2003 Year End Report

Minnesota Child and Family Service Review
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Background

In January 1998, the Office of the Legislative Auditor issued a Child Protection Program Evaluation Report. The report cited the state law requiring the Minnesota Department of Human Services (DHS) to monitor social services and audit compliance with applicable standards, guidelines and the county and state social service plans. The report recommended that DHS also review the appropriateness of decisions made by county child protection agencies in selected cases.

In the fall of that year, DHS conducted the first external review. Reviewers examined county child protection screening, assessment, in-home and placement practices and services. The reviews also examined county child protection agencies’ relationships with their community partners. Between October 1998 and April 2003, DHS reviewed 72 county child protection systems.

In 2001, the federal Administration of Children and Families initiated an outcome-based child welfare review program. This Child and Family Service Review is an ongoing, collaborative quality assurance effort between the federal government and the states. The review examines case specific performance on seven safety, permanency and well-being outcomes and 23 associated performance items. The review purposely sets a very high substantial conformity standard to create an ongoing, quality improvement culture throughout the child welfare system.

By mid 2004, the federal government will complete Child and Family Service Reviews in all 50 states, along with the District of Columbia and Puerto Rico. The Administration of Children and Families will repeat the reviews beginning in late 2004.

Child and Family Service Reviews

Minnesota was the fourth state in the country to complete a Child and Family Service Review. It is a three-stage process:

- The state assesses its capacity to meet the safety, permanency and well-being of its child welfare clients.
- State and federal reviewers examine child welfare cases and interview state and local stakeholders in three counties or jurisdictions to determine how effective child welfare services are in improving outcomes for children and families.
- The state develops a Program Improvement Plan to address systemic factors, as well as safety, permanency and well-being outcomes determined through the review to need improvement.

We are actively supporting staff participation in the review process. It is an excellent training for understanding the child welfare system in our own and other counties. From this flows the opportunity to identify best practices that influence our capacity, willingness and ability to better serve children and families. It is intense but the time, the inconvenience and any expense is minimal compared to the knowledge I gained. I particularly appreciated the observations of experienced supervisors from other counties who engaged our system in a rigorous review.

Rob Sawyer, Olmsted County
The Administration of Children and Families accepted the Minnesota Program Improvement Plan in June 2002. The plan addressed the seven safety, permanency and well-being outcomes, along with 17 of the 23 associated performance items. Minnesota’s findings were very similar to those of other states.

To address these issues, Minnesota’s Program Improvement Plan developed five overarching strategies:

- Implement Structured Decision Making statewide
- Assess the factors related to re-entry into foster care and placement stability
- Improve case planning and case documentation
- Reduce the use of long-term foster care as a permanency option
- Implement quality practices through:
  - Supervisors
  - Managers and supervisors using data to improve case practice
  - Improved quality assurance reviews.

The federal Child and Family Service Review rated Minnesota’s child welfare quality assurance system as a strength. However, the Administration of Children and Families recommended shifting the focus from compliance with applicable statutes and rules to examining outcomes. In late 2002 and early 2003, the state began looking at outcomes for recipients of county child welfare services. This approach to reviewing county child welfare systems closely resembled the federal Child and Family Service Review process.

**Minnesota Child and Family Service Reviews 2003**

In the summer of 2002, the state Child Welfare Quality Assurance Team began discussions with a National Resource Center consultant, who specializes in assisting states developing and implementing their Program Improvement Plans. The Quality Assurance Team also met twice with county managers to discuss the value and process for modifying the quality assurance program. In the fall of 2002, Cass County’s child welfare services were reviewed using portions of the Child and Family Service Review process. As part of this process, several county child welfare cases were examined and key persons in the cases interviewed.

In January 2003, the pilot Minnesota Child and Family Service Review was conducted in Scott County. The county completed a written self-assessment. Peer review teams read child placement and in-home service cases and interviewed key people in each case. DHS site leaders conducted focus
groups with community stakeholders and completed a report integrating the county self assessment, case reviews and stakeholders interviews. Following this, the county completed a Program Improvement Plan establishing goals, action steps and measures for each of the performance items rated as needing improvement.

The peer review teams proved to be beneficial on several levels. These experienced and knowledgeable professionals provided thoughtful and impartial feedback to Scott County. In addition, the peer reviewers’ own professional development was enhanced. Each of the reviewers became familiar with examining child welfare programs and practices from an outcome-based perspective. They were able to integrate this new information into their own supervisory practice. This partnership between counties and DHS encourages a consistent and meaningful statewide quality assurance process.

In 2003, Minnesota conducted 19 outcome-based county child welfare reviews. By mid year, the review process was standardized and mirrored the process piloted in Scott County. In each county, cases were rated specific to the seven safety, permanency and well-being outcomes and 23 associated performance items. In comparing data from the 2001 federal review with data from the 19 county reviews completed in 2003:

- The 2003 data showed improvement on four of seven outcomes and 10 out of the 23 performance items.
- Nine of 17 performance items, which the state was required to address, showed improvement.
- Both permanency outcomes had improved ratings.
- Eight of 12 permanency performance items were rated above 85 percent.
- Two out of three well-being outcomes had improved ratings.
- There was a decline in performance on one well-being and both safety outcomes.

**Objectives and Strategies 2004**

The following strategies will continue to build on the collaborative county and state quality improvement achievements of 2003:

- Present a summary of 2003 Minnesota Child and Family Service Review activities and data, along with plans for 2004 county review, at the March 2004 Minnesota Association of County Social Service Administrators meeting.
Provide directors with updated review information throughout the year and at regional director meetings.

Discuss, with statewide and regional supervisor groups, how to use Minnesota Child and Family Service Reviews and SSIS data to identify and promote quality child welfare practices and positive outcomes.


Issue quarterly Child and Family Service Review reports, which identify current outcome data, and share promising programs and practices that support outcome achievement.

Provide monthly communication to counties discussing individual safety, permanency and well-being performance items, including promising practice tips designed to enhance performance.

Attend the SSIS Tools for Management training, which is offered across the state. Facilitate discussions on using SSIS reports at the county level as quality assurance resources.

Complete 20 county Child and Family Service Reviews.

Develop data base and new reporting system.

Collaborate with the Minnesota Child Welfare Training System to provide safety, permanency and well-being training across the state.

These reviews provide counties with data and technical assistance. The value of a review is measured by how useful this data and information is in improving outcomes for children and families. The addendum to this report includes detailed outcome and performance data, as well as observations of systemic factors and practices that affect outcomes for children and families.
Appendix

Minnesota Child and Family Service Review 2003 Report

Quality Assurance Reviews

In 2003, the Minnesota Child and Family Service Review was developed to meet requirements of Minnesota’s Program Improvement Plan. The review was designed to measure performance on federal outcomes and performance items. This quality assurance modification was fully implemented by July 2003. Child welfare reviews were completed in 20 counties in 2003.

- Grant and Wantonwan Counties were reviewed early in 2003 with the traditional external review model.
- Traverse, Brown, Dodge, Marshall and Jackson Counties were reviewed early in 2003 using a modified version of the Child and Family Service Review. In these five counties, there were some interviews with caseworkers and other case related interviews.
- Steele, Becker, Chippewa and Freeborn Counties were reviewed using the Minnesota Child and Family Service Review and an average of three case related interviews were conducted per case. The self assessment was introduced in these non-metro counties as part of the review process. In these four counties, the case reviews were completed by DHS Quality Assurance staff, rather than peer review teams.

Ten reviews were conducted with the Minnesota Child and Family Service Review Process, which included a self assessment, peer review teams, an average of three case related interviews per case, and stakeholder interviews. (Anoka, Carlton, Dakota, McLeod, Nicollet, Olmsted, Scott, Wabasha and two reviews in Hennepin)
Cases and Primary Presenting Problems

Cases were randomly selected to represent both placement and in-home cases during a specified period. Each case reviewed had at least 60 days of placement or 60 days of services during the review period.

- 184 cases were reviewed: 108 placement cases and 76 in-home cases

In a number of counties, substance abuse was related to methamphetamines. County self assessments commonly recorded methamphetamine use as an emerging challenge.

Case Related Interviews

One of the hallmarks of the Minnesota Child and Family Service Review is case related interviews. These interviews are conducted with persons directly involved in the provision or receipt of services in each case reviewed. During the 2003 reviews, 537 total interviews included:

- 129 parents
- 57 providers
- 59 foster parents
- 47 children
- 189 case workers
- 56 others (such as guardians ad litem, interpreters, personal care attendants, urban representatives and attorneys)

Of these, 476 interviews were conducted in person and 61 by telephone.
County Self Assessment

The Minnesota Child and Family Service Review requirement for completing the county self assessment was initially introduced in metro area counties and later in non-metro counties. Twelve of 18 counties reviewed completed a self assessment. Effective in July 2003, all counties that were scheduled for review completed a self assessment in preparation for the on-site review.

The self assessment is a guided process that gives the county agency an opportunity to evaluate the capacity of their child welfare system. The agency assigns a rating of strength or area needing improvement across eight systemic factors and related guidance items. In addition, the agency completes a narrative description related to each guidance item. This self assessment provides a foundation to the on-site review and to the county’s preparation for program improvements.

County observations:

- **Case review system:** Counties consistently rated case planning and family participation in developing case plans as strengths. This rating was not supported in the case reviews.

- **Quality assurance system:** Counties consistently rated factors around supervisory conferences and case reviews as strengths. However, in many counties, supervisory conferences and case consultations are held as needed and in response to a case crisis. County quality assurance systems were more typically designed to support and evaluate compliance rather than to support or evaluate outcome achievement.

- **Service array and resource development:** Gaps in continuum of services and barriers to service accessibility were consistently rated as systemic factors needing improvement across placement prevention, reunification and permanency.

- **Gaps in continuum of services included:** transportation, crisis services, affordable housing, mental health assessments and treatment, foster care provider options and treatment to address methamphetamine use.

- **Barriers to service accessibility included:** culturally and ethnically diverse service providers and preparedness of county agency staff to work with culturally and ethnically diverse populations. Language and translation services, transportation and waiting lists for mental health assessments were also barriers.

- **Agency responsiveness to the community:** Counties are challenged by how to best provide access for client input and to integrate client input into agency operations and planning. Assessment of specialized, cultural diversity training and staff recruitment to reflect ethnic and racial diversity were areas often rated as areas needing improvement.

- **Foster and adoptive family licensing, approval and recruitment:** Counties are challenged to recruit foster families that can accommodate sibling groups and special needs children, and reflect ethnic and racial diversity.

- **Supervisory and social work caseloads:** Caseload size and supervisor-to-staff ratios were rated an area needing improvement in a third of the counties. Supervisor-to-staff ratios bear on the agency’s capacity to carry out effective quality assurance efforts.
Systemic Factor Rating Summary

Percent of counties rating the factor as a strength

The following table summarizes systemic factors rated as strengths in the 12 counties that completed self assessments in 2003. Overall, the most prevalent finding is that counties are challenged to meet the cultural, ethnic and racial diversities of their populations. This issue is represented in the ratings across several systemic factors and guidance questions. Second, underlying issues outside the domain of the county social service agency, such as transportation and housing, represent critical barriers to placement prevention, reunification and permanency for children.

### Information System

<table>
<thead>
<tr>
<th>Factor</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy and procedure development/implementation</td>
<td>83%</td>
</tr>
<tr>
<td>Planning and resources for information system</td>
<td>92%</td>
</tr>
<tr>
<td>SSIS as management tool</td>
<td>75%</td>
</tr>
<tr>
<td>Barriers to effective utilization</td>
<td>36%</td>
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</table>

### Case Review System

<table>
<thead>
<tr>
<th>Factor</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child in foster care case plan</td>
<td>83%</td>
</tr>
<tr>
<td>Family participation in development of case plan</td>
<td>92%</td>
</tr>
<tr>
<td>Six month administrative or court review</td>
<td>75%</td>
</tr>
<tr>
<td>Timely permanency hearing</td>
<td>75%</td>
</tr>
<tr>
<td>Notice to foster parents, preadoptive parents, relative caregivers</td>
<td>92%</td>
</tr>
</tbody>
</table>

### Quality Assurance System

<table>
<thead>
<tr>
<th>Factor</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal case review system/process</td>
<td>83%</td>
</tr>
<tr>
<td>Review of screening and track assignment for child maltreatment reports</td>
<td>100%</td>
</tr>
<tr>
<td>Supervisory conferences</td>
<td>100%</td>
</tr>
<tr>
<td>Pre-placement or treatment screening team</td>
<td>92%</td>
</tr>
<tr>
<td>Overall quality assurance system/program improvement capacity</td>
<td>100%</td>
</tr>
</tbody>
</table>
Agency Responsiveness to Community

Service Array and Resource Development (Placement Prevention Services)

Service Array and Resource Development (Reunification Services)

Service Array and Resource Development (Permanency Services)
**Staff and Provider Training**

- Meeting overall training needs of child protection staff: 92%
- MCWTS training within first six months of employment: 100%
- Individualized Training Needs Assessment: 83%
- Planning and resources for staff development: 83%
- Staff training evaluation/link to quality improvement: 100%
- Meeting overall training needs of foster and adoptive parents: 92%
- MCTWS Foster, Adoptive and Kinship Training: 92%
- Planning and resources for training foster and adoptive families: 91%

**Foster and Adoptive Home Licensing, Approval and Recruitment**

- Adequacy of foster and adoptive family resources: 50%
- Planning and resources for recruitment, licensing and support: 75%
- Recruitment of foster and adoptive families that reflect ethnic and racial diversity: 67%
- Up-to-date list of available foster families: 100%

**Supervisory and Social Work Caseloads**

- Organizational structure: 91%
- Supervisor-to-staff ratio/social worker caseloads: 64%
- Experience and educational level of child protection staff: 82%
- Agency experience with staff turnover, layoffs and financial constraints: 82%
Stakeholder Interviews

DHS Quality Assurance staff conducted stakeholder interviews during each county’s review. Stakeholder interviews represent a broader community perspective on the evaluation of systemic issues and the agency’s capacity to achieve outcomes of safety, permanency and well-being.

- Stakeholder interviews were held in 13 county reviews.
- Six to eight community stakeholder groups were interviewed for each review, resulting in approximately 90 community stakeholder group interviews in 2003.
- Community stakeholders include:
  - County agency social workers
  - County attorneys
  - Foster parents
  - Juvenile court judges
  - Mandated reporters
  - Public defenders/guardians ad litem and representatives from:
    - Agency administration
    - Law enforcement
    - Schools
    - Tribes
    - Other provider agencies.

Systemic Factor Findings

Overall systemic factor findings are based on information obtained from the county self assessment and stakeholder interviews. In most instances self assessment ratings are supported by stakeholder input and validated in the case review process. However, there were notable discrepancies in the case review system and the quality assurance system.

Assessing the relationship of systemic strengths and areas needing improvement to the achievement of outcomes is a critical function of the Minnesota Child and Family Service Review. The following is a list of commonly observed relationships.

- Caseload size had a significant impact on performance ratings across all outcomes. Counties with smaller caseloads had higher performance on Well-being Outcome 1.
- Counties with lower supervisor-to-staff ratios and strengths in their overall quality assurance system had higher performance ratings across all outcomes.
- Counties with a continuum of well-developed services achieved higher performance ratings across safety, permanency and well-being outcomes. This performance was enhanced when counties incorporated community input into decisions around resource development and addressed language and cultural needs.
- Performance ratings on Permanency Outcome 1 were higher in those counties that had effectively coordinated their permanency efforts with county attorneys, court administration and the judiciary. An emerging barrier to these efforts is the availability of public defenders.
- Counties with strong foster care recruitment, retention and ongoing support systems achieved higher performance ratings on both permanency outcomes.
- Counties that had positive working relationships with tribal communities had higher performance ratings across all outcomes.
Data on Outcome and Item Performance Measures

The 2001 federal Child and Family Service review provided a baseline measurement of performance on safety, permanency and well-being outcomes along with associated performance items. This baseline measure is found in the following table in the State of MN 2001 column.

During 2003, the results of Minnesota Child and Family Service Reviews were compiled on a quarterly basis as a reporting requirement and to monitor progress toward meeting the performance goals established in the state's program improvement plan. These quarterly results are found in the following table in the State 2003 Qtrs 1 through 4 columns.

A cumulative performance measurement for 2003 is found as MnCFSR Total 2003. The final column of the table computes performance change from 2001 to 2003.

Outcome ratings represent the percent of cases rated as substantially achieved. Performance item ratings represent the percent of cases that were rated as strengths.
## Performance on QA Measures: Jan-Dec 2003
### Comparison between 2001 CFSR and 2003 MnCFSR

<table>
<thead>
<tr>
<th>Outcome or Performance Item</th>
<th>State of MN 2001</th>
<th>State 2003 Qtr. 1</th>
<th>State 2003 Qtr. 2</th>
<th>State 2003 Qtr. 3</th>
<th>State 2003 Qtr. 4</th>
<th>MnCFSR Total 2003</th>
<th>% Change 2001-2003</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcome S1</strong></td>
<td>Children are, first and foremost, protected from abuse and neglect</td>
<td>87.23%</td>
<td>75.76%</td>
<td>69.05%</td>
<td>75.68%</td>
<td>66.67%</td>
<td>71.17%</td>
</tr>
<tr>
<td><strong>Item 1</strong></td>
<td>Timeliness of initiating investigations of reports of child maltreatment</td>
<td>76.19%</td>
<td>81.48%</td>
<td>72.73%</td>
<td>57.14%</td>
<td>60.00%</td>
<td>67.77%</td>
</tr>
<tr>
<td><strong>Item 2</strong></td>
<td>Repeat maltreatment</td>
<td>95.74%</td>
<td>90.90%</td>
<td>82.93%</td>
<td>91.89%</td>
<td>98.00%</td>
<td>91.30%</td>
</tr>
<tr>
<td><strong>Outcome S2</strong></td>
<td>Children are safely maintained in their homes whenever possible and appropriate</td>
<td>88.37%</td>
<td>81.58%</td>
<td>78.57%</td>
<td>88.89%</td>
<td>72.41%</td>
<td>79.31%</td>
</tr>
<tr>
<td><strong>Item 3</strong></td>
<td>Services to family to protect child(ren) in home and prevent removal</td>
<td>79.31%</td>
<td>82.76%</td>
<td>85.71%</td>
<td>92.59%</td>
<td>80.00%</td>
<td>84.40%</td>
</tr>
<tr>
<td><strong>Item 4</strong></td>
<td>Risk of harm to children</td>
<td>84.44%</td>
<td>83.78%</td>
<td>87.80%</td>
<td>75.68%</td>
<td>66.67%</td>
<td>71.17%</td>
</tr>
<tr>
<td><strong>Outcome P1</strong></td>
<td>Children have permanency and stability in their living situations</td>
<td>62.50%</td>
<td>83.33%</td>
<td>82.61%</td>
<td>61.90%</td>
<td>75.00%</td>
<td>75.93%</td>
</tr>
<tr>
<td><strong>Item 5</strong></td>
<td>Foster care re-entries</td>
<td>100.00%</td>
<td>90.00%</td>
<td>90.90%</td>
<td>33.33%</td>
<td>22.22%</td>
<td>75.93%</td>
</tr>
<tr>
<td><strong>Item 6</strong></td>
<td>Stability of foster care placement</td>
<td>75.00%</td>
<td>83.33%</td>
<td>65.22%</td>
<td>71.43%</td>
<td>82.50%</td>
<td>76.85%</td>
</tr>
<tr>
<td><strong>Item 7</strong></td>
<td>Permanency goal for child</td>
<td>69.57%</td>
<td>95.83%</td>
<td>100.00%</td>
<td>90.48%</td>
<td>93.46%</td>
<td>91.30%</td>
</tr>
<tr>
<td><strong>Item 8</strong></td>
<td>Reunification, guardianship, or permanent placement with relatives</td>
<td>85.71%</td>
<td>88.89%</td>
<td>80.00%</td>
<td>75.00%</td>
<td>84.13%</td>
<td>84.40%</td>
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<tr>
<td><strong>Item 9</strong></td>
<td>Adoption</td>
<td>75.00%</td>
<td>75.00%</td>
<td>83.33%</td>
<td>88.89%</td>
<td>87.50%</td>
<td>12.50%</td>
</tr>
<tr>
<td><strong>Item 10</strong></td>
<td>Permanency goal of other planned permanent living arrangement</td>
<td>66.67%</td>
<td>100.00%</td>
<td>66.67%</td>
<td>92.86%</td>
<td>87.50%</td>
<td>20.83%</td>
</tr>
<tr>
<td><strong>Outcome P2</strong></td>
<td>The continuity of family relationships and connections is preserved for children</td>
<td>83.33%</td>
<td>95.83%</td>
<td>82.61%</td>
<td>80.95%</td>
<td>84.13%</td>
<td>85.19%</td>
</tr>
<tr>
<td><strong>Item 11</strong></td>
<td>Proximity of foster care placement</td>
<td>100.00%</td>
<td>95.65%</td>
<td>91.30%</td>
<td>94.29%</td>
<td>95.94%</td>
<td>95.45%</td>
</tr>
<tr>
<td><strong>Item 12</strong></td>
<td>Placement with siblings</td>
<td>76.92%</td>
<td>92.31%</td>
<td>92.31%</td>
<td>100.00%</td>
<td>94.29%</td>
<td>93.46%</td>
</tr>
<tr>
<td><strong>Item 13</strong></td>
<td>Visiting with parents and siblings in foster care</td>
<td>68.18%</td>
<td>91.30%</td>
<td>90.48%</td>
<td>77.78%</td>
<td>86.11%</td>
<td>86.73%</td>
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<tr>
<td><strong>Item 14</strong></td>
<td>Preserving connections</td>
<td>91.67%</td>
<td>87.50%</td>
<td>91.30%</td>
<td>85.00%</td>
<td>89.22%</td>
<td>88.79%</td>
</tr>
<tr>
<td><strong>Item 15</strong></td>
<td>Relative placement</td>
<td>95.65%</td>
<td>100.00%</td>
<td>91.30%</td>
<td>94.29%</td>
<td>89.22%</td>
<td>89.22%</td>
</tr>
<tr>
<td><strong>Item 16</strong></td>
<td>Relationship of child in care with parents</td>
<td>83.33%</td>
<td>95.45%</td>
<td>90.00%</td>
<td>70.59%</td>
<td>81.82%</td>
<td>84.78%</td>
</tr>
<tr>
<td><strong>Outcome WB1</strong></td>
<td>Families have enhanced capacity to provide for their children's needs</td>
<td>71.43%</td>
<td>71.79%</td>
<td>57.14%</td>
<td>48.65%</td>
<td>56.06%</td>
<td>58.15%</td>
</tr>
<tr>
<td><strong>Item 17</strong></td>
<td>Needs and services of child, parents, and foster parents</td>
<td>69.39%</td>
<td>76.92%</td>
<td>71.43%</td>
<td>64.86%</td>
<td>60.60%</td>
<td>67.39%</td>
</tr>
<tr>
<td><strong>Item 18</strong></td>
<td>Child and family involvement in case planning</td>
<td>69.39%</td>
<td>79.49%</td>
<td>59.52%</td>
<td>59.46%</td>
<td>66.15%</td>
<td>66.12%</td>
</tr>
<tr>
<td><strong>Item 19</strong></td>
<td>Worker visits with child</td>
<td>81.63%</td>
<td>82.05%</td>
<td>69.05%</td>
<td>62.16%</td>
<td>83.33%</td>
<td>72.83%</td>
</tr>
<tr>
<td><strong>Item 20</strong></td>
<td>Worker visits with parent(s)</td>
<td>82.05%</td>
<td>89.19%</td>
<td>66.67%</td>
<td>67.57%</td>
<td>72.13%</td>
<td>73.56%</td>
</tr>
<tr>
<td><strong>Outcome WB2</strong></td>
<td>Children receive appropriate services to meet their educational needs</td>
<td>81.58%</td>
<td>83.33%</td>
<td>92.86%</td>
<td>82.61%</td>
<td>91.67%</td>
<td>88.62%</td>
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<tr>
<td><strong>Item 21</strong></td>
<td>Educational needs of the child</td>
<td>81.58%</td>
<td>83.33%</td>
<td>92.86%</td>
<td>82.61%</td>
<td>91.67%</td>
<td>88.62%</td>
</tr>
<tr>
<td><strong>Outcome WB3</strong></td>
<td>Children receive adequate services to meet their physical and mental health needs</td>
<td>67.39%</td>
<td>75.00%</td>
<td>79.49%</td>
<td>73.33%</td>
<td>77.19%</td>
<td>76.58%</td>
</tr>
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<td><strong>Item 22</strong></td>
<td>Physical health of the child</td>
<td>84.21%</td>
<td>75.86%</td>
<td>81.82%</td>
<td>83.33%</td>
<td>85.42%</td>
<td>82.09%</td>
</tr>
<tr>
<td><strong>Item 23</strong></td>
<td>Mental health of the child</td>
<td>70.00%</td>
<td>90.90%</td>
<td>81.82%</td>
<td>75.00%</td>
<td>83.02%</td>
<td>82.64%</td>
</tr>
</tbody>
</table>

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13
Outcome Measures

Based on Comparison of 2001 to 2003 Performance

From 2001 to 2003, Minnesota had improved performance on four of seven outcomes.

Rank order of improvement on outcomes that showed improvement
- Permanency outcome 1 (13% increase)
- Well-being outcome 3 (9% increase)
- Well-being outcome 2 (7% increase)
- Permanency outcome 2 (2% increase)

Rank order of decline on outcomes that did not show improvement
- Safety outcome 2 (9% decrease)
- Well-being outcome 1 (13% decrease)
- Safety outcome 1 (16% decrease)
From 2001 to 2003, Minnesota had improved performance on nine of the 17 performance items being monitored as part of the Program Improvement Plan.

Rank order of improvement on nine performance items included in the state’s Program Improvement Plan that showed improvement

- Item 7 Permanency goal for child (24% increase)
- Item 10, Other planned permanency goal, e.g., long-term foster care (21% increase)
- Item 13, Visiting with parents and siblings (19% increase)
- Item 12, Placement with siblings (18% increase)
- Item 9, Adoption (13% increase)
- Item 23, Mental health of child (13% increase)
- Item 21, Educational needs (7% increase)
- Item 3, Prevent removal of children (5% increase)
- Item 6, Stability of placement (2% increase)
Rank order of decline on eight items included in the state's Program Improvement Plan that did not show improvement

- Item 4, Managing risk of harm (1% decrease)
- Item 22, Physical health of child (2% decrease)
- Item 17, Needs and services (2% decrease)
- Item 18, Child and family involvement in case planning (3% decrease)
- Item 20, Worker visits with parents (8% decrease)
- Item 1, Timeliness of assessment (8% decrease)
- Item 19, Worker visits with child (9% decrease)
- Item 5, Foster care re-entry (24% decrease) this item is being tracked due to the state's performance on national standards *

* Interpretation of performance on re-entry into foster care was modified between the second and third quarter of 2003. The interpretation resulted in fewer cases being included in the review sample and contributed to widely varied results. The current interpretation was implemented under advisement by the Administration of Children and Families staff in an effort to make the case review measurement of re-entry consistent with the AFCARS measurement of re-entry.
Rank order of performance on items not being tracked in the state’s Program Improvement Plan*

- Item 16, Relationship of child with parents (1% increase)
- Item 15, Relative placement (6% decrease)
- Item 2, Repeat maltreatment (4% decrease)
- Item 11, Proximity of care (4% decrease)
- Item 14, Preserving connections (3% decrease)

* Item 8 is not included in the comparison of 2001 and 2003 data. In the 2001 review, Item 8 was a measurement of performance related to independent living skills. This was later changed to a measurement of reunification, guardianship or permanent placement with relatives. Future Minnesota Child and Family Service Review reports will be able to track performance improvements based on 2003 data.
Summary of Overall Performance on Outcomes and Items in 2003

Rank Order of Performance on Outcomes, Percent of Cases Rated as Substantially Achieved

Outcome WB2
Educational needs
89%

Outcome P2
Continuity of family relationships
85%

Outcome S2
Children are maintained safely in their homes
79%

Outcome WB3
Physical and mental health needs
77%

Outcome P1
Permanency and stability
76%

Outcome S1
Children are first and foremost protected
71%

Outcome WB1
Families have enhanced capacity
58%
Of the 10 items that had the highest performance ratings, eight are related to the two permanency outcomes.

Item 19 was rated strength in 73 percent of the cases reviewed. Federal Child and Family Service Reviews have linked worker visits with children to better performance on five out of seven outcomes and 14 out of 23 performance items.

Counties rated family involvement as a systemic strength 92 percent of the time. But Item 18—child and family involvement in case planning—was rated a strength in only 66 percent of the on-site case reviews.
Findings from Case Review Data

The following observations are derived from an analysis of the case review data.

- Issues related to safety are a priority in Program Improvement Plans. Performance on both safety outcomes decreased between 2001 and 2003. Further, in overall ranked order, Safety Outcome 1 is ranked sixth out of seven outcomes and Item 1, timeliness of initiating assessment is ranked 21 out of 23 items.

- Well-being Outcome 1 had one of the most significant decreases from 2001 to 2003 in outcome performance and is ranked seventh out of seven outcomes. Correspondingly, all four performance items associated with Well-being Outcome 1 are ranked in the lowest five out of 23 items.

- Permanency Outcome 2 is ranked second out of seven outcomes. Correspondingly, four of the six performance items associated with Permanency Outcome 2 are ranked in the top six out of 23 items.

- The outcome that demonstrated the most improvement from 2001 to 2003 was Permanency Outcome 1. However, in the overall performance ranking, Permanency Outcome 1 is ranked fifth out of seven outcomes.
Case Practice and Program Relationship to Achievement of Safety, Permanency and Well-Being Outcomes

The on-site case review process provides considerable documentation of case practice and agency programs that contribute to ratings on outcomes and performance items. Site leaders collect this information from completed case review instruments and from the daily debriefings provided by the peer review teams.

The following represents some of the more commonly documented practices and programs that contribute to achievement of outcomes and to ratings of strength on performance items.

- Concurrent permanency planning has a strong and positive correlation to the achievement of permanency outcomes.
- Family Group Decision Making enhances performance on managing risk of harm to children, preserving connections, determining and achieving permanency goals and involving families in case planning.
- Consistent and well applied use of Structured Decision Making leads to positive results in safety and well-being outcomes.
- Alternative Response enhances and supports strong performance in involving families in case planning.
- The Signs of Safety case consultation model is an effective approach to assessing risk of harm to children and targeting interventions to manage the risk.
- Timely and thorough relative searches support achievement of permanency outcomes. Concurrent Permanency Planning and Family Group Decision Making programs promote effective relative search practices.
- Frequent and substantive social worker visits to the child and family have a positive correlation to achievement of safety, permanency and well-being outcomes.
- Service planning and delivery, which is coordinated with community based services and providers, supports achievement of safety, permanency and well-being outcomes.
- Positive working relationships between counties and tribes contribute significantly to improved performance safety, permanency and well-being outcomes.
Culturally competent practice enhances the achievement of safety, permanency and well-being outcomes.

Assessment of foster parent needs and provision of supportive services are key to maintaining stable placements. Foster parent recruitment and training are also conducive to achieving stable placements for children.

A number of practices and programs were observed to have a positive effect on reducing the likelihood of foster care re-entry:

- Programs that provide support to youth making transitions from out-of-home care back to their home and community. Successful programs include participation of the child, parents, school and community providers to plan for transition and to support reunification with ongoing services.
- Use of Family Group Decision Making to develop family centered reunification plans and to plan for post reunification supports.
- Careful analysis of county specific issues leading to foster care re-entry and development of strategies and targeted interventions. Examples of interventions to prevent re-entry include respite care, crisis nursery and Family Group Decision Making.
- Use of the Structured Decision Making Family Reunification Assessment tool to guide and document decisions around reunification.

The following represents some of the more commonly documented observations and concerns that impede achievement of outcomes.

- Confusion around the requirements and timelines for initiating an assessment, what constitutes initiating an assessment and meeting requirements for face-to-face observation of the child contributes to low achievement on Safety Outcome 1.

- There was little evidence that agencies had clearly stated expectations or policies related to involving children in case planning.

- Emergence of methamphetamine use has created a challenge to county child protection agencies because existing treatment and support services are often not appropriate. Methamphetamine use has not only presented a significant safety concern, but is also a complicating issue in regard to achieving positive permanency outcomes.

- Involvement of fathers in case planning, in visits with their children, as permanency resources and in relative search activity is an overarching area needing improvement and has significant impact on permanency and well-being outcomes.

Relationships matter: Counties who work effectively with tribes and community based service providers are more likely to achieve safety, permanency and well-being outcomes.

Promising practices for reducing foster care re-entry include:

- Transition planning
- Family Group Decision Making
- Post reunification services
- Thorough assessment of child and family needs.

Practices that need improvement:

- Timely responses to reports of maltreatment
- Involvement of children in case planning
- Involvement of fathers.
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