# **QUALITY SERVICES REVIEW RESULTS**

LUZERNE COUNTY
CHILDREN AND YOUTH SERVICES/
JUVENILE PROBATION



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

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

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#### **Background**

This report presents the findings from Luzerne County's Quality Service Review (QSR) which was conducted in May 2013.

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

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

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

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

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

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

#### Methodology

For the purposes of selecting a sample for the QSR, each county has been assigned to one of eight strata based on the number of dependent (including dependent/delinquent) children it served during federal fiscal year 2011. Luzerne County falls into stratum III, resulting in 15 cases being selected for review - nine in-home cases and six placement cases. The in-home sample is family-based<sup>1</sup> and was selected for Luzerne County from a list provided by the county of families with open in-home cases on February 12, 2013. The placement sample is child-based and was selected for Luzerne County from a list provided by the county of those children in out-of-home placement on the same date.

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

Luzerne County conducted its QSR over six days in May 2013. A total of 116 interviews were conducted, an average of eight interviews per case.

<sup>&</sup>lt;sup>1</sup> A "family-based" sample means that each family in the population represented a single unit. This stands in contrast to a "child-based" sample, in which each child represents a single unit within the population (meaning that a single family in the child-based sample could be represented by multiple children).

The demographics of each child/youth and the current placement setting are reported below and broken out by case type, in-home and out-of-home. Comparisons to the total Luzerne County foster care population in care on February 12, 2013 are provided.

	In-he	ome	Out-o	f-home	Combin	Foster Care Population		
Sex	#	% <sup>2</sup>	#	%	#	%	%	
Male	2	22%	5	83%	7	47%	52%	
Female	7	78%	1	17%	8	53%	48%	
Total	9	100%	6	100%	15	100%	100%	
							Foster Care	
	In-he	ome	Out-of	f-home	Combin	ed Total	Population	
Age	#	%	#	%	#	%	%	
0 – 4	3	222/		2221	_			
	3	33%	2	33%	5	33%	50%	
5-9	4	44%	1	33% 17%	5	33% 33%	50% 21%	
5-9	4	44%	1	17%		33%	21%	

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

	In-h	ome	Out-o	f-home	Combine	ed Total	Foster Care Population
Race/Ethnicity <sup>3</sup>	#	%	#	%	#	%	%
White/Caucasian	9	100%	5	83%	14	93%	81%
Black/African-American	1	11%	1	17%	2	13%	25%
American Indian or Alaskan Native	0	0%	0	0%	0	0%	<1%
Native Hawaiian or Pacific Islander	0	0%	0	0%	0	0%	<1%
Asian	0	0%	0	0%	0	0%	<1%
Other	0	0%	0	0%	0	0%	
Unknown	0	0%	0	0%	0	0%	0%
Unable to Determine	0	0%	0	0%	0	0%	
Hispanic	0	0%	0	0%	0	0%	14%
Total	9		6		15		

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

<sup>&</sup>lt;sup>2</sup> Percentages throughout the report may not sum to 100 percent due to rounding.

<sup>&</sup>lt;sup>3</sup> Reviewers were able to report more than one race for each focus child, in addition to recording whether the child is of Hispanic ethnicity.

	In-he	ome	Out-o	f-Home	Foster Care Population <sup>4</sup>
Current Placement	#	%	#	%	%
Birth home (Biological Mother)	3	33%	1	•	
Birth home (Biological Father)	0	0%	-	-	
Birth home (Both Biological Parents)	4	44%	-	-	
Post-Adoptive Home (Mother)	0	0%	-	-	
Post-Adoptive Home (Father)	0	0%	1	•	
Post-Adoptive Home (Both Parents)	0	0%	1	•	
Kinship – Formal	-	ı	1	17%	
Kinship – Informal	1	11%	0	0%	
Permanent Legal Custodian/Subsidized					
Legal Custodian	1	11%	0	0%	32%
Traditional Foster Home	-	-	2	33%	
Therapeutic Foster Home	-	-	1	17%	62%
Group/Congregate Home	-	-	0	0%	<1%
Residential Treatment Facility	-	-	0	0%	
Juvenile Correctional	-	-	0	0%	
Medical/Psychiatric Hospital	-	-	0	0%	
Detention	-	-	0	0%	2%
Other	-	-	1	17%	4%
Total	9	100%	6	100%	100%

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

<sup>&</sup>lt;sup>4</sup> Placement settings reported in AFCARS include: pre-adoptive home, relative foster family home, non-relative foster family home, group home, institution, supervised independent living, runaway and trial home visit.

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

Indicator <sup>5</sup>	% Acceptable	% Unacceptable
Safety: Exposure to threats of harm	100%	0%
Family home #1	100%	0%
Family home #2	100%	0%
Substitute home	100%	0%
School	100%	0%
Other setting	100%	0%
Safety: Risk to self and others	96%	4%
Risk to self	100%	0%
Risk to others	92%	8%
Stability	78%	22%
Living arrangement	80%	20%
School	75%	25%
Living arrangement	94%	6%
Family home #1	100%	0%
Family home #2	100%	0%
Substitute home	86%	14%
Permanency	73%	27%
Physical health	93%	7%
Emotional well-being	73%	27%
Early learning and development	100%	0%
Academic status	80%	20%
Pathway to independence	100%	0%
Parent or caregiver functioning	68%	32%
Mother	70%	30%
Father	38%	62%
Substitute caregiver	88%	12%
Other	100%	0%

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

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<sup>&</sup>lt;sup>5</sup> Indicator ratings in bold represent the indicator's overall score, which includes the ratings from all sub-indicators.

#### **SAFETY**

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

## Indicator 1a: Safety from Exposure to Threats of Harm

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

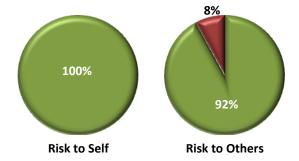


			Acce	ptable		Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%	
Family home #1	8	3	5	0	100%	0	0	0	0%	
Family home #2	2	0	1	1	100%	0	0	0	0%	
Substitute Home	7	4	3	0	100%	0	0	0	0%	
School	11	9	2	0	100%	0	0	0	0%	
Other settings	2	1	1	0	100%	0	0	0	0%	
Total		17	12	1	100%	0	0	0	0%	

Figure 5: "Exposure to Harm" QSR Results

### Indicator 1b: Safety from Risk to Self/Others

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



			Acce	ptable		Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%	
Risk to self	13	7	3	3	100%	0	0	0	0%	
Risk to others	13	10	1	1	92%	0	1	0	8%	
Total		17 4 4 96%				0	1	0	4%	

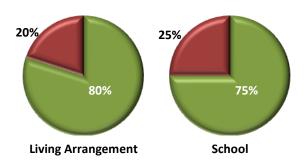
Figure 6: "Behavioral Risk" QSR Results

#### PERMANENCY

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

## Indicator 2: Stability

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



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

			Acce	eptable	•		Unacc	eptable	е
Sub-indicator	N	6	5	4	%	3	2	1	%
Living arrangement	15	3	4	5	80%	1	1	1	20%
School	12	5	3	1	75%	2	1	0	25%
Total		8	7	6	78%	3	2	1	22%

Figure 7: "Stability" QSR Results

#### **Indicator 3:** Living Arrangement

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

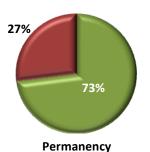


		Acceptable Unacceptable							
Sub-indicator	N	6	5	4	%	3	2	1	%
Family home #1	8	5	3	0	100%	0	0	0	0%
Family home #2	2	0	0	2	100%	0	0	0	0%
Substitute home	7	3	3	0	86%	0	1	0	14%
Total		8	6	2	94%	0	1	0	6%

Figure 8: "Living Arrangement" QSR Results

#### **Indicator 4:** Permanency

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



			Acce	ptable		Unacceptable				
Indicator	N	6	5	4	%	3	2	1	%	
Permanency	15	2	5	4	73%	2	1	1	27%	
Total		2	5	4	73%	2	1	1	27%	

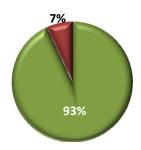
Figure 9: "Permanency" QSR Results

#### WELL-BEING

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

#### **Physical Health** Indicator 5:

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



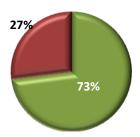
**Physical Health** 

			Acce	eptable		Unacceptable			
Indicator	Ν	6	5	4	%	3	2	1	%
Physical Health	15	10	4	0	93%	1	0	0	7%
Total		10	4	0	93%	1	0	0	7%

Figure 10: "Physical Health" QSR Results

#### **Indicator 6: Emotional Well-being**

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



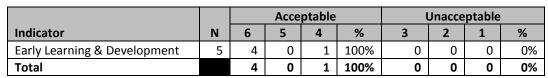
**Emotional Well-being** 

			Acce	ptable		Unacceptable				
Indicator	N	6	5	4	%	3	2	1	%	
Emotional Well-Being	15	4	5	2	73%	4	0	0	27%	
Total		4	5	2	73%	4	0	0	27%	

Figure 11: "Emotional Well-being" QSR Results

## **Indicator 7a: Early Learning & Development**

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



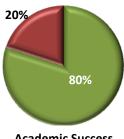
indicator applies only to children under the age of eight years and not attending school.

Figure 12: "Early Learning & Development" QSR Results

100%

#### Indicator 7b: Academic Status

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



**Academic Success** 

			Acce	ptable		Unacceptable					
Indicator	N	6	5	4	%	3	2	1	%		
Academic Status	10	4	4	0	80%	1	1	0	20%		
Total		4	4	0	80%	1	1	0	20%		

Figure 13: "Academic Status" QSR Results

#### **Indicator 8: Pathway to Independence**

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



Pathway to Independence

			Acce	ptable		Unacceptable				
Indicator	N	6	5	4	%	3	2	1	%	
Pathway to Independence	1	0	0	1	100%	0	0	0	0%	
Total		0	0	1	100%	0	0	0	0%	

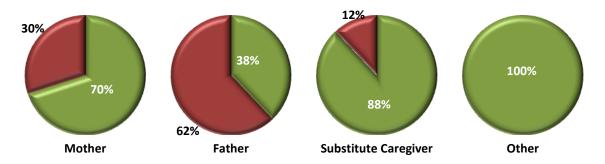
Figure 14: "Pathways to Independence" QSR Results

## PARENT/CAREGIVER FUNCTIONING

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

### **Indicator 9: Parent/Caregiver Functioning**

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



			Acce	ptable	:	Unacceptable					
Sub-indicator	N	6	5	4	%	3	2	1	%		
Mother	10	1	3	3	70%	2	1	0	30%		
Father	8	1	0	2	38%	0	2	3	62%		
Substitute Caregiver	8	4	2	1	88%	0	0	1	12%		
Other	2	0	0	2	100%	0	0	0	0%		
Total		6	5	8	68%	2	3	4	32%		

Figure 15: "Caregiver Functioning" QSR Results

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

Indicator	% Acceptable	% Unacceptable
Engagement efforts	84%	16%
Child/youth	92%	8%
Mother	100%	0%
Father	60%	40%
Substitute caregiver	100%	0%
Other	50%	50%
Role & voice	70%	30%
Child/youth	73%	27%
Mother	90%	10%
Father	40%	60%
Substitute caregiver	88%	12%
Other	60%	40%
Teaming	60%	40%
Formation	60%	40%
Functioning	60%	40%
Cultural awareness & responsiveness	91%	9%
Child/youth	100%	0%
Mother	100%	0%
Father	70%	30%
Assessment & understanding	77%	23%
Child/youth	87%	13%
Mother	80%	20%
Father	50%	50%
Substitute caregiver	88%	12%
Long-term view	53%	47%
Child/youth & family planning process	60%	40%
Child/youth	67%	33%
Mother	60%	40%
Father	40%	60%
Substitute caregiver	75%	25%
Planning for transitions & life adjustments	67%	33%
Efforts to timely permanence	62%	38%
Efforts	67%	33%
Timeliness	50%	50%
Intervention adequacy & resource availability	97%	3%
Adequacy	93%	7%

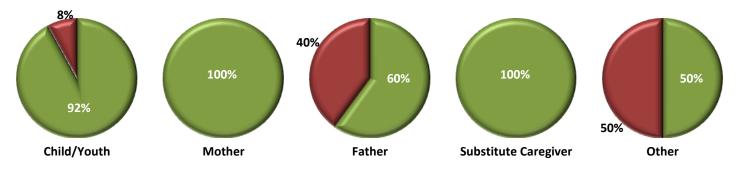
Indicator	% Acceptable	% Unacceptable
Availability	100%	0%
Maintaining family relationships	57%	43%
Mother	80%	20%
Father	33%	67%
Siblings	55%	45%
Other	67%	33%
Tracking & adjusting	83%	17%
Tracking	87%	13%
Adjusting	80%	20%

Figure 16: "Practice Performance Domain Ratings" QSR Results

#### **Indicator 1a: Engagement Efforts**

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

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

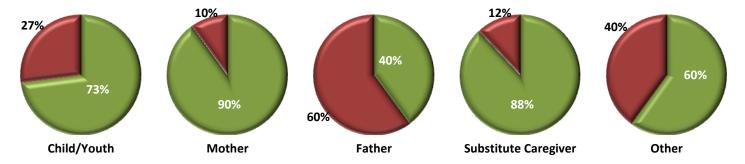


			Acce	ptable	:	Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%	
Child/Youth	12	5	1	5	92%	1	0	0	8%	
Mother	11	5	3	3	100%	0	0	0	0%	
Father	10	2	3	1	60%	3	1	0	40%	
Substitute Caregiver	8	2	3	3	100%	0	0	0	0%	
Other	4	1	0	1	50%	0	1	1	50%	
Total		15	10	13	84%	4	2	1	16%	

Figure 17: "Engagement Efforts" QSR Results

#### Indicator 1b: Role & Voice

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

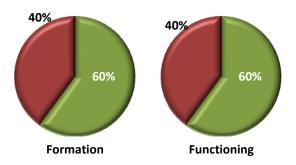


			Acce	eptable	)	Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%	
Child/Youth	11	2	5	1	73%	3	0	0	27%	
Mother	10	4	4	1	90%	1	0	0	10%	
Father	10	2	2	0	40%	1	4	1	60%	
Substitute Caregiver	8	3	4	0	88%	1	0	0	12%	
Other	5	1	0	2	60%	0	1	1	40%	
Total		12	15	4	70%	6	5	2	30%	

Figure 18: "Role & Voice" QSR Results

#### **Indicator 2: Teaming**

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



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

			Acce	ptable		Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%	
Formation	15	4	5	0	60%	2	4	0	40%	
Functioning	15	3	4	2	60%	1	5	0	40%	
Total		7	9	2	60%	3	9	0	40%	

Figure 19: "Teaming" QSR Results

### **Indicator 3: Cultural Awareness & Responsiveness**

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

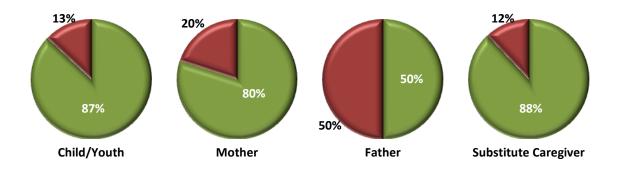


			Acce	ptable		Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%	
Child/Youth	15	4	9	2	100%	0	0	0	0%	
Mother	10	2	7	1	100%	0	0	0	0%	
Father	10	2	4	1	70%	2	0	1	30%	
Total		8	20	4	91%	2	0	1	9%	

Figure 20: "Cultural Awareness & Responsiveness" QSR Results

#### **Indicator 4: Assessment & Understanding**

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

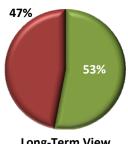


		Acceptable				Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%	
Child/Youth	15	3	6	4	87%	2	0	0	13%	
Mother	10	0	4	4	80%	2	0	0	20%	
Father	10	0	3	2	50%	2	3	0	50%	
Substitute Caregiver	8	1	5	1	88%	1	0	0	12%	
Total		4	18	11	77%	7	3	0	23%	

Figure 21: "Assessment & Understanding" QSR Results

### **Indicator 5: Long-term View**

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



**Long-Term View** 

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

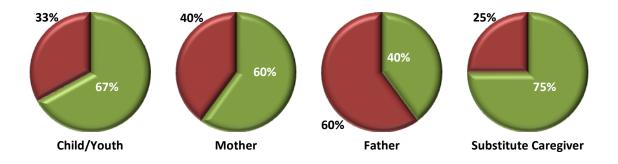
			Acce	ptable		Unacceptable				
Indicator	N	6	5	4	%	3	2	1	%	
Long-Term View	15	3	2	3	53%	6	1	0	47%	
Total		3	2	3	53%	6	1	0	47%	

Figure 22: "Long-term View" QSR Results

### **Indicator 6: Child/Youth & Family Planning Process**

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

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



			Acce	ptable		Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%	
Child/Youth	15	4	4	2	67%	5	0	0	33%	
Mother	10	0	3	3	60%	4	0	0	40%	
Father	10	0	1	3	40%	5	1	0	60%	
Substitute Caregiver	8	3	2	1	75%	2	0	0	25%	
Total		7	10	9	60%	16	1	0	40%	

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

#### **Indicator 7: Planning for Transitions & Life Adjustments**

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



Planning for Transitions & Life Adjustments

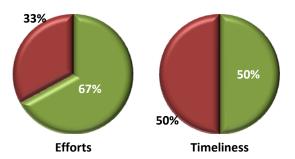
Alternative timeframes are used for the ratings in this indicator. This indicator looks retrospectively over the past 90 days and prospectively over the next 90 days to assess the planning and transitioning through a significant life change and adjustment process of the child/youth and family.

		Acceptable			Unacceptable				
Indicator	N	6	5	4	%	3	2	1	%
Planning for Transitions & Life Adjustments	12	1	3	4	67%	3	1	0	33%
Total		1	3	4	67%	3	1	0	33%

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

## **Indicator 8: Efforts to Timely Permanence**

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



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

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

		Acceptable			Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%
Efforts	15	3	2	5	67%	4	1	0	33%
Timeliness	6	2	0	1	50%	0	1	2	50%
Total		5	2	6	62%	4	2	2	38%

Figure 25: "Efforts to Timely Permanence" QSR Results

#### **Indicator 9: Intervention Adequacy & Resource Availability**

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



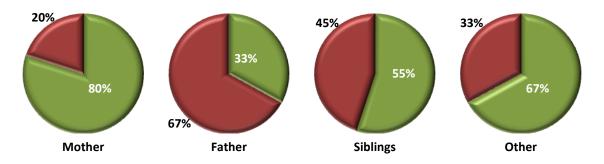
sufficient power and beneficial effect to meet near-term needs and achieve the conditions necessary for safe case closure defined in the long-term view. Resources required to implement current child/youth and family plans should be available on a timely, sufficient, and convenient local basis.

		Acceptable			Unacceptable				
Sub-indicator	N	6	5	4	%	3	2	1	%
Adequacy	15	3	8	3	93%	0	1	0	7%
Availability	15	5	9	1	100%	0	0	0	0%
Total		8	17	4	97%	0	1	0	3%

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

#### **Indicator 10: Maintaining Family Connections**

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

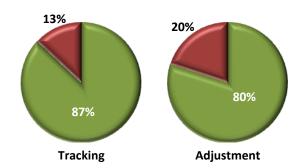


		Acceptable				Unacc	eptable	е	
Sub-indicator	N	6	5	4	%	3	2	1	%
Mother	5	1	2	1	80%	0	1	0	20%
Father	6	1	1	0	33%	1	2	1	67%
Siblings	11	2	3	1	55%	0	2	3	45%
Other	6	2	1	1	67%	0	0	2	33%
Total		6	7	3	57%	1	5	6	43%

Figure 27: "Maintaining Family Connections" QSR Results

## **Indicator 11: Tracking & Adjusting**

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



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

		Acceptable				Unacceptable			
Sub-indicator	N	6	5	4	%	3	2	1	%
Tracking	15	5	4	4	87%	2	0	0	13%
Adjustment	15	3	6	3	80%	3	0	0	20%
Total		8	10	7	83%	5	0	0	17%

Figure 28: "Tracking & Adjusting" QSR Results

## QUALITY SERVICE REVIEW PROTOCOL RATING SCALE LOGIC

		e Guide for Child/Youth	and Family Status Indicat				
	Unacceptable Range: 1-3		Acceptable Range: 4-6				
Improveme	nt Zone: 1-2	Refineme	nt Zone: 3-4	ce Zone: 5-6			
•	or risky. Quick action nprove the situation.	Status is minimum or r unstable. Further effor refine the situation.	fforts are necessary to Status is favorable. Efforts should be n				
1	2	3	4	5	6		
Adverse Status	Poor Status	Marginal Status	Fair Status	Substantial Status	Optimal Status		
The individual's status	Status is and may	Status is mixed,	Status is at least	Substantially and	The best of most		
in this area is poor,	continue to be poor	limited or	minimally or	dependably positive	favorable status		
unacceptable and	and unacceptable. The	inconsistent and not	temporarily sufficient	status for the	presently attainable		
worsening. Any risks	individual's status has	quite sufficient to	for the individual to	individual in this	for this individual in		
of harm, restriction,	been substantially	meet the individual's	meet short-term	area with an ongoing	this area (taking age		
separation, regression,	limited or inconsistent,	short-terms needs or	needs or objectives in	positive pattern. This	and ability into		
and/or other poor	being inadequate at	objectives now in	this area. Status has	status level is	account). The		
outcomes may be	some or many	this area. Status has	been no less than	generally consistent	individual is		
substantial and	moments in time or in	been somewhat	minimally adequate at	with eventual	continuing to do		
increasing.	some essential	inadequate at points	any time over the past	attainment of long-	great in this area.		
	aspect(s). Any risks	in time or in some	30 days, but may be	term needs or	Confidence is high		
	may be mild to	aspects over the	short-term due to	outcomes in this	that long-term		
	serious.	past 30 days. Any	changing	area. Status is good	needs or outcomes		
		risks may be	circumstances,	and likely to	will be or are being		
		minimal.	requiring change	continue.	met in this area.		
			soon.				

	Unacceptable Range: 1-3			Acceptable Range: 4-6		
Improveme	ent Zone: 1-2	Refineme	Refinement Zone: 3-4 Maintenar			
· ·	ate. Quick action should ove practice now.	be changing. Further	nal or marginal and may efforts are necessary to actice situation.	Performance is effective. Efforts should be made to maintain and build upon a posit practice situation.		
1	2	3	4	5	6	
Adverse Practice	Poor Practice	Marginal Practice	Fair Practice	Substantial Practice	Optimal Practice	
Practice may be absent or not operative. Performance may be missing (not done) OR Practice strategies, if occurring in this area, may be contraindicated or may be performed inappropriately or harmfully.	Practice at this level is fragmented, inconsistent, lacking necessary intensity, or off-target. Elements of practice may be noted, but it is incomplete/not operative on a consistent basis.	Practice at this level may be under-powered, inconsistent or not well-matched to need. Performance is insufficient for the individual to meet short-term needs or objectives. With refinement, this could become acceptable in the near future.	This level of performance is minimally or temporarily sufficient to meet short-term need or objectives. Performance in this area may be no less than minimally adequate at any time in the past 30 days, but may be short - term due to change circumstances, requiring change soon.	At this level, the system function is working dependably for this individual, under changing conditions and over time. Effectiveness level is consistent with meeting long-term needs and goals for the individual.	Excellent, consistent effective practice fo this individual in this function area. This level of performance is indicative of well-sustained exemplary practice and results for the individual.	