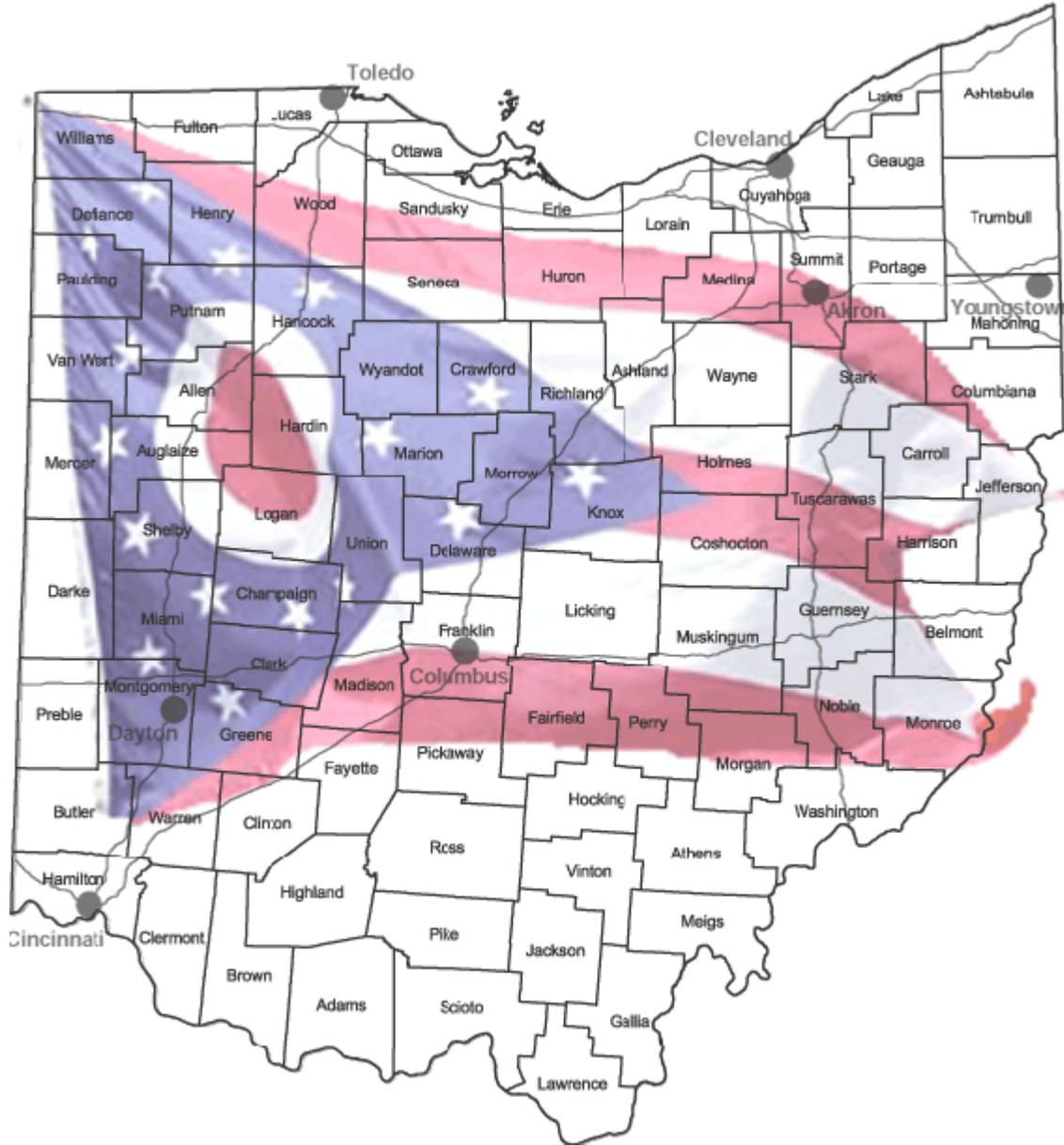


Child and Family Services Review PROGRAM IMPROVEMENT PLAN



**Ohio Department of Job and Family Services
Office of Families and Children
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Ohio Child and Family Services Review Program Improvement Plan

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Introduction

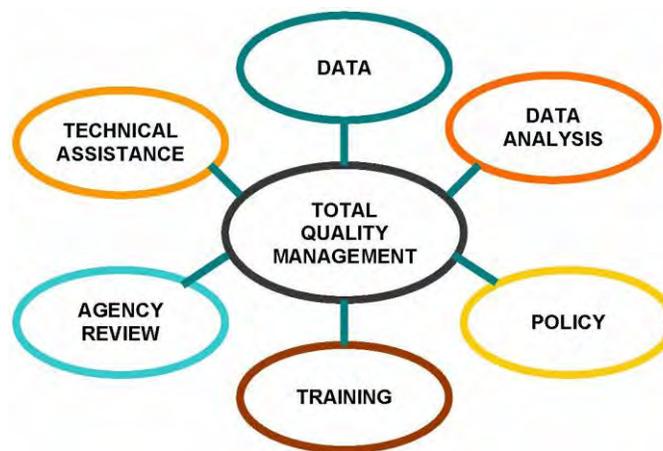
Ohio's Program Improvement Plan (PIP), developed in response to the federal Child and Family Services Review (CFSR) Final Report released April 7, 2009, focuses on achievement of positive outcomes for children and families throughout the continuum of child welfare services. In order to identify which strategies to use to achieve positive outcomes for children and families, the Ohio Department of Job and Family Services (ODJFS) had to take into account that child welfare services are delivered in a state-supervised county-administered environment. ODJFS is the designated state agency responsible for overseeing the operation of 88 public children services agencies (PCSAs), which are responsible for:

- Receiving and responding to reports involving any child alleged to be abused, neglected, or dependent.
- Providing protective services and emergency supportive services to allow children to remain in their own homes.
- Accepting temporary or permanent custody of children from the court.
- Providing out-of-home care for children who cannot remain at home, while providing services to families directed at reunification.
- Placing children in adoption or other planned permanent living arrangements.
- Providing independent living services to assist children as they transition from being in agency custody to independence.
- Recruiting and maintaining foster and adoptive homes.

In addition, ODJFS had to recognize that the following factors have a direct impact on the successful achievement of any strategy, and ultimately the goals established:

- Differences in population size, demographics, community values and norms of the 88 counties.
- Fiscal and human resources available at the county level.
- Services needed by children and families involved with PCSAs may be provided by other agencies, and the support for system change needs to be obtained from agencies at the state and county level.
- Courts may be configured differently (e.g., combined juvenile and probate courts, separate juvenile courts) and may have diverse procedures for handling PCSA actions.

In the second round of PIP development ODJFS, Office of Families and Children (OFC) continued to use the Total Quality Management Framework established during the first round to identify goals, strategies, action steps and benchmarks that will effect positive outcomes for children and families. Following is a graphic depiction of the OFC Total Quality Management Framework.



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Data

Data is one component of the Total Quality Management framework (TQM). Data serves to guide decision-making, evaluate improved performance, and make mid-course corrections. Multiple sources of data will be utilized in all aspects of the PIP in order for Ohio to achieve its identified goals and respective strategies. Outlined below are examples of data sources and state/county specific data reports that will be utilized:

- Child Protection Oversight and Evaluation (CPOE) findings.
- Pre and/or post-evaluation results from technical assistance presentations, training, best practice guidance.
- SACWIS data on initiation of investigations, recurrence of child maltreatment, number of children entering care, length of stay in care, re-entry of children to foster care, length of time to adoption, children in care for over 17 months or more, placement stability.

Data will be manipulated in a variety of structures to facilitate a host of analyses for longitudinal, point-in-time and guiding principles using methodologies that are driven by analytic best practices. For instance, exit-cohort analyses will not be used to determine where counties need to improve performance, since it has been demonstrated by University of Chicago's Chapin Hall not to improve the outcomes for children.

Data Analysis

A second component in TQM is data analysis. Data posted on the ODJFS Business Intelligence Channel will allow counties to analyze their data through multiple levels and dimensions (e.g., demographic, case specific, month/year, age, race, length of stay, placement type and history) in order to examine any trends and needs to reallocate resources. ODJFS' method of providing analyses to counties is state-of-the-art. Specifically, the method gives the counties the opportunity to explore their own data using a battery of interactive tables and graphs. Similarly, the public, via the Supreme Court of Ohio's website (www.Summitonchildren.Ohio.gov), has access to the same analyses, minus the confidential child level information.

Not only are data reports and analyses posted on the ODJFS Business Intelligence Channel, but many are posted on the Ohio Supreme Court website. In addition, these analyses and how to use them will be reviewed and reinforced at different venues. This method of disseminating analytic tools is vital in assisting counties in altering their policies and practice to improve performance. Furthermore, ODJFS has found that it is critical for data and analyses to be interpreted within the unique TQM framework. This method has been discussed and demonstrated at the Children's Summit, and State-County Executive meetings. This framework involves everyone (e.g., line social workers, supervisors, county directors, and state staff) interpreting the analyses. It is fascinating to hear how line-social workers, supervisors, county directors, and state staff interpret analytic findings. Very often, each group has a different "take" on the results, and –most important- each "take" has merit. When these interpretations of the data are understood by all parties, counties are empowered to further refine their action plans.

Policy

The third component of TQM is policy, which includes the Code of Federal Regulations, the Ohio Revised Code, the Ohio Administrative Code, best practice guidance and procedure letters. ODJFS issues policy directives to agencies through Ohio Administrative Code rules. Some policies are based on federal and state law while others are based on best practice. Although ODJFS reviews all of its rules every five years, CFSR findings indicate that there is a need to examine policies in order to determine if they need more clarity or if they are impeding effective service delivery. The use of multiple data sources and agency review findings will be utilized in addressing needed policy revisions.

Training

A fourth component of TQM is training, which consists of OAC rule briefings, SACWIS training, training offered through the Ohio Child Welfare Training Program (OCWTP) and ODJFS sponsored events. Throughout the PIP various training approaches will be utilized to increase the level of staff skills and competencies.

Agency Reviews

The fifth component of TQM is agency reviews. ODJFS reviews PCSAs for compliance with OAC rules through CPOE. CPOE Stage 8 will be modified to reflect the CFSR on-site review process and look at county performance based upon quantitative and qualitative data as well as interviews with case participants and stakeholders. Additionally, agency reviews include monitoring of private agencies and public agencies (specified certification functions) to assure compliance with licensing rules governing foster homes, group homes, children's residential centers, residential parenting facilities, and children's crisis facilities. Results from CPOE reviews and licensing reviews will be used to inform ODJFS of the need for changes in policy and/or additional training and technical assistance needed.

Technical Assistance

The sixth component of TQM is technical assistance. Ohio's program improvement efforts assume that outcomes for children and families will improve if: intervention between the family and caseworker occurs through the use of best practices in a manner that maintains fidelity; there are positive relationships between the caseworker, service provider and the family that promotes engagement; and, services are sufficiently diverse to appropriately respond to families' individual need. As the state seeks to promote the use of evidence-driven practices within county programming through technical assistance, it is clear that successful delivery requires these same elements be reflected in the interaction between the state and the county agency.

It is questionable whether the ODJFS, OFC's structure or functionality best supports a technical assistance model that achieves the intended county-based implementation of evidence-driven practices. Functionality primarily is related to rule development and monitoring; training primarily is related to rule compliance. For a change in practice to be sufficiently integrated at the county level so that it results in overall change in outcome, the state will enhance its role in establishing and supporting these services through technical assistance.

To address this functionality as related to technical assistance, ODJFS, OFC and the Midwest Child Welfare Implementation Center (MCWIC) will collaborate to develop and implement a new technical assistance model. This project is a part of Ohio's systemic effort to improve its child welfare outcomes, and will materially alter how ODJFS, OFC works with Ohio's county-administered public children services agencies. This collaboration will build Ohio's capacity to implement evidence-informed and promising child welfare interventions. The project consists of several distinct elements: a formal assessment of organizational culture and climate; development and installation of the technical assistance model; a rule review; implementation of organizational structural and functional changes to facilitate the new model; and ongoing fidelity monitoring.

As identified above, Ohio's partnership with the MCWIC is a multi-year project with multiple components and phases. At this point of PIP development, Ohio still is engaged in the assessment phase. Since the development of the model is to be guided by the information gathered throughout the assessment phase, Ohio's model has not yet been established and it is not possible to functionally specify how the delivery of technical assistance to counties will change over the course of the next three years. Ohio has proposed a significant cultural shift to be reflected throughout its child welfare programming, however, and it can be expected that any new model will reflect the philosophical underpinnings of the state's proposed shift. Ohio's new technical assistance model will evolve as one that mirrors the principles OFC has identified as directing its daily work:

- ✓ It is our role to provide leadership and maintain organizational and professional competence.
- ✓ We all have a responsibility and commitment to the agencies, partners and individuals we serve.
- ✓ We recognize the urgency and importance of our work.
- ✓ Partnerships and community collaboration enhance the quality of outcomes.
- ✓ Everyone has value and should be treated with respect.
- ✓ Everyone has a role and must be held accountable to ensuring children, youth and vulnerable adults are safe and have a sense of belonging.

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- ✓ All partners have a voice in the decision-making process.
- ✓ Families and agencies are unique and should receive individualized services from a strength-based approach that is culturally responsive.

These principles might see a model that includes a:

- Focus on outcomes rather than process.
- Recognition of each participant's value (increased use of experiential learning such as peer-to-peer, mentoring, shadowing and decreased reliance on classroom experience).
- Focus on individualized experiences (increased use of site-to-site, on-site and county-specific assistance and decreased reliance on standardized curriculum).
- Focus on strengths (increased use of coaching opportunities).
- Shared responsibility in the delivery of technical assistance.
- Focus on timeliness in responding to technical assistance requests.

Although the MCWIC partnership is not a PIP benchmark, ODJFS will include update on its progress and the development and implementation of the technical assistance model in Ohio's quarterly progress reports.

Conclusions

It is recognized that these components are interdependent and do not occur sequentially but concurrently throughout the process of outcome improvement. No component can be singled out as "most critical" because successful outcomes are dependent upon the utilization of all components in concert.

PIP Goals and Strategies

Ohio established six (6) primary goals with associated strategies, action steps and benchmarks with input from: Ohio Children and Family First; participants who attended one of the eight regional PIP forums held in April and May 2009 throughout the state in conjunction with the Supreme Court of Ohio, the Ohio Child Welfare Training Program Region Training Centers, the Adoption Law and Policy; and the U.S. Department of Health and Human Services, Administration for Children and Families, Region V.

Goal 1. Safety: Children are safe in their homes and while placed in substitute care settings.

Goal 2. Permanency: Children have permanency in their living situations; family relationships and connections are preserved.

Goal 3. Child Welfare Service Intervention: Families have enhanced capacity to provide for their children's needs as a result of improved practices.

Goal 4. Community Collaboration: Stakeholders jointly design and coordinate policies, practices, and services to improve child-well being.

Goal 5. Child Welfare Legislative Reform: State laws are modified to reduce fragmentation of child maltreatment definitions and improve consistency of child welfare practices statewide.

Goal 6. Licensing: Children are safe while placed in substitute care settings due to increased oversight of placement providers.

The foundation of Ohio's child protective services (CPS) practice is the Comprehensive Assessment and Planning Model – Interim Solution (CAPMIS). As a result, action steps involving various aspects of the CAPMIS protocol were identified to achieve Goals 1, 2, and 3. Caseworkers use CAPMIS to support and document decisions related to children's safety, permanence, and well-being throughout the life of the case (i.e., assessment/investigation, service planning, removal, and reunification). The protocol is comprised of several tools including: a Safety Assessment; a Safety Plan; a Family Assessment; an Ongoing Case Assessment/Investigation; a Specialized Assessment; a Case Plan, a Case Review; a Semi-annual Administrative Review (SAR); and a Reunification Assessment.

Every tool within the CAPMIS protocol directs the worker to identify and address safety and risk issues; and each tool is designed to follow the logical progression of a CPS case by building upon the information identified and documented in the previous tool. For example, the safety assessment identifies the conditions in the family that must be brought under control to keep the child safe, and the safety plan requires the worker to identify how the safety plan activities will control the identified threats. The family assessment requires workers to re-visit any previously identified safety issues or safety plans and document any changes in the child's circumstances. The tool then focuses the worker on identification of risk issues and service needs. If the family's case is opened for ongoing CPS services, the regular case plan reviews require the worker to continually re-assess safety and risk and identify whether or not case services are adequately addressing the safety and risk issues identified in the assessments. A brief description of each tool is outlined below:

Safety Assessment – The Safety Assessment is designed to assist caseworkers in determining whether or not a child is currently safe. Safety planning is implemented immediately when the assessment of safety determines that a child is in need of immediate protection. This tool is completed within 4 days from the date the report was screened in for assessment/investigation.

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Safety Plan – The Safety Plan is a specific and concrete strategy for controlling threats of serious harm to a child (ren) or supplementing protective capacities, which is implemented immediately when a family's protective capacities are not sufficient to manage immediate safety threats for at least one child in the family. There are three types of Safety Plans: In-Home Safety Plan, Out-of-Home Safety Plan, and Legally Authorized Out-of-Home Placement. Once the decision is made that a Safety Plan is necessary, the Safety Plan is immediately developed and implemented.

In-Home and Out-of-Home Safety Plans are voluntary written agreements between the PCSA and the parent, guardian, or custodian. These types of Safety Plans do not change the legal custody status of the child (ren). The Safety Plan is developed using the JFS 01409, "Comprehensive Assessment and Planning Model - I.S., Safety Plan for Children," and implemented with the cooperation and approval of the parents, guardians, or custodians.

A Legally Authorized Out-of-Home Placement is an option utilized when either the parent, guardian, or custodian will not or cannot agree to an In-Home or Out-of-Home Safety Plan or there is a lack of services to control the identified threats of serious harm or to supplement protective capacities and removal from the home is the only intervention to ensure child safety. A Legally Authorized Out-of-Home Placement changes the custody of the child (ren) and may or may not be a voluntary agreement. An "Agreement for Temporary Custody of Child" (JFS 01645) is considered a Legally Authorized Out-of-Home Placement Safety Plan. Completion of the JFS 01409 is not required to document safety planning in a legally authorized out-of-home placement.

If, through the ongoing assessment of safety (e.g., through home visits and/or family contacts which are not done in conjunction with a child abuse/neglect report), a threat of serious harm is identified, or protective capacities of the parent, guardian, or custodian change such that a child (ren) is no longer safe in the home without intervention, a Safety Plan must be developed immediately. The Safety Re-Assessment contained in the Case Review tool (Section 2A and B) can be used in lieu of the Safety Assessment tool. However, in this situation, nothing prohibits a caseworker from completing the Safety Assessment instead of the Safety Re-Assessment.

Family Assessment – The Family Assessment assists caseworkers with the review of child safety; the identification of the family's risk contributors, non risk contributors, strengths; and the assessment of risk. The actuarial risk assessment classifies families according to how likely they are to maltreat or re-maltreat their children. The information collected in the Family Assessment will guide workers in determining which cases should be opened for ongoing protective services, establishing case plan goals, service needs, and responsibilities of each party listed on the case plan.

Specialized Assessment/Investigation – Specialized Assessment/Investigation activities are conducted by a PCSA when the child abuse or neglect report involves an alleged perpetrator who meets one or more of the following criteria:

- Is responsible for the care of a child in an out-of-home care setting as defined in rule 5101:2-1-01 of the Administrative Code (e.g., a school teacher).
- Is a person responsible for a child's care in out-of-home care as defined in section 2151.011 of the Revised Code (e.g., a day camp counselor, a foster parent, a pre-finalized adoptive parent, an employee of a residential facility, or a licensed/approved child care provider or facility).
- Has access to the child by virtue of his/her employment or affiliation with an institution (e.g., a Boy/Girl Scout leader).

Case Plan – Case Planning is the process of developing a comprehensive action plan with the family for services and activities to effect change in the family to resolve safety threats, enhance protective capacities, reduce risk, and strengthen family functioning. It addresses the contributing factors that have led to the abuse and/or neglect of the child. Case plans provide a clear and specific guide for the

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caseworker and the family in order to change individuals' behaviors and the conditions that negatively influence safety, risk, and family functioning.

Information obtained through the Family Assessment informs what changes need to occur via case planning in order to resolve safety threats, reduce risk, and/or to enhance child well-being. A Family Assessment must be completed prior to the development of a case plan.

All case planning activities are outlined in the Case Plan. Case plans must be developed when services are provided to the child and one of the following occurs:

- In-home supportive services have been agreed upon by the parent.
- The court requests the PCSA to prepare a case plan when the child and his/her parent, guardian, or custodian do not attend a detention or shelter care hearing and the complaint alleged that a child was an abused, neglected, or dependent child.
- The PCSA files a complaint pursuant to 2151.27 of the Revised Code alleging that the child is an abused, neglect, or dependent child.
- The PCSA has court ordered temporary custody or permanent custody of the child.
- The court orders the PCSA to provide protective supervision for a child living in his/her own home.
- The court orders the PCSA to place a child in a planned permanent living arrangement.

Case Review – The Case Review helps caseworkers re-evaluate safety, risk, strengths and needs; review the degree to which services have led to desired case outcomes; and make decisions regarding the status of the case.

Semiannual Administrative Review – This review focuses on case progress review, child well-being assessment, review of independent living services, review of substitute care, protective supervision, in-home supportive services issues, review of permanency planning, and a review of permanency goal status.

Reunification Assessment – The Reunification Assessment is a structured review to support and document the reunification decision. It includes a review of child safety, compliance with court orders, family conditions and dynamics, resources, strengths, protective capacities, child vulnerability and interventions needed. The Reunification Assessment entails a review of past and present safety, an assessment of reunification readiness, and the reunification decision.

One question at reunification is: Are there safety threats active within the family system that requires external control and, if so, what controls are necessary? At reunification, it is not necessary that all safety threats have been resolved, but rather that they have been altered or reduced to a level whereby control within the family system is probable. A child may be able to return to a home where threats of serious harm exist if these threats can be controlled within the family.

A Reunification Assessment is completed when reunification with the removal family is being considered and the child has been placed out of the home for 30 days or more. It is completed whether the child has been in a legally authorized out-of-home placement (including custody with relative/kin) or was placed out of the home as a result of an out-of-home safety plan regardless of the custody status. If the child has been placed out of the home for less than 30 days, the information regarding the child's reunification shall be captured in the Safety Re-Assessment section of the Family Assessment or Case Review. However, nothing prohibits the completion of a Reunification Assessment when a child has been placed out of the home for less than 30 days.

It should be noted that while Community Collaboration and Child Welfare Legislative Reform have been identified as distinct goals, each has a direct impact on ensuring the safety, permanency, and well-being

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of children and youth. Additionally, since Franklin County Children Services (FCCS) will always be one of the on-site counties for the CFSR Action Steps and Benchmarks for FCCS are included in Ohio's PIP.

Goal 1: Children are safe in their homes and while placed in substitute care settings.

Overview

In order to evaluate a State's ability to protect children from abuse and neglect, onsite performance indicators and statewide data indicators were established by HHS to determine statewide conformity. These performance indicators included:

- Timeliness of initiating investigations of reports of child maltreatment;
- Repeat maltreatment;
- Services to family to protect child(ren) in home and prevent removal; and
- Risk of harm.

Two data indicators used to evaluate State conformity included:

- Absence of maltreatment recurrence; and
- Absence of maltreatment of children in foster care by foster parents or facility staff.

Key Concerns

HHS identified the following areas of concern based on the onsite review and Ohio's performance toward achieving the national data standards for safety:

- In some cases, children remained at risk in the home when services were not provided or the services provided did not adequately address the safety issues in the family.
- In some cases, children remained at risk in the home when assessments were inconsistently conducted and safety issues were not identified.
- The State did not consistently meet timeframes for initiating investigations of non-emergency reports.
- Ohio did not achieve the National Standard for the Absence of Maltreatment Recurrence of 94.6% or greater; Ohio's rate was 93.5%.
- Ohio did not achieve the National Standard for Absence of Maltreatment of Child in Foster Care by Foster Parents or Facility Staff of 99.68% or greater; Ohio's rate was 99.49%. **(In 2008 Ohio achieved the National Standard at 99.69%)**

Response

Ohio has established the following three strategies to address the safety concerns noted above:

Strategy 1. *Improve staff skills and competencies in the assessment of child safety and risk in order to identify appropriate services to safely maintain children in their homes and prevent removal.*

Strategy 2. *Improve timeliness of initiation of assessments/investigations for non-emergency reports.*

Strategy 3. *Develop methods for improved response to repeat incidences of child maltreatment.*

Action Steps

Strategy 1. *Improve staff skills and competencies in the assessment of child safety and risk in order to identify appropriate services to safely maintain children in their homes and prevent removal.*

Two Action Steps have been identified to address Strategy 1. These Action Steps include:

- 1.1. Utilize case reviews and technical assistance to identify staff needs to improve the assessment of safety and risk through the application of the Comprehensive Assessment Planning Model - Interim Solution (CAPMIS): Safety Assessment, Safety Reassessment, Family Assessment, Ongoing Case Assessment Investigation, and Specialized Assessment Investigation Tools.**
- 1.2. Expand the number of counties safely maintaining children in their own homes through an alternative response to reports of child maltreatment.**

1.1. Utilize case reviews and technical assistance to identify staff needs to improve the assessment of safety and risk through the application of the Comprehensive Assessment Planning Model - Interim Solution (CAPMIS): Safety Assessment, Safety Reassessment, Family Assessment, Ongoing Case Assessment Investigation, and Specialized Assessment Investigation Tools.

The state has collected information from CPOE Stage 7 reviews about the counties' application of the following CAPMIS Tools: Safety Assessment, Safety Reassessment, Family Assessment, Ongoing Case Assessment Investigation and Specialized Assessment Investigation. This information will be analyzed to develop targeted training and technical assistance (TA) activities for improving caseworker assessment skills. ODJFS will also conduct case reviews of random samples of cases assigned to the Alternative Response pathway to gather similar information on application of the CAPMIS Tools for AR cases. Tools utilized by the workers for cases assigned to the Alternative Response pathway require the same assessment of safety and risk as the Traditional pathway. Concentrated focus of the analysis will be on the identification of child vulnerabilities and adults' protective capacities by workers when assessing for active safety threats. The analysis of the assessment of risk will focus on the identification of family strengths that mitigate risk and risk contributors by the workers. **(1.1.a. - 1.1.b.)**

ODJFS will work with the Ohio Child Welfare Training Program (OCWTP) to finalize the *CAPMIS Tool Kit: Assessing Safety and Risk throughout the Life of the Case*. The CAPMIS Tool Kit is a comprehensive collection of training activities, curricula and related materials that are being developed to address the assessment of safety and risk throughout the continuum of a CPS case utilizing the CAPMIS tools (forms). The activities and curricula will focus on the identification of core CAPMIS elements required to be assessed within the CAPMIS protocol. This Tool Kit will be able to be utilized by multiple professionals (i.e., trainers, coaches, line supervisors, agency administrators, state staff) through a variety of delivery strategies (e.g., in-class workshops, distance learning, individualized instruction, self-guided online learning.) in order to increase skill development of line staff and supervisors. **(1.1.c.)**

Once the Tool Kit is completed, ODJFS policy staff, in conjunction with the OCWTP coaches and trainers, will develop a training and technical assistance action plan. **(1.1.d.)** The Tool Kit content will be presented to PCSA staffs using the varied methods identified above, and evaluated for usefulness and effectiveness. Each CAPMIS tool requires supervisory approval which is reinforced through SACWIS functionality. The initial training will commence with the supervisory staff that are responsible for approving the tools. They will, in turn, be able to provide line workers with ongoing support and instruction. Additionally, the identified training methodology will provide the supervisors with the skills to utilize the CAPMIS Tool Kit with staff. An ongoing analysis regarding the effectiveness of trainings, the participant's transfer of learning, and impact on performance will occur. **(1.1e.-1.1.f.)**

CPOE Stage 8 reports and subsequent quality improvement and/or technical assistance plans (QIP/TAP) will become available after the summer of 2011. Some of the counties reviewed early in the stage will have had an opportunity to participate in Tool Kit presentations. The reports from Stage 8 reviews will be reviewed to determine if assessments have improved, or if additional training and TA needs are indicated. (1.1.g.-1.1.h.)

1.2. Expand the number of counties safely maintaining children in their own homes through an alternative response to reports of child maltreatment.
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Ohio will continue to work toward incorporating Alternative Response (AR) as a method of intervention within the state's child protection options. AR allows PCSAs to differentiate between accepted reports of child maltreatment by responding in a manner that is consistent with the level of risk and corresponds to the severity of the presenting concern. It is based upon the values of:

- Safety-focused intervention;
- Non-adversarial partnership with families;
- Collaboration with professionals;
- Research-based practice; and
- Family engagement and family-driven decision making.

It is important to recognize that Ohio has chosen to implement AR as a second pathway within its child protection system. Since AR exists within Ohio's established child protection system, the CAPMIS protocol is utilized for both the AR pathway as well as the "traditional" pathway. Every report assigned to the alternative response pathway comes to the CPS agency's attention first and foremost as a child maltreatment concern. Regardless of pathway assignment, the agency's primary responsibility is to ensure child safety. The CAPMIS protocol assists workers and supervisors with fulfilling that responsibility for both pathways and supports all of the AR values listed above throughout the life of a case. The technical assistance activities to improve workers' assessment skills outlined in Action Step 1.1 include alternative response because AR cases must be assessed as thoroughly as traditional cases. It is not until after the assessments are completed, that the worker can be assured of the severity of the safety and risk issues in the family. In addition, ongoing attention to changing family dynamics must be just as diligent. For those reasons, CAPMIS is applicable for all cases in the CPS system.

Under Ohio's existing AR programming:

- Ten sites now are offering alternative response as a permanent option for families;
- A wide range of training options and programming –including coaching and mentoring sessions-- have been developed to ensure that caseworkers and supervisors have ongoing access to the skills needed to work within Ohio's alternative response framework;
- SACWIS enhancements have been implemented to address agencies' case management needs while awaiting Ohio's final design;
- Six Ohio counties have been selected to contribute to the national body of knowledge as federal Quality Improvement Center study sites;
- Sites that have embraced the philosophical shift of alternative response also report improved community relationships, expanded networks of support for families, enhanced worker engagement, and creative solutions to age-old problems; and,
- Alternative Response has been identified as a top departmental priority by ODJFS Director Douglas Lumpkin.

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Early findings of Ohio's AR random assignment field study indicate positive outcomes that appear to track those realized in Minnesota and Missouri, including:

- No decrease in the safety of children whose families are assigned to an alternative response pathway.
- Enhanced satisfaction and engagement in services by families that have been assigned to an alternative response pathway.
- A reduction in the percentage of families that are re-reported to the child welfare system.
- A reduction in the percentage of families require child removal.
- A reduction in the depth of penetration within the child welfare system by families.

Certainly, these are improved outcomes for children and families which the state hopes to make available to families on a statewide basis through authorizing legislation. However, it is recognized that there will be a period of time required to enact a supporting state framework. Therefore, ODJFS has established a complementary expansion plan to accommodate additional jurisdictions who wish to make alternative response an option for families under the expanded pilot provisions that were enacted in Amended Substitute House Bill 1 (7/09). Additional sites must be added with an eye towards capacity (are there sufficient state resources to adequately prepare and support sites?) and fidelity (has the state sufficiently defined and identified essential characteristics to ensure that children are safe and families are supported in a manner that ensures ongoing child safety?).

Ohio is fortunate to have six counties selected to participate as a national study consortium site for the federal Quality Improvement Center on Differential Response: Clark, Champaign, Madison, Montgomery, Richland and Summit. Initial efforts will be directed to ensuring that these sites are integrated into Ohio's AR existing infrastructure, including its state advisory group, the Leadership Council. ODJFS has committed to coordinate and engage with these five new counties who, along with Clark, will be offering alternative response as an option for families by fall 2010. Ongoing support is essential to ensure that county programs remain consistent with state programming and that supports are available to ensure that county programming and staff have access to adequate technical assistance, training, and support.

Ohio's simultaneous expansion plan will select additional counties through a competitive Request for Application (RFA) that seeks counties who wish to offer alternative response as an option under the expansion authority granted through Amended Substitute House Bill 1. The RFA will include a Readiness Assessment Tool that counties are to use to identify the required components already are in place or that will need consideration prior to alternative response implementation. **(1.2. a.- 1.2.b.)**

Counties will be supported during the early planning and implementation stages by both technical and financial support. There is a period of organizational realignment in which agencies that are planning the implementation of new programming must engage. As described by the National Implementation Research Network on its website (<http://www.fpg.unc.edu/~nirn/>), these activities "...include ensuring the availability of funding streams, human resource strategies, and policy development as well as creating referral mechanisms, reporting frameworks, and outcome expectations. Additional resources may be needed to realign current staff, hire new staff members to meet the qualifications required by the program or practice, secure appropriate space, purchase needed technology (e.g., cell phones, computers), fund un-reimbursed time in meetings with stakeholders, and fund time for staff while they are in training. These activities and their associated "start up costs" are necessary first steps to begin any new human service endeavor, including the implementation of an evidence-based program or practice in a new community setting. ODJFS will identify discretionary grants and foundation funding to support sites' work. This includes continuation of the ongoing partnership between Ohio and Casey Family Programs to support implementation of Ohio-based Alternative Response programming. **(1.2.c.)**

Applications will be reviewed using criteria set forth in the RFA. Maximum rollout has been established at ten, although the number of sites that are selected will be determined on the basis of current capacity and the resources that are required by the size and location of applicants. A minimum of one county will be selected for this expansion effort. The dates of operation for expansion sites will be dependent upon the

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ability to schedule required training and support, as well as the ability to coordinate local stakeholders. It is hoped that applicants will join QIC sites by offering alternative response to families in the fall of 2010. Additional expansion opportunities may be considered at a later date. (1.2.d.- 1.2.e.)

Plans for statewide implementation and roll-out will be proceeding on a concurrent track, based on the finding of Ohio's studies. This work includes the full integration of competencies within the Ohio Child Welfare Training Program, development of statutory and policy framework, SACWIS enhancement, and service realignment if indicated. We hope in five years funding will be available to conduct a follow-up study on the families which participated in the pilot county study. The opportunity to revisit these families at a later point would give the Department additional information on the long term outcomes associated with this change in practice. (1.2.f.- 1.2.g.)

Ohio will continue its current vehicle for state-county collaborative identification of AR needs, the Leadership Council. It has been through this voting group representing each of the existing AR sites that program framework (including rules and guiding principles), technical assistance, SACWIS functionality, and other organizational support have been identified, prioritized and delivered. Through joint design between county agencies, AR sites and other participating stakeholders, the Leadership Council will be reconfigured to accommodate integration of new AR sites.

It is recognized that alternative response, together with CHIPS, proposes a significant philosophical shift in child welfare practice. The state's intent is to move purposefully and thoughtfully to implement change in a manner that protects children's safety, respects the rights of parents, and maintains program integrity. As Ohio first integrates expansion work to include 15 new sites, efforts concurrently will continue to identify and seek statutory authorization for full-statewide implementation. The enhancement of SACWIS functionality has enabled sites to document work within the AR pathway within Ohio's SACWIS system. As AR SACWIS functionality is extended to each of the 25 expansion sites, Ohio will monitor counties' utilization of alternate response as a viable approach for safely maintaining children within their own home. It is expected that AR programming will be an option for families statewide by the conclusion of Ohio's PIP. (1.2.h.- 1.2.i.)

Strategy 2. Improve timeliness of initiation of assessments/investigations for non-emergency reports.

Three Action Steps will be used to address Strategy 2. These include the following:

- 2.1. Develop best practice guidance on the role of report initiation in the assessment of safety and risk.**
- 2.2. Use baseline performance data to determine the gap between OAC requirements and FCCS performance on timeliness of initiation of assessments/investigations of non-emergency reports.**
- 2.3. Develop timely reports to assist PCSAs in tracking compliance with OAC requirements for initiation of child abuse/neglect investigations.**

2.1. Develop best practice guidance on the role of report initiation in the assessment of safety and risk.

Upon receiving a report that a child has been harmed or is at risk of harm, the agency is required to respond. The first contact, or initiation, of an assessment/investigation should provide the worker with enough pertinent information for the worker to have some assurance of the child's current safety status. If the report is not initiated with an attempt to see the child, the initiation activity should occur with someone with current knowledge of the child's situation. Ohio rule allows workers to initiate a report by calling back a referent, or talking with a collateral source that may or may not have seen the child.

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It is important for workers to understand that initiation of a child maltreatment report is more than a compliance activity. It is the beginning of the assessment/investigation, and as such, should inform the assessment of the child's safety – the first phase of the assessment/investigation. As part of the PIP, ODJFS will solicit information on evidence based practices on report initiation as a part of the assessment process from the National Resource Center on Child Protective Services and then seek their assistance in developing best practice guidance which will be incorporated into the *CPS Worker Manual*. Prior to finalization of the best practice guidance ODJFS will identify possible barriers or county needs regarding timely initiation from a select number of PCSAs. ODJFS will provide this information to PCSA staff through regional meetings or video-based presentations. (2.1.a. – 2.1.e.)

Information obtained from the county assessments and developed as part of the guidance will be presented to PCSA staff, and evaluated for usefulness and effectiveness. (2.1.f.)

2.2. Use baseline performance data to determine the gap between OAC requirements and FCCS performance on timeliness of initiation of assessments/investigations of non-emergency reports.
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CPOE Stage 7 data demonstrated a 90.8% compliance with initiation time frames for non-emergency reports. Of counties reviewed, 16 did not achieve 90% compliance. Results of the CFSS onsite review indicate FCCS' performance on initiation of investigations for non-emergency reports had an adverse impact on the overall results.

To address this strategy ODJFS and FCCS will review county data on responding to non-emergency reports, and developing a work plan to improve response time frames. Baselines for improvement will be established and feedback will be provided to FCCS on compliance with Ohio Administrative Code. Should quarterly measures for improvement not be met the Department will renegotiate performance improvement expectations. (2.2.a. – 2.2.e.)

2.3. Develop timely reports to assist PCSAs in tracking compliance with OAC requirements for initiation of child abuse/neglect investigations.

One of the more critical measures to assess a state's ability to protect children from abuse and neglect is the length of time it takes for caseworkers to initiate investigations (CFSS Item 1) after screening in a report. For this calculation, ACF uses the NCANDS data file, which contains data on reports that have concluded with a disposition (i.e., substantiated, indicated, or unsubstantiated). The average and median lengths of time for reports to be initiated is calculated. Because only reports with dispositions are used, reports which caseworkers have not initiated or have not concluded their investigation are excluded from the federal analysis. Therefore, the state's results will have a higher average mean to initiate than ACF's mean, and the state's median will be lower than the mean response time. ACF's results do not address the length of time it takes for initiation at other times. For instance, if caseworkers initiate 90% of the investigations within 24 hours, how many hours must pass before caseworkers initiate 95% of the investigations, or even 100%? The federal measure, which is a valuable indicator, provides no estimate on cases initiated at other times.

To effectively manage programs, administrators must know how long it takes caseworkers to initiate investigations over time, not just the mean or median times. To augment the federal analysis, Ohio will develop and use an event history analysis using the CPOE Stage 7 report type definitions. For emergency reports, which have a one-hour initiation requirement, Department staff will subtract the date/time of initiation from the date/time the county received the report. For non-emergency reports, which have a 24-hour initiation requirement, staff will subtract the date/time of initiation from the date/time the agency received the report. Consistent with the event history requirements (Singer & Willet, 2003), staff will substitute the date the file was extracted and flag any report not having an initiation time as censored. Reports with known initiation times will be flagged as uncensored. The event history analysis

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relies heavily on this censoring designation. A technical assistance component will be incorporated into the tool. (2.3.a. - 2.3.c.)

For each county and report type, the event history analysis will provide the cumulative percent of reports initiated from hour 0 to hour 700 for each quarter. With these results, a manager would identify when reports are least likely to be initiated timely. PCSA leaders need these analyses promptly to detect unintended initiation delays. To this end, ODJFS will incorporate these event history analyses in two web sites. For general public viewing, the aggregate analysis will be posted on the Supreme Court of Ohio's Summit on Children site (<http://www.summitonchildren.ohio.gov/cfsr/default.html>). More detailed information will be posted on the secure Business Information Channel (BIC) to allow agency administrators to obtain investigation-specific information, as well as data on supervisor and worker performance. The Department will also include this information in quarterly PIP progress reports.

Event history analysis can facilitate rapid problem identification and trigger program improvement. Another useful planning tool is statistical forecasting. With Statistical Forecasting, varieties of algorithms are applied to a data set to generate the predicted number of monthly reports based on the number of monthly reports received in the past. When forecasts are generated, historical counts are mathematically weighted by three components: cycles, trends and seasonality. Most county managers are unfamiliar with using statistical forecasts. To bridge this knowledge gap, the Department has incorporated a technical assistance component into the tool. (2.3.d.)

Although managers may use statistical forecasts to allocate resources, Department staff strongly recommend county directors work with the members of the county Summit Team (See Goal 4: Community Collaboration) to examine and modify these statistical forecasts based on shared knowledge of how the community and local programs will change over time. Because this is a difficult task, ODJFS has designed a tool to help them, entitled: "*Critical Questions for Managers.*" These questions have also been posted on <http://www.summitonchildren.ohio.gov/cfsr/default.html> to ensure accessibility to this resource. (2.3.d.)

Using data to modify programs can be challenging, but here is an example of blending Local County Summit Team knowledge with these statistical forecasts: The Local County Summit Team has a plan to implement an innovative program in the first quarter of 2010. The Summit Team estimates this new program will yield a decrease in the number of investigations by 1% in May 2010 and reach a maximum of 5% by October 2010. With that knowledge, the Summit Team modifies the statistical forecast to reflect what will occur in the future. The Summit Team may choose to use this revised forecast to estimate staffing for organizational alignment and refine budgets. Over time, the Summit Team compares the revised forecasts with the actual numbers. If the actual numbers are substantially different from the forecasts, the Summit Team will want to determine the driving factors for these differences and their long-term implications. For instance, was the new program, designed to reduce the number of investigations, perform as intended or will the new program need further modifications? Although the enhanced forecasts will still be imperfect when compared to the actual number of investigations, the Summit Team is empowered with greater capacity and speed to align and justify resources.

ODJFS will also provide forecasts on the number of investigations for each county on the Supreme Court's website and on BIC. The information on the SCO website will be refreshed throughout the year; the more detailed, county-specific information on BIC will be refreshed throughout the year and augmented to demonstrate forecast accuracy. (2.3.d.)

Strategy 3. *Develop methods for improved response to repeat incidences of child maltreatment.*

Two Action Steps are being implemented to address repeat incidences of maltreatment:

3.1. Produce data on recurrence of child maltreatment defined by the federal measure and event history analysis of recurrence.

3.2. Utilize data and case reviews to develop a plan to reduce the occurrence of repeat maltreatment.

3.1. Produce data on recurrence of child maltreatment defined by the federal measure and event history analysis of recurrence.

The topic of recurrence requires special analytic attention to uncover the complexities and guide efforts in developing feasible recommendations on what leaders can do to prevent recurrence. The federal measure (Item 2) is computed by selecting all substantiated or indicated child reports occurring in the first six months of the reporting period, and then monitoring those same children for a subsequent substantiated or indicated report during the second six-month period. Although the measure appears acceptable, several exigent weaknesses prevent using it for state and county policy development.

- There is a considerable lag between the observation and reporting times. Although the observation window is only six months, it takes over a year (from the time of the first report) before results are known. By that time, policies and procedures could have changed, and it will be another year before the results are widely available.
- How other variables affect the recurrence rate is unknown. Of prime interest are age; type of abuse or neglect; and types of services provided before, during, or after the case is opened.
- The federal analysis does not specify when recurrence is mostly like to occur. In other words, there is no differentiation between abuse that takes places within 30 days of the first report and 160 days of the first report. This distinction is vital for resource allocation and keeping children safe.

To improve knowledge on repeat maltreatment, ODJFS will develop an Abuse and Neglect Study which will identify the first substantiated/indicated report on cases that are not open at time of abuse, and then monitor for a second substantiated/indicated report. The covariance to be considered will be: county; age of victim; type of first report; type of abuse; case status at time of recurrence (open or closed); family structure (e.g., single parent head of household); risk assessment rating; race; and month of report. To control for multiple variables, ODJFS will use logistic regression. This method will allow managers to determine when recurrence is most likely to occur and the most powerful predictors. **(3.1.a.)**

ODJFS will publish the results on the Supreme Court of Ohio's website, and the Deputy Director of the Office of Families and Children will formally announce these in direct communications with the PCSA directors. A survey will be conducted by ODJFS on its usefulness two months following posting. **(3.1.b.)**

3.2. Utilize data and case reviews to develop a plan to reduce the occurrence of repeat maltreatment.

When a PCSA receives a subsequent report of child maltreatment on an ongoing protective services case, the assessment is documented on the CAPMIS Ongoing Case Assessment/Investigation Tool (OCAIT). The OCAIT includes a reassessment of safety threats, strengths and needs, and the actuarial risk elements, or in other words, the same type of information that was documented at the time of the initial report. An analysis of the OCAIT information enables workers and supervisors to determine if something was "missed" during the initial assessment, or if family dynamics impacting safety and risk have changed.

Improving workers' skills in gathering, documenting and analyzing information necessary to make decisions regarding child safety and risk is applicable at any stage of a case. Whether a case is in assessment/investigation or ongoing status, workers should have the skills to accurately identify safety and risk issues in order to address them through the provision of appropriate services. The CAPMIS Tool

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Kit and technical assistance activities mentioned under Strategy 1, will also address repeat incidences of child maltreatment by improving worker skills in assessment. [\(3.2.a. – 3.2.d.\)](#)

Technical Assistance Needed

- Technical Assistance is needed from the National Resource Center for Child Protective Services to obtain written information on report initiation that is consistent with Ohio's CAPMIS protocol which will assist Ohio in making the necessary revisions to the CPS Worker Manual addressing best practice for achieving timely initiation and its role in the assessment of safety and risk. Following receipt of this information Ohio may need further technical assistance during incorporation of the information into the CPS Worker Manual. [\(2.1.a.\)](#)

Goal 2: *Permanency: Children have permanency in their living situations; family relationships and connections are preserved.*

Overview

In order to evaluate Ohio's compliance, HHS examined the permanency and stability of children's living situations, and whether family relationships and connections were maintained. Onsite performance indicators used to assess these measures were:

- Relative placements;
- Placement with siblings;
- Proximity of foster care placement;
- Preserving connections;
- Relationship of child in care with parents;
- Visitation with parents and siblings in foster care;
- Foster care re-entries;
- Foster placement stability;
- Permanency goals, including other planned permanent living arrangements;
- Reunification, guardianship, or permanent placement with relatives; and
- Adoption.

Data indicators used to evaluate conformity included:

- Timeliness and permanency of reunification;
- Timeliness of adoptions;
- Permanency for children in foster care for extended time periods; and
- Placement stability.

Key Concerns

HHS identified the following key areas of concern based on the onsite review and Ohio's performance in achieving the established data indicators for permanency:

- In some cases, siblings were separated when it did not appear necessary to meet safety or service needs.
- There was a lack of consistency in the agency's efforts to maintain and strengthen the parent-child relationship while the children were in foster care.
- There was a lack of consistency in promoting visitation among siblings in foster care.
- Agency efforts to maintain the child's connection with extended family, culture, community and school were inconsistent.
- Agencies did not consistently seek or evaluate relatives, particularly fathers, as potential placement resources.
- In some cases, children re-entered foster care within 12 months of discharge from a previous placement in out of home care.
- In some cases, children experienced multiple placements.
- In some cases, placements were unstable and children experienced multiple, unplanned moves.
- The State did not consistently establish appropriate permanency goals in a timely manner.
- In some cases, the State did not make concerted efforts to achieve the goals of reunification, permanent placement with relatives, or guardianship in a timely manner, or provide the services necessary to support the goal of reunification.
- The State did not make consistent efforts to finalize adoptions timely.
- The State's efforts to ensure stable, long-term placements for children with the goal of OPPLA and to provide the necessary services to facilitate independent living for these children were inconsistent.

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- The State did not achieve the National Standard for Timeliness and Permanency of Reunification of 122.6 or higher; Ohio's composite score was 118.9. **(The AFCARS submission for 09B10A indicated Ohio exceeded the National Standard)**
- The State did not achieve the National Standard for Placement Stability of 101.5 or greater; Ohio's composite score was 99.4. **(Since the 2006b07a AFCARS submission Ohio has achieved and exceeded the National Standard)**
- The State did not achieve the National Standard for Timeliness of Adoptions of 106.4 or greater; Ohio's composite score was 98.7. **(In 2007 and then in 2009 Ohio achieved the National Standard)**
- The State did not achieve the National Standard for Permanency for Children in Foster Care of 121.7 or greater; Ohio's composite score was 116.4.

Response

Ohio has established the following four strategies to address the permanency concerns noted above:

Strategy 1. *Improve permanency planning process to develop appropriate and timely permanency plans for children.*

Strategy 2. *Improve placement resources and family visitation for children in foster care.*

Strategy 3. *Provide older youth and those aging out of foster care with needed supports and connections to achieve self-sufficiency.*

Strategy 4. *Increase staff skills and competencies in case planning and facilitating productive visits among parents, children, siblings, and others who play a critical role in achieving children's permanency plans.*

Action Steps

Strategy 1. *Improve permanency planning process to develop appropriate and timely permanency plans for children.*

Four Action Steps have been identified to address Strategy 1. These include the following:

- 1.1. **Utilize case reviews and technical assistance to identify staff needs in order to improve worker skills in permanency planning through the application of the Comprehensive Assessment Planning Model- Interim Solution (CAPMIS), with specific attention on the Case Plan, Case Review Tool, Reunification Assessment Tool, and Semi-annual Administrative Review Tool.**
- 1.2. **Develop improvements to enhance consistency and quality of permanency planning process.**
- 1.3. **Work with the Supreme Court of Ohio to address court processes, including the Termination of Parental Rights process and procedures, in order for children to have appropriate permanency goals established and achieved.**

1.4. Develop, implement and train on use of analytic tools within business intelligence environment for PCSA administrators to analyze and monitor data related to permanency planning and preserving connections.

1.1. Utilize case reviews and technical assistance to identify staff needs in order to improve worker skills in permanency planning through the application of the Comprehensive Assessment Planning Model- Interim Solution (CAPMIS), with specific attention on the Case Plan, Case Review Tool, Reunification Assessment Tool, and Semi-annual Administrative Review Tool.

One of the most significant outcomes from the CAPMIS design process was the development of tools specifically applicable to ongoing and substitute care cases. The assessment model used in Ohio prior to CAPMIS had a single risk assessment matrix that was used at every key decision-making point in the case (e.g., removal and reunification). The CAPMIS protocol is designed so that a Safety Assessment is required for every new report; and the Family Assessment, inclusive of the actuarial risk assessment, is completed only once during a case episode (i.e., intake through case closure). Although the case plan review tools require the worker to re-assess safety and risk throughout the life of the case, the protocol does not require completion of the original assessment tools or extensive documentation on factors and elements that are known to not be pertinent for a particular family. The protocol takes into account that the agency, presumably, has more in-depth knowledge of the family during the ongoing services stage than the intake worker would have had at the time of the initial assessment.

While workers are prompted to continually re-look at safety threats and risk factors, they also have the ability within SACWIS to cut and paste information from previous assessments and reviews. When workers use the copy functionality in lieu of documenting the re-assessment and analysis, key information on case progress or other changes in the family system may be lost. The case will appear to be in a holding pattern from one review period to the next, when in reality, subtle but significant changes may be occurring that could move the case toward permanency.

The CAPMIS Tool Kit and technical assistance activities mentioned under Goal 1 (Safety) Strategy 1, will also address permanency planning by improving worker skills in using the re-assessments of safety and risk to identify and document case progress, support adjustments to the case plan goal, and support adjustments to service planning as an approach to achieving timely permanency for children. Concentrated focus will be on the identification and provision of services identified to address the risk contributors. An analysis of the family's benefit and progress utilizing the identified services to mitigate risk in the family's progression towards permanency. The identified services are linked to the identified risk contributors of the family. The assessment of the family's progress in relation to the identified services and risk level guides the worker to evaluate the appropriateness of the identified case plan goal. For children removed from the home the review will also focus on the assessment of safety of the removal home to determine if the original safety threats resulting in the removal are present. The assessment of the "reunification readiness" of the parents and the child will be assessed as well as the identification and provision of services needed to maintain the reunification. The Case Review Tool incorporates the activities and services identified in the family's case plan; and requires that the worker assess if the services are appropriate for the family and if the family is progressing towards permanency. The identified services are linked to the identified risk contributors for the family. The assessment of the family's progress in relation to the identified services and risk level guides the worker to evaluate the appropriateness of the identified case plan goal. The available case plan goals are: maintain in own home/prevent removal, independent living, return the child(ren) to parent/guardian/or custodian (reunification), adoption, placement of child(ren) in a planned, permanent living arrangement, excluding adoption (PPLA). Additionally for children with the case plan goal of reunification, the Reunification Assessment should be completed regularly to assess if there are any active safety threats present in the removal home that are preventing the reunification as well as an assessment of reunification readiness of the child and the child's parent(s). This assessment of safety threats and reunification readiness should inform the worker of the effectiveness of current services provided to the family and the identified case plan goal. An ongoing analysis regarding the effectiveness of trainings, the participant's transfer of learning, and impact on performance will occur. (1.1.a. - 1.1.g.)

1.2. Develop improvements to enhance consistency and quality of permanency planning process.

FCCS has also targeted permanency as a local PIP objective. To address Strategy 1, FCCS will receive technical assistance and training from Casey Family Programs on values clarification about permanency planning. This will serve as a foundation for the transition required to improve the quality and consistency of permanency planning and to include permanency planning in the early stages in the life of a case. **(1.2.a.-1.2.b.)** In addition, FCCS and Casey Family Programs will develop and implement permanency roundtables targeting youth in PPLA. **(1.2.c.)** FCCS' hope is that there will be an increase in permanency for PPLA youth and improvement in Composite C-3.

In October 2009, thirteen staff from the FCCS Performance Improvement Department attended a five day training on Team Decision Making (TDM) for placement decisions sponsored by Casey. FCCS is currently working on securing a Casey approved trainer for additional training. FCCS will develop and implement a plan for incorporation of TDM for initial placement/initial consideration of placement within their Assessment/Investigation Department. An evaluation will be conducted on the effectiveness of TDM in improving the quality and consistency of permanency planning. **(1.2.d.-1.2.e.)**

1.3. Work with the Supreme Court of Ohio to address court processes, including the Termination of Parental Rights process and practices, in order for children to have appropriate permanency goals established and achieved.

Courts play a critical role in ensuring that each child's case is handled expeditiously and that safety, permanency, and well-being are paramount. The Supreme Court of Ohio (SCO) and ODJFS have identified activities to address court processes at multiple levels in order for children to have appropriate permanency goals established and achieved in a timely manner. Focus of attention will be on:

- Notice of Hearings
- Effectiveness and Content of Hearings
- Supporting Active Participation of Youth in Proceedings

Notice of Hearings

During the first CFSR, the SCO developed the *Dependency Docket Bench Cards for Ohio Family and Juvenile Court Judges and Magistrates* (Bench Cards). Bench Cards address: Preliminary Matters (Ex Parte Orders, Shelter Care/Preliminary Protective Hearing), Adjudicatory Hearing, Dispositional Hearing, Review Hearings, Case Plan Amendments and Appeals. Each Bench Card addresses requirements of Notice. The SCO will update the Bench Cards to provide additional guidance on proper notice of parties. As with existing cards, this will not only include content on existing regulations but best practices and rationale for a thorough and effective process. **(1.3.a.)** Additionally, the SCO Subcommittee on Legal Representation will develop a Model Motion template for attorneys. A template such as this not only assists attorneys to ensure that all relevant information is properly included (e.g. the range of parties to be notified), but establishes a judicial expectation for documentation and content that is acceptable to the court. **(1.3.c.)** The Ohio Judicial College will sponsor training for judicial officers on effective use of the Model Motion, linking the required content to the "best practice" in the updated Bench Cards. This session shall be provided when both activities have been completed so that content and practice can be linked. **(1.3.b. and 1.3.d.)**

Effectiveness and Content of Hearings

Several venues will address the content and effectiveness of hearings.

Dependency Docket Bench Cards for Ohio Family and Juvenile Court Judges and Magistrates – Will be updated to include information on the content and effectiveness of hearings. The *Dependency Docket*

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Bench Cards for Ohio Family and Juvenile Court Judges and Magistrates were developed to support judicial officers in their duty to provide comprehensive and timely judicial action in child welfare cases and to encourage best practices. Following is a listing of the Bench Cards:

- Ex Parte Orders – Order With or Without Complaint
- Shelter Care/Preliminary Protective Hearing
- Adjudicatory Hearing
- Dependency Docket Activity from Filing Through Disposition
- Dispositional Hearing
- Dispositional Hearing – Special Provisions for Protective Supervision
- Dispositional Hearing- Special Provisions for Temporary Custody
- Dispositional Hearing – Special Provisions for Legal Custody
- Dispositional Hearing- Special Provisions for Permanent Custody (Note: This is where special attention will be on Termination of Parental Rights)
- Dispositional Hearing- Special Provisions for Planned Permanent Living Arrangement
- Dependency Docket Post-Disposition Activity
- Review Hearings
- Review Hearings- Special Provisions for Child in Protective Supervision
- Review Hearings- Special Provisions for Child in Temporary Custody
- Review Hearings- Special Provisions for Child in Permanent Custody
- Review Hearings- Special Provisions for Child in Planned Permanent Living Arrangement
- Case Plan Amendments- Emergency Case Plan Amendments
- Case Plan Amendments- Non-Emergency Case Plan Amendments
- Appeals

Training will be provided for judicial officers when Bench Cards are updated. During this training Termination of Parental Rights will be addressed in review of information on Dispositional Hearing-Special Provisions for Permanent Custody. **(1.3.a. - 1.3.b.)**

Children, Families and the Courts: Ohio Bulletin -An issue of the Bulletin will focus on effective hearings. The bulletin will examine measurements that indicate “effective,” judicial activities that contribute to a meaningful hearing, and the content that should be covered during various hearings. Bulletins are posted on the SCO and are also distributed to all Ohio judicial officers, as well as a wide range other professionals who interact with Ohio’s courts on behalf of children. **(1.3.e.)**

Juvenile Judges Curriculum- A committee formed by the SCO’s Ohio Judicial College with membership from the Ohio Association of Juvenile Court Judges will develop a curriculum for new and experienced juvenile judges. The first step in this work will be to develop an evaluation plan of state judicial education utilizing the national “Implementation Guide to Effective Training Evaluations” developed by the National Council of Juvenile and Family Court Judges and the National Child Welfare Resource Center on Judicial and Legal Issues. Attention will be given to notice, timeliness of hearings, content of hearings, and engagement of youth. **(1.3.f.)**

Guardian ad litem (GAL) training – GALs play a critical role in hearings and ensuring children have appropriate permanency goals established. Ohio implemented new Rules of Superintendence that established standards of practice for GALs, as well as pre-service and annual in-service training requirements. This ongoing training continues to be made available to attorneys throughout the state without cost. ODJFS will continue to support the provision of GAL pre- and annual in-service training through the use of Ohio’s Title IV-E Interbranch Agreement. ODJFS will work to ensure that the concepts of permanency are integrated throughout the curriculum, with a topical focus addressing Effective Practices that Promote Permanency. **(1.3.g.)**

Legal Representation - Attention will also be given to exposing attorneys, GALs and prosecutors to best practices for the representation of children, parents and the agency in child welfare cases. SCO will

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provide a Symposium on Legal Representation. Law Schools will be engaged in helping plan the symposium. (1.3.h.)

Case flow Management – SCO will continue to offer “Improving Case flow Management in Child Abuse, Neglect and Dependency Cases” workshops which were initiated under the first CFSR PIP. The response to this workshop was positive and new court personnel have request they be re-offered. A minimum of two sessions will be offered to a maximum of six counties per session by the close of the PIP. Counties are required to participate as a community team to ensure that case flow issues are addressed throughout the continuum and that solutions are developed through a collaborative process. (1.3.i.)

Supporting Active Participation of Youth in Proceedings

ODJFS and SCO, through the Ohio Judicial College, will be sponsoring a Webinar for Ohio’s judicial officers to discuss the importance of facilitating youth participation in court proceedings and case planning. In addition to specific judicial processes and activities that support active involvement, this session will feature the voices of youth. Using representation from Ohio’s Youth Advisory Boards, this session will strive to effectively convey the difference that active participation can have upon a youth’s overall perception of the proceeding, as well as the impact that such involvement can have on positive outcomes. (1.3.j.)

1.4. Develop, implement and train on use of analytic tools within the business intelligence environment for PCSA administrators to analyze and monitor data related to permanency planning and preservation of connections.
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As practice strategies are developed, administrators have requested data tools to help them understand the characteristics of children in substitute care. Since many CFSR data profile measures are retrospective in design, managers should not use them for strategic planning, but rather to understand important dynamics in combination with robust analytic methods. For example, PCSAs could use local data profiles to:

- Identify specific areas needing attention, design targeted interventions, and then use proactive methods to monitor results;
- Understand unique performance patterns. (e.g., a county may find that many children fail on one specific measure and pass on several others. When common pass-fail patterns are noted, PCSA staff can initiate case reviews on a sample of those cases to learn subtle issues triggering failure); and
- Discover data entry errors and correct information in the reporting system.

Historically, the state produced county level profiles using SPSS syntax, a format which was limited in its analytical capacity. To maximize counties’ use of this information, the Department will provide the profiles in a more flexible reporting environment that will allow the PCSAs to:

- Review aggregated performance over time; and
- Drill-down to either a cluster of like-children or to a specific child.

ODJFS has augmented the SPSS code to create detailed child level reports across the permanency measures, and then loaded the data into a robust business intelligence tool (Cognos). The dynamic flexibility of having the data profiles in a business intelligence environment is that one can easily refine the analysis by adding age or race to the analysis to understand how groups of children are performing. If an administrator wishes to identify who the specific children are, with a click of a button, a child level report appears, identifying the children, demographic information, and how each child performs on each measure. Using business intelligence software triggers critical thinking, and PCSAs have begun to explore the relationship between and among the indicators. For instance, an agency may find that a large percent of children who passed C1.1 failed C4.2. When PCSAs understand the relationship between and

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among various indicators, knowledge of potential systemic issues deepens and local communities are empowered to address collateral problems associated with performance patterns.

The following analytic tools will be developed and posted on the Supreme Court of Ohio website and on ODJFS' Business Intelligence Channel: 1) CFSR Data Profile, by county; 2) Number of children entering care; 3) Length of Stay in Care; 4) Number of Reports and Investigations; 5) Re-entries to foster care (C1-4); 6) Length of Time to Adoption; 7) Children in care 17+ months, adopted by end of year; 8) Children in care 17+ months achieving legal freedom within 6 months; 9) Legally free children adopted in less than 12 months ; 10) Exits to permanency for children with TPR; and 11) Placement Stability of Children. **(1.4.a. – 1.4.f.)**

ODJFS will train and provide technical assistance to PCSAs on the use of the analytic tools and monitor utilization. **(1.4.g.-1.4.h.)**

Strategy 2. *Improve placement resources and family visitation for children in foster care.*

The following Action Step will be implemented to address Strategy 2:

2.1. <i>Revise policy and provide technical assistance to counties to support consistent use of relatives as a placement resource and family visitation of children in foster care.</i>
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Current Ohio Administrative Code (OAC) rules require agencies to make attempts to identify potential relative placements prior to placing a child in substitute care. After a child has been placed, however, the agency is not required to continually re-evaluate previously unapproved relatives as potential placement resources. Family situations and circumstances are constantly changing, and factors which previously caused a relative to be considered inappropriate for placement may be resolved after a child enters substitute care. Therefore in some instances, not re-visiting prior decisions regarding relative placements could unnecessarily delay permanency.

Although agencies are required by rule to make efforts to place siblings together, or to assure that there are visits between siblings when they are not placed together, there is not a specific requirement for a formalized visitation plan. Agencies often schedule family visits that include all children in the family on an informal basis. Although this does allow for ongoing contact between siblings who are placed separately, they may have no regular contact if the family visits are canceled, sporadic, or not held for an extended period of time.

OAC rules will be revised to require that agencies re-evaluate potential kin placement options at every semi-annual review of the case plan. In addition, provisions will be added to the rule that require agencies to have visitation plan activities specific to ongoing contact between siblings who are placed separately. Maintaining family connections, and evaluating relative placement options with the same frequency that reunification readiness is evaluated, will help to focus workers on the progress of the child's permanency plan. In addition, the visitation plan will be revised to specifically include siblings; and the review tools will be revised to include documentation of the ongoing work to identify an appropriate relative placement option for children awaiting permanency. Technical assistance will be provided to agencies relating to the new requirements. **(2.1.a. - 2.1.d.)**

Strategy 3. *Provide older youth and those aging out of foster care with needed supports and connections to achieve self-sufficiency.*

The following Action Step will be implemented to address Strategy 3:

3.1. Improve assessment and provision of Independent Living Services.

Ohio will provide technical assistance and training to agencies on the topic of engaging all youth eligible for independent living services in case planning activities. The training will stress the importance of working collaboratively with youth to assess individual service needs, develop independent living plans, determine post-emancipation plans (90 days prior to an agency's termination of custody), and maintaining/supporting connections for youth as a means of facilitating their successful transition to adulthood. **(3.1.a.)** ODJFS will seek technical assistance from the National Resource Center on Youth Development to: assist in providing this technical assistance, and assist ODJFS in developing a plan for building capacity to provide on-going technical assistance. **(3.1.a. – 3.1.b.)** In addition, existing youth advisory boards and adult supporters will be consulted on a periodic basis for their input on policies and practices that impact them. **(3.1.c.)** Youth advisory boards and local agencies will be contacted to obtain feedback regarding application of the TA and models provided. **(3.1.e.)**

To better determine technical assistance needs associated with improved services delivery and outcomes for youth, ODJFS has initiated efforts to implement mandated provisions of the National Youth Transition Database (NYTD) one year earlier than required. These efforts include implementation of policies to align Ohio's service requirements with those of NYTD, and SACWIS enhancements to document service provision. At biennial intervals, this information will be compiled and shared with stakeholders (e.g., local agencies, youth, and service providers) to identify and develop programming needed to promote successful transitions to adulthood. ODJFS will share the preliminary data reports with agencies from early NYTD implementation to monitor service provision **(3.1.d.)**

Strategy 4. *Increase staff skills and competencies in case planning and facilitating productive visits among parents, children, siblings, and others who play a critical role in achieving children's permanency plans.*

ODJFS has established the following Action Steps to address Strategy 4:

- 4.1. Develop best practice guidance regarding family connection preservation through quality visitations.**
- 4.2. Work with Fatherhood Commission to identify strategies to enhance caseworker and supervisor capacity and skills to effectively engage and support fathers' connection to children in care.**
- 4.3. Work with the Fatherhood Commission nine Program Grantees to connect services provided to fathers' who are involved with child welfare agencies.**

4.1. Develop best practice guidance regarding family connection preservation through quality visitations.

To improve the effectiveness of family visits toward achieving permanency, ODJFS will work with the National Resource Center for Permanency and Family Connections (NRC-PFC) to develop researched-based guidance on parent/child and sibling visitation including information on frequency, duration and location. The guidance will be incorporated into revisions being made to the *Child Protective Services Worker Manual* that is available to all CPS workers and supervisors throughout the state. In addition, ODJFS will provide technical assistance presentations that will be open to all children services agencies. ODJFS will survey participants to help evaluate the usefulness of the information provided. **(4.1.a. - 4.1.c.)**

4.2. Work with Fatherhood Commission to identify strategies to enhance caseworker and supervisor capacity and skills to effectively engage and support fathers' connection to children in care.

The Ohio Commission on Fatherhood is preparing to release an RFP seeking a vendor to develop a curriculum and conduct train-the-trainer workshops that will address values of workers toward fathers, strategies for engaging fathers, examining assets and differences, building trusting relationships, conducting placement/diligent searches, and contacting parental relatives as a placement option. It is envisioned that each topic will be offered through a series of train-the-trainer workshops.

ODJFS and the Ohio Commission on Fatherhood is requesting technical assistance from the National Resource Center for Family-Centered Practice and Permanency Planning and the National Quality Improvement Center on Non-Resident Fathers and the Child Welfare System to assist in the identification of training curriculum and fatherhood resources. (4.2.a.) ODJFS will provide input into the development of the train-the-trainer series to ensure relevant child welfare/father components are included. A training plan will be developed and implemented once curriculum is completed.(4.2.b. - 4.2.d.)

4.3. Work with the Fatherhood Commission nine Program Grantees to connect services provided to fathers' who are involved with child welfare agencies.

In 2007 Governor Ted Strickland re-established the Ohio Commission on Fatherhood. The purpose of the Commission includes promoting programs which:

- Build the parenting skills of fathers;
- Provide employment- related services to low income, non-custodial fathers;
- Prevent premature fatherhood;
- Provide services to fathers who are inmates in, or have just been released from, imprisonment in a state correctional or detention facility so that they are able to maintain or reestablish family relationships;
- Reconcile fathers with their families; and
- Increase public awareness of the critical role that fathers play.

On July 23, 2009 the Ohio Commission on Fatherhood released an RFP to support local fatherhood initiatives. The following agencies were awarded funding and commenced activities in March 2010:

Forever Dads

Zanesville, Muskingum County since 2006. ForeverDads is located in Economic Region 10. The ComeUNITY Project, a program of ForeverDads funded through the Ohio Commission on Fatherhood will serve Muskingum, Coshocton and Guernsey Counties with their programs and training support. The target population will be low income fathers and high school males. The goal is to equip men to become responsible fathers and reduce premature fatherhood.

Using the National Best Practice and Promising Fatherhood Curriculums in a variety of training programs *Forever Dads* will strengthen father and family relationships, provide outcomes of gainful employment and/or entrepreneurial services to fulfill financial responsibility while increasing public awareness of the critical role fathers contribute to stability.

Talbert House

Based in Hamilton County, Talbert House is a community-wide nonprofit network of social services with over 30 proven programs focusing on prevention, assessment, treatment and reintegration.

The Fatherhood Project assists men in their efforts to become the responsible, committed, and nurturing fathers they want to be. The Fatherhood Project helps dads strengthen their connection and involvement in the lives of their children by providing parenting classes, fatherhood coaching, and legal services aimed

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at reducing employment and parenting barriers. In addition, the program sponsors father/child recreational activities as well as fellowship and support events for dads.

Columbus Urban League “Father 2 Father”

Based in Franklin County, the Columbus Urban League will provide assistance for men to become instinctive, responsible, and nurturing fathers they desire to be. They will also be educating the general public on the unique, important, and essential role that fathers play in the development of their children.

Program services include a classroom curriculum that develops the attitudes and skills needed for responsible fatherhood and helping men discover and cultivate their nurturing potential. Assistance with issues regarding child support, visitation, and family law matters, ultimately advocating for policy change/implementation that make these very areas more father friendly.

Charisma Community Connection “Summit County Fatherhood Initiative”

Based in Summit County, SCFI’s mission is to work collaboratively with Father and Family Service providers to increase the involvement of Fathers in the lives of their children. They will work on: decreasing substance and alcohol abuse, developing employment skills, innovative parenting techniques; decreasing domestic violence and improving children’s overall physical, social and academic performance.

Program services include 24/7 Dad A.M. and 24/7 Dad P.M., Quenching the Father Thirst: Developing a Dad, and National Partnership for Community Leadership-Fatherhood Development: A Curriculum for Young Fathers. Partnering organization; Father and Son's of Northeastern Ohio; Fathers for Families and Friends Northern Summit County; Man 2 Man Brother 2 Brother Akron Ohio; S.L.A.A.P Start Living And Acting Positive; 100-Black Men Akron Chapter; The Interdenominational Ministerial Alliance; also Stark, Portage, partner. Summit County Fatherhood Initiative is also a partner agency with; OPNFF Ohio Practitioner Network of Fathers and Families; NFI, National Fatherhood Initiative.

WSOS Community Action Commission, Inc. “Very Important Padre” (VIP)

Based in Fremont, Ohio WSOS will serve Defiance, Erie, Fulton, Henry, Lucas, Ottawa, Sandusky, Williams and Wood counties. WSOS will serve fathers with:

24/7 Dad, Life Skills Training, Self Esteem Enhancement, Work Ethic Training, Money Smart-Financial Training, Wrap Around Planning and PASSAGES Domestic Violence Prevention program. All fathers will participate in understanding and negotiating Child Support Enforcement.

Action for Children

Based in Franklin County, the agency will target and focus on primarily African American fathers to increase visitation by non-custodial fathers, improve relations with child’s custodial parent, improve child’s academic performance, increase safety in the child’s custodial home and in father’s home, and decrease family violence.

Action for Children will use the Art of Positive Parenting, Daddy’s Promise Pledge, Parents Who Parent Separately, and Parenting Made Easier.

The Ohio State University Extension Office in Greene County

The Ohio State University Extension Office in Greene County will include Champaign, Clark Clinton, Drake, Miami, Montgomery, Preble, and Shelby counties. The Extension office will provide:

Fathering classes to better enable fathers to foster caring relationships, meaningful interactions, and understand the important role fathers play in the lives of their children.

Life skills to fathers including money management, employability skills, nutrition, ServSafe(tm) Employee training, and diabetes education.

Programming to reduce domestic violence

The opportunity to initiate mediation and visitation with their children.

Cuyahoga County Fatherhood Initiative

The Cuyahoga County Fatherhood Initiative (CCFI) seeks to strengthen families in their community by encouraging fathers to play a more active role in nurturing and raising their children. The Fatherhood Initiative responds to the social concerns regarding "father absence" by providing fathers with services to prepare them to meet the psychological and financial needs of their children. The CCFI also seeks to increase public awareness of the importance of father involvement. The Initiative has four primary goals: (1) Promote public awareness of the importance of the role of fathers; (2) Improve current county service delivery to fathers and provide linkages to other public systems; (3) Fund fatherhood related programs on the county level; and (4) Hold an annual conference to promote healthy father-child relationships.

The mission of the CCFI is to significantly increase the number of children in the county that grow up with a responsible father involved in their lives.

HARCATUS Head Start

HARCATUS Head Start's project, **FatherTime**, is an enrichment program for fathers and father figures. The program strives to build the father and child relationships through the proven nationally accredited curriculum "The Nurturing Fathers Program", field trips and providing hands-on-activities for both fathers and children. FatherTime includes weekly sessions and breakout sessions for both fathers and children. The sessions end with a father/child closing interactive activity, which is chosen by the children. In addition to the weekly programming, Father-Child kick off events and a Father-Child Summit will be held. Key objectives of FatherTime are: to improve self-esteem of both children and fathers, increase participation by both children and their fathers in community based activities, decrease involvement in substance abuse and alcohol abuse, and an increase in literacy competencies and employment attainment. The program objectives will be measured by using the Adult-Adolescent Parent Inventory.

As part of Ohio's PIP, ODJFS will work with the Ohio Commission on Fatherhood and their selected grantees to facilitate the linkage between PCSAs and the Fatherhood grantees to connect services provided to fathers' who are involve in the child welfare system. **(4.3.a. – 4.3.b.)** Fatherhood program participants will be administered the Adult-Adolescent Parenting Inventory (AAPI) which assesses parenting and child-rearing attitudes of adult and adolescent parent and non-parent populations. Based on the known behaviors of abusive parents, responses to the AAPI provide an index of risk for practicing parenting behaviors known to contribute to the maltreatment of children. Responses to the AAPI target five specific parenting and child-rearing behaviors:

- Inappropriate Expectations of Children;
- Parental Lack of Empathy;
- Strong Belief in the Use of Corporal Punishment;
- Reversing Parent-Child Roles; and
- Oppressing Children's Power and Independence.

To determine the degree of attitudinal change, the AAPI will be re-administered to participants following completion of the program.

Technical Assistance Needed

- Obtain technical assistance from NRC-YD to: assist public children services agencies enhance efforts to: 1) identify youth eligible for Independent Living Services; 2) engage youth in assessment and development of independent living plans; 3) develop appropriate independent living plans; 4) maintain/support important connections for youth and assist ODJFS in developing a plan for building capacity in the provision of technical assistance. **(3.1.a. - 3.1.b.)**
- Obtain technical assistance from the National Resource Center for Permanency and Family Connections to obtain written information on parent/child and sibling visitation and assist ODJFS

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in developing technical assistance and best practice guidance on parent/child and sibling visitation to be incorporated in the *CPS Worker Manual*. (4.1.a.)

- Obtain technical assistance from the National Resource Center for Permanency and Family Connections and the National Quality Improvement Center on Non-Resident Fathers and the Child Welfare System to assist in the identification of training curriculum and fatherhood resources. (4.2.a.)

Goal 3: *Child Welfare Service Intervention: Families have enhanced capacity to provide for their children's needs as a result of improved practices.*

Overview

During the onsite review, services provided by child welfare agencies were evaluated to assess effectiveness in the areas of Safety, Permanency and Child Well-Being. Additionally, these services were also considered when determining compliance with the Systemic Factor of Services Array.

Key Concerns

HHS identified the following areas of concern based upon the onsite review, interviews with State and Local Stakeholders, and information contained in the Statewide Assessment:

- The State did not consistently assess or meet the service needs of parents, particularly fathers.
- In some cases, agencies did not make diligent efforts to involve parents and/or children, when appropriate, in the case planning process.
- In some cases, caseworker visits with children were of insufficient frequency and quality.
- In some cases, the frequency and quality of caseworker visits with parents, especially fathers, was insufficient to monitor the safety and well-being of the child or promote attainment of case goals.
- In some cases, children remained at risk in the home when the services provided did not adequately address the safety issues of the family.
- In some cases, children remained at risk when needed services were not provided or were not sufficient.
- In some cases, services necessary to support reunification were not provided.
- In some cases, a lack of available services to address children's special needs resulted in delayed adoptions.
- In some cases, agencies did not make concerted efforts to provide Independent Living Services for older youth in care.

Response

Ohio has established the following two strategies to address the above noted concerns:

Strategy 1. *Increase provision of family-driven services by ensuring case plans are developed, implemented, and reviewed in partnership with families and children, including fathers and paternal relatives.*

Strategy 2. *Increase staff skills and competencies in conducting frequent and quality visits with custodial parents, non-custodial parents, children who are in their own homes, and children who are in substitute care, to assure children's safety and well-being, to assure their needs are being met, and to assure that there is ongoing permanency planning.*

Strategy 3. *Improve staff skills and competencies in family search and engagement techniques and preserving family connections.*

Action Steps

To achieve Strategy 1 the following Action Steps will be used:

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- 1.1. Utilize data and case reviews to develop a plan to improve family-driven service identification and implementation through case planning and reviews for both in-home and substitute care cases.**
- 1.2. Improve the provision of training to county agencies through the development of a learning management system that can be accessed and reviewed through information and technology resources.**
- 1.3. FCCS will establish uniform expectations for conducting facilitated 90-day reviews and SARs to promote safety, permanency, and well-being.**
- 1.4. FCCS will evaluate the impact of supervisors in the QA peer review process including improvement in the quality and timeliness of CAPMIS Tools.**

1.1. Utilize data and case reviews to develop a plan to improve family-driven service identification and implementation through case planning and reviews for both in-home and substitute care cases.

ODJFS will provide CAPMIS-based TA to PCSAs to enhance caseworkers' assessment skills, and establish appropriate services to increase safety and reduce risks to children. CAPMIS supports family engagement during the planning and review phases of each case. The model is designed to support workers' working with families to identify current issues and available resources. As a result, case plans are individualized and specific services are targeted to the family's concerns. Overtime, the case plan is jointly reviewed by the family and caseworker to assess the effectiveness of the services rendered and to revise the case plan if needed.

Throughout CAPMIS implementation, the state has collected information about the counties' application of the model from CPOE Stage 7 reviews. This information will be analyzed to develop targeted training and technical assistance (TA) activities for improving caseworker service planning and review skills. ODJFS will also conduct case reviews of random samples of cases assigned to the Alternative Response pathway to gather similar information on application of CAPMIS for AR cases. Concentrated focus will be on the identification and provision of services identified with and/or by family members to address the family's risk contributors. The analysis of the family's benefit and progress as identified by the family's perception and their involvement in the reviews and service planning will be conducted. For children removed from the home, the assessment of the "reunification readiness" of the parents and the child will be assessed as well as the identification and provision of services needed to maintain the reunification. The family's involvement with the identification of the service needs and planning will be reviewed. The assessment of safety threats and reunification readiness should inform the worker of the effectiveness of current services provided to the family and the identified case plan goal. **(1.1.a. - 1.1.b.)**

ODJFS will work with the Ohio Child Welfare Training Program (OCWTP) to finalize the *CAPMIS Tool Kit: Assessing Safety and Risk throughout the Life of the Case*. The CAPMIS Tool Kit is a comprehensive collection of training activities, curricula and related materials that are being developed to address the case management for the continuum of a CPS case utilizing the CAPMIS tools (forms). The activities and curricula will be used to enhance workers' skills in engagement and case planning for in-home and substitute care cases through synthesizing case information (e.g., safety threats, risks, protective capacities and strengths) to identify service needs; as well as effective use of case plan reviews to facilitate case progress. This Tool Kit will be able to be utilized by multiple professionals (i.e., trainers, coaches, line supervisors, agency administrators, state staff, etc.) through a variety of delivery strategies (e.g., in-class workshops, distance learning, individualized instruction, and self-guided online learning.) in order to increase skill development of line staff and supervisors. **(1.1.c.)**

Once the Tool Kit is completed, ODJFS policy staff, in conjunction with the OCWTP coaches and trainers, will develop a training and technical assistance action plan. **(1.1.d.)** The Tool Kit content will be presented to PCSA staffs using the varied methods identified above, and evaluated for usefulness and

effectiveness. Each CAPMIS tool requires supervisory approval which is reinforced through SACWIS functionality. The initial training will commence with the supervisory staff that are responsible for approving the tools. They will, in turn, be able to provide line workers with ongoing support and instruction. Additionally, the identified training methodology will provide the supervisors with the skills to utilize the CAPMIS Tool Kit with staff. An ongoing analysis regarding the effectiveness of trainings, the participant's transfer of learning, and impact on performance will occur. (1.1.e. - 1.1.f.)

CPOE Stage 8 reports and subsequent quality improvement and/or technical assistance plans (QIP/TAP) will become available after the summer of 2011. Some of the counties reviewed early in the stage will have had an opportunity to participate in Tool Kit presentations. The reports from CPOE Stage 8 reviews will be analyzed to determine if assessments have improved, or if additional training and TA needs are indicated. (1.1.g.-1.1.h.)

1.2. Improve the provision of training to county agencies through the development of a learning management system that can be accessed and reviewed through information and technology resources.

ODJFS will work with the OCWTP to develop a variety of learning methodologies to assist in skill development of PCSA staff (e.g., in-class workshops with distance learning technologies and self-administered online learning) through the OCWTP learning management system, E-Track. (1.2.a.) The OCWTP E-Track will be roll out to the 8 OCTWP Regional Training Centers, the facilitators, the PCSAs and finally caregivers. (1.2.b. - 1.2.g.) The use of this learning management system will assist ODJFS in offering new methods of learning to agencies in order to accomplish benchmarks outlined in this Goal as well as other Goals in the PIP.

1.3. FCCS will establish uniform expectations for conducting facilitated 90-day reviews and SARs to promote safety, permanency, and well-being.

FCCS will conduct an assessment of current 90-day reviews and SARs. Based on findings from their review the agency will develop a guidance document that defines the quality standards for facilitated 90-day reviews and SARs. (1.3.a. - 1.3.b.) Upon completion of training on the guidance document, FCCS will be evaluating the new expectations by collecting review observation ratings from meeting participants. (1.3.c. - 1.3.d.)

1.4. FCCS will evaluate the impact of supervisors in the QA peer review process including improvement in the quality and timeliness of CAPMIS Tools.

In 2009, FCCS transitioned from a peer review process to an inclusive review process, in which front-line supervisors assessed the quality and accuracy of work completed by caseworkers. This change has resulted in improved supervisory processes which assist caseworkers in achieving higher quality standards. Formal evaluation of this new process will be completed through the use of a quality assessment tool and reviews of the number of CAPMIS items completed (e.g., safety assessments, reunification assessments) and the timeliness of those activities.(1.4.a. - 1.4.b.) An assessment of the impact of supervisory involvement in the QA peer review process will also occur. (1.4.c.)

Strategy 2. Increase staff skills and competencies in conducting frequent and quality visits with custodial parents, non-custodial parents, children who are in their own homes, and children who are in substitute care, to assure children's safety and well-being, to assure their needs are being met, and to assure that there is ongoing permanency planning.

This strategy will be addressed through the following Action Steps:

- 2.1. **Increase staff skills and competencies in conducting visits with children in their own homes to assure their safety and well-being and to assure that their needs are being met.**
- 2.2. **Increase staff skills and competencies in conducting visits with children in substitute care to assure their safety and well-being, to assure that their needs are being met, and to assure that there is ongoing planning for permanency for the child.**
- 2.3. **Increase staff skills and competencies in conducting visits with parents in in-home and substitute care cases to assure the safety and well-being of children, to assure that their needs are being met, and to assure that there is ongoing planning for permanency for the child.**

2.1. Increase staff skills and competencies in conducting visits with children in their own homes to assure their safety and well-being and to assure that their needs are being met.

To improve the effectiveness of family visits toward achieving permanency, ODJFS will work with the National Resource Center for Permanency and Connections, the National Resource Center for Child Protective Services and the National Resource Center for In-Home Services to obtain evidence-based practices on worker/child visitation. **(2.1.a.)** This information will be used to develop a best practice guidance which will be incorporated into revisions being made to the *Child Protective Services Worker Manual* that is available to all CPS workers and supervisors throughout the state. ODJFS will provide technical assistance presentations that will be open to PCSAs on this information. ODJFS will survey participants to help evaluate the usefulness of the information provided. **(2.1.b. - 2.1.c.)**

2.2. Increase staff skills and competencies in conducting visits with children in substitute care to assure their safety and well-being, to assure that their needs are being met, and to assure that there is ongoing planning for permanency for the child.

ODJFS requested technical assistance from the National Resource Center for Permanency and Family Connections and the National Resource Center for Youth Development to partner to provide a statewide session on conducting visits with children in substitute care, preferably onsite or via videoconference, for PCSAs. This session would include presenters from one or two other states who have improved their performance in regard to conducting visits with children in substitute care and include one of the youth presenters from the National Child Welfare Resource Center to provide a youth's perspective regarding the importance of quality of worker/child/youth the visits. Additionally, ODJFS is requesting follow-up technical assistance to develop a plan for capacity building. Following plan development implementation of the plan will commence. **(2.2.a.- 2.2.b.)**

ODJFS will utilize data reviews and CPOE reports to monitor agency performance regarding visits with children in substitute care. **(2.2.c.)**

2.3. Increase staff skills and competencies in conducting visits with parents in in-home and substitute care cases to assure the safety and well-being of children, to assure that their needs are being met, and to assure that there is ongoing planning for permanency for the child.

Foundation level information regarding caseworker visits to client family homes is currently contained in the Ohio Child Welfare Training Program (OCWTP) caseworker and supervisor core workshops which are provided to all new caseworkers and casework supervisors, respectively. The OCWTP's *2009-2010 Targeted Data Collection to Inform Training Needs Assessment* found that workers need additional support for developing skills in conducting home visits. OCWTP will build upon core level foundation knowledge with the following training interventions.

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First, OCWTP will enhance existing training strategies in Supervisory Core I: *Casework Supervision*. This workshop includes a series of checklists of topics to discuss during various supervisory meetings with staff, including a checklist for supervisory case conferences with staff. OCWTP will add topics specific to preparing caseworkers for home visits, and de-briefing with them after home visits to that checklist. These checklists would essentially become an informal protocol for ensuring consistent, monitoring and support for quality casework home visits. **(2.3.a.)**

Secondly OCWTP will enhance the existing learning lab which follows Supervisor Core Module 1: Casework Supervision. This learning lab uses the Frontline video “Failure to Protect: The Case of Logan Marr” to stimulate discussion and examination of a supervisor’s role in guiding, monitoring, and consulting with caseworkers regarding their work with families. OCWTP will add discussion questions specific to developing supervisors’ skills in helping workers conduct quality home visits, and asking specific questions to gather specific, accurate information from workers following home visits. **(2.3.b.)**

Third, OCWTP will develop a distance learning curriculum, *Effective Use of Home Visits*. Content will include aspects of home visits such as determining the purpose of the visit, re-assessing children’s safety during every home visit, checking progress on case plan completion and engaging parents in developing strategies for overcoming barriers, ensuring staff safety during home visits, documenting home visits, maintaining parent’s interest in completing case plan activities, and how to debrief with the supervisor following the home visit. Components of the distance learning curriculum will be adapted for “stand alone” use in a variety of training methods such as learning labs, coaching opportunities, and self study that can be conducted by supervisors during unit meetings or case conferences, or by trainers during individual or group coaching sessions. The curriculum will also include links to various resources on conducting successful home visits, and addressing common child welfare issues (such as substance abuse or domestic violence) during home visits. The distance learning curriculum will be developed in Articulate format, and housed on the OCWTP website, for easy accessibility to child welfare staff throughout Ohio. **(2.3.c. – 2.3.e.)**

Need for this training will be assessed through a variety of training needs assessment methods including Regional Training Center staff discussion with staff from constituent agencies, review of county CPOE data, and individual training needs assessments. Pilots of the distance learning curriculum will occur in selected PCSAs, and supervisors will be trained on how to use the “stand alone” adapted components. **(2.3.f.)** OCWTP will evaluate the effectiveness of curriculum and the “stand alone” components and revise them as needed. **(2.3.g.)** The availability of the distance learning curriculum, *Effective Use of Home Visits* will be promoted via the OCWTP website and through meetings conducted by the eight Regional Training Centers with their assigned counties. **(2.3.h.)**

Strategy 3. *Improve staff skills and competencies in family search and engagement techniques and in preserving family connections.*

This strategy will be addressed through the following Action Steps:

- 3.1. Improve identification of family members through family search and engagement techniques.**
- 3.2. Improve preservation of family connections through better planning and engagement of family members.**

3.1. Improve identification of family members through family search and engagement techniques.

The Ohio Child Welfare Training Program, Northeast Ohio Regional Training Center (NEORTC) in collaboration with the National Resource Center on Permanency and Family Connections will offer a Training of Trainer workshop on September 20, 2010 and September 21, 2010 to fourteen (14) PCSAs

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served by NEORTC. The fourteen agencies served by the region include Medium-Small (1), Medium (2), Large (5) and Metro (6) counties. The trainers for the workshop, Donald Koenig and Patti Renfro, will be creating a listserv for continued contact with participants and will also provide coaching and mentoring. **(3.1.a. - 3.1. b.)** Following the training participants will return to their counties to offer the training to agency staff. NEORTC will convene a work group to discuss lessons learned and develop recommendations for dissemination of information. **(3.1.c.)** Since this region has such diversity in terms of agency size the results of implementation efforts, it is believed, would be applicable statewide.

Additionally, ODJFS will work with the Ohio Child Welfare Training Program to develop and pilot a one-hour asynchronous online course on the foundational components of a process to conduct family search and engagement throughout the life of a child welfare case. The course will describe technologies and strategies to search for, engage, and fully involve family members and kin to promote permanence for children in out-of-home care. The course will outline five skill sets necessary for FSE; searching, engaging, developing a kin permanency team, exploring connections, and sustaining connections, and will describe four activities for each skill set. **(3.1.d.)**

3.2. Improve preservation of family connections through better planning and engagement of family members.

Implementation research indicates that coaching is a worthwhile investment for PCSAs wanting to ensure that staff use the skills learned in training when they return to the field. A 95% gain is found in skill use on the job when learners are coached after training, compared to only a 5% gain without coaching (Joyce and Showers, 2002). During OCWTP's recent targeted training needs data collection process, focus groups consistently voiced interest in, and a need for coaching. OCWTP recruits coaches from current and recently retired child welfare practitioners and directors, selected because their specialty skills and experience match specific coaching needs identified by a PCSA. Each coach completes a six-hour Training for Coaches course, which teaches coaching skills and strategies that help learners improve their practice skills.

The OCTWP Regional Training Centers (RTCs) coordinate all requests for coaching services. Coaches develop a coaching plan with the learner and his or her immediate supervisor and coaches maintain documentation, provide a summary of the coaching experience, and create a developmental plan for the learner at the final session.

OCWTP has developed coaching interventions in several particular competency areas. They include Core-level skills, such as engaging families; visitation; working with relatives and extended families; family assessment, including the use of CAPMIS; case planning; and case documentation.

ODJFS will work with OCWTP to strengthen the OCWTP Coaching Program's capacity to provide in-the-field coaching on a variety of engagement skills which can result in improving a worker's ability to preserve family connections through better planning and engagement of family members.

OCWTP will engage in the following activities:

1) Identify and prepare coaches who are specialists in engagement:

- Poll RTCs and current practitioners for potential coaches skilled in engaging families and children in collaborative partnerships. **(3.2.a.)**
- Enroll identified coaches in the 6-hour Training for Coaches course. **(3.2. e.)**
- Provide a Training on Content session to familiarize selected coaches with specific coaching strategies to enhance engagement. **(3.2.f.)**

2) Develop coaching strategies to enhance engagement skills:

- Research existing skill-building resources and tools from other systems and determine which resources and tools are applicable to Ohio. **(3.2.b.)**

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- Make any Ohio-specific adaptations to selected resources and tools. **(3.2.c.)**
- Develop engagement skill-building resources and tools to help caseworkers involve children and families in (a) identifying strengths and needs, (b) identifying services and service providers, (c) establishing goals in case plans, (d) evaluating progress toward goals, and (e) discussing the case plan in case planning meetings. **(3.2.d.)**

3) Implement a program of in-county coaching on engagement skills throughout the state:

- Promote availability of coaching to enhance engagement skills through the OCWTP website and through meetings conducted by the eight Regional Training Centers with their assigned counties. **(3.2.g.)**
- Select at least three PCSAs to pilot coaching interventions to address engagement skills. **(3.2.h.)**
- Collect and analyze outcome measures of piloted coaching interventions (develop clear learning objectives and competencies and develop tool for assessing transfer training indicators for piloted coaching interventions.) **(3.2.i.)**

Technical Assistance Needed

- Obtain technical assistance from the National Resource Center for Permanency and Family Connections, the National Resource Center for Child Protective Services, and the National Resource Center on In-Home Services to obtain written information on child/worker visitation and assist ODJFS in developing technical assistance and best practice guidance on child/worker visitation to be incorporated in the *CPS Worker Manual*. **(2.1.)**
- Obtain technical assistance from the National Resource Center for Permanency and Family Connections and the National Resource Center for Youth Development to partner to provide a statewide session on worker/child/youth visits, preferably onsite or via videoconference, for PCSAs. The desire is for this session to include presenters from one or two other states who have improved their performance in regard to conducting visits with children in substitute care and include one of the youth presenters from the National Child Welfare Resource Center to provide a youth's perspective regarding the importance of the quality of the visits. Additionally, ODJFS is requesting follow-up technical assistance to develop a plan for capacity building. **(2.2.)**
- Obtain technical assistance from the National Resource Center for Permanency and Family Connections to offer a Training of Trainer workshop on Creating Family Connections and Permanence and provide follow-up coaching and mentoring to workshop participants. **(3.1.a.) (already approved)**

Goal 4: *Community Collaboration: Stakeholders jointly design and coordinate policies, practices, and services to improve child-well being.*

Overview

Round 2 CFSSR findings identify the strong partnerships among state child-serving agencies, the courts, local agencies and service providers as a solid foundation for advancing needed improvements to Ohio's child welfare system. Throughout the process, these entities have supported the state's CFSSR efforts. Because multiple priorities challenge each of these systems, Ohio's Round 2 PIP efforts must be streamlined and coordinated. In addition, the state's significant fiscal constraints demand a collaborative approach to reduce fragmentation and duplication of scarce resources. Therefore, Ohio's PIP and CFSP feature an integrated model of initiatives designed to better address the multiple needs of families involved with the child welfare system.

Key Concerns

Assessment of children's educational, physical (including dental), and mental health needs; as well as the provision of needed services to address those needs were examined during the CFSSR review process. Based on the onsite review, interviews with state and local stakeholders and information contained in the CFSSR Statewide Assessment, HHS identified the following concerns:

- The State did not consistently ensure that children's educational needs were met.
- The state's efforts to assess and address physical health, dental health, and mental health needs of children receiving both foster care and in-home services were inconsistent.
- In some cases, services were not sufficiently accessible across the state, particularly mental health and substance abuse services.
- In some cases, services rendered to children and families were not individualized.

Response

Ohio established the following four strategies to address these concerns:

Strategy 1. Improve identification and statewide dissemination of practices which result in improved outcomes for children and families.

Strategy 2. Increase access to effective community-based treatment, including physical and behavioral health care, and family support services.

Strategy 3. Improve assessment of children's educational needs and the provision of services designed to address them.

Strategy 4. Decrease fragmentation of policies and procedures impacting youth who are aging out of care.

Action Steps

Strategy 1. *Improve identification and statewide dissemination of practices which result in improved outcomes for children and families.*

The following Action Step will be used to address Strategy 1:

1.1. Provide local partners with child welfare data and information about best practices to facilitate improved outcomes and promote peer learning opportunities.

ODJFS will continue to work with the Supreme Court of Ohio and Ohio Family and Children First to implement Strategy 1. Information, including the Cabinet's priorities for children's programming and CFSR performance data, will be distributed quarterly to sister agencies, PCSAs, local courts, and Family and Children First Councils. This information will serve as a foundation for community planning to address the multiple needs of families who come to the attention of local child welfare agencies.

During the PIP development process, the Supreme Court of Ohio established a CFSR page on the Summit on Children website. This link, <http://www.summitonchildren.ohio.gov/cfsr/default.html> provides general information regarding the CFSRs; highlights the Review's relevance to multiple systems; contains information regarding preferred practices; and provides state and county-specific data analyses of the following child welfare elements:

- Length-of-Stay,
- Children in Custody at Month's End,
- Reunification and Re-entry,
- Children in Care Longer than One Year,
- Using Data to Control Costs,
- Point in-Time Forecasts of Children in Care, and
- Forecasts on the Number of Children Entering Care Each Month.

Confidential, child-specific data will also be made available to PCSAs through the ODJFS Business Intelligence Channel (BIC). These data profiles enable agency staff to determine the unique child characteristics which impact local CFSR performance. As part of the Round 2 PIP activities, ODJFS' Technical Assistance Specialists will provide guidance to PCSAs on use of local data for monitoring and program planning purposes. **(1.1.e.)**

The Ohio Family and Children First Website, <http://www.fcf.ohio.gov/> also features information concerning the CFSR and priorities for children's programming. In October 2009, the Cabinet finalized its strategic plan and priorities for state fiscal years 10 and 11. This document, which was distributed statewide, highlights Ohio's CFSR Program Improvement Plan as one of those priorities: <http://www.fcf.ohio.gov/dotAsset/9348.pdf>. In recognition that CFSRs require states ensure the provision of needed services to families involved in the child welfare system, the Cabinet Council voted to serve as the "Sister Agency Advisory Council" for Ohio's CFSR work in the spring of 2009. This decision reflects the shared commitment of Ohio's child-serving agencies to meeting the federal CFSR goals. These agencies include the Ohio Departments of: Job and Family Services (Offices of Ohio Health Plans-Medicaid, Families and Children); Mental Health; Alcohol and Drug Addiction Services; Health; Mental Retardation and Developmental Disabilities; Education; Youth Services; and Aging; as well as the Ohio Rehabilitation Services Commission, the Governor's Office of Faith and Community-Based Initiatives, and the Ohio Fatherhood Commission. **(1.1.a. and 1.1.d.)**

Chief Justice Moyer convened the Second Summit on Children during the PIP approval process. Held on November 12-13, 2009, the Summit provided local, multi-disciplinary teams the opportunity to participate in solution-focused learning labs designed to address barriers to child safety, permanency and well-being. Specific topics were selected based on the most frequently cited concerns raised during the First Lady's visits to local Family and Children First Councils and the 2008 Summit. While the learning labs were

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facilitated by a topic expert, the peer exchange of ideas to generate effective responses and highlight successful programs was the purpose of this activity. Suggested solutions were recorded and will be distributed to each participant in the coming weeks. Topics included:

<p style="text-align: center;">Funding</p>	<ul style="list-style-type: none"> • Leveraging local funds • Coping with the escalating cost of services • Flexible funding • Countering TANF reductions
<p style="text-align: center;">Systemic Issues</p>	<ul style="list-style-type: none"> • Establishing a shared vision • Developing/maintaining a continuum of care in this economic climate • Measuring outcomes/data • Connecting data systems • Reducing staff turnover
<p style="text-align: center;">Behavioral Health</p>	<ul style="list-style-type: none"> • Access to services • Placement prevention/intensive home-based services • Early screening for mental health and developmental needs • Application of trauma-informed care
<p style="text-align: center;">Education</p>	<ul style="list-style-type: none"> • Increase graduation rates and academic performance • Engaging youth who do not adapt to traditional education • Engaging families and building • Community partnerships • Creating safe schools and healthy communities • Supporting children with autism spectrum disorders and their families
<p style="text-align: center;">Building and Sustaining Local Planning Teams</p>	<ul style="list-style-type: none"> • Developing a high-functioning Family and Children First Council • Engaging all partners • Integrating Summit and HB 289 plans • Developing leadership
<p style="text-align: center;">Health</p>	<ul style="list-style-type: none"> • Access to health care • Timely screening and coordination of care • Teen pregnancy • Prevention and prenatal care
<p style="text-align: center;">Out-of-Home Care</p>	<ul style="list-style-type: none"> • Supporting kinship programs • Ensuring the sufficient availability of foster homes • Short-term residential/step-down care • Timely adoption of children in permanent custody

<p style="text-align: center;">Youth in Court</p>	<ul style="list-style-type: none"> • Truancy • Violent youth crime • Alternatives to incarceration/detention • Disproportionate minority contact
<p style="text-align: center;">Transitioning Youth Out of the System</p>	<ul style="list-style-type: none"> • Youth employment/WIA • Housing • Health care needs • Post-secondary education

Financial and resource support for the Summit was provided through federal grant funding and by Casey Family Programs. Additionally, technical assistance was provided to Summit planners from the National Resource Center for the Recruitment and Retention of Foster and Adoptive Parents and the National Resource Center for Child Welfare Data and Technology.

In November 2009, county teams and state partners reported the progress made toward addressing the most frequently cited needs and barriers. A common county request was that the State avoids duplication in the establishment of multiple planning teams. In response, the State Summit Planning Team coordinated its work with the Ohio Family and Children First Cabinet agencies. At the Summit, First Lady Frances Strickland, who chairs OFCF, described the shared goals of aligning services and supports for Ohio’s families. County planning teams are also being encouraged to merge with existing Family and Children First Councils or other community groups of similar intent. **(1.1.b - 1.1.c.)**

Strategy 2. Increase access to effective community-based treatment, including physical and behavioral health care, and family support services.

To address Strategy 2, the following Action Steps were established:

- 2.1. Continue to work collaboratively with the OFCF Cabinet Council to assess gaps in needed services and to develop inter-agency strategies to effectively address them.
- 2.2. Provide parent advocates to families receiving local service coordination in order to improve access to services and decrease the need for out-of-home care placement.
- 2.3. FCCS will secure evidence-based service contracts using pooled funds from ADAMH, Juvenile Court, and FCCS.
- 2.4. Identify and address health care issues.

<p>2.1. Continue to work collaboratively with the OFCF Cabinet Council to assess gaps in needed services and to develop inter-agency strategies to effectively address them.</p>
<p>2.2. Provide parent advocates to families receiving local service coordination in order to improve access to services and decrease the need for out-of-home care placement.</p>

The OFCF Cabinet’s *System of Care* (SOC) initiative (previously known as *Access to Better Care- ABC*) reflects the state’s cross-system commitment to implementing a coordinated continuum of services and supports for children and families with an emphasis on behavioral healthcare. With limited funding in this biennium, the Cabinet’s support for this initiative reflects an incremental approach to providing a

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comprehensive array of needed services for Ohio's children and families. Ohio's SOC initiative strives to promote local system collaboration, avoid duplication of services, and invest in effective services and supports for children and families most in need. Cross-system project priorities were established to:

- Increase access to behavioral health services for children involved in juvenile court, child welfare, childcare, education and/or primary health care systems;
- Decrease incidence of out-of-home placements made solely for the purpose of meeting the behavioral health needs of children or youth;
- Increase school attendance and academic achievement;
- Improve family stability;
- Strengthen family advocacy and parent engagement;
- Increase collaboration and accountability among child-serving agencies; and
- Align and target resources to increase Ohio's capacity to serve children and families with behavioral health needs.

To realize these priorities, state agencies established inter-agency program and funding agreements to support SOC program components. Funding sources include:

- **ODJFS – IV-B funds** appropriated to local Family and Children First Councils to provide non-clinical, family-centered services and supports necessary to successfully maintain children and youth (ages 0 through 21) with multi-system needs in the community, helping to mitigate the risk of out of home placement. These funds, combined with those contributed by **DYS, ODADAS and ODD** also support the services provided by Parent Advocacy Connection (PAC) to assist families in navigating multiple systems to secure help for their children. [\(2.1.a., 2.2.\)](#)
- **ODJFS – Child Care Quality federal funds** allocated to ADAMH/CMH Boards to support the Early Childhood Mental Health Consultant services to early childhood providers and families of young children. The program's objectives are to build protective factors in young children, increase parents' skills and promote the competencies of early childhood providers. Children (ages 0-6 years) who are at risk for abuse, neglect and poor social/emotional health are targeted populations for these programs.
- **ODMH - Children's Community Behavioral Health General Revenue Funds** allocated to ADAMH/CMH./ADAS Boards to support clinical intervention and treatment that address local gaps in treatment services. This component of SOC focuses on the provision of effective community-based services needed to maintain children and youth (ages 0 through 17) in their homes.
- **ODMH/ODYS – Behavioral Health/Juvenile Justice projects** provide competitively bid funds to ADAMH/CMH for programs designed to divert juvenile justice youth with mental health issues away from detention centers and toward community mental health and substance abuse treatment.

In order to meet the families' needs more effectively, these projects are required to be culturally competent, home and community based, child and family focused, strength based, and accountable; demonstrate interagency collaboration; and have families as partners. [\(2.1.a.\)](#)

2.3. FCCS will secure evidence-based service contracts using pooled funds from ADAMH, Juvenile Court, and FCCS.
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In recognition that meeting the needs of children and families in the child welfare system requires the availability of high-quality substance abuse and mental health services, Franklin County is working to build an integrated system of care. To do so, FCCS will pool funds with the ADAMH Board of Franklin County and the Juvenile Court to provide evidence-based behavioral health care services to families involved with the child welfare system. Evidence based contracts will be awarded through a Request for Proposal process and community collaboration contracts will be tracked to report on services provided through these contracts. [\(2.3.a. – 2.3.c.\)](#)

2.4. Identify and address health care issues.

ODJFS has embarked on several initiatives to increase access to care, improve the quality of assessments and treatment, and enhance health care service delivery. Partners in this work include: ODJFS - Office of Ohio Health Plans; ODH - Division of Family and Community Services (Bureau for Children with Medical Handicaps; Bureau of Early Intervention Services, and the Bureau of Oral Health Services); The Ohio Association of Community Health Centers; the Ohio Association of Health Plans; the Ohio Chapter of the American Academy of Pediatrics; the Center for Health Care Quality at Cincinnati Children's Hospital Medical Center; ODMH; Ohio Family and Children First; and ODE. These projects include:

- **The Ohio Child Health Improvement Partnership Program (OCHIP)**

Ohio has been selected as one of five pilot states to participate in a project to establish a sustainable infrastructure to support measurable health care improvements for all children and families in Ohio. This partnership model is designed to improve outcomes for children through statewide collaboration. The model supports physicians' efforts to improve care for children by providing local infrastructure and resources for quality improvement. The National Initiative for Children's Healthcare Quality (NICHQ) and the Institute for Health Care Improvement (IHI) support these projects.

OCHIP goals:

- Measurably improve health care for the approximate 880,000 Ohio children less than six years of age via standardized developmental screening, assessment and follow up care (note: expansion beyond the Medicaid population);
- Develop enduring statewide partnerships that work collaboratively to achieve measurable and dramatic improvements in the health outcomes of Ohio's children; and
- Use these partnerships to accelerate healthcare improvements for multiple health conditions (e.g., asthma, ADHD, children with special healthcare needs, maternal depression, substance abuse, autism).

- **Ohio Family and Children First Inter-Departmental Workgroup**

A multi-departmental workgroup is being established under the auspices of the OFCF to specifically explore health care issues for children in foster care, and design a coordinated approach to addressing them. The need for this group was identified following a presentation to the Deputy Directors by Dr. Philip Scribano and Yvette McGee-Brown of the Columbus Nationwide Children's Hospital, Casey Family Programs, and Dr. Abraham Bergman of Seattle, Washington in June 2009. Recommendations of this committee will further inform implementation of Ohio's PIP and Fostering Connections plan. (2.4.a.)

- **Availability of Health Care: Community Health Centers**

"Community Health Centers" refer to diverse public and non-profit organizations and programs that receive federal funding under section 330 of the Public Health Service (PHS) Act, as amended by the Health Centers Consolidated Act of 1996 (P.L. 104-299) and the Safety Net Amendments of 2002. These include: Community Health Centers, Migrant Health Centers, Health Care for the Homeless Health Centers, and Primary Care Public Housing Health Centers. These health centers are characterized by five essential elements which differentiate them from other providers. The centers must:

- Be located in or serve a high need community, i.e. "medically underserved areas" or "medically underserved populations;"
- Provide comprehensive primary care services as well as supportive services, such as translation and transportation services, that promote access to health care;
- Make services available to all residents of their service areas, with fees adjusted upon

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- patients' ability to pay;
- Be governed by a community board with a majority of members health center patients; and,
- Meet other performance and accountability requirements regarding their administrative, clinical, and financial operations.

Services required of Federally Qualified Health Centers include:

Primary Health Care Services	Required
Primary Care for All Life-cycle Ages	Required on-site or under arrangement
Basic Lab	Required on-site or under arrangement
Emergency Care	Required on-site or under arrangement
Radiological Services	Required on-site or under arrangement
Pharmacy	Required on-site or under arrangement
Preventive Health	Required on-site or under arrangement
Preventive Dental	Required on-site or under arrangement
Transportation	Required on-site or under arrangement
Case Management	Required on-site or under arrangement
Dental Screening for Children	Required on-site or under arrangement
After Hours Care	Required
Hospital/Specialty Care	Required by clinic staff or under arrangement

As part of Ohio's PIP, ODJFS will increase caseworker awareness of free and low cost health care to families through distribution of materials on Community Health Centers. [\(2.4.b.\)](#)

- **Availability of Dental Care**

Specialized dental programs have been designed to increase accessibility to oral health care in Ohio. Some of these include:

- **School Programs:**
 - 1) The Bureau of Oral Health Services assists local agencies with implementing and maintaining school-based dental sealant programs. With parental consent, teams of dental hygienists and dental assistants place sealants on children's teeth in accordance with a dentist's written instructions.
 - 2) The Fluoride Mouth Rinse Program (FMRP) helps to prevent tooth decay and is available to elementary schools in non-fluoridated communities and/or those that serve a majority of students from low-income families.
- **Dental OPTIONS (Ohio Partnership To Improve Oral health through access to Needed Services)** is a program offered by the Ohio Dental Association in partnership with the ODH to assist Ohioans with special health care needs and/or financial barriers to obtain dental care. Eligible patients are matched with volunteer OPTIONS dentists who have agreed to reduce fees.
- **Dental Treatment Programs in Ohio** provides dental treatment services and is generally operated by local health departments, health centers, hospitals and other community-based organizations. These programs offer sliding fee schedules or reduced fees.
- **Healthy Start/ Healthy Families** is one of Ohio's Medicaid programs through which children (up to age 19) and pregnant women can obtain low cost dental care.
- **Dentist Shortage Areas and Loan Repayment Programs** allow general dentists and dental hygienists working in underserved areas to apply for repayment of school loans related to their professional training.

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As part of Ohio's PIP, ODJFS will work with the Ohio Department of Health to increase awareness and promote the use of these dental programs by families involved with local child welfare agencies. (2.4.c.)

- **Medicaid Enrollment of Youth Aging Out of Care**

In January 2008, ODJFS extended free Medicaid coverage to youth, up to the age of 21, who age out of foster care/public independent living services. To implement this program, the Department's Office of Ohio Health Plans (Medicaid) established a rule that requires Independent Living caseworkers to enroll youth in the appropriate Medicaid program as part of their transition from care. To ensure uninterrupted coverage the II worker completes the JFS 1958 "Referral to Medicaid" form and submits it to the County Department of Job and Family Services (CDJFS) in a timely manner, preferably 30 days prior to emancipation.

To improve local practices, ODJFS held a joint video conference for CDJFSs and PCSAs regarding processes needed to increase Medicaid enrollment for of transitioning youth. In addition, the Office of Families and Children recently issued a procedure letter regarding requirements related to Fostering Connections and best practices on transitioning.

As part of Ohio's PIP, ODJFS will monitor Medicaid enrollment of transitioning youth, and work with PCSAO and local PCSAs to increase youth and caseworker awareness of this benefit. (2.4.d.)

Strategy 3. *Improve assessment of children's educational needs and the provision of services designed to address them.*

To address Strategy 3 the following Action Step was established:

3.1. Work collaboratively with partner agencies to address the non-academic barriers to student success.

ODJFS will:

- A) Promote an integrated network of educationally-based support services which address the non-academic barriers to school success; and
- B) Improve access to IEP-related services for children who are Medicaid eligible.

A. Support Services

Over the last three years, 12 effective and promising Ohio-based school mental health initiatives have been rigorously screened and selected for inclusion in the *Ohio Mental Health Network for School Success (OMHNSS) Effective Practice Registry*. During FY2010, a subset of five of these programs will be identified through a competitive application process to receive technical assistance and consultation focused on ensuring effective mental health services to youth with serious emotional disturbance (SED). The TA will focus on strategies for ensuring this population has access to uninterrupted, effective services through school/community partnerships. TA topic areas will include:

- Strategies to enhance school/community partnerships;
- Strong family engagement;
- Identification and referral processes for SED students;
- Identification and referral processes for SED youth with trauma-related problems;
- Linkage to community services for students with SED;
- Selection of culturally competent and evidenced-based practices specifically appropriate for youth with SED; and
- Data: collection, interpretation, and data-driven decision making.

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The enhanced services have been designed to counter fragmentation, reflect the diversity of the local communities within which the programs are operating, and promote the sustainability of effective interventions. The project's goal of improving access to needed services for these youth and their families will be realized through the increased coordination of local resources.

The five selected school mental health programs will be evaluated on the ability to demonstrate positive treatment outcomes for the youth enrolled, and increased capacity to serve the SED population. Specific evaluation components will include:

- School-community connectivity of resources and services for the SED population;
- Self Study of service mapping;
- Evaluation of funding strategies and program resources;
- Evaluation of capacity expansion for services to SED students; and
- Documentation of individual student outcomes

Effective practice outcomes will also be disseminated through existing OMHNSS networking outlets to facilitate seamless, responsive services to SED youth and their families. **(3.1.a.)**

B. Individualized Education Plans

The Medicaid School Program (MSP) serves Medicaid eligible children between the ages of 0-21. The program permits reimbursement of allowable services which are identified on the child's individualized education plan (IEP) and provided in the school setting. Approved school providers can receive reimbursement for:

- Direct services delivered to eligible children with an IEP, or those undergoing evaluation for disability;
- Targeted Case Management for children with developmental disabilities;
- Administrative claiming; and
- Limited transportation services.

MSP is administered jointly by ODJFS' Office of Ohio Health Plans and ODE. PIP activities will center on monitoring the number of school districts which apply and/or approved to be Medicaid providers, and increasing the awareness of this funding option by PCSAs located in these districts. **(3.1.b.)**

Strategy 4. Decrease fragmentation of policies and procedures impacting youth who are aging out of care.

The following Action Step was established to address Strategy 4:

4.1. Work with the OFCF Cabinet to align services targeting transition-age youth to reduce fragmentation and promote program participation.
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ODJFS will continue to work with Ohio Family and Children First to identify various state department programs which target transition-age youth (TAY) in order to identify areas of duplication or gaps in services. Following review, recommendations for alignment and consolidation of TAY resources, policies and services will be made to the Family and Children First Cabinet Council. Multi-system initiatives being addressed to date include:

- ODMH's "National Policy Academy on Transition-age Youth;"
- ODJFS' WIA "Shared Vision" workforce development project, and initiatives designed to address the unique needs of children aging out of the foster care system;

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- ODMRDD's "Transition from School to Adulthood" program;
- The Interagency Council on Homelessness and Housing;
- ODH's Bureau for Children with Medical Handicaps' coordination teams;
- ODYS' re-entry initiatives;
- ODADAS' aftercare services for young adults; and
- ODE's Career-based Intervention Programs, "Ohio Secondary Transition for Students with Disabilities" grant project, and Career-Technical Education programs directed toward serving special populations.

Additional information re: OFCF's efforts targeting TAY is available via:

<http://www.fcf.ohio.gov/dotAsset/9350.pdf> (4.1.a. - 4.1.b.)

In addition, efforts continue to increase youths' access to employment training opportunities. In Ohio, local control and decision-making are maximized through an effective state and local partnership that fosters continuous improvement of the workforce development system. The WIA framework is designed to meet the needs of employers, job seekers and those who want to advance their careers. Employment and training services target adults, dislocated workers and youth. Services are provided through local One-Stop Centers.

Children aging out of foster care are one of the target populations for the federal WIA "Shared Youth Vision" program. There are currently 18 WIA Youth Employment Programs in Ohio. Program staff provide support and guidance to local youth councils in identifying funding sources; labor market, employment, and training information; developing programs and activities; formulating plans; and building partnerships. In addition, OFCF recently reconfigured regional office sites to mirror those of the Ohio Department of Development. This realignment, which facilitates greater interface between the various transition-age youth projects and local WIA programs, will be a targeted activity of PIP. (4.1.c.)

Goal 5: *Child Welfare Legislative Reform: State laws are modified to reduce fragmentation of child maltreatment definitions and improve consistency of child welfare practice statewide.*

Overview

ODJFS and the Supreme Court of Ohio (SCO) have maintained an eleven year partnership to jointly address matters that impact the children and families who appear before Ohio's courts. At ODJFS' request, the SCO's standing "Advisory Committee on Children, Families and the Court" established the "Subcommittee on Responding to Child Abuse, Neglect and Dependency" in 2004. The Subcommittee's charge was to:

- Determine if Ohio's statutory guidelines for the investigation and prosecution of child abuse and neglect properly serve children and families in need of government intervention;
- Make statutory and administrative recommendations to improve Ohio's system for accepting and investigating reports of child abuse and neglect; and
- Make recommendations to standardize Ohio statutes regarding abuse, neglect, and dependency cases.

The Subcommittee, appointed by Chief Justice Thomas J. Moyer, undertook an eighteen month study which involved more than one thousand stakeholders. The Subcommittee's study found Ohio's child protection definitions to be:

- Overly broad (e.g. "dependency," where use is left open to interpretation);
- Overly narrow (e.g. civil sexual abuse definitions);
- Undefined (e.g. "abandonment"); and
- Confusing (e.g. circular definitions of "abused child" and "endangerment").

The study also recommended the State move to a Child in Need of Protective Services (CHIPS) framework to:

- Clarify distinction between civil (juvenile) and criminal courts: civil to provide protection of child; criminal to punish those who cause harm to child.
- Shift the question from "did someone harm the child and who?" to "does this child require intervention?"
- Close existing gaps in current statute.

On November 17, 2009, CHIPS legislation was introduced in the Ohio General Assembly. As drafted, CHIPS proposes a single adjudication with seven categories of harm. It defines the need for intervention in terms of impact to child and eliminates need for dependency category.

Response

Ohio has established the following strategy to implement the Subcommittee's recommendations:

Strategy 1. *Move Ohio from an incident-based statutory framework to a "child in need of protective services" (CHIPS) system that: eliminates inconsistent, overly broad, overly narrow and undefined categories of child maltreatment and provide more concise categorization of reports.*

Action Step

To achieve this Strategy the following Action Step was established:

1.1. Respond to issues identified in Round 1 CFSR regarding inconsistency across jurisdictions with more clearly defined definitions of child maltreatment.

ODJFS will continue to refine CHIPS legislation based on stakeholder input. The Department will participate in the legislative process and provide testimony to support its passage. Following enactment of the bill, the Supreme Court of Ohio will draft Juvenile Rules of Procedure and Rules of Superintendence to reflect the new policies. Provisions of the bill set forth a two year delayed implementation. This time period will allow the state sufficient opportunity to: ensure training of all stakeholders, including mandated reporters, establish supporting framework, including SACWIS, integration into the OCWTP, revision of all appropriate forms and instruments, and proposed amendments to OAC rules. A comprehensive plan will be developed to thoughtfully address the various systemic and organizations needs that will be required by a change of this magnitude. [\(1.1.a. - 1.1.g.\)](#)

Goal 6: *Licensing: Children are safe while placed in out-of-home care settings due to increased oversight of placement providers.*

Overview

To evaluate the integrity of Ohio's foster and adoptive parent licensing, recruitment and retention practices, HHS examined:

- Whether state standards for foster family homes and child care institutions reasonably concurred with recommended national standards;
- If state standards were consistently applied to all licensed homes and institutions receiving Title IV-E or IV-B funds;
- Whether the state complied with Federal requirements for criminal background checks;
- If Ohio's case planning process included provisions for addressing the safety of foster and adoptive placements;
- Whether Ohio had a process in place to ensure diligent recruitment of potential foster and adoptive families which reflects the diversity of children in the State for whom foster and adoptive homes are needed; and
- Whether the state effectively uses cross-jurisdictional resources to facilitate timely adoptions and permanent placements for waiting children.

Key Concerns

Based upon the Statewide Assessment and stakeholder interviews conducted during the onsite review, HHS identified the following areas of concern:

- Application of state standards was inconsistent due to the practice of granting waivers or variances to foster homes and child care institutions.
- Ohio's regulations regarding background checks conform to federal regulations; however, children may be at risk as local agencies oversee this process.

Response

ODJFS has established the following two strategies to address these concerns:

Strategy 1. *Amend rules governing the issuance of waivers and variances in the Ohio Administrative Code.*

Strategy 2. *Enhance Ohio's process for ensuring compliance with background check requirements for all ODJFS- licensed caregivers.*

Action Steps

Strategy 1. *Amend rules governing the issuance of waivers and variances in the Ohio Administrative Code.*

The following Action Step was established to address Strategy 1:

1.1. Revise policy regarding foster care licensing waivers and variances.

ODJFS will re-evaluate its administrative rules governing requirements/standards for certification and recertification of foster care agencies to address issues that have resulted in the need for agencies to request waivers and variances. The waiver and variance rules will be amended or rescinded and certification standards either be enforced as they are currently written or modified if the standard is not determined to impact child safety or well-being. ODJFS will share this information with external stakeholders during existing stakeholder meetings that are held jointly with Licensing staff and seek input as the rules undergo review to assure a smooth transition. **(1.1.a. - 1.1.c.)**

In addition, through ongoing internal meetings, Licensing staff will continue to address approaches to conducting reviews that will assure the consistent application of standards across the state. The Licensing Standard Operation Procedures Manual (SOPM) and the Ohio Foster Care Licensing (OFCL) Documentation, particularly eForms will be used as vehicles to promote consistency.

Strategy 2. Enhance Ohio's process for ensuring agency compliance with requirements for conducting background checks.

Following is the Action Step which will be implemented to address Strategy 2:

2.1. Institute heightened oversight of BCII compliance by ODJFS.

Since receipt of the *CFSR Final Report*, ODJFS has established new protocols to enhance the state's practices of monitoring background checks on caregivers who are certified and/or approved by the Department. ODJFS now submits a file to the Ohio Bureau of Criminal Identification and Investigation (BCII) which contains the names and identifying information of known certified foster caregivers, current approved adoptive parents, other adults in the foster care household. The information is maintain by BCII in a databank and used to exchange information with ODJFS about caregiver arrest information and criminal charges. The *Retained Applicant Fingerprint Database Information Exchange* process is known as "RAPBACK."

BCII notifies the Department of any arrests or convictions related to these submissions. Upon receipt of this information, ODJFS notifies the recommending agency; which in turn, must contact BCII within two business days of receiving the notification to request additional information. If the information indicates a person in the household has been arrested, convicted, or plead guilty to any offense, the agency must take appropriate action within twenty-four hours of receiving the additional information from BCII. The required appropriate actions the agency must conduct include:

- Contacting the local law enforcement agency that made the arrest;
- Notifying, within twenty-four hours, any other agency that holds custody of a child in the home and informing the agency of the information received; and
- Re-evaluating the household to ensure the placement will not jeopardize the health, safety or welfare of the children in the home.

As part of recertification, ODJFS will review criminal background checks through a sample record review of newly certified/recertified foster parents, newly approved/updated adoptive parents, and newly hired staff of JFS-certified residential facilities. Requirements will be monitored, including follow-up on RAPBACK hits during onsite reviews or via SACWIS desk audits. Agencies will be required to develop corrective action plans to address findings of noncompliance. ODJFS is notified of RAPBACK hits by BCII on a daily basis. From the RAPBACK notification ODJFS identifies the public and/or private agency to which the foster home or adoptive home belongs. ODJFS then notifies the agency(ies) and the department's licensing staff responsible for the agency advising the agency to complete the JFS 01301 RAPBACK Notification form and send it to the licensing specialist and the enforcement coordinator. All notifications are logged and tracked by the enforcement coordinator. ODJFS will generate and make

Ohio Child and Family Services Review Program Improvement Plan

available reports which detail agency noncompliance with background check requirements. These reports will be posted on JFS' website and made available for review by PCSA, PCPA, and PNA directors. **(2.1.a - 2.1.d.)**

In addition, ODJFS will provide local agencies with training (e.g., New Agency/Administrator Orientation or remedial sessions) and technical assistance (e.g., statewide meetings) to improve compliance with background check requirements. Should noncompliance continue, an agency may be issued a temporary license, denied a license, or have its license revoked following review by the ODJFS Licensing Review Committee. **(2.1.e. - 2.1.g.)**

References

Joyce, B., & Showers, B. (2002). *Student Achievement Through Staff Development* (3rd ed.). Alexandria, VA: Association for Supervision and Curriculum Development.

Singer, J. & Willett, J. (2003). *Applied Longitudinal Data Analysis: Modeling Change and Event Occurrence*. New York: Oxford University Press.

Methods of Evaluation

Ohio is required to establish improve goals for Absence of Maltreatment Recurrence, Timeliness and Permanency of Reunification, and Permanency for Children in Youth in Foster Care for Long Periods of Time. Baseline performance for these National Standards is reflected in the table starting on the next page.

Ohio is required to establish improvement goals for Performance Items 1,3,4,5, 7, 10, 17, 18, 19, and 20. The PMAG has not rendered a decision on Ohio's proposal for measuring achievement of these items. (Refer to attached proposal)

Ohio Child and Family Services Review Program Improvement Plan

State: OHIO

Type of Report: PIP: Quarterly Report: ___ (Quarter : ___)

Date Submitted:

National Standards Measurement Plan and Quarterly Status Report

Safety Outcome 1: Absence of Recurrence of Maltreatment												
National Standard	94.6%											
Performance as Measured in Final Report/Source Data Period	93.5%											
Performance as Measured in Baseline/Source Data Period	92.7% (2009ab)											
Negotiated Improvement Goal	93.3%											
Renegotiated Improvement Goal												
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
Safety Outcome 1: Absence of Maltreatment of Children in Foster Care												
National Standard	99.68%											
Performance as Measured in Final Report/Source Data Period	99.49%											
Performance as Measured in Baseline/Source Data Period	99.46% (2006b07a)											
Negotiated Improvement Goal	99.69% -Met and exceeded National Standard as of FY 2008											
Renegotiated Improvement Goal												
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Ohio Child and Family Services Review Program Improvement Plan

Permanency Outcome 1: Timeliness and Permanency of Reunification												
National Standard	122.6											
Performance as Measured in Final Report/Source Data Period	118.9											
Performance as Measured in Baseline/Source Data Period	118.1 (FY2007)											
Negotiated Improvement Goal	121.5 – Met and exceeded National Standard in 09B10A											
Renegotiated Improvement Goal	To be determined											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Permanency Outcome 1: Timeliness of Adoptions												
National Standard	106.4											
Performance as Measured in Final Report/Source Data Period	98.7											
Performance as Measured in Baseline/Source Data Period	97.3											
Negotiated Improvement Goal	108.0 – Met and exceeded National Standard in 2007											
Renegotiated Improvement Goal												
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Permanency Outcome 1: Achieving Permanency for Children in Foster Care for Long Periods of Time												
National Standard	121.7											
Performance as Measured in Final Report/Source Data Period	116.4											
Performance as Measured in Baseline/Source Data Period	112.4 (2009)											
Negotiated Improvement Goal	115.5											
Renegotiated Improvement Goal	To be determined											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Ohio Child and Family Services Review Program Improvement Plan

Permanency Outcome 1: Placement Stability												
National Standard	101.5											
Performance as Measured in Final Report/Source Data Period	99.4											
Performance as Measured in Baseline/Source Data Period	102.0 (2006b07a)											
Negotiated Improvement Goal	102.0 - Met and exceeded National Standard as of 2006b07a and have been meeting National Standard since											
Renegotiated Improvement Goal												
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Item-Specific and Quantitative Measurement Plan and Quarterly Status Report

Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.												
Item 1: Timeliness of initiating investigations or reports of child maltreatment.												
Performance as Measured in Final Report	63%											
Performance as Measured in Baseline/Source Data Period												
Negotiated Improvement Goal	To be determined.											
Method of Measuring Improvement	CPOE											
Renegotiated Improvement Goal	To be determined.											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.												
Item 3: Services to family to protect children in the home and prevent removal or re-entry into foster care.												
Performance as Measured in Final Report	86%											
Performance as Measured in Baseline/Source Data Period												
Negotiated Improvement Goal	To be determined.											
Method of Measuring Improvement	CPOE											
Renegotiated Improvement Goal	To be determined.											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
Safety Outcome 2: Children are Safely maintained in their homes whenever possible and appropriate.												
Item 4: Risk of harm to child												
Performance as Measured in Final Report	75%											
Performance as Measured in Baseline/Source Data Period												
Negotiated Improvement Goal	To be determined.											
Method of Measuring Improvement*	CPOE											
Renegotiated Improvement Goal	To be determined.											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Ohio Child and Family Services Review Program Improvement Plan

**Permanency Outcome 1: Children have permanency and stability in their living situations
Item 7: Permanency goal for child**

Performance as Measured in Final Report	57.5%											
Performance as Measured in Baseline/Source Data Period												
Negotiated Improvement Goal	To be determined.											
Method of Measuring Improvement	CPOE											
Renegotiated Improvement Goal	To be determined.											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

**Permanency Outcome 1: Children have permanency and stability in their living situations
Item 10: Permanency goal of other planned permanent living arrangement**

Performance as Measured in Final Report	71%											
Performance as Measured in Baseline/Source Data Period												
Negotiated Improvement Goal	To be determined.											
Method of Measuring Improvement	CPOE											
Renegotiated Improvement Goal	To be determined.											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

**Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs
Item 17: Needs and service of child, parents, foster parents**

Performance as Measured in Final Report	69%											
Performance as Measured in Baseline/Source Data Period												
Negotiated Improvement Goal	To be determined.											
Method of Measuring Improvement	CPOE											
Renegotiated Improvement Goal	To be determined.											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Ohio Child and Family Services Review Program Improvement Plan

Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs Item 18: Child and family involvement in case planning												
Performance as Measured in Final Report	64%											
Performance as Measured in Baseline/Source Data Period												
Negotiated Improvement Goal	To be determined.											
Method of Measuring Improvement*	CPOE											
Renegotiated Improvement Goal	To be determined.											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs Item 19: Caseworker visits with child												
Performance as Measured in Final Report	87.5%											
Performance as Measured in Baseline/Source Data Period												
Negotiated Improvement Goal	To be determined.											
Method of Measuring Improvement												
Renegotiated Improvement Goal	To be determined.											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs Item 20: Caseworker visits with parents												
Performance as Measured in Final Report	58%											
Performance as Measured in Baseline/Source Data Period												
Negotiated Improvement Goal	To be determined.											
Method of Measuring Improvement	CPOE											
Renegotiated Improvement Goal	To be determined.											
Status (for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

**Proposal for
CFSR/PIP Case Review Sampling Using The
Ohio Child Protection Oversight and Evaluation (CPOE) Process**

Ohio's statewide Child Protection Oversight and Evaluation (CPOE) quality assurance process was implemented almost 25 years ago in May 1986. CPOE, an on-site assessment of each of Ohio's 88 counties, must take place every 24 months. CPOE is based on CFSR outcomes and provides a platform for ODJFS and county public children service agencies (PCSA) to collaboratively evaluate service quality and develop improvement strategies for child welfare outcomes. CPOE includes county level case reviews, data reporting, technical assistance and monitoring. Starting with CPOE Stage 8 in 2010, the CPOE 8 review tools will be a slight modification of the Child and Family Service Review on-site review instrument. Ohio proposes to do the following:

1. Develop a baseline for measuring progress on items, other than those items associated with the national standard data indicators, using a prospective method with baseline and goal establishment during the first year of PIP implementation using the Ohio CPOE Stage 8 assessment process.
2. To review a minimum sample size of cases larger than the ACF required 65 cases per year. Ohio will review a random sample of 65 in-home and foster cases per quarter during the two year (eight quarter) PIP implementation period.
3. The period under review will be a 12 month period ending two months prior to the first day of the CPOE Stage 8 entrance conference. (Refer to Appendix B)

What follows is a summary of how CPOE and a review of statewide data from the SACWIS system will be used to prospectively set the baseline and agreed-upon amount of improvement (AAI) for Ohio's Round Two Program Improvement Plan (PIP).

Developing a Baseline

In order to establish a baseline to measure improvement during the PIP period, Ohio will use its CPOE Stage 8 process. Pursuant to Ohio Administrative Code (OAC) and the Roe v. Staples consent decree the State must review child welfare practice in each county every 24 months. As such, Ohio will review all 88 PCSAs from small to major metro counties during the two year CFSR PIP period. Franklin County, Ohio's largest metropolitan area will be reviewed twice during the PIP period. (Refer to Appendix A for the county size groupings) Table 1 shows the proposed schedule for reviewing all 88 Ohio counties over eight quarters starting in 2010.

Table 1

OHIO COUNTIES TO REVIEW PER QUARTER CPOE 8 SAMPLING								
<u>Quarters</u>	1	2	3	4	5	6	7	8
County Size								
Small	4	3	3	4	3	3	2	3
Sm/Med	3	2	2	3	1	1	1	2
Med	1	2	3	2	3	3	4	2
Large	1	2	1	2	2	3	2	2
Metro	1	2	1	1	1	2	1	1
Maj Metro	1	1			(1)*	1		
=====								
Totals	<u>11</u>	<u>12</u>	<u>10</u>	<u>12 = 45</u>	<u>11</u>	<u>13</u>	<u>10</u>	<u>10 = 44</u>

***NOTE:**

Franklin County will be included in each year of the CPOE 8 review. Reviews will be occur in Quarters 1 and 5.

Prospective county level data collected from the first four quarters of CPOE Stage 8 will be used to establish the baseline to determine the degree of improvement for selected items in the PIP. (Refer to Attachment C) This plan is in keeping with **CFSR Amended Technical Bulletin #3**, which grants States the ability to use “instruments and case samples to measure and monitor practice using a minimum of a 12-month review period that is adjusted at the end of each quarter.” (CFSR Amended Technical Bulletin #3, pg. 4).

Case Sampling

During CPOE Stage 8, which will coincide with the first two years of the PIP, 65 cases will be reviewed each quarter. Cases will be drawn using a sample of various size counties throughout the State. Case samples each quarter are selected based on: county size and when the CPOE Stage 7 review occurred. Additionally, staff assignments and requests received from a county for delay of their review may also impact counties which will be reviewed each quarter.

This large number of case reviews per quarter is significantly larger than the CF SR on-site case sampling requirement. However it is in keeping with the mandated requirement of Ohio's Roe v. Staples consent decree. Table 2 demonstrates how Ohio will sample 260 cases per year during the two year CPOE Stage 8 review period.

Table 2

Number of Cases to be Reviewed Per Quarter BY COUNTY SIZE AND TOTAL CASES STATEWIDE								
QUARTERS	1	2	3	4	5	6	7	8
County Size								
Small	3/12*	2/6	3/9	2/8	2/6	3/9	3/6	3/9
Sm/Med	3/9	3/6	3/6	3/9	2/2	3/3	3/3	3/6
Med	11/11	6/12	9/27	9/18	7/21	6/18	6/24	10/20
Large	11/11	7/14	11/11	10/20	9/18	7/21	8/16	10/20
Metro	11/11	9/18	12/12	10/10	8/8	7/14	8/16	10/10
Maj Metro	11/11	10/10			10/10			
Totals	65	66	65	65	65	65	65	65

NOTE:

The numbers to the left of the “/” indicate the number of cases to be reviewed per county. The numbers to the right of the “/” indicate the total number of cases to be reviewed statewide. For example, for Small counties in Quarter 1, we would sample 3 cases each from 4 counties for a total of 12 cases across all Small counties.

Ohio proposes a methodology which mirrors ACF's process in selecting cases for the CF SR on-site review. In-home and foster care cases will be sampled using the same ratios. A random case sample list will be drawn from SACWIS and the Ohio AFCARS file to produce a list of the cases to be reviewed each quarter for the counties to be reviewed that quarter. Table 3 identifies the number and type of cases per quarter, by size county that will be needed to meet the plan to review each of Ohio's 88 counties during the eight quarter CPOE Stage 8 implementation period.

Table 3

IN-HOME AND FOSTER CARE CASE SAMPLE REVIEWED PER QUARTER by COUNTY SIZE								
Quarter County Size	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>
Small	1/4	1/3	1/3	1/4	1/3	1/3	1/2	1/3
	2/8	1/3	2/6	1/4	1/3	2/6	2/4	2/6
Sm/Med	1/3	1/2	1/2	1/3	1/1	1/1	1/1	2/4
	2/6	2/4	2/4	2/6	1/1	2/2	2/2	1/2
Med	3/3	2/4	3/9	3/6	3/9	2/6	3/12	4/8
	8/8	4/8	6/18	6/12	4/12	4/12	5/20	6/12
Large	5/5	3/6	5/5	4/8	2/4	3/9	3/6	4/8
	6/6	4/8	6/6	6/12	7/14	4/12	5/10	6/12
Metro	5/5	3/6	6/6	4/4	3/3	3/6	2/4	2/2
	6/6	6/12	6/6	6/6	5/5	4/8	6/12	8/8
Maj Metro	5/5	4/4			5/5	5/5		
	6/6	6/6			5/5	5/5		
Totals	25/40	25/41	25/40	25/40	25/40	25/40	25/40	25/40

NOTE:

The numbers to the left of the “/” in the first row indicate the number of in-home cases to be reviewed per county. The number to the left of the “/” in the second row is the number of foster care cases per county. The numbers to the right of the “/” in both rows indicate the total number of in-home and foster care cases to be reviewed statewide. One additional foster care case will be reviewed during the second quarter.

Period under Review

As indicated earlier, during the CPOE 8 assessment the period under review will be a twelve month period prior to the beginning of the review. (Refer to Appendix B)

APPENDIX A**Counties by CPOE Size Category**Listed from smallest population to largest population
(Rev. 5/1/08)

Small	Medium-Small	Medium	Large	Metro	Major Metro
Vinton	Guernsey	Darke	Miami	Warren	Hamilton
Noble	Mercer	Pickaway	Ashtabula	Trumbull	Franklin
Monroe	Ottawa	Ashland	Allen	Lake	Cuyahoga
Morgan	Holmes	Seneca	Columbiana	Mahoning	3
Harrison	Madison	Knox	Wayne	Lorain	
Paulding	Preble	Huron	Wood	Butler	
Wyandot	Fulton	Sandusky	Richland	Stark	
Meigs	Highland	Washington	Clark	Lucas	
Pike	Clinton	Lawrence	Fairfield	Montgomery	
Adams	Brown	Athens	Greene	Summit	
Fayette	Crawford	Marion	Portage	10	
Carroll	Logan	Belmont	Licking		
Van Wert	Auglaize	Jefferson	Delaware		
Henry	Union	Hancock	Medina		
Hocking	Shelby	Ross	Clermont		
Gallia	15	Scioto	15		
Hardin		Erie			
Jackson		Muskingum			
Morrow		Tuscarawas			
Putnam		Geauga			
Perry		20			
Coshocton					
Williams					
Defiance					
Champaign					
25					

POPULATIONS

Major Metro: 800,000 +

Metro: 200,000 – 799,999

Large: 100,000 – 199,999

Medium: 50,000 – 99,999

Medium-Small: 40,000 – 49,999

Small: 39,999 and less

US Census Bureau County Population Estimates July 1, 2007

<http://www.census.gov/popest/counties/CO-EST2007-01.html>

APPENDIX B

**Child Protection Oversight & Evaluation Stage 8
12 Month Sampling Chart for Case Review and CAPMIS TA
Assessment/Investigation, In-Home Supportive Services,
Protective Supervision, Substitute Care, Adoption**

**The Sampling Period is the 12-month period
ending two months prior to the first day of the Entrance Conference month.**

If Entrance Occurs In	Sample Period & Period Under Review Will Be
October 2010	August 1, 2009 to July 31, 2010
November 2010	September 1, 2009 to August 31, 2010
December 2010	October 1, 2009 to September 30, 2010
January 2011	November 1, 2009 to October 31, 2010
February 2011	December 1, 2009 to November 30, 2010
March 2011	January 1, 2010 to December 31, 2010
April 2011	February 1, 2010 to January 31, 2011
May 2011	March 1, 2010 to February 28, 2011
June 2011	April 1, 2010 to March 31, 2011
July 2011	May 1, 2010 to April 30, 2011
August 2011	June 1, 2010 to May 31, 2011
September 2011	July 1, 2010 to June 30, 2011
October 2011	August 1, 2010 to July 31, 2011
November 2011	September 1, 2010 to August 31, 2011
December 2011	October 1, 2010 to September 30, 2011
January 2012	November 1, 2010 to October 31, 2011
February 2012	December 1, 2010 to November 30, 2011
March 2012	January 1, 2011 to December 31, 2011
April 2012	February 1, 2011 to January 31, 2012
May 2012	March 1, 2011 to February 28, 2012
June 2012	April 1, 2011 to March 31, 2012
July 2012	May 1, 2011 to April 30, 2012
August 2012	June 1, 2011 to May 31, 2012
September 2012	July 1, 2011 to June 30, 2012

Primary Goal- Safety: Children are safe in their homes and while placed in substitute care settings.				Applicable CFSR Outcomes or Systemic Factors: S1, S2		
Strategies: 1. Improve staff skills and competencies in the assessment of child safety and risk in order to identify appropriate services to safely maintain children in their homes and prevent removal. 2. Improve timeliness of initiation of assessments/investigations of non-emergency reports. 3. Develop methods for improved response to repeat incidences of child maltreatment.				Applicable CFSR Items: 1,2, 3, 4		
Action Steps and Benchmarks		Person Responsible	Evidence of Completion	Quarter Due	Quarter Completed	Quarterly Update
1.1.	Utilize case reviews and technical assistance to identify staff needs to improve the assessment of safety and risk through the application of the Comprehensive Assessment Planning Model - Interim Solution (CAPMIS): Safety Assessment, Safety Reassessment, Family Assessment, Ongoing Case Assessment Investigation, and Specialized Assessment Investigation Tools.					
1.1.a.	Conduct an analysis of the findings from the Child Protection Oversight and Evaluation (CPOE) Stage 7 CAPMIS/TA reports to identify training needs regarding the assessment of safety and risk throughout the life of a case.	L. McGee	Findings from the CPOE Stage 7 CAPMIS/TA reports are compiled and recorded in an Excel document.	1		

1.1.b.	Conduct case reviews of a random sample of Alternative Response (AR) cases to identify training needs regarding the assessment of safety and risk throughout the life of a case on AR pilot counties.	L. McGee	Findings from the AR pilot county case reviews are compiled and recorded in an Excel document.	2		
1.1.c.	Identified training needs are addressed in the CAPMIS Tool Kit.	L. McGee	1- Summary of identified training needs 2- Summary of revisions to the CAPMIS Tool Kit and curriculum.	3		
1.1.d.	Prepare a plan to deliver training and technical assistance to public children services agencies' (PCSA) line supervisors and county administrators to address the identified training needs regarding ongoing assessments of child safety and risk throughout the life of a case utilizing the applicable CAPMIS tools.	L. McGee OCWTP staff	Action plan to deliver technical assistance and/or training for the identified PCSA staff.	3		
1.1.e.	Provide training sessions that incorporate the CAPMIS training Tool Kit curricula.	L. McGee OCWTP staff	Report containing information regarding the effectiveness of the training sessions.	4, 5		
1.1.f.	Facilitate regional or video-based CAPMIS TA sessions utilizing the training tools developed for the CAPMIS Tool Kit following field testing.	L. McGee OCWTP staff	Evaluation report outlining the impact of technical assistance on improving staff skills and competencies in the assessment and identification of child safety/risk issues.	4, 5		

1.1.g.	The CPOE Stage 8 reports are submitted to the CPS policy unit.	B. Manuel	Report containing an analysis of Stage 8 reports to determine level of improvement specific to item 4, risk assessment and safety management, in the assessment and identification of child safety/risk.	6		
1.1.h.	The PCSAs' quality improvement plans (QIP) and/or technical assistance plans (TAP) resulting from CPOE Stage 8 are submitted to the CPS policy unit.	B. Manuel	Report utilizing information and activities of the QIPs/TAPs resulting from CPOE Stage 8 in order to identify commonalities in agencies' needs, positive practices, and evaluate the impact on item 4 in the assessment of safety and risk.	6, 7		
1.2.	Expand the number of counties safely maintaining children in their own homes through an alternative response to reports of child maltreatment.					
1.2.a.	Develop and disseminate a self-assessment tool for counties to evaluate readiness for AR programming and identify needed steps.	K. Gilbert	Self-Assessment Tool and notification of availability to counties.	1		
1.2.b.	Develop and release a Request for Applications (RFA) to competitively select up to ten additional sites.	K. Gilbert	RFA distributed to PCSAs.	1		
1.2.c.	Secure grant and state funding to ensure that expansion counties are adequately supported during development/transitional period.	K. Gilbert	Menu of funding streams targeted to support AR expansion.	1		

1.2.d.	Integrate QIC counties into expansion work to ensure that SOAR counties have access to adequate support and that implementation is consistent with state model and guidelines.	K. Gilbert	Summary of plan to integrate QIC counties into expansion work.	1		
1.2.e.	Select up to ten expansion sites through competitive review of readiness, capacity, community preparedness, leadership and other factors. A minimum of one county will be selected for this expansion effort.	K. Gilbert	Site(s) notified through written communication.	1		
1.2.f.	Provide technical assistance and available resources for implementation activities for AR expansion sites.	K. Gilbert	Report on TA and implementation support provided.	2		
1.2.g.	Extend SACWIS AR functionality to 10 expansion and 5 QIC sites.	K. Gilbert	Verification that SACWIS functionality has been extended to AR sites.	2		
1.2.h.	Families are assigned to an alternative response pathway and received services under alternate programming in 25 counties.	K. Gilbert	Report on number of cases assigned to the AR pathway.	3		
1.2.i.	An Alternative Response for maintaining children safely within their own home is statutorily authorized as statewide programming.	K. Gilbert	Status update on the enactment of the Authorizing Statute.	8		
2.1.	Develop best practice guidance on the role of report initiation in the assessment of safety and risk.					
2.1.a.	Work with the National Resource Center for Child Protective Services to develop best practice guidance on the role of report initiation in the assessment of safety and risk.	L. McGee	Materials on evidence based practices on report initiation as part of the assessment process.	2		

2.1.b.	Conduct an assessment with a select number of PCSAs through data analysis, consultation, and staff interviews in order to identify possible barriers or county needs regarding timely initiations.	L. McGee	Report identifying county identified needs and barriers.	3		
2.1.c.	Incorporate the best practice guidance on report initiation in the <i>CPS Worker Manual Revisions</i> .	L. McGee	Summary of the revisions to the <i>CPS Worker Manual</i> .	4		
2.1.d.	Disseminate the best practice guidance to the PCSA's and develop a TA implementation plan.	L. McGee	Summary of dissemination and a plan of TA implementation activities.	5		
2.1.e.	Implement the TA plan.	L. McGee	Summary of TA activities provided.	6		
2.1.f.	Surveys conducted to participants to assess effectiveness of the TA provided.	L. McGee	Report containing post evaluations results on the technical assistance.	7		
2.2.	Use baseline performance data to determine the gap between OAC requirements and FCCS performance on timeliness of initiation of assessments/ investigations of non-emergency reports.					
2.2.a.	FCCS will pull first quarter CY 2010 data based upon time frames established by OAC requirements for initiation of assessments/investigations on non-emergency reports.	K Canada	Data report and analysis.	2		

2.2.b.	ODJFS will pull first quarter CY 2010 data based upon time frames established by OAC requirements for initiation of assessments/investigations on non-emergency reports.	R. Ward	Data report and analysis.	2		
2.2.c.	Reconcile FCCS/ODJFS data.	K Canada J. Van Hull	Analytic Report.	3		
2.2.d.	Work with FCCS to develop a work plan for improving response time frames for non-emergency reports; which would include establishing a baseline and measuring levels of improvement.	K Canada J. Van Hull	Work Plan.	3		
2.2.e.	Review FCCS data on responding to non-emergency reports and provide feedback on compliance with OAC requirements and performance improvement expectations; including renegotiation of performance improvement expectations, if indicated.	K Canada J. Van Hull	1-Analysis of progress and barriers to improving timeliness of initiation assessments/investigations of non-emergency reports. 2-Data Reports.	5, 8		
2.3.	Develop timely reports to assist PCSAs in tracking compliance with OAC requirements for initiation of child abuse/neglect investigations.					
2.3.a.	Develop and produce a statewide county by county Event History Report on initiation of child abuse/neglect.	R. Ward	Event History Report on Initiation of Child Abuse and Neglect Assessment/Investigations.	2		
2.3.b.	Deploy to PCSAs Event History Reports to be used for future planning to comply with OAC requirements during the course of CPOE Stage 8.	R. Ward	Survey Results of PCSA directors and TASs using Survey Monkey two months after information is deployed to determine usefulness of data for planning purposes.	3		

2.3.c.	Technical assistance for PCSA administrators on the use of the Event History Report will be incorporated into the tool.	R. Ward	Summary of Technical Assistance provided.	4, 5, 6		
2.3.d.	Develop and update a Statistical Forecasting Tool with a training component to assist PCSA administrators in predicting the future number of child abuse and neglect intakes which will be received based on the number of monthly intakes received.	R. Ward	Statistical Forecasting Tool	3, 5, 7		
3.1.	Produce data on recurrence of child maltreatment defined by the federal measure and event history analysis of recurrence.					
3.1.a.	Develop a Abuse and Neglect Study which identifies the first substantiated/ indicated report on cases that are not open at time of abuse and then monitor for a second substantiated indicated report with the covariates being county, age of victim, type of first report, type of abuse, case status at time of recurrence, family structure.	R. Ward	Recurrence Study	4		
3.1.b.	Produce a Abuse and Neglect Study and publish results on the Supreme Court of Ohio Website.	R. Ward	Survey Results of PCSA directors using Survey Monkey two months after information is deployed to determine usefulness of data for planning purposes.	5		
3.2.	Utilize data and case reviews to develop a plan to reduce repeat maltreatment.					

3.2.a.	Conduct an analysis of the findings from the Child Protection Oversight and Evaluation (CPOE) Stage 7 CAPMIS/TA reports to identify training needs regarding the assessment of safety and risk throughout the life of a case.	L. McGee	Findings from the CPOE Stage 7 CAPMIS/TA reports are compiled and recorded in an Excel document.	1		
3.2.b.	Conduct case reviews of a random sample of Alternative Response (AR) cases to identify training needs regarding the assessment of safety and risk throughout the life of a case on AR pilot counties.	L. McGee	Findings from the AR pilot county case reviews are compiled and recorded in an Excel document.	2		
3.2.c.	Develop and implement plan to reduce repeat maltreatment based on analysis.	L. McGee	1- Plan 2- Summary of plan implementation	3		
3.2.d.	Monitor plan's impact on recurrence of maltreatment.	L. McGee	Summary of the plan's impact on recurrence of maltreatment.	4 , 7		
Renegotiated Action Steps and Benchmarks						

Primary Goal - Permanency: Children have permanency in their living situations; family relationships and connections are preserved.		Applicable CFSR Outcomes or Systemic Factors: P1, P2, SF2				
Strategies: 1. Improve permanency planning process to develop appropriate and timely permanency plans for children. 2. Improve placement resources and family visitation for children in foster care. 3. Provide older youth and those aging out of foster care with needed supports and connections to achieve self-sufficiency. 4. Increase staff skills and competencies in case planning and facilitating productive visits among parents, children, siblings, and others who play a critical role in achieving children’s permanency plans.		Applicable CFSR Items: 7, 10, 12, 13, 14, 15, 16, 25, 27, 28, 29				
Action Steps and Benchmarks		Person Responsible	Evidence of Completion	Quarter Due	Quarter Completed	Quarterly Update
1.1.	Utilize case reviews and technical assistance to identify staff needs in order to improve worker skills in permanency planning through the application of the Comprehensive Assessment Planning Model - Interim Solution (CAPMIS), with specific attention on the Case Plan, Case Review Tool, Reunification Assessment Tool, and Semi-annual Administrative Review Tool.					
1.1.a.	Conduct an analysis of the findings from the Child Protection Oversight and Evaluation (CPOE) Stage 7 CAPMIS/TA reports to identify training needs regarding permanency planning.	L. McGee	Findings from the CPOE Stage 7 CAPMIS/TA reports are compiled and recorded in an Excel document.	1		
1.1.b.	Identified training needs are addressed in the CAPMIS training Tool Kit.	L. McGee	1- Summary of identified training needs. 2- Summary of revisions to Tool Kit and curriculum.	3		

1.1.c.	Prepare a plan to deliver training and technical assistance to public children services agencies' (PCSA) line supervisors and county administrators to address the identified training needs regarding permanency and case planning related tools.	L. McGee	Action plan to deliver technical assistance and/or training around permanency and case planning for the identified PCSA staff.	3		
1.1.d.	Provide training sessions that incorporated the CAPMIS training Tool Kit curricula.	L. McGee OCWTP staff	Report containing information regarding the effectiveness of the sessions.	4		
1.1.e.	Facilitate regional or video-based CAPMIS TA sessions utilizing the training tools developed for the CAPMIS Tool Kit following field testing.	L. McGee	Quarterly evaluation reports outlining the impact of technical assistance on improving staff skills and competencies in the assessment and identification of child safety/risk issues.	5		
1.1.f.	The CPOE Stage 8 reports are submitted to the CPS policy unit.	B. Manuel	Report containing an analysis of Stage 8 reports to determine level of improvement specific to items 7, permanency goal for child; 8, reunification; and 17, needs and services of child and parents, regarding the assessment and identification of child safety/risk.	6		
1.1.g.	The PCSAs' quality improvement plans (QIP) and/or technical assistance plans (TAP) resulting from CPOE Stage 8 are submitted to the CPS policy unit.	B. Manuel	Report utilizing information and activities of the QIPs/TAPs resulting from CPOE Stage 8 in order to identify commonalities in agencies' needs, positive practices, and evaluate the impact on items 7, 8, and 17 in the assessment of safety and risk.	7		
1.2.	Develop improvements to enhance consistency and quality of permanency planning process.					

1.2.a.	Through technical assistance from the Casey Family Programs FCCS will focus on increasing the quality and consistency of permanency planning throughout the life of the case.	K Canada	Work Plan	1		
1.2.b.	Casey Family Programs will provide training and values clarification to FCCS staff about permanency planning to serve as a foundation for the transition required to improve the quality and consistency of permanency planning and to include permanency planning in the early stages in the life of a case.	K Canada	Training Materials	1		
1.2.c.	FCCS and Casey Family Programs will develop and implement permanency roundtables targeting youth in PPLA.	K Canada	Report on increased permanency for PPLA youth and improvement in Composite C-3.	4, 8		
1.2.d.	FCCS will develop and implement a plan for the incorporation of Team Decision Making for initial placement/initial consideration of placement within their Assessment/Investigation Department.	K Canada	Implementation work plan.	1		
1.2.e.	FCCS will evaluate the effectiveness of Team Decision Making in improving the quality and consistency of permanency planning.	K. Canada	Report data for families and children who have participated in Team Decision Making.	3, 7		
1.3.	Work with the Supreme Court of Ohio to address court processes, including the Termination of Parental Rights process and practices, in order for children to have appropriate permanency goals established and achieved.					
1.3.a.	Update the <i>Dependency Docket Bench Cards for Ohio Family and Juvenile Court Judges and Magistrates</i> to provide additional guidance on proper notice of parties and include information on the content and effectiveness of hearings-including dispositional hearings and Termination of Parental Rights.	K. Gilbert SCO	Notification to Ohio Family and Juvenile Court Judges and Magistrates of updated <i>Dependency Docket Bench Cards</i> .	6		

1.3.b.	Provide training to judicial officers on the Dependency Docket Bench Cards for Ohio Family and Juvenile Court Judges and Magistrates - including dispositional hearings and Termination of Parental Rights.	K. Gilbert SCO	Report of training results.	6		
1.3.c.	Develop a Model Motion Template for Attorneys.	K. Gilbert SCO	Model Motion Template.	4		
1.3.d.	Disseminate Model Motion Template and provide training on Model.	K. Gilbert SCO	Report on training results.	6		
1.3.e.	Prepare and issue a Child, Families and the Courts Bulletin focusing on conducting effective hearings and examine the content of the hearings.	K. Gilbert SCO	Notification of issuance of the Child, Families and the Courts Bulletin.	4		
1.3.f.	Develop a Juvenile Judges curriculum.	K. Gilbert SCO	Draft Juvenile Judges Curriculum.	6		
1.3.g.	Provide training to GALs on effective practices that promote permanency.	K. Gilbert SCO	Report on training results.	8		
1.3.h.	Design and offer a Symposium on Legal Representation to attorneys, GALs, and prosecutors.	K. Gilbert SCO	Report on results of symposium.	5		
1.3.i.	Provide a minimum of two sessions of the "Improving Case Flow Management in Child Abuse, Neglect and Dependency Cases" workshop.	K. Gilbert SCO	Report of results.	8		
1.3.j.	Sponsor a Webinar on facilitating youth participation in court proceedings and case planning.	K. Gilbert SCO	Report of results.	2		
1.4.	Develop, implement and train on use of analytic tools within the business intelligence environment for PCSA administrators to analyze and monitor data related to permanency planning and preservation of connections.					

1.4.a.	Develop and post following analytic tools: <i>CFSR Data Profile, by county; Length of Stay in Care; Re-entries to foster care (C1-4); Length of Time to Adoption; Children in care 17+ months, adopted by end of year; Children in care 17+ months achieving legal freedom within 6 months; Legally free children adopted in less than 12 months; Exits to permanency for children with TPR; Placement Stability of Children.</i>	R. Ward	Analytic tools and report on implementation.	3		
1.4.b.	Update tools on Supreme Court of Ohio website and ODJFS' Business Intelligence Channel.	R. Ward	1- Supreme Court of Ohio will inform ODJFS that information has been posted on their website. 2- ODJFS will inform PCSAs that information has been posted on the Business Intelligence Channel.	7		
1.4.c.	Develop and post <i>Number of Children Entering Care</i> analytic tool.	R. Ward	<i>Number of Children Entering Care Tool.</i>	3		
1.4.d.	Update <i>Number of Children Entering Care</i> analytic tool with new data on Supreme Court of Ohio website and ODJFS' Business Intelligence Channel .	R. Ward	<i>Number of Children Entering Care Tool</i>	5,7		
1.4.e.	Develop and post <i>Number of Reports and Investigations</i> analytic tool.	R. Ward	<i>Number of Reports and Investigations Tool.</i>	2		
1.4.f.	Update <i>Number of Reports and Investigations</i> analytic tool with new data on Supreme Court of Ohio website and ODJFS' Business Intelligence System.	R. Ward	<i>Number of Reports and Investigations Tool.</i>	4,6,8		
1.4.g.	Provide training and technical assistance to PCSA's on use of analytic tools.		Summary of training technical assistance provided.	3, 5		
1.4.h.	Monitor PCSA's utilization of the analytic tools.		Summary of utilization.	7		
2.1.	Revise policy and provide technical assistance to counties to support consistent use of relatives as a placement resource and family visitation of children in foster care.					

2.1.a.	Develop policy requirements for the identification and notification of relatives for possible placement of a child entering agency custody, and for those children who are in custody but not in a relative placement.	L. McGee	Revised Ohio Administrative Code (OAC) rules and verification of submission through the clearance process.	2		
2.1.b.	Develop policy requirements to ensure visits between siblings placed separately unless it is not in the child's best interest and to ensure family visitation.	L. McGee	Revised Ohio Administrative Code (OAC) rules and verification of submission through the clearance process.	2		
2.1.c.	Revise existing planning and review tools to promote the identification of relative placements and family visitation.	L. McGee	Modified planning and review tools.	3		
2.1.d.	Finalize policy changes and provide technical assistance to counties related to the new requirements.	L. McGee Carrie Anthony	Notification that the revised policy is in effect and summary of the TA provided (type and areas covered).	4		
3.1.	Improve assessment and provision of Independent Living Services.					
3.1.a.	Obtain technical assistance from NRC-YD to assist public children services agencies enhance efforts to: 1) identify youth eligible for Independent Living Services; 2) engage youth in assessment and development of independent living plans; 3) develop appropriate independent living plans; 4) maintain/support important connections for youth.	C. Anthony	Agenda and schedule demonstrating statewide Presentation to PCSAs Onsite or via Webinar or Videoconference and the sharing of practice models addressing the 4 areas of emphasis.	2		
3.1.b.	Work with the NRC-YD to develop a plan for building capacity for the long-term provision of technical assistance.	C. Anthony	Independent Living Services Technical Assistance Plan.	2		
3.1.c.	Solicit Youth input on child welfare policies and practices.	C. Anthony	Report outlining opportunities provided for youth input and outcomes.	3		
3.1.d.	Share preliminary data reports with agencies from early NYTD implementation to monitor service provision.	C. Anthony	Summary of implementation efforts; identify challenges and barriers if any.	7		

3.1.e.	Obtain feedback from youth advisory boards and local agencies regarding their application of the TA and models provided.	C. Anthony	Summary regarding feedback.	4, 7		
4.1.	Develop best practice guidance regarding family connection preservation through quality visitations.					
4.1.a.	Obtain written information from the National Resource Center for Permanency and Family Connections on parent/child and sibling visitation and receive technical assistance from the NRC to develop technical assistance and best practice guidance.	C. Anthony L.McGee	Initial set of guidelines and practice tools received from NRC-FPP.	2		
4.1.b.	Incorporate final set of guidelines in the CPS Worker Manual.	L. McGee	Revisions to the CPS Worker Manual.	4		
4.1.c.	Provide technical assistance presentations on the best practice guidance and identified barriers will be provided to PCSAs.	L. McGee	Report containing information regarding the effectiveness of sessions and feedback on the best practice guidance.	6		
4.2.	Work with Fatherhood Commission to identify strategies to enhance caseworker and supervisor capacity and skills to effectively engage and support fathers' connection to children in care.					
4.2.a.	Obtain technical assistance from the National Resource Center for Family-Centered Practice and Permanency Planning and the National Quality Improvement Center on Non-Resident Fathers and the Child Welfare System to assist in the identification of training curriculum and fatherhood resources.	T. Robinson	Report on training curriculum and fatherhood resources identified.	1		

4.2.b.	Work with Fatherhood Commission to provide input into the development of train-the-trainers series to ensure relevant child welfare/father components are included.	T. Robinson	Workshop Series.	3		
4.2.c.	Develop training plan .	T. Robinson	Training plan.	4		
4.2.d.	Implementation of training plan.	T. Robinson	Evaluation of training.	5, 7		
4.3.	Work with the Fatherhood Commission nine Program Grantees to connect services provided to fathers' who are involved with child welfare agencies.					
4.3.a.	Facilitate linkage between PCSAs and Fatherhood Programs.	T. Robinson J. Van Hull	Quarterly Report on Fatherhood Program Activities	3, 5, 8		
4.3.b.	Evaluate activities of Fatherhood Program Grantees.	T. Robinson	Report on outcome of Fatherhood Program Activities.	4, 6, 8		
<i>Renegotiated Action Steps and Benchmarks</i>						

Primary Goal - Child Welfare Service Intervention: Families have enhanced capacity to provide for their children's needs as a result of improved practices.				Applicable CFSR Outcomes or Systemic Factors: WB1		
Strategies: 1. Increase provision of family-driven services by ensuring case plans are developed, implemented, and reviewed in partnership with families and children, including fathers and paternal relatives. 2. Increase staff skills and competencies in conducting frequent and quality visits with custodial parents, non-custodial parents, children who are in their own homes, and children who are in substitute care, to assure children's safety and well-being, to assure their needs are being met, and to assure that there is ongoing permanency planning. 3. Improve staff skills and competencies in family search and engagement techniques and in preserving family connections.				Applicable CFSR Items: 17, 18, 19, 20		
Action Steps and Benchmarks		Person Responsible	Evidence of Completion	Quarter Due	Quarter Completed	Quarterly Update
1.1.	Utilize data and case reviews to develop a plan to improve family-driven service identification and implementation through case planning and reviews for both in-home and substitute care cases.					
1.1.a.	Conduct an analysis of the findings from the Child Protection Oversight and Evaluation (CPOE) Stage 7 CAPMIS/TA reports to identify training needs regarding service planning and review tools implemented during the ongoing services stage of a case.	L. McGee	Findings from the CPOE Stage 7 CAPMIS/TA reports are compiled and recorded in an Excel document.	1		

1.1.b.	Conduct case reviews of a random sample of Alternative Response (AR) cases to identify training needs regarding service planning and review tools implemented during the ongoing services stage of a case for AR pilot counties. Service planning tools that are specific to cases assigned to the Alternative Response Pathway are the Family Service Plan, Alternative Response Case Review, and Alternative Response Case Closure.	L. McGee	Findings from the AR pilot county case reviews are compiled and recorded in an Excel document.	2		
1.1.c.	Identified training needs around engagement and case planning for both in-home and substitute care cases are addressed in the CAPMIS training Tool Kit.	L. McGee	1) Summary of identified training needs 2) Summary of revision to the Tool Kit and curriculum.	3		
1.1.d.	Prepare a plan to deliver training and technical assistance to public children services agencies' (PCSA) line supervisors and county administrators to address the identified training needs regarding service planning and review tools implemented during the ongoing services stage of a case utilizing the applicable CAPMIS tools.	L. McGee	Action plan to deliver technical assistance for the identified PCSA staff.	3		
1.1.e.	Provide training sessions that incorporated the CAPMIS training Tool Kit curricula.	L. McGee OCWTP staff	Report containing information regarding the effectiveness of the sessions.	4, 5		
1.1.f.	Facilitate regional or video-based CAPMIS TA sessions utilizing the training tools developed for the CAPMIS Tool Kit following field testing.	L. McGee	Evaluation reports outlining the impact of technical assistance on improving staff skills and competencies in engagement and case planning.	4, 5		

1.1.g.	The CPOE Stage 8 reports are submitted to the CPS policy unit.	B. Manuel	Report containing an analysis of Stage 8 reports to determine level of improvement specific to items 17, needs and services of child and parents;18, child and family involvement in case planning; 19, caseworker visits with child; and 20, caseworker visits with parent.	6		
1.1.h.	The PCSAs' quality improvement plans (QIP) and/or technical assistance plans (TAP) resulting from CPOE Stage 8 are submitted to the CPS policy unit.	B. Manuel	Report utilizing information and activities of the QIPs/TAPs resulting from CPOE Stage 8 in order to identify commonalities in agencies' needs, positive practices, and evaluate the impact on items 17, 18, 19, and 20.	7		
1.2.	Improve the provision of training to county agencies through the development of a learning management system that can be accessed and reviewed through information and technology resources.					
1.2.a.	Develop a variety of learning methodologies to assist in skill development of PCSA staff_(e.g., in-class workshops with distance learning technologies and self-administered online learning) through E-Track.	L. Crozier OCWTP Trainers RTCs	Report regarding the development and implementation of the existing learning methodologies delivered through E-Track.	8		
1.2.b.	Develop a plan to implement E-Track to the Regional Training Centers.	L. Crozier OCWTP Trainers RTCs	Implementation plan.	2		
1.2.c.	Implementation of E-Track to Regional Training Centers (RTC).	L. Crozier OCWTP Trainers RTCs	Notification to RTCs of E-track Implementation.	3		
1.2.d.	Implementation of E-Track to facilitators (OCWTP trainers)	L. Crozier OCWTP Trainers RTCs	Summary report of current practices based upon information and description of areas of improvement.	4		
1.2.e.	Develop a plan to implement E-Track to the PCSAs and caregivers.	L. Crozier OCWTP Trainers RTCs	Implementation plan.	4		

1.2.f.	Implementation of E-Track to PCSAs.	L. Crozier OCWTP Trainers RTCs	Notification to PCSAs of E-track Implementation and assessment of its use.	6		
1.2.g.	Implementation of E-Track to caregivers	L. Crozier OCWTP Trainers RTCs	Notification to caregivers of E-track Implementation and assessment of its use..	7		
1.3.	FCCS will establish uniform expectations for conducting facilitated 90-day reviews and SARs to promote safety, permanency, and well-being.					
1.3.a.	FCCS will conduct an assessment of current 90-day reviews and SAR reviews.	K. Canada	Summary report of current practices based upon information and description of areas of improvement.	2		
1.3.b.	FCCS will develop a guidance document in consultation with Service Teams that defines the quality standards for facilitated 90-day reviews and SARs.	K Canada	Guidance Document	3, 4		
1.3.c.	FCCS will develop and implement plan and training on guidance document for facilitated 90-day reviews and SARs.	K. Canada	Plan and Training Materials	4, 5, 6		
1.3.d.	FCCS will evaluate implementation of facilitated 90-day reviews and SARs.	K Canada	Rating results from observations of reviews and rating results from meeting participants.	7, 8		
1.4.	FCCS will evaluate the impact of supervisors in the QA peer review process including improvement in the quality and timeliness of CAPMIS Tools.					
1.4.a.	FCCS will develop an analysis plan and obtain baseline data on the quality and timeliness of CAPMIS related tools: Safety Assessment, Safety Plans, Family Assessments, Reunification Assessments and Case Plans.	K Canada	Baseline data and analysis plan.	1		
1.4.b.	FCCS will collect data on the quality and completion of the CAPMIS Tools (see 1.4.a)- Safety Assessment, Safety Plans, Family Assessments, Reunification Assessments and Case Plans.	K. Canada	Report on data results for CAPMIS Tools.	4, 7		

1.4.c.	Assess the impact of supervisors in the QA peer review process.	K. Canada	Summary of strengths and challenges.	7		
2.1.	Increase staff skills and competencies in conducting visits with children in their own homes to assure their safety and well-being and to assure that their needs are being met.					
2.1.a.	Obtain written information from the National Resource Center for Permanency and Family Connections, the National Center for Child Protective Services, and the National Center for In-Home Services on conducting visits with children in their own homes in order to develop a best practice guidance.	L. McGee	Initial set of guidelines and practice tools received from the NRCs.	2		
2.1.b.	Incorporate final set of guidelines in the CPS Worker Manual. Best practice guidance provided by NRCs will be incorporated into technical assistance to public children services agencies.	L. McGee	Revisions to the CPS Worker Manual.	4		
2.1.c.	Provide technical assistance presentations on the best practice guidance and identified barriers will be provided to PCSAs.	L. McGee	Report containing information regarding the effectiveness of sessions and feedback on the best practice guidance.	6		
2.2.	Increase staff skills and competencies in conducting visits with children in substitute care to assure their safety and well-being, to assure that their needs are being met, and to assure that there is ongoing planning for permanency for the child.					

2.2.a.	Obtain technical assistance from the National Resource Center for Permanency and Family Connections and Permanency Planning and the National Resource Center for Youth Development to develop a capacity building plan and facilitate technical assistance sessions for public children services agencies on worker/child/youth visits.	C. Anthony	Capacity building plan and summary of participant evaluations of technical assistance sessions.	1		
2.2.b.	Implement capacity building plan for the provision of technical assistance to PCSAs.	C. Anthony	Report on status of implementation.	3		
2.2.c.	Use CPOE Stage 8 data to monitor progress on quality child/worker visits.	B. Manuel	Report on progress of quality child/worker visits.	Quarterly Report until goal is met		
2.3.	Increase staff skills and competencies in conducting visits with parents in in-home and substitute care cases to assure the safety and well-being of children, to assure that their needs are being met, and to assure that there is ongoing planning for permanency for the child.					
2.3.a.	Integrate items on conducting home visits to the check list on supervisory conferences in Supervisory Core I: Casework Supervision.	L. Crozier OCWTP	Revised check list on Supervisory Conferences.	1		
2.3.b.	Integrate trainer instructions and discussion questions on home visits to the learning lab following Supervisor Core I: Casework Supervision.	L. Crozier OCWTP	Report summarizing changes made to the learning lab following Supervisor Core I: Case Work Supervision.	1		

2.3.c.	Develop the distance learning curriculum, <i>Effective Use of Home Visits</i> .	L. Crozier OCWTP	Distance learning curriculum.	2		
2.3.d.	Train supervisors on conducting “stand alone” adapted components of the curriculum.	L. Crozier OCWTP	Report containing information on participants perceptions on the effectiveness of the training.	3		
2.3.e.	Train trainers on conducting the curriculum, <i>Effective Use of Home Visits</i> .	L. Crozier OCWTP	Report containing information on participants perceptions on the effectiveness of the training.	3		
2.3.f.	Pilot the distance learning curriculum, <i>Effective Use of Home Visits</i> .	L. Crozier OCWTP	Report containing information on participants perceptions on the effectiveness of the training.	3		
2.3.g.	Evaluate the effectiveness of the curriculum, make revisions if necessary, and inform trainers of the revisions.	L. Crozier OCWTP	Report containing information on participants perceptions of the effectiveness of the curriculum and revisions made to the curriculum, if indicated.	4		
2.3.h.	Promote implementation of the curriculum throughout Ohio.	L. Crozier OCWTP	Screen print of curriculum posting on OCWTP website and announcements of training.	6, 7		
3.1.	Improve identification of family members through family search and engagement techniques.					
3.1.a.	Plan a Training of Trainers workshop focusing on Creating Family Connections to be offered to counties served by the OCWTP, Northeast Ohio Regional Training Center with the assistance of the National Resource Center on Permanency & Family Connections.	J. Hembree L. Crozier	Training Plan and Training Agenda.	1		

3.1.b.	Offer two day Training of Trainers workshop with coaching and mentoring follow-up on Creating Family Connections and Permanence to 14 counties served by the OCWTP, Northeast Ohio Regional Training Center in collaboration with the National Resource Center on Permanency and Family Connections.	J. Hembree L. Crozier	Evaluation report on how training, coaching and mentoring impacted practice.	4, 7		
3.1.c.	Convene a workgroup to assess the results of efforts used to implement Family Search and Engagement and develop a plan for dissemination of lessons learned from the 14 counties.	J. Hembree L. Crozier	Workgroup Report and Recommendations.	8		
3.1.d.	Develop and pilot a one-hour asynchronous online course of the foundational components of a process to conduct family search and engagement throughout the life of the case.	L. Crozier OCWTP	Evaluation of the pilot and post course follow-up to determine if transfer of learning occurred.	6		
3.2.	Improve preservation of family connections through better planning and engagement of family members.					
3.2.a.	Poll RTCs and current practitioners for potential coaches skilled in engaging families and children in collaborative partnerships.	L. Crozier OCWTP	Report containing information on results of identification of coaches.	1		
3.2.b.	Research existing skill-building resources and tools from other systems and determine which resources and tools are applicable to Ohio.	L. Crozier OCWTP	Report on resources and tools identified.	3		
3.2.c.	Make any Ohio-specific adaptations to selected resources and tools.	L. Crozier OCWTP	Report summarizing changes made to the resources and tools.	4		
3.2.d.	Develop engagement skill-building resources and tools to help caseworkers involve children and families in (a) identifying strengths and needs, (b) identifying services and service providers, (c) establishing goals in case plans, (d) evaluating progress toward goals, and (e) discussing the case plan in case planning meetings.	L. Crozier OCWTP	Listing of resources and tools developed.	4		

3.2.e.	Enroll identified coaches in the 6-hour Training for Coaches course.	L. Crozier OCWTP	Summary of results of training.	4		
3.2.f.	Provide a Training on Content session to familiarize selected coaches with specific coaching strategies to enhance engagement.	L. Crozier OCWTP	Summary of results of training.	4		
3.2.g.	Promote availability of coaching to enhance engagement skills through the OCWTP website and through meetings conducted by the eight Regional Training Centers with their assigned counties.	L. Crozier OCWTP	Screen print of coaching opportunities posting on OCWTP website and announcements of training.	5		
3.2.h.	Select at least three PCSAs to pilot coaching interventions to address engagement skills	L. Crozier OCWTP	Report outlining results of coaching interventions.	7, 8		
3.2.i.	Collect and analyze outcome measures of piloted coaching interventions.	L. Crozier OCWTP	Report containing an analysis of coaching interventions.	8		
<i>Renegotiated Action Steps and Benchmarks</i>						

	Primary Goal- Child Welfare Legislative Reform: State laws are modified to reduce fragmentation of child maltreatment definitions and improve consistency of child welfare practice statewide.				Applicable CFSR Outcomes or Systemic Factors: S1, S2	
Strategy: 1. Move Ohio from an incident-based statutory framework to a “child in need of protective services” (CHIPS) system that: eliminates inconsistent, overly broad, overly narrow and undefined categories of child maltreatment and provide more concise categorization of reports.					Applicable CFSR Items: 1, 4	
	Action Steps and Benchmarks	Person Responsible	Evidence of Completion	Quarter Due	Quarter Completed	Quarterly Update
1.1.	Respond to issues identified in Round 1 CFSR regarding inconsistency across jurisdictions with more clearly defined definitions of child maltreatment.					
1.1.a.	Participate in legislative process as appropriate to support passage.	K. Gilbert Office of External Affairs CPS Policy Staff	Status update on participation in legislative process	4, 8		
1.1.b.	Facilitate a minimum of 4 stakeholder sessions per year to provide ongoing education with stakeholders regarding CHIPS to ensure accurate understanding of provisions and integration of stakeholder concerns into final language.	K. Gilbert Office of External Affairs CPS Policy Staff	Summary of sessions held, including evaluation of sessions and next steps.	4, 8		
1.1.c.	Maintain ohiochildlaw.org website to ensure that all stakeholders have access to current information regarding and ability to comment on proposed CHIPS language.	K. Gilbert SCO	Summary of how stakeholders can comment on proposed CHIPS language through website.	1		

1.1.d.	Develop two year implementation plan consistent with provisions of legislation.	K. Gilbert Office of External Affairs CPS Policy Staff	Plan developed.	7		
1.1.e.	Convene county agency workgroup to develop policy guidelines and recommended rule language in anticipation of CHIPS enactment.	CPS Policy Staff PCSA Representatives	Policy proposal.	4		
1.1.f.	Identify areas in both Rules of Superintendence and Rules of Juvenile Procedure that will need change as a result of CHIPS enactment.	SCO	Legal Analysis of areas that will need to be revised.	6		
1.1.g.	Begin JAD sessions to identify the SACWIS enhancements that are indicated by rule and policy proposal.	SACWIS MIS CPS Policy	JAD sessions initiated.	8		
<i>Renegotiated Action Steps and Benchmarks</i>						

Primary Goal: Community Collaboration- Stakeholders jointly design and coordinate policies, practices, and services to improve child well-being.				Applicable CFSR Outcomes or Systemic Factors: WB2,WB3,SF2,SF5		
Strategies: 1. Improve identification and statewide dissemination of practices which result in improved outcomes for children and families. 2. Increase access to effective community-based treatment, including physical and behavioral health care, and family support services. 3. Improve assessment of children's educational needs and the provision of services designed to address them. 4. Decrease fragmentation of policies and procedures impacting youth who are aging out of care.				Applicable CFSR Items: 21, 22, 23, 25, 27, 28, 29, 36, 37		
Action Steps and Benchmarks		Person Responsible	Evidence of Completion	Quarter Due	Quarter Completed	Quarterly Update
1.1.	Provide local partners with child welfare data and information about best practices to facilitate improved outcomes and promote peer learning opportunities.					
1.1.a.	Publish updates identifying successful county programs related to CFSR outcomes.	K. Gilbert	Supreme Court of Ohio will notify ODJFS that updates have been posted to the Supreme Court Website.	1		
1.1.b.	Distribute a compilation of county-generated solutions to most frequently cited barriers to achieving safety, permanency and well-being.	K. Gilbert	Screen print verification that information is posted on www.fcf.ohio.gov www.summiton children.ohio.gov.	1		
1.1.c.	Distribute expanded video of state responses to counties most frequently cited programs for community use and to highlight under-utilized and/or innovative options.	K. Gilbert	Notification of distribution of videos.	2		

1.1.d.	Communicate Ohio's priorities for children's programming through the establishment and maintenance of state websites.	S. Williams K.Gilbert	1- Notification to counties of FCF website 2- SCO website incorporates RSS feedback for automatic notification of updates.	1 (FCF) 2 (SCO)		
1.1.e.	Make available data related to county performance on CFSR outcomes.	R. Ward	Statewide screen print of additional data posted to website and notification to counties of its availability.	3, 7		
2.1.	Continue to work collaboratively with the OFCF Cabinet Council to assess gaps in needed services and to develop inter-agency strategies to effectively address them.					
2.1.a.	Prioritize services based on multi-systemic service utilization reports, project evaluations, and gap analysis.	OFCF S. Williams	List of prioritized services reviewed and approved by OFCF Cabinet Council	4,8		
2.2.	Provide parent advocates to families receiving local service coordination in order to improve access to services and decrease the need for out-of-home care placement.	S. Williams	Annual Report on number of families who utilized parent advocates and satisfaction results.	4,8		
2.3.	FCCS will secure evidence-based service contracts using pooled funds from ADAMH, Juvenile Court, and FCCS.					
2.3.a.	FCCS will issue Requests for Proposals (RFP)	K. Canada	Notification to vendors of the RFP issuance; RFP.	1		
2.3.b.	FCCS will award the community collaborative evidence based service contracts.	K. Canada	List of evidence based service contracts identifying services provided.	1		
2.3.c.	FCCS will track the community collaborative contracts and report on services from the contracts.	K. Canada	Summary of contracts and services.	4, 7		

2.4.	Identify and address health care issues.					
2.4. a.	Continue to work with the OFCF Cabinet to identify health care issues experienced by children in the child welfare system and implement strategies to address them.	S. Williams	Summary of collaborative efforts to address identified health care issues.	4,8		
2.4.b.	Increase caseworker awareness of free and low cost health care to families served.	S. Williams	Distribution of materials on Community Health Centers to PCSAs.	3,7		
2.4.c.	Increase caseworker awareness of available oral health care to families served.	S. Williams ODH staff	Distribution of materials and method of distribution regarding oral health care services to PCSAs.	3,7		
2.4.d.	Continue monitoring Medicaid enrollment of children are aged out of foster care.	S. Williams OHP staff	Quarterly enrollment reports.	3,7		
3.1.	Work collaboratively with partner agencies to address the non-academic barriers to student success.					
3.1.a.	In collaboration with the Ohio Department of ODJFS will promote an integrated network of educationally-based services which address non-academic barriers to student success.	S. Williams	Summary of Shared Agenda and Ohio Mental Health Networks for School Success collaborative activities.	4,8		
3.1.b.	Disseminate information to PCSAs about Ohio's Medicaid School Program.	S. Williams OHP staff	Report on the number of school districts which apply to be and/or approved to be Medicaid providers.	4,8		

4.1.	Work with the OFCF Cabinet to align services targeting transition-age youth to reduce fragmentation and promote program participation.					
4.1.a.	Identify various state department programs which target transition-age youth in an effort to identify areas of duplication or gaps in services.	S. Williams	Inter-system matrix identifying programs.	2		
4.1.b.	Align and consolidate TAY resources, policies, and services across agencies to increase youth's access to employment training opportunities.	S. Williams OCFC	Written policy recommendations made to the OFCF Cabinet Directors.	4,7		
4.1.c.	Work with local OFCF councils and WIA Boards to increase youths' access to employment training opportunities.	OCFC Williams	S. Summary of collaborative efforts between OFCF and WIA Boards.	6		
<i>Renegotiated Action Steps and Benchmarks</i>						

Primary Goal- Licensing: Children are safe while placed in substitute care settings due to increased oversight of placement providers.					Applicable CFSR Outcomes or Systemic Factors: SF7	
Strategies: 1. Amend rules governing the issuance of waivers and variances in the Ohio Administrative Code. 2. Enhance Ohio's process for ensuring compliance with background check requirements for all ODJFS- licensed caregivers.					Applicable CFSR Items: 42, 43	
Action Steps and Benchmarks		Person Responsible	Evidence of Completion	Quarter Due	Quarter Completed	Quarterly Update
1.1.	Revise policy regarding foster care licensing waivers and variances					
1.1.a.	Re-evaluate OAC rules governing requirements and standards for certification and recertification of foster care agencies requests for waivers and variances and submit revisions through clearance process.	C. Anthony	Proposed revisions to OAC rules	1		
1.1.b.	Finalize policy changes and provide technical assistance to agencies regarding the new requirements and/or procedures.	C. Anthony Eaton	A. Summary of policy changes and TA plan.	2		

1.1.c.	Decrease and/or eliminate the use of waivers and variances by providers.	A. Eaton	Summary of waivers/variances that were approved, if any and an annual summary report of the number and type of waivers/variances requested after the policy and rule changes listed in 1.1.b. have occurred.	6, 8		
2.1.	Institute heightened oversight of BCII compliance by ODJFS.					
2.1.a.	Increase monitoring during agency oversight visits to verify compliance with BCII requirements.	A. Eaton	Compilation of Summary of Findings of Noncompliance Reports; JFS generated reports summarizing aggregate findings.	3, 8		
2.1.b.	Incorporate monitoring of RAPBACK during agency visits.	A. Eaton	Compilation of Summary of Findings of Noncompliance Reports; JFS generated reports summarizing aggregate findings.	4, 8		
2.1.c.	Requirements will be monitored during onsite reviews or via SACWIS desk audits.	A. Eaton	JFS generated reports summarizing aggregate findings.	4, 8		
2.1.d.	Agencies will be required to develop corrective action plans to address all findings of noncompliance pertaining to background checks unless exempt due to pending enforcement actions.	A. Eaton	Approved Agency CAPs.	4, 8		

2.1.e.	Provide training (e.g., New Agency/Administrator Orientation or remedial sessions) and technical assistance (Quarterly Meetings) to improve agency compliance with background check requirements.	A. Eaton	Training Agenda; Sign-In Sheets; Training Curricula.	4, 8		
2.1.f.	New Agency Orientation will be offered to agencies via web cast.	A. Eaton	Training Notice and Agenda; Sign-In Sheets; Training Curricula.	2, 4		
2.1.g.	Quarterly meetings will be held for all agencies to include as a topic of TA, all BCII requirements, documentation and notification requirements.	A. Eaton	Training Notice and Agenda; Sign-In Sheets; PowerPoint Handouts.	3		
<i>Renegotiated Action Steps and Benchmarks</i>						

Primary Strategies	Key Concerns
<p>Improve timeliness of initiation of assessments/ investigations of non-emergency reports. (Goal 1: Safety)</p>	<p>Ohio needs to develop a best practice guidance for PCSAs on the role of report initiation in the assessment of safety and risk.</p>
<p>Provide older youth and those aging out of foster care with needed supports and connections to achieve self-sufficiency. (Goal 2: Permanency)</p>	<p>Ohio need to improve assessment and provision of Independent Living Services and seeks assistance in developing strategies for providing technical assistance to counties on: 1) identifying youth eligible for Independent Living Services; 2) engaging youth in assessment and development of independent living plans; 3) developing appropriate independent living plans; 4) maintaining/supporting important connections for youth.</p>
<p>Increase staff skills and competencies in case planning and facilitating productive visits among parents, children, siblings, and others who play a critical role in achieving children's permanency plans. (Goal 2: Permanency)</p>	<p>Ohio needs to develop best practice guidance regarding family connection preservation through quality visitation.</p>

<p>Increase staff skills and competencies in engaging and supporting fathers' connections to their children. (Goal 2: Permanency)</p>	<p>Ohio needs to develop and provide training to child welfare staff on strategies to use in effectively engaging and supporting fathers' connections to their children.</p>
<p>Increase staff skills and competencies in conducting visits with children in their own homes to assure their safety and well-being and to assure that their needs are being met. (Goal 3: Child Welfare Service Intervention)</p>	<p>Ohio needs to develop best practice guidance regarding in-home child/worker visitations.</p>
<p>Increase staff skills and competencies in conducting visits with children in substitute care to assure their safety and well-being, to assure that their needs are being met, and to assure that there is ongoing planning for permanency for the child. (Goal 3: Child Welfare Service Intervention)</p>	<p>Ohio seeks assistance in developing strategies for providing technical assistance to counties on improving the quality of caseworker visits to children/youth in substitute care. Technical assistance in this area needs to include the youth's perspective of what he/she wants to address during a visit with the worker and also what other states have seen as a benefit when improving caseworker visits.</p>
<p>Improve staff skills and competencies in family search and engagement techniques and preserving family connections. (Goal 3: Child Welfare Service Intervention)</p>	<p>Ohio seeks training, mentoring, and coaching on search and engagement techniques.</p>

TA Resources Needed

NRC for Child Protective Services

NRC for Youth Development

NRC for Permanency and Family Connections

**NRC for Permanency and Family Connections
National Quality Improvement Center on Non-Resident Fathers**

**NRC for Permanency and Family Connections
for Child Protective Services
for In-Home Services** **NRC
NRC**

**NRC for Permanency and Family Connections
for Youth Development** **NRC**

NRC for Permanency and Family Connections

Ohio Performance on the Round Two CFSR National Standard Items: 2006B07A to 2009B10A										
		Data Period for Final Report					Most recent period for potential baseline			
	Improvement Factor	2006b07a	FY2007	2007b08a	FY2008	2008b09a	2009ab	2009B10A	TB#3A Goal	Status
Absence of Maltreatment Recurrence (standard: 94.6% or more)	1.0060	93.5%	93.6%	N/A	93.7%	N/A	92.7%	N/A	93.3%	Lowest potential baseline 09AB
Absence of Child Abuse and/or Neglect in Foster Care (standard: 99.68% or more)	1.0010	99.46%	99.56%	N/A	99.69%	N/A	99.59	N/A	99.56%	NS achieved in 2008
Timeliness and Permanency of Reunification (standard: 122.6 or higher)	1.0290	119.5	118.1	118.6	118.7	118.4	121.0	123.0	121.5	NS achieved in 09B10A
Timeliness of Adoptions (standard: 106.4 or higher)	1.041	102.8	108.0	108.4	102.3	103.0	107.2	105.0		NS in 2007

Permanency for Children and Youth in Foster Care for Long Periods of Time (standard: 121.7 or higher)	1.0280	119.2	119.4	119.3	117.4	113.7	112.4	113.3	115.5	Lowest potential baseline 2009
Placement Stability (standard: 101.5 or higher)	1.0300	102.0	102.6	103.6	103.9	104.3	105.0	106.1		NS achieved
Yellow - Indicates potential baseline with TB#3A applied				Indicates file period where PIP Goal achieved or national standard met						
Indicates data quality issues identified that directly impact the measure for this file										
Source: U.S. Department of Health and Human Services Administration for Children and Families Administration on Children, Youth and Families Children's Bureau Data current as of August 13, 2010										

Table 1. Ohio CFSR Ratings for Safety and Permanency Outcomes and Items

Outcomes and Indicators	Outcome Ratings			Item Ratings	
	In Substantial Conformity?	Percent Substantially Achieved*	Met National Standards?	Rating* *	Percent Strength
Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect	No	63.2	Met 0 of 2		
Item 1: Timeliness of investigations				ANI	63
Item 2: Repeat maltreatment				Strength	100
Safety Outcome 2: Children are safely maintained in their homes when possible and appropriate	No	75.0			
Item 3: Services to prevent removal				ANI	87
Item 4: Risk of harm				ANI	75
Permanency Outcome 1: Children have permanency and stability in their living situations	No	30.0	Met 0 of 4		
Item 5: Foster care reentry				ANI	85
Item 6: Stability of foster care placements				ANI	77
Item 7: Permanency goal for child				ANI	57.5
Item 8: Reunification, guardianship, or placement with relatives				ANI	56
Item 9: Adoption				ANI	25
Item 10: Other planned permanent living arrangement				ANI	71
Permanency Outcome 2: The continuity of family relationships and connections is preserved	No	65.0			
Item 11: Proximity of placement				Strength	100
Item 12: Placement with siblings				ANI	88
Item 13: Visiting with parents and siblings in foster care				ANI	48

Outcomes and Indicators	Outcome Ratings			Item Ratings	
	In Substantial Conformity?	Percent Substantially Achieved*	Met National Standards?	Rating* *	Percent Strength
Item 14: Preserving Connections				ANI	74
Item 15: Relative placement				ANI	56
Item 16: Relationship of child in care with parents				ANI	58

*95 percent of the applicable cases reviewed must be rated as having Substantially Achieved the outcome for Ohio to be in substantial conformity with the outcome.

**Items may be rated as a Strength or an ANI. For an overall rating of Strength, 90 percent of the cases must be rated as a Strength.

Table 2. Ohio CFSR Ratings for Child and Family Well-Being Outcomes and Items

Outcomes and Indicators	Outcome Ratings		Item Ratings	
	In Substantial Conformity?	Percent Substantially Achieved	Rating**	Percent Strength
Well-Being Outcome 1: Families have enhanced capacity to provide for children's needs	No	65.6		
Item 17: Needs/services of child, parents, and foster parents			ANI	69
Item 18: Child/family involvement in case planning			ANI	64
Item 19: Caseworker visits with child			ANI	87.5
Item 20: Caseworker visits with parents			ANI	58
Well-Being Outcome 2: Children receive services to meet their educational needs	No	87.5		
Item 21: Educational needs of child			ANI	87.5
Well-Being Outcome 3: Children receive services to meet their physical and mental health needs	No	82.8		
Item 22: Physical health of child			ANI	84
Item 23: Mental health of child			ANI	85

*95 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for Ohio to be in substantial conformity with the outcome.

**Items may be rated as a Strength or an ANI. For an overall rating of Strength, 90 percent of the cases reviewed for the item (with the exception of item 21) must be rated as a Strength. Because item 21 is the only item for Well-Being Outcome 2, the requirement of a 95-percent Strength rating applies.

Table 3. Ohio CFSR Ratings for Systemic Factors and Items

Systemic Factors and Items	In Substantial Conformity?	Score*	Item Rating**
Statewide Information System	Yes	3	
Item 24: The State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care.			Strength
Case Review System	No	2	
Item 25: The State provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parents that includes the required provisions.			ANI
Item 26: The State provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review.			Strength

Systemic Factors and Items	In Substantial Conformity?	Score*	Item Rating**
<p>Item 27: The State provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.</p>			ANI
<p>Item 28: The State provides a process for termination of parental rights proceedings in accordance with the provisions of Adoption and Safe Families Act.</p>			ANI
<p>Item 29: The State provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the</p>			ANI
Quality Assurance System	Yes	4	
<p>Item 30: The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of children.</p>			Strength

Systemic Factors and Items	In Substantial Conformity?	Score*	Item Rating**
<p>Item 31: The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.</p>			Strength

Systemic Factors and Items	In Substantial Conformity?	Score*	Item Rating**
Training	Yes	4	
<p>Item 32: The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services.</p>			Strength
<p>Item 33: The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP.</p>			Strength
<p>Item 34: The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.</p>			Strength

Systemic Factors and Items	In Substantial Conformity?	Score*	Item Rating**
Service Array	No	2	
<p>Item 35: The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency.</p>			Strength
<p>Item 36: The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CESP.</p>			ANI
<p>Item 37: The services in item 35 can be individualized to meet the unique needs of children and families served by the agency.</p>			ANI

Systemic Factors and Items	In Substantial Conformity?	Score*	Item Rating**
Agency Responsiveness to the Community	Yes	4	
Item 38: In implementing the provisions of the CFSP, the State engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP.			Strength
Item 39: The agency develops, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP.			Strength
Item 40: The State's services under the CFSP are coordinated with services or benefits of other Federal or Federally-assisted programs serving the same population.			Strength

Systemic Factors and Items	In Substantial Conformity?	Score*	Item Rating**
Foster and Adoptive Parent Licensing, Recruitment, and Retention	No	2	
Item 41: The State has implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards.			Strength
Item 42: The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.			ANI
Item 43: The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children.			ANI

Systemic Factors and Items	In Substantial Conformity?	Score*	Item Rating**
Item 44: The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom adoptive homes are needed.			Strength
Item 45: The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children.			Strength

* Scores range from 1 to 4.

A score of 1 or 2 means that the factor is not in substantial conformity. A score of 3 or 4 means that the factor is in substantial conformity.

** Items may be rated as a Strength or as an ANI.

