-home cases. Educate fathers on how the group will benefit them and help them to complete their objectives on the FSP/ CPP.	3. Fathers are assessed for this group at key case decision-making points and at the point of FSP/ CPP development.	Documentation of discussion with fathers about the group. Documentation of why fathers were not referred to the group.	Improvement Team, Protective Services Caseworkers and Supervisors, Fatherhood Group Coordinators	By 01/13/2012	Staff education, updated policies and procedures	Currently addressed through the agency's administrative permanency staffings which are being revised. Education for staff has been ongoing and new workers typically observe a group as part of their orientation. Use of the group for in-home cases will also increase the frequency with which new groups can start.
	4. Conduct focus groups of fathers and of agency staff to identify additional barriers to consistent and ongoing engagement of	4. Fathers and agency staff have the opportunity for input into what barriers they identify and what possible additional solutions are.	Report from the focus group.	Improvement Team	By 10/28/2011	Technical Assistance from the CWTP	Completed as part of the QSR in February 2012. The agency is assessing some of the suggestions for feasibility of implementation.

	fathers throughout the life of a case.						
	5. Train agency staff on engaging fathers, the effects that father absence could have on children, and how to assess the risk and safety threats they present to their children in order to identify suitable services for them.	<p>5. All protective service caseworkers and supervisors are trained and understand why engagement of fathers is important.</p> <p>Information on the father(s) is obtained on all cases and fathers are assessed to determine if they present risks and safety threats to their children, what services they require, and if they can safely be involved with their children.</p>	<p>Training report.</p> <p>Review of a sampling of cases.</p> <p>Follow-up surveys or focus groups of fathers to determine if barriers have been resolved and if engagement of fathers has increased.</p>	Improvement Team, Protective Services Caseworkers and Supervisors, Fatherhood Group Coordinators	By 02/03/2012	Technical Assistance from the CWTP; Possible agency-specific training by the CWTP	Completed November 2012.

Improvement Team(s)/ Members *(List the members of the Improvement Team and identify co-chairs with an asterisk if applicable):*

- Amanda Helring, LCCYS, Chair
- Nicole Lance, LCCYS, Co-Chair
- Amanda Parks, Legal Services Initiative (LSI) Paralegal
- Bea Ferguson-Murphy, LCCYS
- Jerri Regan, LCCYS
- Caseworker from the Clinical Unit available on a rotating basis