



**Wisconsin Department of Children and Families
Division of Safety and Permanence**

Program Improvement Plan

**Revised Version
December 14, 2010**

Introduction

The child welfare service system in Wisconsin is primarily a county-operated, state-supervised system. The state provides program funding and oversees policy direction while county human or social service departments provide child welfare services to children and families. Eleven federally-recognized Indian Tribes located in Wisconsin receive funding from the Department of Children and Families (DCF) for some child welfare services as well as funds directly from the federal government. Two facets of the child welfare system are state operated; the special needs adoption program and child welfare services in Milwaukee County.

Local and state agencies, private partners, tribes, advocacy centers, and other stakeholders all play a key role in the success of Wisconsin's child welfare system. The creation of the new Department in July of 2008 brought to light more than ever the interest and dedication Wisconsin stakeholders have in developing appropriate policies and practice to assure the safety, permanence, and well-being of Wisconsin's children. To provide advice and counsel to the DCF in implementing such changes, the Secretary's Council on Child Welfare was formed. The Council convenes key leaders in child abuse prevention and protective services from across the state to advise the Secretary of the Department regarding policy, budget, and program issues to improve Wisconsin's child welfare system.

The Department has several initiatives underway that are outside of our Program Improvement Plan (PIP). Though the following initiatives are not included in the PIP, we expect them to have a positive impact on all the challenges that were identified through the Child and Family Services Review (CFSR) process:

In December, 2009, the Wisconsin State Legislature codified the Federal Indian Child Welfare Act into state law. The new law (the Wisconsin Indian Child Welfare Act or "WICWA") strengthens the Federal Act and defines processes for meeting certain requirements for removal, foster care placement, and termination of parental rights in cases of Indian children. As part of the major initiatives for implementation, the Department has partnered with the Midwest Child Welfare Implementation Center (MCWIC) to initiate the "Best Outcomes for Indian Children in Out-of-Home Care" Project. The DCF was awarded a three-year unique project grant through MCWIC. The MCWIC/DCF Project focuses on implementation of WICWA through a series of activities that will assist Wisconsin's child welfare system in incorporating the fundamentals of the Indian Child Welfare Act and Chapters 48 and 938, Wis. Stats., related to Indian child welfare. In an effort to provide quality assistance to each county, the project will utilize three statewide facilitators who will provide technical assistance to county agencies on the implementation of WICWA, develop training modules designed to meet the needs of the agency, assist in training on entering ICWA information into the electronic Wisconsin Statewide Automated Child Welfare Information System (eWiSACWIS), and help create communication systems with tribal agencies regarding WICWA implementation.

In 2010 the Division of Safety and Permanence (DSP) initiated the pilot of an Alternative Response program in four counties and the Bureau of Milwaukee Child Welfare (BMCW). The pilot program employs an alternative response approach to child protective services (CPS) that is family-focused and strengths-based in supporting child and family well-being. The program allows the development of improved procedures for the response to reports of child maltreatment. A central tenet of alternative response is that many children and families that come to the attention of CPS are

better served using a supportive and collaborative approach that focuses on strengths and needs of a family and is free from the constraints and stigma of an investigation. By redesigning the ways in which CPS responds to screened-in reports of alleged child maltreatment, an alternative response approach may create more flexibility for agencies and their staff in identifying and addressing family needs.

The state has also made changes to the governance structure of its child welfare training system to create an executive committee made up of county, state, and tribal child welfare service provider representatives to govern the new child welfare professional development system. This structure will assist in timely decision making which will, in turn, lead to more efficient development and delivery of professional development opportunities throughout the state. It will also strengthen the state's capacity to ensure that training is delivered consistently throughout the state and aligns with current policy and standards set by the DCF.

In conjunction with our Levels of Care initiative for foster care as part of our PIP, the DCF received statutory authority for a rate regulation system that will redesign our rate-setting structure and develop a framework for measuring performance of service providers. Rate regulation is designed to restructure rates paid to Group Homes, Residential Care Centers and the administrative rates paid to child placing agencies in a manner that supports equitable payments between similar providers and supports the best practices and standards to enhance outcomes for children and youth in out-of-home care. As we enhance our understanding of the needs of children in out-of-home care through use of a common statewide assessment (discussed below), we are also developing an increased understanding of the capacity of our providers and the gaps in our array of placement services. Over the next two years these changes will result in placing and supporting children in placements that are best aligned with their needs.

The BMCW has initiated a service system redesign that will create a service delivery system that is accountable for outcomes and minimizes the number of professionals involved in a single case. BMCW staff, with external consultation, will develop project objectives, design a service and reimbursement model, and create a process for vendors to provide specific services to achieve performance targets in timely permanency, placement stability, and well-being measures.

DCF's Future of Child Welfare project has a strong relationship with our PIP and will support many of the same desired outcomes. This project aims to develop a strategic plan of action for the future of child welfare in the state of Wisconsin. The initiative will focus on developing a roadmap with specific projects designed to achieve desired outcomes over the next three to five years. Efforts will focus on three projects during the next 24 months. The first is the child welfare funding project, which will explore how we utilize federal funds and determine whether we can better employ federal authority to maximize those funds to achieve better outcomes for children. This project will include an analysis of county child welfare spending, state funding allocations to counties through community aids, and the relationship of funding to child welfare outcomes. Secondly, The Future of Child Welfare project will focus on racial disproportionality, an issue that is of particular concern in Wisconsin. We will identify and implement key strategies to address racial disproportionality in the state child welfare system, in partnership with community groups, other government agencies, and families. The third major project, focusing on Wisconsin's child welfare practice model, is discussed further below as part of our strategy to build service capacity within the PIP.

Program Improvement Plan (PIP) Development Process

After the completion of the on-site review, the DSP had 150 days to develop its PIP. Within that timeframe, the Division took concerted steps to assure that the Department and key stakeholders understood the results of the CFSR, and provided input into the necessary and feasible strategies for the Department and local agencies to undertake in order to achieve improvement goals.

The first phase of PIP development began with several regional roundtables held by the DSP across the state to provide interested parties with information regarding the preliminary results of the review and to obtain feedback regarding current and future program improvement initiatives that could be included in the PIP. Specific discussions were also held with key stakeholder groups such as the Out-of-Home Care and Adoption Committee, tribal representatives, the Wisconsin Commission on Children Families and the Courts, state legislators, and the Youth Advisory Council.

In the second phase of development, the DSP identified a “Core Team” of interested stakeholders which reviewed strategies identified by the DSP for inclusion in the PIP, as well as the comments, concerns, and suggestions offered by stakeholders around the state during the PIP regional roundtables. Through facilitated discussion the Core Team identified 16 strategies as potential initiatives to address the areas identified as needing improvement in the CFSR. DSP program staff and Department leadership then reviewed the feasibility, potential impact, and measurability of these identified strategies. In August, the final report from the Children’s Bureau was received and posted on-line to the DCF CFSR web page for public review. Stakeholders were encouraged to review the report and send any feedback to the Division. The Core Team met for a third time in August to review departmental recommendations and provide further feedback. A revised draft of the PIP outline and action steps was shared with various stakeholders, including the Secretary’s Council on Child Welfare. A first draft of the PIP was shared with the Core Team and the Secretary’s Council on Child Welfare in early September before final drafting was completed.

Identified Challenges

Based on the state’s performance on the federal child safety and permanency data profiles, and the CFSR case review process, Wisconsin’s child welfare system needs improvement in the following areas:

Timely Response, Assessment and In-Home Service Provision

The state did not meet performance standards in timeliness of response to maltreatment (Item 1), providing adequate in-home services to prevent removal (Item 3), and assessment practice (Item 4). Improvements are also needed to better assess the needs of families (Item 17), and to ensure that caseworkers meet regularly with children and parents (Items 19 and 20). Strategies for improvement in these areas are specifically addressed in the PIP.

Permanency Planning and Case Review

Performance on most of the permanency outcome measures was below the federal performance standards. The state lacks consistency in adequately identifying permanency goals for children (Item 7), achieving adoption after termination of parental rights (Item 9), and in finding other planned permanent living arrangements when reunification is not possible (Item 10). The state also needs to make improvements in preserving familial connections by placing children with their siblings more often (Item 12), ensuring children are able to visit their siblings and parents when in care (Item 13), and making relative placements (Item 15). Other areas needing improvement include placement stability (Item 6), reunification with parents or permanent placements with relatives (Item 8), and

maintaining relationships with parents when children are placed in out-of-home care (Item 16). Under the PIP, changes in the foster care system and other strategies to take advantage of permanence options will improve family connections, placement stability, and achieving permanence. These strategies will also improve consistency in the application of foster care licensing standards (Item 42).

Item 14, which addresses preserving cultural and community connections, was also rated as an area needing improvement. Interviews held with tribal stakeholders after completion of the on-site review indicated that while advancements have been made in the relationship between DCF and the 11 sovereign tribes in the state of Wisconsin, more work is needed to improve relationships between those tribes and Wisconsin's 72 counties to truly improve the connections Indian children in the child welfare system maintain with their tribes. More work is also needed to improve cultural and community connections for all children in the state's child welfare system.

Input from stakeholders and the CFSR case reviews also show that improvements are needed to improve the case planning practice and permanency plan review process (Item 18, and systemic factor Items 25, 27, 28, and 29). Wisconsin's performance in the permanency outcomes is directly tied to the lack of integrated policy related to case planning, permanency planning, and concurrent planning, which has led to significant variation among local child welfare agencies related to permanency planning practice and outcomes, inconsistent provision of post-reunification services, and diminished use of best practices in concurrent planning. The Trial Reunification policy has not been effectively implemented, primarily due to concerns regarding local child welfare agency practice related to in-home safety planning, and due to the reluctance of some courts to pursue trial reunification without formal statutory authority. Strategies in the PIP focus on revising assessment standards, providing policy guidance and targeted training to better support effective permanency and concurrent planning practices, and improving collaboration between child welfare agencies and the court system.

The percentage of foster care reentries (Item 5) was rated as a strength in the CFSR because 100% of the applicable cases reviewed (12 out of 40 foster care cases) included no incidents of foster care reentry. However, statewide administrative data for Wisconsin shows a different picture. In 2008, the statewide reentry rate was 22%. For juvenile justice cases the rate was 27% in 2008, and these cases accounted for 39% of all reentry cases. The Statewide Assessment and Final Report address several areas in which reform is needed to address reentry rates and case planning for children in the juvenile justice system, and to reduce the reentry rate for the full out-of-home care population in Wisconsin. Wisconsin has identified the need to reconsider the approach to addressing the behavioral health needs of adolescents, and the assessment and support of parental capacity to sustain reunification. Various initiatives in the PIP address Wisconsin's foster care reentry problem and are noted below.

Well-Being of the Child

Although the findings show that these are areas still needing marked improvement, in the on-site review Wisconsin performed fairly well in meeting the educational, physical health, and mental health needs of the child (Items 21, 22, and 23). Initiatives in the PIP focus on improvements to coordinate a child's educational and health plans, as well as program initiatives to offer specific services.

Service Array

The state has in place an array of services that assess the strengths and needs of children and families and address those needs in order to create a safe home environment. However, Wisconsin's challenges lie in the accessibility of those services by all 72 counties (Item 36), and ensuring that there are varied services available throughout the state to meet the unique needs of children and families, including bilingual families and those with unique cultural backgrounds (Item 37). This is especially a challenge in Wisconsin's rural counties, where specialized services are often not accessible or, in some instances, even available. In the balance of the state, improvements need to be made so that available services are accessible to more families. The PIP initiatives in this area are meant to increase both the availability and accessibility of those services.

Training Monitoring and Compliance

Although the state has a training program in place for initial and ongoing staff, the state does not have a process to ensure that all staff who deliver services have fulfilled training requirements (Items 32 and 33). The state's mandated foster parent training program does not go into effect until January, 2011, and thus was also rated as an area needing improvement in the CFSR (Item 34). Initiatives under the state's newly-restructured training system are included in the PIP to address these concerns.

Primary PIP Strategies

Wisconsin's five primary strategies are designed to focus on particular program areas. Goals achieved in each of the primary strategies are intended to result in improvements across the child welfare system. An overarching motivation in Wisconsin's PIP is to bridge gaps in the system to establish more consistent policy and practice statewide. As a county-operated system, Wisconsin's implementation of change in the child welfare system at the ground level is dependant upon the on-site consultation that can be provided by DCF. Through the state's legislative budget process, DCF will be seeking funding for 5 new full-time permanency consultants, and 4 limited-term but full-time field training positions. These consultants will provide training and technical assistance to local agencies to implement practice changes on the local agency level.

Improving Pathways to Permanence

Wisconsin's primary goal in pursuing this strategy is to improve case planning and review. The first action in achieving this goal is to rewrite the Child Welfare (CW) Ongoing Services Standards. The revised CW Ongoing Services Standards will support integrated case planning to clarify the safety management process, improve family engagement throughout the case process, and enhance case planning practice. The DCF will continue to work with the Child Welfare Case Process Committee to bring the requirements of the CW Ongoing Services Standards into an integrated case plan in the eWiSACWIS system. This integrated plan will provide families, caseworkers, and courts a comprehensive plan that includes elements of the current plans (Court orders, Case Plan, Permanency Plan, Safety Plan, Family Interaction Plan, Independent Living plan, etc.). A fully integrated case plan will become a more useful tool for both agencies and the court system process, and thus engaging the family in case planning will become more meaningful. Information regarding managing threats to child safety, direction for behavioral change, the court's expectations for reunification, and planning permanence goals for the child will be synthesized so that the case planning process is clear for all participants. With this enhanced capacity for meaningful planning and family engagement, DCF on-site consultants will train local agencies to increase purposeful family and child visits to assure children maintain safe and permanent homes. The CW Ongoing

Services Standards will also clarify policy and provide specific guidance for compliance with the Fostering Connections to Success Act and best practice for notifying, locating and engaging relatives; placing siblings together; and maintaining sibling interaction when siblings cannot be placed together. This will provide much-needed direction for caseworkers to fully engage relatives, preserve family and community connections, and maintain parental and sibling relationships. Through regional trainings, DCF will reach all 72 counties to educate and answer questions about the new policies under the CW Ongoing Services Standards for all local agency directors and managers. After the initial training process, DCF would reach 25% of counties (including Milwaukee) for TA consultations within the PIP period, and continue to provide TA consultations under the state's Child and Family Services Plan to reach the rest of Wisconsin counties by 2015.

This strategy will also focus on clarifying policy (through issuance of the CW Ongoing Services Standards) and law to better inform the use of concurrent planning, trial reunification, and Other Planned Permanent Living Arrangements (OPPLA). The current state statutory language indicates that concurrent planning is allowable, but does not set forth parameters and mandates for its use. In addition, policy has been issued for the use of trial reunification, however due to the lack of statutory language regarding its use, many agencies and courts are not utilizing trial reunification as an option when reunifying children with their parents. DCF will identify and pursue necessary legislative changes to the statutes which address permanence goals to clarify the appropriate use of each goal, the requirements for concurrent planning, and the use of trial reunifications. DCF will create a protocol for assessing and reporting the decisions for concurrent planning, and a staffing structure that supports the use of concurrent planning and OPPLA. The policies to support the use of concurrent planning will emphasize improved practices in locating and engaging relatives, including absent fathers and the relatives of absent fathers to ensure that all permanency options are explored. This will have a positive impact on the number of children who are placed with relatives and siblings, will improve maintaining relationships between the child and parents, and will help preserve connections between the child and his or her family and community. On-site consultants will provide training and technical assistance to implement these enhanced policies at the ground level. DCF will collaborate with the courts and other legal partners to build a shared understanding of how concurrent planning promotes permanence and encourage the use of trial reunification. Initiatives to improve the use of trial reunification will focus partially on implementation for the juvenile justice population, as more effective use of this process would be particularly beneficial for decreasing reentry in that population, as well as in the general out-of-home care population.

To successfully implement the revised CW Ongoing Services Standards, and to establish a clear legal framework to implement concurrent planning and case review system improvements that will positively impact court case processing, concerted collaboration between child welfare agencies and the court system is necessary. For this reason, the DCF and Children's Court Improvement Program (CCIP) will collaborate to form the Permanency Workgroup. The Workgroup will provide input from a legal and judicial perspective regarding the identified areas needing improvement in the DCF case review system. The Workgroup will identify potential for changes in policy, law, and practice that will increase consistency in filing timely TPR petitions in accordance with the provisions of ASFA, standardize agency and court practice in notifying caregivers of hearings, improve the quality of permanency plan hearings, and clarify the concepts of trial reunification and concurrent planning to ensure that legal and judicial systems are able to fully implement those policies. The Workgroup will provide consultation with recommendations to DCF for policy and law change. These recommendations will be used by DCF during the PIP period to inform development of policy (especially in the development of the CW Ongoing Services Standards) and in

identifying where changes in the law could improve court and agency practice. The DCF, with input from the Workgroup, will develop specific tools that can be used as training and practice resources to fully implement system changes to improve the case review process. DCF will implement those practice resources in its on-site and on-line training. Through regional trainings, DCF will reach all 72 counties to educate and answer questions about these new policies for all local agency directors and managers. After the initial training process, DCF would reach 25% of counties (including Milwaukee) for TA consultations within the PIP period, and continue to provide TA consultations under the state's Child and Family Services Plan to reach the rest of Wisconsin counties by 2015.

This strategy also includes an initiative to improve the utilization of permanency goals. Through the implementation of permanency roundtables or modified roundtables (statewide) and permanency consultations (targeted), which are being done in collaboration with the Casey Family Programs on both a statewide basis and as a targeted implementation in the Bureau of Milwaukee Child Welfare (BMCW), workers will learn how to best utilize legal permanence options. The goal of these initiatives is to provide a structured forum for confidential case consultation designed to facilitate progress toward permanency for children in out-of-home care. These roundtables or consultations will stimulate thinking and learning about pathways to permanency, in order to better identify and address barriers to permanency through professional development, policy change, resource development, and the engagement of system partners. Concurrent planning as integrated into the CW Ongoing Services Standards will be a key component of the consultations and roundtables. Family group conferencing and teaming will be emphasized as part of concurrent planning practice, to bring families together to meet with the child welfare agency, community providers and significant individuals in their lives who can support them in making the best decisions for their children. DCF and contracted permanency consultants will provide training and technical assistance to help local agencies implement this process.

Wisconsin will pursue statutory authority for funding the implementation of subsidized guardianship statewide. Subsidized guardianship allows an exit to legal permanence that is as stable as adoption for those for whom adoption raises intra-familial or cultural concerns. Training, policy guidance, and tools will need to be created to fully implement this permanency goal statewide. By enhancing the resources available to a greater number of available guardians, this change will help more children to achieve permanence, especially with relatives. This change will improve the connections a child has between his or her family and community, and will make it easier for a child to achieve permanence in a home with his or her siblings.

Finally, DCF will implement Phase 2 of the Levels of Care (LOC) initiative to improve standardized licensing for all foster homes and improve the use of relative placements. The purpose of LOC is to improve stability, safety, and permanence of children by matching their assessed needs with the skills, abilities, and capacities of caregivers. The first phase of LOC was implemented in January, 2010, and created new requirements to encourage (and in most cases require) the licensure of relative providers. The changes will result in a continued increase in the number of licensed relative providers throughout the PIP period, which will result in a greater capacity for agencies to place children with their siblings and assist children in maintaining familial connections.

Phase 2 of the LOC initiative will integrate an administrative rule for treatment foster care into Ch. DCF 56 of the administrative rules, "Foster Care Homes for Children," thus creating one single foster care licensing code with progressive requirements for all foster parents and agencies. Training and consultation to fully implement the requirements under the new rule will emphasize the

importance of locating relatives and better supporting them as foster parents. Under the LOC initiative, foster parents must meet specific requirements in their training, skills, knowledge, abilities, and experience. As relative foster parents are more formalized as a placement option and better trained, they will be better supported to maintain placement stability. Under this more consistent structure, Wisconsin will see an increase in the number of relative providers, which will improve placements with siblings, create an environment where a child can more easily visit with his or her parents and siblings, improve relationships between children and their parents, and help children preserve connections with their families and community. Phase 2 will implement new licensing requirements which will allow foster parents to take placement of children at varying support needs, which will greatly improve an agency's ability to place sibling groups together. Non-relative community members who have a special relationship with the child will also be more easily licensed under LOC, which will help agencies better facilitate practice to preserve a child's connections with the community. Foster parents will be better trained to understand the importance of these connections, and agencies will be better supported to put these policies into practice.

Phase 2 will also include full implementation of the use of the Child and Adolescent Needs and Strengths (CANS) standardized assessment tool. The CANS will be used not only to better meet the well-being needs of children and parents (as discussed below), but as a comprehensive tool to guide practice. Training for use of the CANS will emphasize the need for improved practice to place with relatives, preserve connections, and foster visits between families. The CANS itself will put in place a mechanism by which community connections, and social and familial support are all assessed and rated to direct case planning to preserve the continuity of family relationship and connections for all children placed in foster care.

Improving Family Engagement and Well-Being

This strategy focuses on goals that will better engage children and families in case planning, increase caseworker contacts with children and families, and improve assessments to meet children's and families' service needs.

Wisconsin will provide training and on-site support to local agencies to increase family engagement and develop working partnerships with families. Throughout the 2-year PIP period, the QSR process will be used to assess and measure successful outcomes related to family involvement in case planning. Training in this area is currently offered to counties when improved family engagement is identified as a need during the QSR evaluation, but is not always accepted. On-site coaching and mentoring is offered as an optional follow-up to the training, but accepted in only some counties where training was provided. The PIP initiative will emphasize the importance of training in family engagement for all counties that need to change practice to improve family engagement, as identified through the QSR process. Those counties will also be guided to take advantage of on-site coaching and mentoring to strengthen practice to engage families and support parents in enhancing their capacity to care for their children. The training and on-site coaching and mentoring will place specific emphasis on the need to engage fathers and non-custodial parents. This training will include suggestions for utilizing local child support agencies to locate fathers, an initiative that is currently being explored as an intra-agency collaboration in DCF at the state level. This goal also includes action steps to provide direct consultation in collaboration with the department's Bureau of Regional Operations (BRO) to assist counties in meeting and maintaining benchmarks to improve caseworker visits with children and families.

Starting in January, 2011, the Child and Adolescent Needs and Strengths (CANS) standardized assessment tool will be used to assess the needs of each child placed in foster care for placement decisions, mental health screening, identification of children's physical health, behavioral health, and educational needs, and more consistent rate setting for foster parents. This tool will also be used to assist in matching a child's needs in all out-of-home care placements including foster care, group homes, and Residential Care Centers. Finally, the CANS includes a "Current Caregiver" and "Identified Permanent Resource" module to assess the needs of parents in a variety of capacities including mental and physical health, family stress, organization and problem solving. Use of the CANS will be fully implemented so that local agencies will more comprehensively and consistently assess the needs of all children placed in out-of-home care. The PIP initiative will analyze use of the CANS tool to identify gaps in well-being services provided to children and parents, and generate recommendations to improve the provision of those services.

Improving Safety Timeliness & Response

The first goal of this strategy will be to improve the quality of assessments and planning to address child safety. The Safety Intervention Standards (SIS) initiative will provide agencies with clarification and additional guidance to enhance safety practice. The SIS were issued in 2006, and there is a need for additional or refined direction and guidance to further improve safety practice in order to reduce repeat maltreatment, prevent removal or re-entry into foster care, and improve assessment and safety management. By refining this primary resource for safety requirements and guidance, workers will gain skills and expertise, resulting in best safety practice. Assessment and safety management will improve, resulting in reduced maltreatment to children. These improvements will also allow children to remain safely in their homes through the use of in-home safety plans, where needed, thereby reducing removal of children and re-entry into foster care. A Safety Coordinator has joined the Professional Development System team to assist in the implementation of practice changes at the local level and assure transfer of learning in the field. This person will coordinate all safety curriculums around the state to complete and maintain a comprehensive series of safety training, and be responsive in making training reflective of changes in policy and best practice. The Safety Coordinator will expand coaching and mentoring in the area of safety, and will be a master trainer in the child safety series to be responsible for certification, monitoring, and mentoring of the competence of safety trainers throughout Wisconsin. Through the work of the Safety Coordinator, DCF will be able to implement the policies under the new Safety Intervention Standards in all 72 counties. Additionally, the Safety Coordinator will assist DCF in collaborating with the National Resource Center on Child Protective Services (NRCCPS) to develop a safety training program to approve supervisors as safety experts.

The second goal of this strategy, to improve timeliness of initiating initial assessments (CPS investigations), will be achieved through the use of eWiSACWIS reports to track and monitor timelines on a regional level. Because this is an area of immediate concern in many counties, by the second quarter DCF will provide data reports on the timeliness of initial assessments to local agencies. Agencies will be provided an analysis of the data and, where needed, be required to analyze and address identified timeliness concerns. Regional staff in the BRO will play an instrumental role in the performance management process and in providing ongoing technical assistance and support. Continued monitoring of the data reports will assure improvement in response times as evidenced by a reduced number of cases exceeding the assigned response times.

At the state level, this information will continue to be tracked using the Department's KidStat performance management process.

Building Service Capacity

Two initiatives will be implemented to improve the availability and accessibility of specified services. The Intensive In-Home Services program provides short-term (usually 3 to 6 months), concentrated, in-home services to families so that they may remain safely together, averting the need for out-of-home placement for children whenever possible. This targeted implementation will be a grant program available to a limited number of agencies through a competitive award process. After a family-centered assessment and case planning process, families are selected for the program when children can remain safe at home if supported by appropriate and necessary services. Services address the individualized needs of the family to 1) control identified threats to child safety, 2) enhance parental capacity to provide a safe environment for their child(ren), and 3) provide an environment free of current and future incidents of maltreatment. Throughout the program, the agency works to link the family to the community for ongoing and long-term service needs.

The targeted implementation of a nursing initiative in Milwaukee County provides a mechanism for the ongoing oversight and coordination of health care services for children under three years of age in out-of-home care. Professional nurses will support continuity of health care and the monitoring of health needs within the target population. Nurses will provide periodic home visits to children under age 3 in out-of-home care and foster parent support regarding health education. Collaboration with ongoing case managers will support improved understanding regarding specific health needs to facilitate individualized case planning and management.

We will also pursue two initiatives to address the more general concerns about service availability and accessibility statewide, and the lack of bilingual and culturally-competent services. As part of the Department's Future of Child Welfare project, one of these initiatives will focus on Wisconsin's child welfare practice model. We will develop a practice model to improve the consistency and quality of our desired outcomes. The practice model will define standards of practice, identifying how practices implemented in the agency support outcomes identified in the strategy. It will also define how the outcomes will be measured both quantitatively and qualitatively. Simply stated, the practice model will make an explicit link connecting the agency's policy, practice, training, supervision, and quality assurance with its mission, vision, agency values, and strategic plan. It will be the agency's guide to daily interactions among employees, children, families, stakeholders, and community partners who work together to achieve defined outcomes. This practice model will be a standard for providing in-home, out-of-home, prevention, and after care services statewide within a consistent framework. Having this model in place will lay the foundation for a thorough analysis of our service array to identify the core services needed by children and families, and to isolate gaps to assure that children and families have access to those core services regardless of where they live.

To address the need for increased bilingual and culturally-competent services statewide, an implementation plan will be developed through the input of the Workgroup on Safety and Well-Being for Immigrant and Refugee Children and Families. This Workgroup was formed to identify specific gaps in Wisconsin's provision of services to immigrant and refugee families in the child welfare system. The Department formed and currently leads this workgroup, which is a collaboration of county agency representatives, local minority-interest advocacy groups and service providers, the Department of Justice, and the Department of Public Instruction. The Workgroup studies the need for improved interpretation services, culturally-appropriate foster care placements

and other services, the need for policy direction regarding case practice and advocacy for immigrant and refugee families, and other issues specific to the needs of Wisconsin's growing immigrant and refugee population. As part of the PIP, the Department will review a report to be issued by the Workgroup regarding recommendations for policy and program initiatives to address those needs. DCF will prioritize those recommendations based on feasibility and projected impact on access to services, and develop an implementation plan to pursue policy and program objectives to improve access to bilingual and culturally-competent services statewide. The Workgroup will also produce a guidebook as a resource for all local service agencies to use when determining eligibility for access to services for immigrant and refugee families. Many of Wisconsin's bilingual children come from immigrant or refugee families, so these initiatives will affect a large subset of our bilingual population.

Professional Development Enhancements

Several initiatives will improve Wisconsin's capacity to monitor and enforce compliance with training requirements for case workers and foster parents.

Effective January 1, 2011, all foster parents in Wisconsin will be required by law to complete training in the care and support needs of children placed in foster care or treatment foster care. Foster parent training is broken into three areas: Pre-Placement, Initial Licensing, and Ongoing training. A standardized web-based version of the Pre-Placement training will be available beginning January 1, 2011, to allow increased access to training for those families unable to attend training in person. A standardized face-to-face version of the Pre-Placement training will be created and will also be available on January 1, 2011. Initial Licensing training is completed during the first licensing period. Ongoing training begins in the second period of licensure, and is provided on a continual basis to educate foster parents on topics relevant to the needs of the children in their care. Training requirements will be established for each level of foster parent certification and included in the promulgation of an Administrative Rule change to Ch. DCF 56, Admin. Code. Wisconsin's eWiSACWIS system has the functionality to document and track completed training for each foster parent. The PIP initiative to implement the Learning Management System will improve the child welfare professional development system's ability to track compliance with the foster parent training requirements.

The second initiative will be to implement the Learning Management System (LMS) to meet the present and future needs of the child welfare professional development system. The LMS will include a central warehouse of compliance information, as well as the integration of testing to measure and evaluate efficacy of training, and a central repository for e-learning and informal learning events.

The PIP also includes an initiative to expand the department-wide performance management approach, "KidStat," to county-level child welfare agencies. KidStat is an approach to measure, analyze, and track statewide performance on key child welfare outcomes, including but not limited to the federal CFSR performance measures. This performance management approach at the state level has already resulted in significant improvements in child welfare outcomes such as increased timeliness of initial contact, and initial health screens of children entering out-of-home care in Milwaukee County. The introduction of KidStat at the county level will help local agencies use data to drive agency efforts in program outcome improvements. During the PIP period 5-10 counties will be provided with their performance data on key measures. For the PIP targeted implementation these measures will include time to reunification, re-entry, timely filing of TPR petitions, exits to

permanency for children in foster care for 3 or more years, and disproportionality. DSP will provide training, technical assistance, and support to local child welfare agency supervisors, program managers, and executives to learn how to interpret and use the data to inform action and identify strategies for implementation. This PIP initiative will lay the groundwork for expanding the KidStat approach to all counties as the use of this approach becomes more integrated into management practice.

Finally, training will be improved through the expansion of professional development opportunities for child welfare leadership in Wisconsin. The professional development system will develop a continuum of offerings for new and future child welfare managers, directors, and other executives. This will include a standard statewide menu of child welfare leadership training, as well as the implementation of a mentoring program for new child welfare directors in the state.

Methods of Evaluation

Wisconsin is not required to establish improvement goals for any of the CFSR Data Standards. Part B of the PIP Matrix (Section IV) identifies the state's performance at the point of the CFSR review and the data profile periods in which the state subsequently met the minimum improvement or 75th percentile performance expectations.

Wisconsin is required to establish improvement goals for Performance Items 1, 3, 4, 7, 10, 17, 18, 19 and 20. Baseline performance for these Performance Items will be determined retrospectively using data from the sample period, April 1, 2009 through March 31, 2010, including state administrative data for Performance Item 1 and quality assurance case review data from the Quality Service Reviews (QSR) conducted with county child welfare agencies and the BMCW.

The QSR process is a qualitative case review process and is similar to the CFSR model. Both in-home and out-of-home cases are reviewed, including record reviews and interviews with key participants to the case, and focus groups are facilitated with child welfare system stakeholders including agency staff, youth, local providers and foster parents, and court personnel. The QSR case review results are scored and the scores from specific indicators are used to proxy most of CFSR Performance Items. This monitoring process was used and approved by the Children's Bureau to monitor performance as part of the state's CFSR Round 1 PIP. The approved methodology of converting QSR scores to CFSR scores was used to establish the state's baseline performance and improvement targets for the Performance Items listed above and are provided in Part C of the PIP Matrix (Section IV).

**Wisconsin
Child and Family Services Review
Program Improvement Plan**

This Plan includes the following sections:

- I. PIP General Information
- II. PIP Strategy Summary and TA Plan
- III. PIP Agreement Form
- IV. PIP Matrix

I. PIP General Information

CB Region:	I	II	III	IV	V	VI	VII	VIII	IX	X
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State: **Wisconsin**

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2. Cyrus Behroozi, Administrator, Division of Safety and Permanence, DCF	
3. Julie Majerus, Policy Advisor, Bureau of Safety and Well-Being, DCF	

4. Ron Hermes, Deputy Administrator, Division of Safety and Permanence, DCF
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11. Christine Lenske, Independent Living Coordinator, DCF
12. John Elliot, Senior Policy Advisor, Secretary's Office, DCF
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20. Harry Hobbs, Section Chief, Continuous Quality Improvement, DCF
21. Autumn Knudtson, Ongoing Child Protective Services Policy & Consultation Specialist, DCF
22. Ken Taylor, Executive Director, Wisconsin Council on Children and Families
23. Dave Titus, Director, Dodge County Human Services and Health Department
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25. Bill Orth, Director, Sauk County Dept. of Human Services
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28. Vicki Tylka, Director, Marathon County Dept. of Social Services
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30. Larry Winter, Director, Chippewa County Dept. of Human Services
31. Linda Hall, Executive Director, Wisconsin Association of Family & Children's Agencies
32. Michelle Jensen Goodwin, Director, Children's Court Improvement Program
33. Amber Peterson, Policy Analyst, Children's Court Improvement Program
34. Wanda Montgomery, Executive Director, Children's Family and Community Partnership
35. Lynn Green, Director, Dane County Dept. of Human Services
36. Margaret Carpenter, Administrator, Division of Juvenile Corrections, Dept. of Corrections
37. Nicole Grice, Program Evaluation Manager, BMCW, DCF
38. Kathy Elertson, BMCW Nurse Administrator, DCF
39. Dr. Michelle Urban, Chief Medical Director, BMCW, DCF
40. Chris Sieck, Child Welfare Professional Development Coordinator, University of Wisconsin School of Human Ecology, DCF
41. Amy Smith, Curriculum Coordinator, University of Wisconsin School of Human Ecology, DCF
42. Maria Cancian, Professor of Public Affairs and Social Work, University of Wisconsin, DCF
43. Alison Lebwohl, Foster Care and Adoption Performance Analyst, DCF

II. PIP Strategy Summary and TA Plan

State: Wisconsin

Date Submitted (Revised Version): December 7, 2010

PRIMARY STRATEGIES	INTENDED IMPROVEMENT AREAS	TA RESOURCES NEEDED
<p><u>I. Improving Pathways to Permanence</u></p> <ul style="list-style-type: none"> • Case Planning and Review <ul style="list-style-type: none"> ○ Child Welfare (CW) Ongoing Services Standards/Integrated Case Planning/Concurrent Planning/Preserving Connections ○ Legislative changes ○ CCIP/DCF Permanency Workgroup • Enhanced Utilization of Permanency Goals <ul style="list-style-type: none"> ○ Permanency Consultations/Roundtables or modified versions ○ Statewide Subsidized Guardianship 	<p>Integrated policy related to case planning, permanency planning, and concurrent planning (Case Review).</p> <p>Reentry into foster care (Item 5).</p> <p>Identifying permanency goals on a timely basis (Item 7).</p> <p>Timeliness in achieving adoption after termination of parental rights (Item 9).</p> <p>Finding other planned permanent living arrangements when reunification is not possible (Item 10).</p> <p>Use of concurrent planning (Items 7, 8, 9, 10, and Case Review).</p> <p>Preserving familial connections by placing</p>	<p>Casey Family Programs</p>

PRIMARY STRATEGIES	INTENDED IMPROVEMENT AREAS	TA RESOURCES NEEDED
<ul style="list-style-type: none"> Levels of Care Phase 2 	<p>children with their siblings (Item 12).</p> <p>Ensuring children are able to visit their siblings and parents when in care (Item 13).</p> <p>Identifying relatives and using them as placements resources (Item 15).</p> <p>Placement stability (Item 6).</p> <p>Reunification with parents or permanent placements with relatives (Item 8).</p> <p>Maintaining relationships with parents when children are placed in out-of-home care (Item 16).</p> <p>Consistency in the application of foster care licensing standards (Item 42).</p> <p>Preserving cultural and community connections (Item 14).</p> <p>Quality of permanency planning hearings (Case Review).</p> <p>Consistency in timely filing of termination of parental rights petitions in compliance with</p>	

PRIMARY STRATEGIES	INTENDED IMPROVEMENT AREAS	TA RESOURCES NEEDED
	<p>ASFA (Case Review).</p> <p>Agency and court practice in notifying caregivers of hearings (Case Review).</p>	
<p><u>II. Improving Family Engagement and Well-Being</u></p> <ul style="list-style-type: none"> • Increased Family Engagement • Child and Adolescent Needs and Strengths (CANS) Standardized Assessment Tool 	<p>Family engagement in case planning (Item 18).</p> <p>Engaging fathers and non-custodial parents (Item 18).</p> <p>Caseworker contacts with children and families (Items 19 and 20).</p> <p>Assessing the needs of children, foster parents and families to adequately meet those needs (Item 17).</p> <p>Assessing the placement needs of children and matching children with placements that address those needs (Items 17, 21, 22, and 23).</p> <p>Meeting educational, physical health, and mental health needs of the child (Items 21, 22, and 23).</p>	
<p><u>III. Improving Safety Timeliness and Response</u></p> <ul style="list-style-type: none"> • Improve the quality of assessments and planning to address child safety 	<p>Timeliness of initial assessments (Item 1).</p> <p>Repeat maltreatment (Item 2).</p> <p>Adequate in-home safety services to prevent</p>	<p>National Resource Center on Child Protective Services (NRCCPS)</p>

PRIMARY STRATEGIES	INTENDED IMPROVEMENT AREAS	TA RESOURCES NEEDED
<ul style="list-style-type: none"> Improve performance on timeliness of initiating initial assessments 	removal (Item 3). Assessment practice (Item 4).	
<p><u>IV. Building Service Capacity</u></p> <ul style="list-style-type: none"> Expansion of intensive in-home services Nursing Initiative: BMCW Targeted Implementation The Future of Child Welfare: Practice Model Addressing the need for bilingual & culturally-competent services 	Meeting the physical health needs of children (Item 22). Accessibility of services by all 72 counties (Service Array). Ensuring varied services are available throughout the state to meet the unique needs of children and families, including bilingual families and those with unique cultural backgrounds (Service Array).	
<p><u>V. Professional Development Enhancements</u></p> <ul style="list-style-type: none"> Mandated foster parent training Implement Learning Management System Improve Performance-Based Management Capacity <ul style="list-style-type: none"> Expand the department-wide performance management approach, “KidStat,” to 	Staff development and training programs (Training). Ensuring that all staff who deliver services have fulfilled training requirements (Training). Training for foster and adoptive parents (Training).	Professional Development Advisory Council (PDAC)

PRIMARY STRATEGIES	INTENDED IMPROVEMENT AREAS	TA RESOURCES NEEDED
<p>county-level managers</p> <ul style="list-style-type: none"> Expand Professional Development offerings on executive leadership in Child Welfare 		

III. PIP Agreement Form

The PIP should be signed and dated by the Chief Executive Officer of the State child welfare agency and by the Children’s Bureau Regional Office responsible for the State. The approved PIP with original signature must be retained in the Children’s Bureau Regional Office. A hard copy of the approved PIP must be submitted to the following parties immediately upon approval:

- State child welfare agency
- Children’s Bureau (Child and Family Services Review staff)
- Child Welfare Review Project, c/o JBS International, Inc.

Agreements

The following Federal and State officials agree to the content and terms of the attached Program Improvement Plan:



12/710

Reggie Bicha, Secretary, Department of Children and Families

Date

Children’s Bureau

Date

IV. PIP Matrix
Part A: Strategy Measurement Plan and Quarterly Status Report

Primary Strategy I: Improving Pathways to Permanence			Applicable CFSR Outcomes or Systemic Factors: P1, P2, Case Review, Foster Care Licensing		
Goal Ia: Improve Case Planning and Review			Applicable CFSR Items: 6, 7, 10, 12, 13, 14, 15, 16, 25, 29		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Through revision of the Child Welfare (CW) Ongoing Services Standards, improve policy to support an integrated case planning approach to strengthen safety, permanency, and well-being outcomes for children and their families.					
Operational benchmarks (statewide): Ia.1.1 Rewrite the CW Ongoing Services Standards to support integrated case planning, improve practice for preserving connections, and support better use of concurrent planning, trial reunification, and Other Planned Living Arrangements (OPPLA).	A. Knudtson, J. Brom	Draft of CW Ongoing Services Standards	Q1		
Ia.1.2 Issue draft of the CW Ongoing Services Standards for review and comments. Consult with external stakeholders for policy change recommendations.	A. Knudtson, J. Brom	Summary report of recommendations received	Q3		
Ia.1.3 Develop curriculum and training requirements to be put in place upon issuance of the updated CW Ongoing Services Standards.	A. Knudtson, J. Brom	Finalized curriculum; training requirements; training schedule	Q6		
Ia.1.4 Issue CW Ongoing Services Standards.	A. Knudtson, J. Brom	Quarterly report with summary of policy issuance	Q8		
Ia.1.5 Through the use of on-site consultants,	A. Knudtson,	Summary report	Q8		

provide field training and ongoing technical assistance to implement practice change statewide at the ground level in accordance with the new Standards and integrated case planning policy. (To reach all 72 counties with regional training and 25% of counties – including Milwaukee – with TA consultation.)	J. Brom, C. Sieck	of Ongoing field training and on-site TA initiated			
Ia.1.6 Modify eWiSACWIS to support CW Ongoing Services Standards and integrated case plan practice documentation.	A. Knudtson, J. Brom, eWiSACWIS team	Summary report of eW changes completed (Current Status: requirements completed)	Q8		
Action Step 2: Make legislative changes necessary to improve case planning and review, including the improved use of concurrent planning, trial reunification, and OPPLA.					
Operational benchmarks (statewide): Ia.2.1 Review and identify needed statutory changes for case planning review (include input from stakeholder groups).	J. Majerus	Written legislative proposals	Q1		
Ia.2.2 Identify and consult with potential legislative sponsors, assist in drafting bills, attend legislative hearings, and support passage of bills through ongoing consultation.	J. Majerus	Legislative bills and/or summary of legislative consultations	Q6		
Ia.2.3 Issue policy and provide regional and on-site training to implement new legislative requirements for concurrent planning, trial reunification, and OPPLA.	J. Majerus	Summary of policy issued and regional trainings	Q8		
Action Step 3: Collaborate with the Children’s Court Improvement Program (CCIP) to create the <i>Permanency Workgroup</i> as a subcommittee of the <i>WT Commission on Children, Families and the Courts</i> , to provide recommendations for improving the case review system processes.					

<p>Operational benchmarks (statewide): Ia.3.1 Collaborate with CCIP to identify the members of the <i>Permanency Workgroup</i>.</p>	<p>R. Hermes, M. Jensen Goodwin</p>	<p>Summary report of workgroup members identified; Meeting schedule</p>	<p>Q1</p>		
<p>Ia.3.2 <i>Permanency Workgroup</i> identifies potential for changes in policy, law, and practice that will increase consistency in filing timely TPR petitions in accordance with ASFA, standardize agency and court practice in notifying caregivers of hearings, improve the quality of permanency plan hearings, and clarify the concepts of trial reunification and concurrent planning to ensure legal and judicial systems are able to fully implement those policies.</p>	<p>R. Hermes, M. Jensen Goodwin</p>	<p>Quarterly report with summary of meetings</p>	<p>Q4</p>		
<p>Ia.3.3 Through quarters 2 through 8, <i>Permanency Workgroup</i> provides ongoing consultation to DCF with recommendations regarding case review system policy, law, and practice improvements.</p>	<p>R. Hermes, M. Jensen Goodwin</p>	<p>Summary report of recommendations received</p>	<p>Q5</p>		
<p>Ia.3.4 DCF, with input from the <i>Permanency Workgroup</i>, will produce resource materials to guide practice and assist in training.</p>	<p>R. Hermes</p>	<p>Resource materials</p>	<p>Q7</p>		
<p>Ia.3.5 DCF implements use of practice resource materials in child welfare on-site and on-line training. (To reach all 72 counties with regional and on-line training and 25% of counties - including Milwaukee - with TA consultation.)</p>	<p>R. Hermes</p>	<p>Summary of trainings and on-site TA where resource materials used</p>	<p>Q8</p>		
<p>Goal Ib: Enhanced Utilization of Permanency Goals</p>			<p>Applicable CFSR Items: 7, 8, 9, 10</p>		
<p>Action Steps/Benchmarks</p>	<p>Person Responsible</p>	<p>Evidence of Completion</p>	<p>Qtr Due</p>	<p>Qtr Done</p>	<p>Quarterly Update</p>

Action Step 1: Continue implementing permanency consultations to expedite permanency for children and youth in out-of-home care in the Bureau of Milwaukee Child Welfare (BMCW).					
Operational benchmarks (targeted): Ib.1.1 BMCW permanency consultation workgroup meets to discuss identified systemic barriers and amend program policy to support process.	N. Grice	Summary analysis of policy amendments	Q4		
Ib.1.2 Oversee documentation, tracking of consultations and follow-up on Permanency Action Plans and make adjustments for improved implementation, as needed.	N. Grice	Monthly and quarterly reports	Q4		
Ib.1.3 Continue project monitoring and management.	N. Grice	Summary of project monitoring	Q7		
Action Step 2: Implement Casey Permanency Roundtables (or a modified version) statewide.					
Operational benchmarks (statewide): Ib.2.1 Develop a Wisconsin Permanency Roundtable (or modified version) protocol and training for statewide implementation.	S. Obershaw	Protocol; Summary report of training implementation plan	Q1		
Ib.2.2 Modify eWiSACWIS to provide documentation and templates needed for implementation.	S. Obershaw, eWiSACWIS team	Summary report of eWiSACWIS modifications (Current Status: Design beginning for June 2011 production)	Q4		
Ib.2.3 Through use of on-site permanency consultants, provide training and ongoing technical assistance to implement Wisconsin	S. Obershaw	Quarterly report with summary of permanency	Q7		

Permanency Roundtable (or modified version) protocol statewide.		roundtables/con sultations held			
Ib.2.4 Evaluate effectiveness through monitoring timeliness to permanency.	S. Obershaw	Summary of evaluations	Q8		
Action Step 3: Expand the Subsidized Guardianship (SG) program statewide.	S. Obershaw				
Operational benchmarks (statewide): Ib.3.1 Obtain necessary statutory authority to fund expansion of the SG program statewide.	S. Obershaw, J. Majerus	Statutory authority provided in law	Q2		
Ib.3.2 Develop training, and develop and issue policy for SG expansion.	S. Obershaw, C. Sieck	Summary report of policy issued and training implementation	Q2		
Ib.3.3 Develop and implement eWiSACWIS documentation and templates needed.	S. Obershaw, eWiSACWIS team	Summary report of eWiSACWIS changes made (Current Status: Initial requirements complete and to be scheduled for June 2011 production)	Q2		
Ib.3.4 Implement SG policy in Milwaukee County through training and continued technical assistance.	S. Obershaw	Summary analysis of use of SG in Milwaukee County	Q2		
Ib.3.5 Implement SG policy statewide through training and continued technical assistance.	S. Obershaw	Summary analysis of use of SG statewide	Q3		
Goal Ic: Levels of Care Phase 2 Implementation			Applicable CFSR Items: 6, 12, 13, 14, 15, 16, 42		
Action Steps/Benchmarks	Person	Evidence of	Qtr	Qtr	Quarterly Update

	Responsible	Completion	Due	Done	
Action Step 1: Revise policies and administrative rules to fully implement Levels of Care initiative to standardize licensing and enforce certification requirements for relative caregivers and all foster homes to improve permanency outcomes for children.					
Operational benchmarks (statewide): Ic.1.1 Create an administrative rule governing the licensing and certifications of all foster homes.	J. Brom	Issuance of Emergency Rule	Q1		
Ic.1.2 Modify and create forms for agency documentation of licensing and CANS tool, and enhance eWiSACWIS to support new documentation requirements.	J. Brom, A. Olson, eWiSACWIS team	Summary report of forms created and provider III redesign implementation (Current status: Design complete and scheduled for June 2011 production)	Q1		
Action Step 2: Provide field, classroom, and on-line training to improve consistency in foster care licensing, and to utilize LOC requirements to improve permanency outcomes.					
Operational benchmarks (statewide): Ic.2.1 Develop reports for state and agency monitoring for outcomes and consistency of licensing practices.	J. Brom, A. Olson, A. Lebwohl	Summary of monitoring reports	Q3		
Ic.2.2 Provide training, technical assistance, and monitoring of outcomes related to Levels of Care Initiative. Include training on use of the CANS to inform practice to better locate and engage relatives, and preserve familial and community connections. Provide on-line CANS training to provide certification and	J. Brom, A. Olson, A. Lebwohl	Summary reports on training/ technical assistance provided; Analysis of	Q4, Q8		

re-certification.		training process experience			
Ic.2.3 Develop and provide training and technical assistance on the changes to Ch. DCF 56, Admin. Code.	J. Brom, A. Olson, C. Sieck	Training curriculum and summary report	Q4		
Ic.2.4 Implement on-line pre-requisite training for foster care licensors.	J. Brom, A. Smith	Summary report of on-line DCF 56 Admin. Rule training	Q8		
Primary Strategy II: Improving Family Engagement and Well-Being			Applicable CFSR Outcomes or Systemic Factors: WB1, WB2, WB3		
Goal IIa: Increased Family Engagement			Applicable CFSR Items: 17, 18, 19, 20		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Implement training, coaching and mentoring efforts to improve practice to support increased family engagement and participation in the case planning and service provision process.					
Operational benchmarks (statewide): IIa.1.1 Use the Quality Services Review (QSR) Process to assess and measure worker engagement and contact with the family as well as family involvement in the case planning process.	H. Hobbs, W. Henderson	Quarterly report with summary analysis of reviews conducted	Q4, Q8		
IIa.1.2 Provide county-tailored “Engaging to Build Trusting Relationships” training to identified counties to assure child welfare staff use engagement strategies to build working partnerships with the child and family, difficult to reach family members, and/or out-of home care providers.	C. Sieck	Summary analysis of trainings provided and training evaluations	Q4		
IIa.1.3 For all counties where engagement is identified as a need by a QSR, provide additional onsite coaching and mentoring to strengthen engagement skills and practice.	C. Sieck	Quarterly report with summary of coaching and mentoring provided	Q4, Q8		
Action Step 2: Provide data and consultation					

to assist agencies in improving caseworker visits with children and families.					
Operational benchmarks (statewide): IIa.2.1 DSP provides quarterly data on caseworker contacts to county agencies.	A. Olson	Summary of data results in quarterly reports	Q4		
IIa.2.2 BRO will meet with counties to discuss data reports and identify counties which have difficulty meeting federal benchmarks.	A. Olson, BRO	Summary of meetings with counties	Q4		
IIa.2.3 BRO will collaborate with DSP and county agencies to assist identified counties in formulating action plans to meet federal benchmarks.	A. Olson, BRO	Summary of action plans developed	Q4		
IIa.2.4 BRO will collaborate with DSP and county agencies to provide ongoing consultation to assist counties in maintaining federal benchmarks in caseworker visits.	A. Olson, BRO	Summary report of ongoing consultations	Q8		
Goal IIb: Evaluate use of Child and Adolescent Needs and Strengths (CANS) standardized assessment tool to improve well-being			Applicable CFSR Items: 21, 22, 23		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Analyze use of the CANS tool to better assess the well-being needs of all children in out-of-home care and their parents.					
Operational benchmarks (statewide): IIb.1.1 Incorporate the CANS tool for all children placed in out-of-home care into the foster, group home, and RCC rules, and implement use of the tool through face-to-face training and ongoing technical assistance.	J. Brom, A. Olson, M. Morse	Summary report of issuance of emergency rules and Uniform Foster Care Rate Setting Policy, and CANS tool implementation activities	Q1		
IIb.1.2 Develop evaluation plan to analyze use of the CANS tool to improve provision of educational, physical and mental health	J. Brom, A. Olson	Evaluation plan	Q1		

services to children, as well as services to parents.					
IIb.1.3 Implement evaluation plan to identify gaps in service.	J. Brom, A. Olson	Progress reports per plan	Q5		
IIb.1.4 Evaluate results and develop recommendations for improving the provision of well-being services to children and parents.	J. Brom, A. Olson	Report with recommendations	Q8		
Primary Strategy III: Improving Safety Timeliness & Response			Applicable CFSR Outcomes or Systemic Factors: S1, S2		
Goal IIIa: Improve the quality of assessments and planning to address child safety			Applicable CFSR Items: 2, 3, 4		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Strengthen policy, practice, and training to support children remaining safely in their own home.					
Operational benchmarks (statewide): IIIa.1.1 Revise draft of Safety Intervention Standards and gain feedback from external stakeholders.	C. Klick	Summary report of statewide input	Q1		
IIIa.1.2 Update and reissue the Safety Intervention Standards.	C. Klick	Summary report of issued Standards	Q2		
IIIa.1.3 Modify eWiSACWIS to include updated safety templates, tools and case record documentation requirements.	C. Klick	Summary report of finalized eW Changes (Current status: Design completed and scheduled for June 2011 production)	Q2		
IIIa.1.4 Revise training curriculum.	C. Klick, C. Sieck	Summary report of training curriculum updates	Q3		

IIIa.1.5 Through training and on-site coaching and mentoring that is organized and maintained by the Safety Coordinator, provide field and classroom training to support local practice change in all 72 counties.	C. Klick, C. Sieck	Summary reports of on-site training	Q3, Q6		
Action Step 2: Develop and mandate a safety training program that results in supervisors becoming certified or qualified safety experts.					
Operational benchmarks (targeted): IIIa.2.1 Collaborate with the National Resource Center on Child Protective Services (NRCCPS) to field test the “Supervisors as Safety Decision Makers” program.	C. Klick, A. Smith	Summary analysis of field test	Q1		
IIIa.2.2 Add a Safety Coordinator to the Central Professional Development unit to focus on developing local expertise.	C. Sieck	Summary report of new Safety Coordinator’s responsibilities	Q1		
IIIa.2.3 Make any needed revisions to the program and develop a work plan with the NRCCPS to transition program to Central Professional Development unit and build in-state capacity to facilitate the program.	C. Klick, A. Smith	Summary analysis of revisions and work plan	Q3		
IIIa.2.4 Implement work plan to transition program to Central Professional Development unit.	C. Klick, C. Sieck	Quarterly report with summary of work plan implementation	Q5		
IIIa.2.5 Select participants from Wisconsin to begin 22 week program to become statewide facilitators.	C. Klick	Summary of trainings for facilitators	Q7		
IIIa.2.6 Select next group of supervisors to participate in program and continue implementation of long-term training.	C. Klick	Quarterly report with summary of work plan implementation and plan for long-term training capacity	Q8		

Goal IIIb: Improve performance on timeliness of initiating Initial Assessments			Applicable CF SR Items: 1		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Use eWiSACWIS reports and regional staff to track & monitor timeliness of initiating initial assessments.					
Operational benchmarks (statewide): IIIb.1.1 Develop a performance management report and TA plan for counties to track timeliness of initiating assessments.	W. Henderson, T. Muender, BRO	Summary of performance management report and training process developed	Q1		
IIIb.1.2 Implement performance management report and TA plan.	T. Muender, W. Henderson, BRO	Summary analysis of report and TA plan implementation	Q2		
IIIb.1.3 Develop and implement an ongoing process to monitor timeliness of county and BMCW assessment initiation.	T. Muender, W. Henderson, BRO; BMCW	Summary analysis of ongoing monitoring system	Q4		
Primary Strategy IV: Building Service Capacity			Applicable CF SR Outcomes or Systemic Factors: WB3, Service Array		
Goal IVa: Expansion of intensive in-home services			Applicable CF SR Items: 36, 37		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Provide short-term, concentrated, in-home services to families so that they may remain safely together, thus preventing the need for out-of-home placement for children whenever possible.					
Operational benchmarks (targeted): IVa.1.1 Finalize concept paper and competitive award process with input from external stakeholders.	C. Klick	Concept paper and summary of competitive award process	Q3		

IVa.1.2 Issue action memo for competitive award process for intensive in-home services program.	C. Klick	Action memo	Q4		
IVa.1.3 Select sites for targeted implementation based on competitive award process.	C. Klick	Summary of site selection	Q5		
IVa.1.4 Provide technical assistance and support to selected site(s).	C. Klick; T. Muender	Summary analysis of targeted program implementation and TA provided	Q8		
Goal IVb: Nursing Initiative: BMCW Targeted Implementation			Applicable CFSR Items: 22, 37		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Initiate the BMCW Nurse Family Engagement program.					
Operational benchmarks (targeted): IVb.1.1 Support hiring of qualified Registered Nurses by contracted ongoing case management agencies.	Dr. M. Urban, K. Elertson	Registered Nurse positions filled	Q1		
IVb.1.2 Develop and oversee nurse orientation training and verification of core competencies in collaboration with identified vendors.	K. Elertson, Dr. M. Urban	Summary report of orientation and training completed	Q2		
IVb.1.3 Initiate periodic RN home visits to children under 3 in out-of-home care.	K. Elertson, Dr. M. Urban	eWiSACWIS reports and summary report of periodic home visits	Q2		
Action Step 2: Collaborate with the Children's Hospital of Wisconsin Outcomes Center to monitor outcomes and evaluate program.			Q4		
Operational benchmarks (targeted): IVb.2.1 Standardize RN home visitation,	K. Elertson, Dr. M. Urban	Summary report of standards	Q3		

practice standards, and policies.		identified and issued policies			
IVb.2.2 Collaborate with external stakeholders to form quality oversight workgroup.	Dr. M. Urban, K. Elertson	Summary of workgroup members identified; Meetings schedule	Q4		
IVb.2.3 Develop quality indicators to monitor desired outcomes of Nurse Family Engagement program.	Dr. M. Urban, K. Elertson	Summary analysis of quality indicators developed	Q8		
Goal IVc: The Future of Child Welfare: Practice Model			Applicable CFSR Items: 36, 37		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Develop practice model to guide policy, practice, service provision, quality assurance, and training consistently statewide.					
Operational benchmarks (statewide): IVc.1.1 Conduct work group meetings to develop statewide practice model. Representatives will include county, state, tribal, training and private provider representatives.	J. Elliott	Summary of workgroup meeting discussions	Q2		
IVc.1.2 Conduct focus groups of all stakeholders to collect feedback and revise practice model.	J. Elliott	Summary of feedback from state-wide focus groups	Q3		
IVc.1.3 Develop and issue statewide child welfare practice model.	J. Elliott	Practice model	Q5		
IVc.1.4 Develop an implementation plan to provide training and technical assistance to integrate the child welfare practice model statewide.	J. Elliott	Summary of implementation activities	Q8		
IVc.1.5 Initiate core service array study to identify core services, gaps in service, and	J. Elliott	Action plan for service array	Q8		

service structure changes to provide core services statewide.		study and implementation plan			
Goal IVd: Address the need for bilingual & culturally-competent services			Applicable CFSR Items: 36, 37		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Develop an implementation plan for advancing the recommendations of the Workgroup on Safety and Well-Being for Immigrant and Refugee Children and Families.					
Operational benchmarks (statewide): IVd.1.1 Submit Workgroup report with recommendations.	J. Majerus	Workgroup report and summary of DCF's plan for analysis	Q1		
IVd.1.2 Prioritize recommendations of the workgroup based on the feasibility and impact of implementing policy or programs.	J. Majerus	Written proposals with analysis	Q2		
IVd.1.3 Develop implementation plan for advancing changes in policy or initiating programs to improve access to bilingual and culturally-competent services.	J. Majerus	Implementation plan	Q4		
IVd.1.4 Initiate implementation plan (i.e. begin writing policy, meeting with legislators, or seeking funding, etc.).	J. Majerus	Quarterly report with summary of implementation activities	Q7		
Action Step 2: Produce a guidebook for service providers which will clarify eligibility for public assistance benefits.	J. Majerus				
Operational benchmarks (statewide): IVd.2.1 Draft guidebook.	J. Majerus	Guidebook draft	Q3		
IVd.2.2 Share guidebook with external stakeholder for input on development.	J. Majerus	Summary of feedback from external stakeholders	Q4		
IVd.2.3 Issue guidebook to local service	J. Majerus	Guidebook	Q5		

agencies and post online.		published and available on DCF website			
Primary Strategy V: Professional Development Enhancements			Applicable CFSR Outcomes or Systemic Factors: Training		
Goal Va: Mandated Foster Parent Training			Applicable CFSR Items: 34		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Implement mandated foster parent training to assure all licensed foster parents receive required training.					
Operational benchmarks (targeted): Va.1.1 Standardize Pre-Placement Training curriculum by creating web-based and face-to-face versions.	A. Olson	Published versions of the web-based and face-to-face training	Q1		
Va.1.2 Standardize training requirements for all certification levels and amend licensing code to reflect training requirements.	A. Olson, J. Brom	Promulgation of emergency rule	Q1		
Va.1.3 Begin provision of training.	A. Olson	Summary report of completed training hours	Q1		
Va.1.4 Develop a plan for evaluating the efficacy and delivery of the training.	A. Olson, C. Sieck	Draft of evaluation plan	Q3		
Va.1.5 Gather feedback on the efficacy and delivery of the training and modify to support practice enhancement.	A. Olson	Completed surveys; Summary report of modified trainings	Q6		
Goal Vb: Implement Learning Management System (LMS)			Applicable CFSR Items: 32, 33		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Implement Learning Management System that includes a central warehouse of compliance information, integration of testing, and a central repository					

for e-learning and informal learning events.					
Operational benchmarks (statewide): Vb.1.1 Complete needs analysis.	C. Sieck	Needs analysis	Q1		
Vb.1.2 Distribute RFP with identified needs to LMS vendors.	C. Sieck	Summary of RFP distribution	Q2		
Vb.1.3 Contract with LMS vendor and work on needed modifications.	C. Sieck	Summary report of completed contract	Q3		
Vb.1.4 Implement LMS.	C. Sieck	Summary analysis of LMS implementation	Q4		
Vb.1.5 Ongoing review of effectiveness.	C. Sieck	Summary analysis of system effectiveness in quarterly reports for quarters 5 through 8.	Q8		
Goal Vc: Improve Performance-Based Management Capacity			Applicable CFSR Items: 32, 33		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Utilize the department-wide performance management approach “KidStat” to work with local agencies to monitor and improve identified critical areas needing improvement.					
Operational benchmarks (targeted): Vc.1.1 Select 5-10 targeted implementation counties and finalize technical, training, and program project plans.	M. Rawlings	Summary analysis of targeted sites selected and project plans	Q1		
Vc.1.2 Design, develop and test local KidStat report content and lay out distribution methodology.	M. Rawlings	Summary analysis of finalized report and distribution methodology	Q3		
Vc.1.3 Develop supervisor/program	M. Rawlings,	Summary of	Q3		

management training curriculum and on-site support plan.	DSP Prof. Dev. Council	training and support plan			
Vc.1.4 Implement KidStat by providing training and holding regular meetings to discuss performance on selected measures and county strategies for improvement. Initial measures for the PIP will include: <ul style="list-style-type: none"> • Time to Reunification • Re-entry into Foster Care • Timely Termination of Parental Rights • Exits to Permanent Homes for Children in Foster Care 3+ Years • Disproportionality 	M. Rawlings, BITS w/ DSP Prof. Dev. Council, BRO, OPQA	Summary report of trainings completed by required supervisors/program management and meetings conducted in targeted sites.	Q6		
Vc.1.5 Monitor and evaluate targeted implementation of KidStat, including resources (staff, training, technology) needed to support implementation statewide and any outcome improvements.	M. Rawlings, BITS w/ DSP Prof. Dev. Council, BRO	Summary analysis with evaluation of performance improvements to date.	Q7		
Vc.1.6 Develop recommendations and pursue rollout of KidStat across all county agencies.	M. Rawlings, BITS w/ DSP Prof. Dev. Council, BRO, OPQA	Summary report of regular meetings across the state and improvement across outcomes	Q8		
Goal Vd: Expand Professional Development offerings on Executive leadership in Child Welfare			Applicable CFSR Items: 32, 33		
Action Steps/Benchmarks	Person Responsible	Evidence of Completion	Qtr Due	Qtr Done	Quarterly Update
Action Step 1: Expand delivery modalities of and the opportunities for professional development on child welfare leadership.					
Operational benchmarks (statewide): Vd.1.1 Professional Development Advisory Council (PDAC) workgroup will conduct study of effectiveness of the use of	C. Sieck	Summary of recommendations from study	Q1		

Leadership Academy for Supervisors (LAS).					
Vd.1.2 Integrate the use of LAS online courses in professional development system.	C. Sieck	Summary of online courses being offered	Q2		
Vd.1.3 Design CW Director Mentorship program and Organizational Effectiveness model based on child welfare practice model developed under the Future of CW project.	C. Sieck	Summary of Mentorship program and Effectiveness model designed	Q5		
Vd.1.4 Implement the Child Welfare Director mentorship program.	C. Sieck	Summary report of mentorship program in place	Q6		
Vd.1.5 Implement Organizational Effectiveness model for targeted agencies.	C. Sieck	Summary analysis of implemented Organizational Effectiveness model	Q6		

Part B: 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	94.3% (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA											
Negotiated Improvement Goal	NA – National Standard achieved with FFY 2009 profile with a performance of 95.4%											
Renegotiated Improvement Goal	Not applicable											
Status (Enter the current quarter measurement 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	99.75% (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA (FFY 09B and FFY 10A)											
Negotiated Improvement Goal	NA-Met the national standard at the time of the CFSR Statewide Assessment and Final Report											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Permanency Outcome 1: Timeliness and Permanency of Reunification												
National Standard	122.6											
Performance as Measured in Final Report/Source Data Period	97.4 (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	97.4 (FFY 2008)											
Negotiated Improvement Goal	Met minimal improvement target goal of 100.2 as of the FFY 09A/B profile with a score of 101.8											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement 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	116.9 (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA											
Negotiated Improvement Goal	Met the national standard at the time of the CFSR Statewide Assessment and Final Report											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement 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	117.7 (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA											
Negotiated Improvement Goal	Met national standard as of the FFY 09B/10A data profile with a score of 123.6											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
Permanency Outcome 1: Placement Stability												
National Standard	101.5											
Performance as Measured in Final Report/Source Data Period	98.1 (FFY 2008)											
Performance as Measured at Baseline/Source Data Period	NA											
Negotiated Improvement Goal	Met national standard as of the FFY 09B/10A data profile with a score of 102.3											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Part C: Item-Specific and Quantitative Measurement Plan and Quarterly Status Report

Outcome/Systemic Factor: Safety Outcome 1												
Item: Performance Item 1- Timeliness of initiating investigations/assessments of child maltreatment reports												
Performance as Measured in Final Report	66.0%											
Performance as Measured at Baseline/Source Data Period	61.0% eWISACWIS 12 months 4/1/09-3/31/10											
Negotiated Improvement Goal	61.6%											
Method of Measuring Improvement	<p>Administrative Data Report 12 months adjusted on a rolling quarter – first measurement period 7/1/09-6/30/10</p> <p>Data Source: eWiSACWIS data which includes documentation of the report date, the response time (i.e. date and time required for initial contact to begin investigation), and date and time of initial contact</p> <p>Numerator: Number of initial contacts made within the required date and time Denominator: Total number of initial contacts required</p> <p>Data: For each PIP quarter, all investigations completed and approved by the supervisor will be extracted and of these total investigations, the number where the initial contact requirement (date and time in minutes) is met will be included in the numerator</p>											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
Outcome/Systemic Factor: Safety Outcome 2												
Item: Performance Item 3- Services to family to protect children in the home and prevent removal or re-entry into out of home care.												
Performance as Measured in Final Report	71.0%											
Performance as Measured at Baseline/Source Data Period	890% with 104 applicable cases(4/1/09-3/31/10)											

Negotiated Improvement Goal	92.9%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicators associated with the child, siblings and family:</p> <ul style="list-style-type: none"> ○ Assessment and Understanding of Safety (QSR Practice Review Indicator 4A) ○ Safety Management: Case Planning Process (QSR Practice Review Indicator 6A) <p>Numerator: Number of cases where average score for above indicators is a 4 or above on a scale of 1-6 Denominator: Total number of cases reviewed</p> <p>Data: For each PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling year. The minimum number of applicable cases from the baseline will be maintained during each reporting period. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB</p>											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
Outcome/Systemic Factor: Safety Outcome 2												
Item: Performance Item 4- Risk assessment and safety management												
Performance as Measured in Final Report	65.0%											
Performance as Measured at Baseline/Source Data Period	100.0% with 108 applicable cases(4/1/09-3/31/10)											
Negotiated Improvement Goal	Not applicable No goal established - State will report performance through first 2 quarters of PIP and the need for further measurement will be jointly evaluated by WI and CB											
Method of Measuring Improvement	Case review data											

	<p>Data Source: Quality Services Review (QSR) scoring data will be used to monitor performance related to the following practice indicators associated with the child, siblings and family:</p> <ul style="list-style-type: none"> ○ Exposure to Threats of Harm (QSR Child Status Indicator 1) ○ Behavioral Risk to Self/Others (QSR Child Status Indicator 7) <p>Numerator: Number of cases where average score for above indicators is a 4 or above on a scale of 1-6 Denominator: Total number of cases reviewed</p> <p>Data: For each PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling year. The minimum number of applicable cases from the baseline will be maintained during each reporting period. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB</p>											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
<p>Outcome/Systemic Factor: Permanency Outcome 1 Item: Performance Item 7- Permanency goal for child</p>												
Performance as Measured in Final Report	60.0%											
Performance as Measured at Baseline/Source Data Period	66.0% with 74 applicable cases(4/1/09-3/31/10)											
Negotiated Improvement Goal	73.0%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicator associated with the child and family (where applicable):</p> <ul style="list-style-type: none"> ○ Permanency: Planning a Change Process (QSR Practice Review Indicator 6B) 											

	<p>Numerator: Number of applicable cases where score for above indicator is a 4 or above on a scale of 1-6 Denominator: Total number of applicable cases reviewed</p> <p>Data: For each PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling year. The minimum number of applicable cases from the baseline will be maintained during each reporting period. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB</p>											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Outcome/Systemic Factor: Permanency Outcome 1	
Item: Performance Item 10- Other permanent planned living arrangement	
Performance as Measured in Final Report	53.0%
Performance as Measured at Baseline/Source Data Period	41.0% with 17 applicable cases(4/1/09-3/31/10)
Negotiated Improvement Goal	56.3%
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicators associated with the child and family (where applicable):</p> <ul style="list-style-type: none"> o Progress to Permanency: Older Youth (QSR Progress Indicator 3) <p>Numerator: Number of applicable cases where score for above indicators is a 4 or above on a scale of 1-6 Denominator: Total number of applicable cases reviewed</p>

	<p>Data: For each PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling year. The minimum number of applicable cases from the baseline will be maintained during each reporting period. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB</p> <p><i>NOTE: Given the small sample size and resulting sizeable sampling error, the results of this approach will be evaluated with the Children’s Bureau PMAG after the end of each of the first two quarters to evaluate the integrity of this methodology.</i></p>											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
<p>Outcome/Systemic Factor: Well-Being Outcome 1 Item: Performance Item 17- Needs and services of child, parents and foster parents</p>												
Performance as Measured in Final Report	35%											
Performance as Measured at Baseline/Source Data Period	79% with 108 applicable cases(4/1/09-3/31/10)											
Negotiated Improvement Goal	84.0%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicators associated with the child, siblings, and caregivers:</p> <ul style="list-style-type: none"> ○ Overall Case Assessment and Planning (QSR Practice Review Indicator 4B) ○ Long Term View for Safety Case Closure (QSR Practice Review Indicator 5) ○ Planning for a Change Process: Permanency and Behavioral Outcomes (QSR Practice Review Indicator 6B and 6C) ○ Resource and Support Use (QSR Practice Review Indicator 7) ○ Tracking and Adjustment (QSR Practice Review Indicator 9) <p>Numerator: Number of cases where average score for above indicators is a 4 or above on a scale of 1-6</p>											

	<p>Denominator: Total number of cases reviewed</p> <p>Data: For each PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling year. The minimum number of applicable cases from the baseline will be maintained during each reporting period. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB</p>											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Outcome/Systemic Factor: Well-Being Outcome 1	
Item: Performance Item 18- Child and family involvement in case planning	
Performance as Measured in Final Report	44%
Performance as Measured at Baseline/Source Data Period	82% with 108 applicable cases(4/1/09-3/31/10)
Negotiated Improvement Goal	86.7%
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicators associated with the child, mother, father and caregiver (if applicable):</p> <ul style="list-style-type: none"> ○ Engagement of Child and Family (QSR Practice Review Indicator 1A) ○ Role and Voice in Decisions (QSR Practice Review Indicator 1B) <p>Numerator: Number of cases where average score for above indicators is a 4 or above on a scale of 1-6</p> <p>Denominator: Total number of cases reviewed</p>

	<p>Data: For each PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling year. The minimum number of applicable cases from the baseline will be maintained during each reporting period. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB</p>											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12
<p>Outcome/Systemic Factor: Well-Being Outcome 1 Item: Performance Item 19- Caseworker visits with child</p>												
Performance as Measured in Final Report	71%											
Performance as Measured at Baseline/Source Data Period	94% with 103 applicable cases(4/1/09-3/31/10)											
Negotiated Improvement Goal	97.0%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicators associated with the child and siblings:</p> <ul style="list-style-type: none"> ○ Worker Visits with Child and Siblings (QSR Additional Review Findings 9) <p>Numerator: Number of cases where average of the scores for above indicator is a 4 or above on a scale of 1-6 Denominator: Total number of cases reviewed</p> <p>Data: For each PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling year. The minimum number of applicable cases from the baseline will be maintained during each reporting period. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB</p>											
Renegotiated Improvement Goal												

Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12

Outcome/Systemic Factor: Well-Being Outcome 1												
Item: Performance Item 20- Caseworker visits with parents												
Performance as Measured in Final Report	34%											
Performance as Measured at Baseline/Source Data Period	73% with 107 applicable cases(4/1/09-3/31/10)											
Negotiated Improvement Goal	78.5%											
Method of Measuring Improvement	<p>Case review data</p> <p>Data Source: Quality Services Review (QSR) scoring data will be used to report performance related to the following practice indicators associated with the children and families:</p> <ul style="list-style-type: none"> ○ Worker Visits with Mother and Father (QSR Additional Review Findings 9) <p>Numerator: Number of cases where average of the scores for above indicator is a 4 or above on a scale of 1-6 Denominator: Total number of cases reviewed</p> <p>Data: For each PIP quarter, the cases for the most recent quarter will be added to the last 3 quarters for a rolling year. The minimum number of applicable cases from the baseline will be maintained during each reporting period. In the event that the minimum applicable cases are not achieved the state will add cases from the next month or quarter or utilize other approved method by CB</p>											
Renegotiated Improvement Goal												
Status (Enter the current quarter measurement for the reported quarter.)	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12