

Progress of the Michigan Department of Human Services

Period Four Monitoring Report for
Dwayne B. v. Granholm

April 1, 2010—September 30, 2010

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www.public-catalyst.com

99 Wood Avenue South
Suite 303, Iselin, NJ 08830

public catalyst

info@public-catalyst.com
908-655-5350

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I. Introduction & Overview

This document serves as the fourth report to the Honorable Nancy Edmunds of the United States District Court for the Eastern District of Michigan in the matter of *Dwayne B. v. Granholm*. On July 3, 2008, the parties, the State of Michigan, the Michigan Department of Human Services (DHS), and Children’s Rights (CR), signed an Agreement to resolve pending litigation regarding Michigan’s child welfare system. DHS is a statewide multi-service agency providing cash assistance, food stamps, and child protection, prevention and placement services for the State of Michigan. Children’s Rights is a national advocacy organization with more than two decades of experience in class action reform litigation on behalf of children involved in child welfare systems. The court formally approved the Agreement on October 24, 2008, and appointed Kevin Ryan of the Public Catalyst Group as the monitor charged with overseeing and reporting on DHS’ progress implementing its commitments. In turn, he assembled the Michigan monitoring team composed of members of Public Catalyst with experience with child welfare reform in other jurisdictions, both as former administrators and advocates. The monitoring team is responsible for assessing the state’s performance under the Agreement. The parties have agreed that the monitoring team shall take into account timeliness, appropriateness, and quality in reporting on DHS’ performance.

The Agreement is structured into six-month periods with public reporting by the monitoring team following each period. This report is for Period Four—April 1, 2010 through September 30, 2010—and reflects entirely the work of the previous administration to meet the commitments of the Agreement.

The Agreement reflects the parties’ joint desire to improve outcomes for children and families in Michigan’s child welfare system as quickly as possible. Upon receipt of the monitor’s third report in this matter, plaintiffs expressed to the court in December 2010 growing dissatisfaction with the pace and progress of the reform effort. The newly elected administration, led by Michigan Governor Rick Snyder and DHS Director Maura Corrigan, requested an opportunity to analyze the status of the reform effort, develop improvement strategies, implement critical changes to the leadership and organization of the effort and ultimately negotiate with plaintiffs in an effort to modify the parties’ Agreement. After several months of study and discussion, the parties reached a Modified Settlement Agreement (MSA) which: provides the plaintiff class with immediate action steps and strategies that focus on bringing rapid attention and improvement to critical performance areas in which there has been non-compliance; reprioritizes the phase-in of needed structural improvements; embeds a new case practice model designed by the current DHS management in consultation with the monitors and plaintiffs; and establishes benchmarks and performance targets that the new administration has committed to achieve in order to realize sustainable reform.

This report to the court reflects the status of Michigan’s reform efforts as of September 30, 2010, prior to the election of Governor Snyder, and details the many challenges of the overall reform effort up to that time. It makes clear the significant hurdles confronted by the new administration and outlines the challenges of creating a strong and sustainable child welfare system capable of ensuring the safety, permanency and well-being of the state’s most vulnerable children and youth.

II. Summary of Commitments

Settlement Agreement Commitment	Due Date	Completed	Comment
I.H & I Funding: Defendants shall request funds sufficient to effect the provisions in this Agreement in connection with any budget, funding, or allocation request to the executive or legislative branches of State government. See page 38	Ongoing	No	The state implemented a \$7.5 million reduction in the adoption medical subsidy program from FY2008 to FY2010.
III.D Maltreatment in Foster Care: By the end of Reporting Period Two, the percentage of children not maltreated while in foster care will be 99.68% or higher.	9/30/2009	No	
III.E.1 Timely and Permanent Reunification: DHS shall meet an interim CFSR target score of 99 by Reporting Period Two and report on each of the individual component measures for Composite One.	9/30/2009	Yes	
III.E.2 Timeliness to Adoption: DHS shall meet an interim CFSR target score of 93 by Reporting Period Two and report on each of the individual component measures for Composite Two.	9/30/2009	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
III.E.3 Permanency for Long-waiting Children in Foster Care: DHS shall meet an interim CFSR target score of 118 by Reporting Period Two and report on each of the individual component measures for Composite Three.	9/30/2009	Yes	
III.E.4 Placement Stability in Foster Care: DHS shall maintain a CFSR score of 101.5 or higher for all Reporting Periods, and report on each of the individual component measures.	Ongoing	Yes	
IV.A.5 CSA Oversight: The Children's Services Administration shall hold responsibility for evaluating the performance of contract providers of children's services. See page 38	Ongoing	Yes	
IV.A.6 Bifurcation: Individuals within the Children's Services Administration shall not hold responsibility for any of DHS' other functions, such as cash assistance, Medicaid, and adult services. See page 37	Ongoing	Yes	
IV.B CSA Structure: DHS committed to implement the organizational structure as set forth in the Agreement. See page 37	Ongoing	No	
V.A CA/N System: DHS shall ensure that its system for receiving, screening, and investigating reports of child abuse and neglect is adequately staffed and that investigations of all reports are initiated and completed within the time periods required by state law. See page 50	Ongoing	No	

Settlement Agreement Commitment	Due Date	Completed	Comment
V. B Hotline-Wayne County Pilot: DHS shall pilot a 24-hour hotline in Wayne County that is adequately staffed and equipped for the receipt, screening, and assignment for investigation of reports of abuse and neglect. See page 50	10/31/2009	No	
V.C CPS QA: DHS shall establish and implement a quality assurance process to ensure that reports of abuse and neglect are competently investigated and addressed. See page 51	Ongoing	No	
V.D Specialized Investigative Units: DHS shall establish separate units to investigate all allegations of abuse or neglect relating to any child in the foster care custody of DHS. See page 51	6/30/2010	Partially	Ingham County neither has its own unit nor is it covered by the regional maltreatment in care units.
VI.A.1 & 4 BSW Requirement: Entry level caseworkers in both DHS and private agencies will have a bachelor's degree in social work or a related human services field. See page 40	Ongoing	Yes	
VI.A.2 & 4 Pre-service Training: All entry level DHS and CPA caseworkers will complete an eight week pre-service training that includes a total of 270 hours of competency-based classroom and field training followed by a competency-based examination. See page 41	Ongoing	No	
VI.A.2 & 4 Pre-service Training: As part of pre-service training, a trainee may be assigned specific tasks or activities with an experienced worker and may have a "training caseload" not to exceed three cases. See page 41	Ongoing	No	

Settlement Agreement Commitment	Due Date	Completed	Comment
VI.A.3a In-Service Training: All DHS caseworkers shall receive a minimum number of hours of in-service training for FY10: CPS workers: at least 24 hours. See page 42	9/30/2010	No	
VI.A.3a In-Service Training: All DHS caseworkers shall receive a minimum number of hours of in-service training for FY10: foster care and adoption workers: at least 40 hours. See page 42	9/30/2010	No	
VI.A.4 In-Service Training: Private CPA caseworkers whose activities and responsibilities are comparable to DHS caseworkers shall receive a minimum number of hours of in-service training for FY10: CPA workers: at least 24 hours. See page 42	9/30/2010	No	
VI.B.2 & 6 Supervisor Training: All newly hired or promoted supervisors in both the public and private agencies shall complete the supervisory training program and pass a competency-based performance evaluation within three months of assuming the supervisory position. See page 43	Ongoing	No	
VI.B.3 Supervisor Training: All DHS supervisors who were promoted or hired to supervisory positions before April 2009, and who have not previously received supervisory training, shall complete the supervisory training program and pass the competency-based performance evaluation given to new supervisors, by July 2010. See page 43	7/31/2010	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
VI.B.4 MSW Requirement: All staff hired from outside DHS or promoted from within DHS to fill positions including responsibility to supervise child welfare casework will have earned a master's in social work from an accredited school of social work or a master's or higher degree in a comparable/equivalent field or receive an approved waiver as a condition for such hiring or promotion. See page 40	Ongoing	Yes	
VI.B.5 University Based Training Opportunities: DHS shall encourage staff to pursue master's level work under a tuition reimbursement program. DHS shall develop relationships, joint programs and other programs with universities to enhance and improve existing training opportunities. See page 42	Ongoing	Partially	No, as to tuition reimbursement; Yes, as to university partnerships.
VI.C Licensing Worker Training: DHS shall ensure all staff responsible for conducting home studies, licensing inspections, annual evaluations & other activities related to licensing of foster homes or residential facilities are trained. See page 67	Ongoing	No	
VI.D Training Oversight: There will be a designated individual within the DHS central office who is solely responsible for overseeing and ensuring compliance with all training requirements for both DHS and private agency workers and supervisors.	Ongoing	Yes	
VI.E.2.a. Supervisor Staff Ratios: By January 2010, 50% of Foster Care, Adoption, and CPS supervisors will supervise no more than five caseworkers. See page 47	1/31/2010	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
VI.E.3.a. Foster Care Worker Caseloads: 95% of Foster Care workers will have caseloads of no more than 30 children. See page 44	Ongoing	Yes	
VI.E.3.b. Foster Care Worker Caseloads: 70% of Foster Care workers will have caseloads of no more than 22 children. See page 44	Ongoing	Yes	
VI.E.4.b. Adoption Caseloads: 95% of Adoption workers will have caseloads of no more than 30 children. See page 45	Ongoing	No	
VI.E.4.c. Adoption Caseloads: 70% of Adoption workers will have caseloads of no more than 22 children. See page 45	10/31/2009	Yes	
VI.E.5.a.(i) CPS Investigations Caseloads: 95% of CPS workers will have caseloads of no more than 16 open cases. See page 44	Ongoing	No	
VI.E.5.a.(ii) CPS Investigations Caseloads: 60% of CPS workers will have caseloads of no more than 14 open cases. See page 44	10/31/2009	No	
VI.E.5.b.(i) CPS On-Going Services Caseloads: 95% of CPS workers will have caseloads of no more than 30 families. See page 44	Ongoing	No	
VI.E.5.b.(ii) CPS On-Going Services Caseloads: 60% of CPS workers will have caseloads of no more than 25 families. See page 44	10/31/2009	No	
VI.E.6.a. POS Monitoring Caseloads: 60% of POS monitoring workers will have a caseload of no more than 55 cases. See page 46	10/31/2009	Yes	
VI.E.7 Licensing Caseloads: 60% of Licensing Workers will have a caseload of no more than 36 cases. See page 46	10/31/2009	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
VI.E.9 Caseload Tracking and Reporting: DHS will provide regular reporting, at least quarterly, on the percentage of supervisors and workers in each of the categories whose workloads meet the standards.	Ongoing	Yes	
VII.A Assessment and Service Plans: DHS shall complete a written assessment of children's and families' strengths and needs, designed to inform decision-making about services and permanency planning and an initial service plan, within 30 days after a child's entry into foster care, and shall update the assessment and the service plan at least quarterly thereafter. DHS shall review and approve assessments and service plans prepared by a private CPA or CCI. See page 72	Ongoing	No	
VII.C Team Decision Making: A TDM shall be held to make or recommend critical case decisions; shall be led by a trained facilitator; and shall include the parent(s) from whom the child has been or may be removed, foster parent(s), child(ren) if of age to participate, family, friends, or other supports identified by the parent(s) and child(ren); other service providers as appropriate, and the caseworker with supervisory participation when necessary. For children placed with a private CPA, the private CPA caseworkers, and the private CPA supervisor when necessary, shall also be present. See page 73	3/31/2010	Partially	Yes, DHS implemented team decision making; No, DHS did not hold team decision making meetings at all required points in the case.

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>VII.F.1-7 Permanency Planning Goals (All): A child shall be assigned only one permanency goal at any time and this goal shall be a federally-recognized permanency goal. Where appropriate, a child shall also be assigned a concurrent goal in conformity with federal regulations and section VII.F.2 of this Agreement. See page 68</p>	Ongoing	Yes	
<p>VII.F.2 Concurrent Planning: Strategic planning and preparation for possible adoptive placement of a child shall occur concurrently with the delivery of reunification services to the child’s birth parents unless clearly inappropriate for documented case-specific reasons. See page 71</p>	Ongoing	Yes	
<p>VII.F.3 Goal Change to Adoption: If a child’s goal is changed to adoption, DHS and the assigned contract agency shall within 30 days of the goal change: a. Assign a worker with adoption expertise to the case; b. Determine whether the child’s foster parents or relatives are prepared to adopt the child and if so, take appropriate steps to secure their consent to adopt; c. If no adoptive resource has been identified, register the child on adoption exchanges; and d. Develop a child specific recruitment plan if no adoptive resource has been identified. See page 79</p>	Ongoing	No	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>VII.F.3 Barriers to Adoption or Guardianship: DHS in consultation with the monitor shall develop a process that will identify barriers to adoption and guardianship in cases in which a permanent home has not been identified within six months of the child's permanency goal becoming adoption or guardianship. See page 79</p>	Ongoing	No	Process developed but not implemented.
<p>VII.F.4 TPR Petition: The process of freeing a child for adoption and seeking and securing an adoptive placement shall begin as soon as the child's permanency goal becomes adoption, but in no event later than as required by federal law. A TPR petition shall be filed within two weeks of the date on which the goal is changed to adoption.</p>	Ongoing	No	
<p>VII.F.8 Adoption Subsidies: Notification process. Upon identification of an adoptive family for a child legally freed for adoption, DHS shall within 14 days provide the putative adoptive family with an adoption subsidy application and explanatory material regarding the adoption subsidy program in Michigan and related federal Title IV-E regulations and DHS policies. DHS shall include a written record of the delivery of such materials in the child's file. See page 81</p>	Ongoing	No	
<p>VII.F.9 Tracking Disrupted Pre-Adoptive Placements: DHS shall track and report on children whose pre-adoptive placements disrupt prior to finalization. See page 80</p>	Ongoing	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
VII.G.4c Permanency Backlog Cohort: DHS shall achieve legal permanency for at least 85% of the children in the legally free backlog identified in Section VII.G.1. See page 83	9/30/2010	No	
VII.G.4c Permanency Backlog Cohort: DHS shall achieve legal permanency for at least 85% of the children in the reunification backlog identified in Section VII.G.1. See page 83	9/30/2010	No	
VII.G.4a & b PPS Staffing: DHS shall continue to employ and/or contract for sufficient Permanency Planning Specialists, as required, to pursue legal permanency for backlog cohort cases. See page 84	10/1/2009	No	
VII.G.4a & b PPS Staffing: DHS shall continue to assign the Permanency Planning Coordinator to manage, monitor and report on the Backlog Project. See page 84	10/1/2009	Yes	
VII.H.2 Worker-Parent Visits: For each child with a goal of reunification, the caseworker will have face-to-face contacts with the child's parent(s) at least two times for the first month in care and at least once every month thereafter. See page 74	10/31/2009	No	
VII.H.3 Parent-Child Visits: Every child shall have at least two monthly visits with parents, barring the stated exceptions. See page 77	10/31/2009	No	
VII.H.4 Sibling Visits: Siblings not placed together shall have at least monthly visits, barring stated exceptions. See page 75	10/31/2009	No	

Settlement Agreement Commitment	Due Date	Completed	Comment
VIII.A.1 Provision of Healthcare Services: DHS shall take all necessary and appropriate steps to ensure that each child entering foster care receives any needed emergency medical, dental and mental health care and a full medical examination within 30 days of the child's entry into care. See page 87	10/31/2009	No	
VIII.A.2 Health Services Plan: DHS shall provide to the monitor and plaintiff a detailed Health Services Plan, which shall set forth the specific action steps DHS will implement in order to ensure that each child entering foster care receives the screenings, examinations and immunizations set forth in the Settlement Agreement. The Health Services Plan shall be subject to the approval of the monitor in consultation with the parties. See page 87	9/30/2010	Yes	
VIII.A.2d Medicaid Card: Each child entering care will be assigned a Medicaid number and the foster parent or other placement provider will receive a Medicaid card, or an alternative verification of the child's Medicaid status and number, within 30 days of the child's entry into care. See page 87	Ongoing	No	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>VIII.A.3 Mental Health Spending: DHS shall redirect at least \$3 million to fund mental health services and will analyze services available in each county to ensure that children in care have access to necessary services. If they do not, DHS will reallocate those funds accordingly as follows: a. By October 2009, in Wayne, Kent, Oakland, Genesee, and Macomb Counties; b. By October 2010, in Berrien, Calhoun, Ingham, Jackson, Kalamazoo, Muskegon, Saginaw, St. Clair, and Washtenaw Counties; and c. By October 2011, in all remaining counties.</p>	<p>10/24/2008</p>	<p>Yes</p>	
<p>VIII.A.4.a Youth in Transition (YIT) Supports: DHS will ensure that children age 14 and older in foster care and youth transitioning from foster care to adulthood have access to the range of supportive services necessary to support their preparation for and successful transition to adulthood. See page 84</p>	<p>Ongoing</p>	<p>No</p>	
<p>VIII.A.4.b YIT Policies: DHS shall develop and implement policies, services, and programs focused on meeting the needs of foster children who are 14 years and older with a permanency goal other than a goal of reunification. See page 84</p>	<p>11/15/2008</p>	<p>No</p>	

Settlement Agreement Commitment	Due Date	Completed	Comment
VIII.A.4.b(i) Michigan Works Referrals: DHS will refer all children age 14 and older in foster care and youth transitioning from foster care to adulthood to Michigan Works! Agencies for participation in youth programs and services administered under the Workforce Investment Act, 29 U.S.C. 2801 et seq., designed to assist youth in developing job skills and career opportunities, and will refer suitably qualified children for summer training, mentorship, and enrichment opportunities. See page 86	11/15/2008	No	
VIII.A.4.b(ii) Placement to 20/Services to 21: DHS will develop and implement a policy and the necessary resources to extend all foster youths' eligibility for foster care custody until age 20 and to make available independent living services through the age of 21. See page 84	11/15/2008	No	
VIII.A.4.b(iii) Medicaid Enrollment for YIT: DHS will develop and implement a policy and process by which all children emancipating from the foster care system at age 18 or beyond are enrolled for Medicaid managed care coverage so that their coverage continues without interruption at the time of emancipation. See page 86	Ongoing	No	
VIII.A.4.b(iv) Housing Referrals for YIT: DHS will refer all children without an identified housing situation at the time of emancipation from the foster care system at age 18 or beyond to the Michigan State Housing Development Authority for rental assistance and services under the Homeless Youth Initiative. See page 86	Ongoing	No	

Settlement Agreement Commitment	Due Date	Completed	Comment
VIII.A.4.b(v) Education Planners: By October 2009, DHS shall hire 14 regional Education Planners who shall provide consultation and support to youth age 14 and older in accessing educational services and in developing individualized education plans, including identifying all available financial aid resources. See page 88	10/31/2009	Yes	
VIII.A.5.a Educational Screening: DHS shall ensure that each child is screened for general and educational needs within 30 days of his/her entry into care. See page 88	10/31/2009	No	
VIII.A.5.b School Registration and Attendance: DHS shall take reasonable steps to ensure that school-aged foster children are registered for and attending school within 5 days of initial placement or any placement change, including while placed in congregate care or emergency placement. No child shall be schooled pursuant to MCL Section 380.1561(3)(f). See page 88	10/31/2009	No	
VIII.A.5.c Continuity of Educational Experience: DHS shall make reasonable efforts to ensure the continuity of a child's educational experience by keeping the child in a familiar or current school and neighborhood, when this is in the child's best interests and feasible, and by limiting the number of school changes the child experiences. See page 88	10/31/2009	No	

Settlement Agreement Commitment	Due Date	Completed	Comment
VIII.B.1a Foster Home Capacity: DHS shall ensure that each county has a sufficient number and adequate array of foster homes capable of serving the needs of those children coming into care for whom foster home placement is appropriate. See page 59	Ongoing	No	
VIII.B.1b Foster Home Capacity: DHS shall ensure that relatives of children in foster care and non-relatives with whom a child has a family-like connection are identified and considered as potential foster home placements for children; where a relative or non-relative with whom the child has a family-like connection is an appropriate foster home placement for a child, DHS shall ensure that appropriate steps are taken to license the relative or non-relative as a licensed foster home as set forth in VIII.B.7 See page 61	Ongoing	Partially	Yes, as to utilization of relatives as a placement resource; No, as to ensuring timely licensure.

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>VIII.B.2 Recruitment Plan for Special Populations: By December 15, 2008, DHS shall develop and provide to the monitor and plaintiffs a recruitment plan to increase the number of available placements for adolescents, sibling groups, and children with disabilities. The recruitment plan shall include, for each category of placements, the number of placements to be developed; the strategies to be followed in developing such placements; and specific timetables with interim targets. Within 30 days of receiving the proposed plan, the monitor shall, in consultation with the parties, either approve the plan or, if the monitor determines that the plan is not appropriate, convene the parties for the purpose of revising the plan so that the plan can be approved within an additional 30 days. DHS shall implement the approved recruitment plan consistent with the timetable and interim targets set forth therein. See page 60</p>	<p>9/1/2009</p>	<p>No</p>	<p>DHS, in collaboration with Spaulding for Children, received a \$2 million federal grant to focus, in part, on recruiting homes for children with disabilities, sibling groups, and adolescents.</p>
<p>VIII.B.3.b Treatment Home Expansion: DHS will have 100 treatment foster home beds available.</p>	<p>10/31/2009</p>	<p>Yes</p>	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>VIII.B.5 State Oversight of Foster Home Recruitment: A designated unit or person within the central office shall be responsible for monitoring the development and implementation of the foster and adoptive home recruitment and retention plans by county offices; providing or arranging for technical assistance to the county offices concerning recruitment and retention; and reporting to the Children’s Services Cabinet on progress and problems in achieving the goals set forth in the recruitment and retention plans. See page 60</p>	Ongoing	No	
<p>VIII.B.6 Determination of Care: In order to ensure that payments to foster parents are sufficient to meet the needs of the children in foster care, DHS shall ensure that the Determination of Care (DOC) process is applied consistently and appropriately across all counties and offices. See page 38</p>	6/12/2009	Yes	
<p>VIII.B.6 Determination of Care: DHS shall identify, after consultation with the monitor and plaintiffs, a state office responsible for ensuring that Determinations of Care and decisions regarding payment of a specialized administrative rate to contract providers are made uniformly across the state and in accordance with DHS policy. See page 38</p>	6/12/2009	Yes	
<p>VIII.B.6 Determination of Care: DHS shall also establish procedures by which a foster parent or CPA may obtain review by a designated official in the central office of a DOC or administrative rate (general or specialized) decision. See page 38</p>	6/12/2009	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>VIII.B.7b Placement with Unlicensed Kin: When placing a child with a relative who has not been previously licensed as a foster parent, DHS shall: i. Prior to placement, visit the relative’s home to determine that it is safe; ii. Within 72 hours following placement, check law enforcement and child abuse registry records for all adults residing in the home; and iii. Within 30 days, complete a home study determining whether the relative should, upon completion of training and submission of any other required documents, be licensed as a foster parent. See page 62</p>	Ongoing	Yes	
<p>VIII.B.7b Placement with Unlicensed Kin: Other than pursuant to a waiver, no child shall be placed in an unlicensed foster home unless there is an order of the juvenile court that the child be so placed. See page 62</p>	Ongoing	No	
<p>VIII.B.7c Foster Care Rates-Licensed Kin: All licensed relative foster care providers shall receive the same foster care maintenance rates paid by DHS to similarly-situated unrelated foster care providers, including the ability to qualify for enhanced DOC rates.</p>	Ongoing	Yes	
<p>VIII.B.7d Foster Care Rates-Permanent Wards: All permanent wards living with relative caregivers shall be provided foster care maintenance payments equal to the payments provided to licensed foster caregivers.</p>	Ongoing	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
VIII.B.7e Relative Licensing Waiver: If it is in a child's best interest to be placed with a relative who desires to forego licensing, the exceptional circumstances for waiving licensing must be documented in the child's record, and must be approved by the county child welfare director in the designated counties or the Children's Services Field Manager for any other county. See page 62	Ongoing	No	
VIII.B.7j(ii) Licensing: DHS shall designate sufficient licensing staff to review all current unlicensed foster homes and to complete the licensing process for each family within 90 days. See page 67	Ongoing	No	
VIII.B.7k Relative Licensing - New: Beginning October 1, 2008, with regard to all children entering DHS foster care custody as of that date, relatives providing foster care for children in DHS foster care custody will be licensed unless exceptional circumstances have been documented and approved. See page 62	Ongoing	No	
VIII.B.7o(i & ii) Relative Licensing Staff: DHS shall continue to employ or contract for relative licensing staff as necessary and to maintain licensing teams, as required, to address all remaining cases within the relative caregiver backlog cohort; and continue to assign the relative licensing coordinator to oversee implementation of the backlog review and to monitor and report on progress. See page 64	10/1/2009	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
VIII.B.7o Relative Caregiver Backlog Cohort: Review of 100% of the relative caregiver backlog cohort by September 30, 2010 shall have been completed, and all homes reviewed shall have been duly licensed as foster care providers, or specially waived from licensure, or if not licensed or waived, children placed in such homes shall have been re-placed within 30 days of the decision not to license or waive licensure. See page 64	9/30/2010	Yes	
VIII.B.8. Child Placement Process-Statewide: DHS shall submit for review and approval by the monitor plans for implementation of adequate child placement processes in the remainder of the state, along with any modifications to the CPN process in Wayne County. See page 53	9/30/2009	No	
VIII.B.8.a Child Placement Process-Statewide: DHS shall fully implement an adequate placement process in Oakland, Genesee, Kent, and Macomb counties. See page 53	10/31/2009	No	
VIII.B.9 Post Adoption Services: DHS shall develop and implement a full range of post-adoption services to assist all eligible special needs children adopted from foster care and their permanent families and shall maintain sufficient resources to deliver such post-adoption services to all children and families who qualify. See page 81	Ongoing	No	
IX.D, E Needs Assessment: DHS shall develop services in accordance with the timeline established by the monitoring team in the Needs Assessment recommendations.	Ongoing	No	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>X.B.1 Limitations on Out of County Placements: DHS shall place all children within their own county or within a 75 mile radius of the home from which the child entered custody (whichever is greater) except as provided in the Agreement. See page 55</p>	<p>7/7/2009</p>	<p>No</p>	<p>No, all children requiring an exception were not reviewed. Of those remaining, insufficient information to evaluate whether all of those children were placed according to the terms of this provision.</p>
<p>X.B.2 Limitations on Separation of Siblings: Siblings who enter placement at or near the same time shall be placed together, unless doing so is harmful to one or more siblings, one of the siblings has exceptional needs that can only be met in a specialized program or facility, or the size of the sibling group makes placement impractical despite diligent efforts to place the group together. See page 55</p>	<p>Ongoing</p>	<p>No</p>	
<p>X.B.3 Limitations on Number of Children in Foster Home: For children entering the foster care system, no child will be placed in a foster home if that placement will result in more than three foster children in that foster home, or a total of six children, including the foster family's natural and/or adopted children. No placement will result in more than three children under the age of three residing in a foster home. Exceptions to these limitations may be made in a child's best interest by the county Administrator of Children's Services in a "Designated County" and in any other county by the Children's Services Field Manager. See page 56</p>	<p>7/7/2009</p>	<p>No</p>	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>X.B.4 Limitations on Use of Emergency or Temporary Facilities: Children shall not remain in emergency or temporary facilities, including shelter care, for more than 30 days or more than one time within a 12-month period, barring stated exceptions. See page 58</p>	<p>10/31/2009</p>	<p>No</p>	
<p>X.B.5 Detention, Jail, Correctional Facility: No child in DHS foster care custody will be placed, by DHS or with knowledge of DHS, in a jail, correctional, or detention facility unless such child is being placed pursuant to a delinquency charge. Within 90 days of the signing of this Agreement, DHS will notify the State Court Administrative Office and the Michigan State Police of this prohibition, and provide written instructions to immediately notify the local DHS office of any child in DHS foster care custody who has been placed in a jail, correctional, or detention facility. See page 57</p>	<p>Ongoing</p>	<p>No</p>	
<p>X.B.6 Limitations on Placement of High Risk Youth: DHS shall not place any child determined by a DHS assessment to be at high risk for perpetrating violence or sexual assault in any foster care placement with foster children not so determined. See page 57</p>	<p>Ongoing</p>	<p>No</p>	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>X.B.7 Limitation on New Residential Care Placements: No child shall be placed in an RTC or any other group care setting with a capacity in excess of 8 children (campus wide) without express written approval by the designated county director or Children’s Services Field Manager. The need for a residential placement shall be reassessed every 90 days. Children may not be placed in a residential placement for more than six months without express authorization. No child may be placed in a residential placement for more than 12 months without the express authorization of the Director of the CSA or a higher-ranking official. See page 57</p>	7/7/2009	No	
<p>XI.A.1 Prohibition on Psychotropic Medications: Psychotropic medication shall not be used as a method of discipline or control for any child. See page 87</p>	Ongoing	No	
<p>XI.A.2 Psychotropic Med Policies & Procedures Review: Within six months of the signing of this Agreement, DHS will undertake a review of the policies and procedures surrounding the use of psychotropic medications. This evaluation will be designed in close collaboration with the monitor and any additional experts on the use of psychotropic medication for children it deems appropriate. See page 87</p>	1/3/2009	No	
<p>XI.A.3 Medical Director: By November 15, 2008, DHS shall create and as soon as possible thereafter hire or contract for the services of a full-time Medical Director. See page 87</p>	Ongoing	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>XI.A.5 Psychotropic Medication Documentation: DHS shall establish and implement processes to ensure documentation of psychotropic medication approvals, documentation by contract agencies of all uses of psychotropic medication, and review of such documentation by appropriate DHS staff, including the Medical Director, on an ongoing basis. See page 87</p>	1/15/2009	No	
<p>XI.B.1 Prohibition on Physical Discipline: DHS shall prohibit the use of Positive Peer Culture, peer-on-peer restraint, and any other forms of physical discipline in all foster care placements. All uses of physical restraint for children in any placements, and all uses of seclusion/isolation in group, residential, or institutional placements, shall be reported to the QA unit. Such reports shall be made available to the licensing unit and the Medical Director for appropriate action.</p>	Ongoing	No	
<p>XI.B.2 Restraint & Seclusion Policies & Procedures Review: DHS shall undertake a review of the policies and procedures surrounding all forms and use of physical restraint and seclusion/isolation of children in foster care. This evaluation will be designed in close collaboration with the monitor and any additional experts on the use of physical restraint and seclusion/isolation of children it deems appropriate.</p>	7/7/2009	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
XII.B Performance Based Contracting: All DHS contracts with CCIs or private CPAs that provide placements and child welfare services to plaintiff class members shall be performance-based contracts that require an annual review of the CPAs' and CCIs' performance. See page 38	6/1/09 for CPAs; 7/31/09 for CCIs	No	
XII.B Performance Based Contracting: DHS shall incorporate all applicable performance outcome goals set forth in Section III and process requirements in the Agreement into the performance-based contracts; and develop a set of enforcement measures to be imposed in the event that a contract agency fails to comply with material terms or requirements of the performance-based contract. See page 38	10/31/2009	No	
XII.C Maltreatment in Care & CPAs: DHS will give due consideration to any and all substantiated incidents of abuse, neglect, and/or corporal punishment occurring in the placements licensed and supervised by a contract agency at the time of processing its application for licensure renewal. See page 52	Ongoing	Yes	
XII.C Maltreatment in Care & CPAs: The failure of a contract agency to report suspected abuse or neglect of a child to DHS will result in an immediate investigation to determine the appropriate corrective action up to and including termination of the contract or placement of the provider on provisional licensing status, and a repeated failure within one year will result in termination of the contract. See page 52	Ongoing	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
XII.D CPA Data Reporting: DHS will ensure that all CCI's or private CPAs that provide placements and child welfare services to plaintiff class members report to DHS accurate data on at least a six-month basis in relation to the requirements of this Agreement.	3/31/2009	No	
XII.E Contract Evaluations: Beginning October 2009, DHS shall conduct annual contract evaluations of all CCI's and private CPAs providing placements and services to plaintiff class members. DHS shall inspect each private CPA. See page 38	10/31/2009	Yes	
XII.E Contract Evaluations: Beginning October 2009, DHS shall conduct annual contract evaluations of all CCI's and private CPAs providing placements and services to plaintiff class members. DHS shall conduct an unannounced inspection of each residential care facility. See page 38	10/31/2009	Yes	
XII.E Contract Evaluations: Beginning October 2009, DHS shall conduct annual contract evaluations of all CCI's and private CPAs providing placements and services to plaintiff class members. DHS shall visit a random sample of each agency's foster homes, including the greater of 5% of the total number of homes or 10. See page 38	10/31/2009	No	
XII.F DHS Staffing Capacity for Contract Oversight: DHS shall maintain sufficient resources to permit its staff to undertake timely and competent contract enforcement activities.	Ongoing	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>XII.G POS Function Review: DHS will, in coordination with the monitor, review the effectiveness of the DHS POS monitoring function in providing case-level oversight of private CPAs. See page 46</p>	<p>Ongoing</p>	<p>No</p>	
<p>XIII.A Data Reporting: DHS shall generate from an automated system accurate and timely data reports regarding each of the requirements and outcome measures set forth in this Agreement and regarding those other requirements of this Agreement for which automated reporting is reasonable and appropriate, as determined by the monitor in consultation with the parties. Extensions allowing additional time during which DHS may supply particular reports based upon manual counts may be granted by the monitor after consultation with plaintiffs.</p>	<p>10/31/2009</p>	<p>No</p>	
<p>XIII.B Permanency Tracking: In consultation with the monitor and in coordination with Children’s Services Administration, Field Operations Administration, private CPA representatives, and Local/Regional DHS office representatives, DHS will design a permanency tracking system and associated reports. The system will, at a minimum, be capable of reporting pertinent status information sorted by individual child, DHS worker/CPA, and county, for all children in foster care. See page 74</p>	<p>9/30/2009</p>	<p>No</p>	

Settlement Agreement Commitment	Due Date	Completed	Comment
XIII.C Federal Data Reporting: Both leading up to and subsequent to the full implementation of a SACWIS, DHS shall at all times satisfy all federal reporting requirements and shall maintain data integrity and accuracy on a continuous basis.	Ongoing	No	
XIV.A QA Program: DHS shall, in consultation with and subject to the approval of the monitor, develop and implement a statewide QA program that will be directed by a QA unit established within the DHS central office. See page 47	Ongoing	Yes	
XIV.C QA Capacity: The QA unit shall be adequately staffed, and its staff shall receive specialized training to fulfill all unit responsibilities. See page 47	Ongoing	Yes	
XIV.D Public Reporting: All reports provided by the QA unit shall become public record so long as any individually identifying information in relation to the temporary or permanent wards in DHS foster care custody is redacted from such report consistent with applicable state and federal confidentiality laws. See page 47	Ongoing	Yes	
XIV.E Performance Reporting: The QA unit shall, within 60 days following the end of each reporting period, compile and provide, in consultation with the monitor, all pertinent data regarding statewide performance in relation to the requirements and outcome measures in the Agreement. See page 47	Ongoing	No	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>XIV.F.1.a Maltreatment-Single Allegation: DHS shall conduct reviews designed to assess and meet the needs of children who have been the subject of an allegation of abuse or neglect in a residential care setting or a licensed or unlicensed foster home between June 2007 and September 2008, and who remain in the facility or home in which the maltreatment is alleged to have occurred. See page 47</p>	Ongoing	Yes	
<p>XIV.F.1.b Maltreatment-Multiple Allegations: DHS shall conduct reviews designed to assess and meet the needs of children who have been the subject of three or more reports alleging abuse or neglect in a foster home, the most recent of which was filed during or after July 2007, and who remain in the foster home in which maltreatment is alleged to have occurred. See page 47</p>	Ongoing	Yes	
<p>XIV.F.1.c Multiple Placements: DHS shall conduct reviews designed to assess and meet the needs of children who, at the time of review, have been in three or more placements, excluding return home, within the previous 12 months. See page 47</p>	Ongoing	Yes	
<p>XIV.F.1.d Long-term Residential Care: DHS shall conduct reviews designed to assess and meet the needs of children who, at the time of review, have been in residential care for one year or longer. See page 47</p>	Ongoing	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
<p>XIV.F.1.e Unrelated Unlicensed Caregivers: DHS shall conduct reviews designed to assess and meet the needs of children who, at the time of review, are in unrelated caregiver placements, defined as an unlicensed home in which the caregiver is not a relative of the child but has been approved as a placement resource because of prior ties to the child and/or the child's family. See page 47</p>	Ongoing	Yes	
<p>XIV.F.3 Special Review Reporting: At the conclusion of the initial 90-day period, DHS will report to the monitor and plaintiffs the results of the reviews conducted during the period, and will develop and implement a corrective action plan, as appropriate, to address the findings. See page 47</p>	Ongoing	Yes	
<p>XIV.G Fatalities: DHS shall ensure that a review, conducted by qualified and competent individuals and independent of the county in which the fatality occurred, has been conducted, and the findings and recommendations of that review conveyed to the monitor and plaintiffs, of each child who died while in the foster care custody of DHS, as follows: 1. For such children who died during the three-year period ending March 31, 2008, no later than November 15, 2008; 2. For child fatalities occurring after March 31, 2008, within six months of the date of death. Findings and recommendations of these reviews will be incorporated into all relevant QA activities, program improvement, contract agency oversight, and other related policies and practices. See page 47</p>	Ongoing	Yes	

Settlement Agreement Commitment	Due Date	Completed	Comment
XVI. Named Plaintiffs Updates: DHS will provide plaintiffs' counsel with regular quarterly updates of the individual named plaintiffs' case records until such time as the named plaintiffs are no longer in DHS foster care custody. Each quarter thereafter, the parties will meet and confer in good faith regarding the named plaintiffs' case plans and placements and services.	Ongoing	Yes	

III. Methodology

In preparation for this report, the monitoring team conducted a series of verification activities to evaluate DHS' progress implementing its commitments in the Agreement. These activities included meetings with DHS leadership, verification visits to DHS offices and private agencies throughout the state, meetings with advocates for children and families, as well as reviews of individual case records and other documentation. During field office visits, the monitoring team interviewed staff and supervisors and talked to public and private managers about the pace, progress, and challenges of the reform. The monitoring team also completed verification work at DHS' central offices regarding relative home, foster home and institutional licensure and re-licensure processes; training; the quality assurance and adoption subsidy processes; and investigations of institutional complaints. The monitoring team also reviewed and analyzed a wide range of aggregate and detail data produced by DHS as referenced throughout this report.

For Period Four, the monitoring team conducted verification activities in DHS operations for five counties and seven private agencies. To date, the monitoring team's work includes multiple verification meetings in the six largest urban counties; verification work in all of the nine next largest counties; visits to a random sample of the remaining medium and small counties; and visits to all of the largest and a wide range of the medium and small private agencies. In all, the monitoring team's verification work reached offices serving more than 80 percent of the children in DHS' custody.

IV. Demographics

A. Complaints, Investigations, and Substantiations of Abuse and Neglect

During Period Four, DHS received 62,123 child protective services complaints, a five percent increase compared to the prior six month period. DHS referred 40,454, or 65 percent, for investigation, the same percentage referred in the prior period, but an increase in volume of more than 2,000 referrals. By county, the median percentage referred for investigation was 57 percent, with a low of 33 percent (Missaukee) to a high of 100 percent (Keweenaw). Of the 40,454 that DHS referred for investigation, DHS reported data on 39,064, 97 percent of the referrals, with information not provided for 1,390 referrals.¹ For the referrals reported, DHS concluded that a preponderance of the evidence indicated abuse or neglect in 10,147 or 26 percent of those cases. By county, the median percentage with a preponderance of the evidence indicating abuse or neglect was 23 percent, with a range of 0 percent (Keweenaw, Leelanau, and Missaukee) to 56 percent (Ontonagon). The continued wide variation in referral and preponderance rates by county underscores the wide variation in protective services practice also observed by the monitoring team during their verification visits.

B. Population of Children in Custody

Revised data² provided by DHS indicates that as of March 31, 2010, there were 16,525 children in custody.³ DHS reports there were 16,201 children in custody as of September 30, 2010, a decline of 324 children (two percent) during Period Four. DHS saw more children leave (4,243) than enter (3,919) custody, explaining the decline.

As of the end of the period, the majority of children in care continued to be the youngest, those ages 0 to 6. The size of that age group remained relatively stable (an increase of 17 children during the period) while the number of children and youth in all other age groups declined, including those 18 and older.⁴

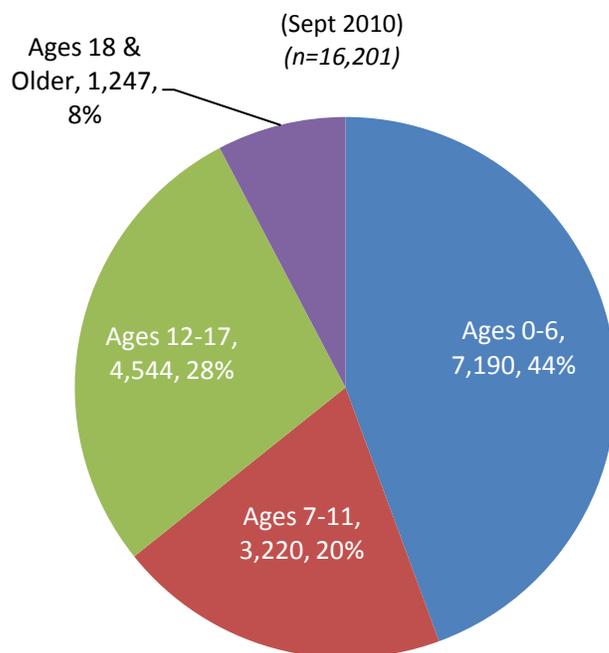
¹ DHS did not include an explanation for why the information was missing for these referrals.

² DHS previously reported 16,857 in care on March 31, 2010, as cited in the Period Three report. DHS later revised this count, indicating that they should not have included 332 children who were receiving services through the Interstate Compact on Adoption and Medical Assistance (ICAMA) who are in the custody of another jurisdiction but not in Michigan's custody.

³ The references in this report to children and youth placed in DHS' supervision, custody or care refer to child welfare and do not include children and youth who are the responsibility of DHS through the juvenile justice system unless those children and youth also have an open child welfare case.

⁴ Provisions in the Agreement expanded placement as an option for more youth over age 18 but there has not been a corresponding increase in the number of these aged youth in care.

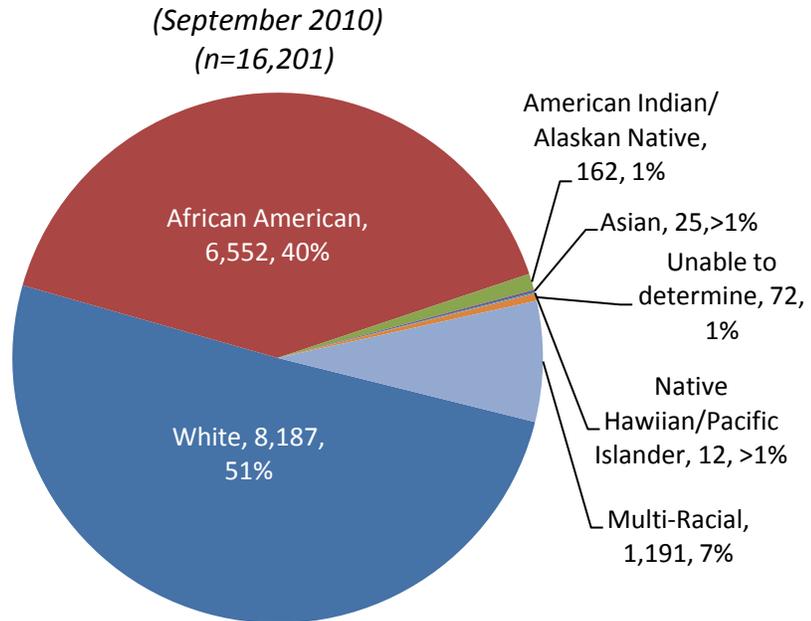
Figure 1 – Ages of Children in Custody



The gender of the population in DHS custody is equally split, 50 percent male and 50 percent female.

With regard to race, White (51 percent) and African American (40 percent) children represent the majority of those in DHS custody. While the number of White children in care has remained stable, the number of African-American children in custody declined, compared to the prior period. The number of children and youth for whom race was unreported decreased by almost half compared to the prior period and is relatively low at 0.4%.

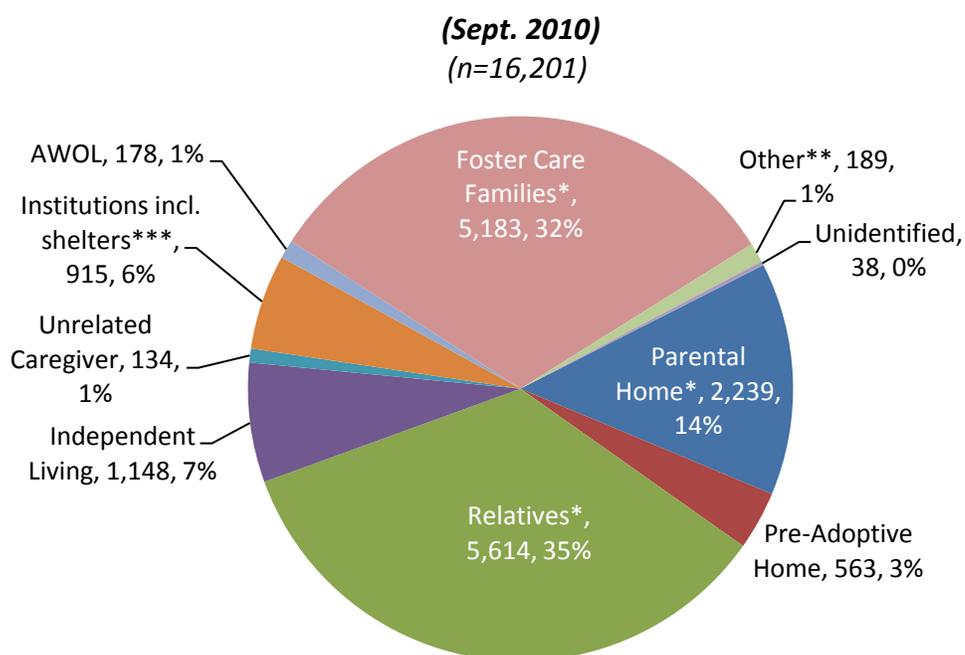
Figure 2 – Race of Children in Custody



Additionally, six percent of children are identified as having Hispanic ethnicity.

As detailed in the following chart, the majority of children (84 percent) in DHS custody live in family settings, including foster families, with relatives, with their own parents, and in pre-adoptive homes. There was a slight increase in the number of children living in shelters and institutional settings, from 891 to 915, compared to the prior period. By the end of this period, there were 81 fewer youth reported to be residing in independent living placements that provide services to youth who are aging out of care.

Figure 3 – Placement of Children in Custody



* Includes in- and out-of-state

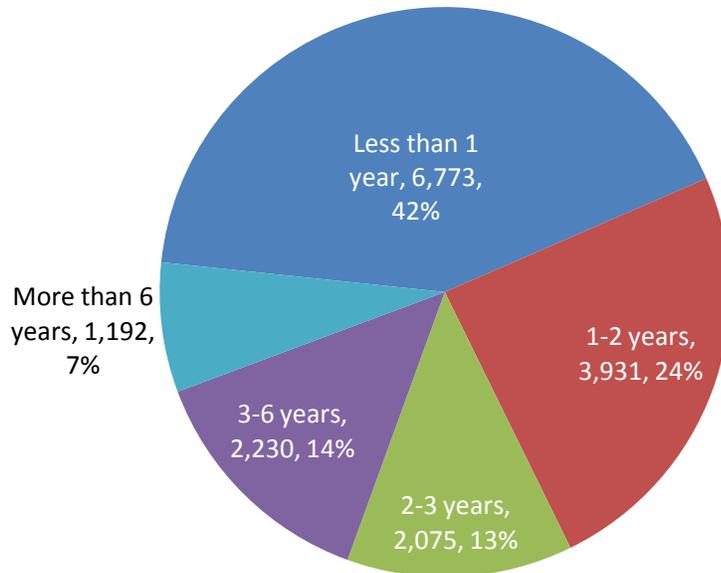
** Includes detention (48), jail (36), community justice centers (8), court treatment (9), legal guardians (37), mental health hospitals (10), boarding schools (32) and DHS training schools (9).

*** Includes emergency shelters (75), out-of-state child placement institutions (15), and private child care institutions (825).

Of the children in DHS custody on September 30, 2010, 42 percent were in care for less than one year. One out of every five children and youth were in care for three years or more.

Figure 4 —Length of Stay in Care

(Sept. 2010)
(n=16,201)



V. Building the Organizational Capacity to Support Reform

DHS committed to a number of organizational, structural, and functional changes in the Settlement Agreement. Those include modifications to DHS’ organizational structure, implementing a clear division between DHS’ child welfare and other responsibilities (referred to as “bifurcation”); creation of a high-level coordination entity, the Children’s Services Administration (CSA), to ensure consistency in the application of child welfare programs; evaluation of the on-the-ground relationship between the public and private agencies through the public staff that monitor private agency casework; and creating a structure charged with ensuring equity in financial support to children in custody.

In each of the first three monitoring periods, the prior administration reorganized its senior child welfare leadership structure, and each time, plaintiffs’ counsel consented, having been advised in advance of the proposed change. In Period Four, the administration reorganized subcabinet responsibilities in variance with terms of the Agreement and without advance notice to plaintiffs or the monitoring team, in contravention of the consent decree.

A. Determination of Care

The parties agreed that there needed to be equity statewide in the determination of care (DOC) process, which establishes the rate to be paid for support of a child. The rate itself is also called the DOC. There is a standard rate and then there can be enhancements to that rate based on age and circumstance, particularly with respect to children with special needs. DHS named the Federal Compliance Office as the lead central entity responsible for ensuring uniform payment of DOC.

Based on its representations to the monitoring team, DHS met the terms of the Agreement with respect to the centralization of the DOC process. DHS also reports implementing a plan for ensuring accountability with the statewide equity commitments.

B. Assessing the Adequacy of Resources for Reform

The prior administration reduced resources in Period Four for commitments embedded within the Agreement. As a result, the state in Period Four did not achieve some of the caseload standards established in the Agreement and did not meet its commitment to grow additional services, as described in the monitoring team's reports to the court at the conclusion of Periods Two and Three. By way of example, DHS reduced expenditures in the adoption medical subsidy program from \$11,954,977 in FY 2008 to \$4,420,105 in FY 2010.

DHS committed in the Agreement that it would, at a minimum, request of the Michigan Legislature "state funds and any federal/special fund authorization sufficient to effect the provisions and outcome measures set forth in this Agreement in connection with any budget, funding, or allocation request to the executive or legislative branches of State government." (I.H.) Nonetheless, DHS and the State Budget Office did not advance to the Michigan Legislature a request for funds or spending authorization to fully fund all needed positions or to replace the significant cuts in services to children and families that the administration implemented in FY2009 and FY2010.

C. Strengthening Contract Oversight

The Child Welfare Contract Compliance Unit (CWCCU) is the lead unit of the Children's Services Administration responsible for monitoring DHS' contracts with private agencies. DHS committed, beginning October 2009, to conduct contract evaluations of all child caring institutions (residential facilities known as CCIs) and private child placing agencies (CPAs) providing placements and services. The purpose of the evaluations is to ensure the safety and well-being of the children served by the CCI or CPA and to ensure that the contract agency is complying with the applicable terms of their agreement. At least once annually, DHS committed to 1) inspect each private CPA to review all relevant aspects of the agency's

operations; 2) conduct an unannounced inspection of each residential care facility; and 3) visit a random sample of each agency's foster homes, including five percent of the total number of homes supervised by the agency or ten homes, whichever is greater.

DHS reported there were 224 contracted programs subject to the annual review provisions of the Agreement in FY2010. A contract compliance review was completed for 187 of the 224 programs in FY2010. For the remaining 37 programs, no contract review was conducted or scheduled if the program opened, closed or had its contract terminated in the fiscal year; if program operations were suspended during the year; or if the program was not presently serving DHS children.

The monitoring team reviewed a sample of the evaluation reports and observed that during their visits contract compliance monitors assessed programs in a variety of areas such as training, case management, staffing ratios, policies and procedures, program operations, child and family assessments, and quarterly reporting. The contract evaluations included case file reviews and interviews with management, staff, children, foster parents, and biological parents involved with the program. Each of the 187 programs reviewed in FY2010 was cited for one or more contract, policy, or rule violations which DHS reported is not uncommon. The violations involved training, caseloads, and various service delivery requirements. Nearly all of the programs submitted a contract compliance improvement plan that CWCCU either initially approved or approved with modifications, with the balance of the plans due in the next monitoring period.

With respect to the unannounced inspections, BCAL reported there were 133 licensed residential care facilities that required unannounced inspections in FY2010. BCAL reported inspecting 115 of those facilities as part of their interim or renewal licensure cycle. Of the remaining 18 facilities, two had no DHS children presently residing there; seven inspections were overdue—three in-state and four out-of-state; and nine facilities closed prior to their inspection.

With respect to the third obligation under this provision, DHS reported spending Period Four in discussions about which DHS unit should be the appropriate entity to conduct the visits and reviews of a random sample of each agency's foster homes. Because DHS did not perform any foster home reviews in FY2010, the state did not comply with this portion of the commitment. The monitoring team will report on the status of implementation in future monitoring reports.

DHS committed to implementing performance-based contracting, with annual performance reviews. Performance metrics were selected in consultation with the private agencies, and DHS amended its foster care and adoption contracts in June 2009 and residential facility contracts in July 2009 to include the proposed performance measures. During Period Three, in cooperation

with the private agencies, DHS began collecting preliminary data to assess performance. Subsequent analysis revealed issues both with the quality of the data collected and with some of the performance metrics, and DHS concluded the process would need to undergo significant revision. As a result, as of Period Four, DHS does not yet have the performance-based contracting process envisioned in the Agreement.

VI. Developing the Workforce to Deliver High Quality Services

In the Agreement, DHS committed to develop the workforce over time in order to ensure that both DHS and private agency staff serving Michigan's at-risk children and families have improved educational qualifications and receive quality training. These commitments continued to be applicable during Period Four. Although there was some improvement in this area, DHS did not fully meet its commitments.

A. Increasing Worker Qualifications

In Period Four, DHS reported there were 281 new entry-level public and private agency caseworkers who were required to have a bachelor's degree in social work or a related human services field. The monitoring team compared the personnel lists provided by DHS with reports from the CSA training database, JJOLT, in order to assess performance. Based on the information provided, all of the caseworkers possessed the requisite degree.

DHS also committed that newly-hired or promoted public agency supervisors would have a master's degree in social work or a master's or higher degree in a comparable/equivalent field. DHS reported hiring or promoting 34 supervisors from April 1, 2010 through September 30, 2010. However, the monitoring team, during verification of the qualifications information provided, noted that at least one supervisor listed as having been promoted in Period Four was also reported as being promoted to the same supervisory position in Period Three. The monitoring team, therefore, reduced the number of new supervisors to 33 for Period Four. Based on the information provided, 25 of the 33 DHS supervisors possessed the requisite master's degree and DHS waived the master's degree requirement for the remaining supervisors based on experience, as is authorized by the Agreement. In total, DHS has granted waivers of the master's degree requirement for eight percent of the DHS supervisors which does not trigger the case-by-case review of the waivers by the monitoring team provided for in the Agreement when ten percent of the supervisors have been granted master's degree waivers.

B. Expanding Training to Strengthen the Workforce

Pre-Service Training

DHS, again, did not meet their commitment to ensure all new caseworkers enroll in training, complete the pre-service training program, pass the performance-based evaluation (PBE), and carry no more than three cases prior to completing training.

In the Agreement, DHS committed that public and private agency entry level caseworkers in CPS, foster care, and adoption programs and purchase of service (POS) monitors will complete an eight week pre-service training program. As part of pre-service training, a trainee may be assigned specific tasks or activities in connection with a case so long as the primary responsibility for that case remains with an experienced worker. A trainee also may be assigned responsibility for a “training caseload” of up to three cases, under appropriate supervision, and must pass a performance-based evaluation (PBE), including a written examination, prior to assuming a full caseload.

DHS provided the monitoring team with training reports that reflect 174 entry-level caseworkers hired by DHS in Period Four of which 88 fully adhered to the pre-service training commitments. Twenty-two new workers were pending training at the close of the period, but did not carry any cases, which is consistent with the Agreement. The remaining 64 caseworkers were assigned either their first case before starting training and/or a fourth case before completing training in violation of the state’s commitment to only assign a case to a new worker who is enrolled in training and to only assign four or more cases to a new worker who has successfully completed the pre-service training program. DHS also reported that 105 entry-level private agency caseworkers were hired during the period of which 51 met fully the pre-service training commitments, 13 were awaiting training, and 41 did not meet the training standards. The monitoring team noted a difference of two between the numbers of new entry-level staff reported in the personnel report compared to the training report. In any case, the discrepancy does not impact performance in this area.

Table 1 – Pre-Service Training Performance

	New Hires	Met Commitment		Pending Training		Did Not Meet Commitment	
Public	174	88	51%	22	13%	64	37%
Private	105	51	49%	13	12%	41	39%
Total	279	139	50%	35	12%	105	38%

In-Service Training

The commitment that all caseworkers receive ongoing training annually increased for DHS staff and commenced for private agency staff in FY2010. The chart below reflects the timetable for implementation of in-service training for caseworkers.

Table 2 – Implementation Schedule for In-Service Training

Training Year	CPS Staff	FC & Adoption Staff	Private Agency Staff
October 2008 – September 2009	16 hours	24 hours	N/A
October 2009 – September 2010	24 hours	40 hours	24 hours
October 2010 – September 2011	32 hours	40 hours	40 hours
October 2011 and thereafter	40 hours	40 hours	40 hours

DHS provided in-service training information from JJOLT to the monitoring team for 1,515 public agency staff reflecting an in-service completion rate of 81 percent, a marked improvement from the prior year, and for 327 private agency staff, with a completion rate of 51 percent for their first reporting year, representing combined statewide performance of 75 percent. Noteworthy is that 24 local DHS offices and 18 private agency offices reported achieving 100 percent of the in-service requirements. Only 29 staff had no in-service hours credited.

Although the number of staff for whom DHS is now able to report has increased significantly, there remains a discrepancy between the number of caseworkers subject to the in-service requirements and those registered as JJOLT users. DHS continues to work to diagnose the reasons for the differences, some of which may be a result of multiple entries for workers covering more than one program area, *i.e.*, CPS, foster care, adoption, POS.

DHS continued to leverage its partnership with seven Michigan graduate social work schools,⁵ which developed a Child Welfare In-Service training program that offers a wide array of relevant courses for caseworkers. In addition to the university-based training opportunities, DHS continued to offer pre-approved in-service training sessions hosted by the Prosecuting Attorneys Association of Michigan, the State Court Administrative Office, the Department of Community Health, and several online sites. Further, local training tailored to the specific needs of an office or region is also available to staff.

⁵ The Michigan Graduate Schools of Social Work participating in the partnership are Andrews University, Eastern Michigan University, Grand Valley State University, Michigan State University, University of Michigan, Wayne State University, and Western Michigan University.

DHS also committed to encourage its child welfare staff and the staff of private CPAs to pursue master's level graduate degrees under a tuition reimbursement program. DHS reported that it allocated \$400,000 in FY2010 but no process was in place to administer the program so no funds were expended in Period Four. Just after the close of the period, DHS received approval from the federal Administration for Children and Families for funding authorization to administer the tuition reimbursement program in FY2011. However, at the conclusion of Period Four, the program had not been implemented.

Supervisory Training

In the Agreement, DHS committed that new supervisors in the CPS, foster care, adoption or POS programs would complete a 40-hour training program and pass a competency-based performance evaluation within three months of assuming the supervisory position. As noted, DHS reported that 34 public agency staff were promoted or hired into supervisory positions during Period Four, at least one of whom was also reported as being newly promoted to the same position in Period Three and completed supervisory training during that period. Twenty-two of the remaining 33 new supervisors completed training within three months of their appointment, as required. Six supervisors were pending training at the close of Period Four, but the three-month period had not yet elapsed. One supervisor included in the personnel report did not appear on the training report, so no information was provided on the training status. The remaining four supervisors were not trained within three months of promotion, but three ultimately completed training and the fourth supervisor was scheduled to attend during Period Five. As noted in the last monitoring report, given the small number of supervisors promoted or hired each period, better coordination among human resources, training, and field offices with respect to these training commitments should be attainable.

DHS also committed that by July 2010 supervisors who were promoted or hired before April 2009 and who had not previously received supervisory training would receive the same competency-based supervisory training and written examination given to new supervisors. DHS reported there were 256 supervisors subject to this provision. Commendably, 254 supervisors met the commitment by either successfully completing the 40-hour supervisory training by July 2010 or by providing acceptable documentation of prior completion of another approved supervisory training. The remaining two supervisors completed the 40-hour training after July 2010.

VII. Lowering Caseloads

A. Child Protective Services

For Period Four, DHS again failed to meet the Agreement’s existing caseload standards for child protective services investigations. Only 53 percent of investigators had 16 or fewer cases, far below the required 95 percent, and only 40 percent had 14 or fewer, 20 percent below the target of 60 percent. DHS’ performance in Period Four also failed to meet the child protective services ongoing caseload standards. Fifty seven percent of workers met the standard of 30 cases or less, well below the required 95 percent, and 45 percent had 25 or fewer, below the agreed upon 60 percent.

Table 3 – CPS Caseloads

Child Protective Services – Investigations					
Period Four	All Staff	1 Staff to 16 Cases Target = 95%		1 Staff to 14 Cases Target = 60%	
Urban Counties	306	168	55%	126	41%
Outstate Counties	443	231	52%	176	40%
TOTAL	749	399	53%	302	40%

Child Protective Services – Ongoing					
Period Four	All Staff	1 Staff to 30 Cases Target = 95%		1 Staff to 25 Cases Target = 60%	
Urban Counties	319	187	59%	146	46%
Outstate Counties	438	242	55%	192	44%
TOTAL	757	429	57%	338	45%

B. Foster Care

Throughout the reform, DHS has consistently achieved foster care caseload standards. For Period Four, DHS met the two required standards: 95 percent of staff had no more than 30 children and 80 percent of staff, ten percent above the target, had 22 children or less.

Table 4 – Foster Care Caseloads

Period Four	Foster Care				
	All Staff	1 Staff to 30 Children		1 Staff to 22 Children	
		Target = 95%		Target = 70%	
Urban Counties	333	318	95%	259	78%
Outstate Counties	318	283	89%	190	60%
Private Agencies	459	455	99%	435	95%
TOTAL	1110	1056	95%	884	80%

C. Adoption

DHS met one of the adoption standards and missed the second. DHS far exceeded the standard of 70 percent of staff with no more than 22 children, with 84 percent of staff meeting that standard. DHS missed the second standard by three percent, with 92 percent of adoption staff with 30 or fewer children.

Table 5 – Adoption Caseloads

Period Four	Adoption				
	All Staff	1 Staff to 30 Children		1 Staff to 22 Children	
		Target = 95%		Target = 70%	
Urban Counties	18	16	89%	12	67%
Outstate Counties	41	23	56%	12	29%
Private Agencies	202	201	100%	195	97%
TOTAL	261	240	92%	219	84%

D. Licensing

DHS far exceeded the licensing caseload standard – that 60 percent of workers will have no more than 36 cases – with 85 percent compliance.

Table 6 – Licensing Caseloads

Period Four	Licensing		
	All Staff	1 Staff to 36 Cases Target = 60%	
Urban Counties	32	30	80%
Outstate Counties	94	69	77%
Private Agencies	214	191	82%
TOTAL	340	290	85%

E. Purchase of Service Monitors

As discussed in prior reports, the POS role is an outgrowth of Michigan’s partnership with the private sector. For children assigned to the private sector for foster care or adoption services, DHS POS workers visit the children quarterly, review service plans, assess progress toward permanency, and perform all data entry into DHS’ information technology system. In October 2010, DHS exceeded the POS monitor caseload standard - that 60 percent of staff would have no more than 55 cases – with 89 percent of staff meeting that standard.

Table 7 – POS Monitor Caseloads

Period Four	Purchase of Service		
	All Staff	1 Staff to 55 Cases Target = 60%	
Urban Counties	345	305	90%
Outstate Counties	227	185	86%
TOTAL	572	490	89%

As also noted in prior monitoring reports DHS committed, in coordination with the monitoring team, to review the effectiveness of the POS function. During Period Four, DHS formed an internal agency workgroup that began to gather information regarding county practices related to POS monitor responsibilities; identify areas where there may be duplication of effort between POS and direct casework staff; and analyze POS monitors’ caseloads. DHS surveyed its

POS monitors in order to gather relevant information. DHS also researched other state’s monitoring processes and made recommendations to DHS leadership regarding possible changes to the roles and functions of POS monitors. During Period Four, DHS had not coordinated the review with the monitoring team.

F. Supervisor Ratios

In Period Four, 75 percent of DHS and private agency supervisors supervised five or fewer workers, well in excess of the target of 50 percent.

Table 8 – Supervisor to Staff Ratios

Period Four	Supervisor to Staff Ratios		
	All Supervisors	1 Supervisor to 5 Staff Target = 50%	
Urban Counties	141	86	61%
Outstate Counties	187	141	75%
Private Agencies	200	168	84%
TOTAL	528	395	75%

VIII. Implementing Quality Assurance

The Quality Assurance Unit was established pursuant to the Agreement and at the end of Period Four was a part of the Children’s Services Administration Child Welfare Improvement Bureau. The Unit consists of a director, who had been in place for just under one year as of the end of Period Four, and 14 analysts. Five urban areas have an assigned analyst, three analysts work from the central office, and the other six provide regional coverage to the remaining 78 counties. Three of the analyst positions were vacant as of the end of Period Four, and at the time of this writing, a total of five positions were vacant as new opportunities opened up for existing QA staff due to the early retirement package offered by the previous administration. Demand for experienced staff to support the reform from a variety of pivotal positions remains high, and as noted in a prior report, the current civil service title for the QA analyst positions continues to make them vulnerable to promotion. Given the time it takes to develop sound QA skills and the strong emphasis placed by the new administration on this function, stability in staffing would be of great benefit moving forward.

During Period Four, the analysts continued to conduct the special reviews for the five categories of high-risk children detailed in the Agreement. These reviews are conducted in consultation with the local office. When the analyst identifies policy or practice issues that need to be addressed locally, local leadership is asked to respond and create a Quality

Improvement Plan (QIP) focusing on three areas of improvement. The analyst is responsible for reviewing the QIPs and then engaging in quarterly monitoring. DHS analyzes the results of all of these special reviews for patterns and trends. The findings are presented to the Children's Cabinet, which functions as the statewide CQI oversight team, which then reviews and evaluates the findings and recommends statewide policy or practice changes.

During Period Four, DHS conducted reviews in all five high risk categories, reporting a total of 976 reviews completed – a volume of reviews higher than in previous periods. In four of the five categories, DHS reports having completed all reviews. In the fifth category, multiple placements, DHS continues to sample, reporting completing 573 reviews during Period Four.

Data issues continued to present some challenges through Period Four with respect to both over-identifying and under-identifying children in each high-risk category. Both under-and over-identification requires follow up work by QA staff to identify the children who should be reviewed. DHS believes that during Period Four they remedied previous issues with under-counting and continued to hone the data identification process so as to reduce over-identification in the future.

During Period Four, DHS took steps to begin meeting its obligation to report quarterly with regard to the special reviews. Prior to Period Four, DHS had reported less frequently, issuing two reports – one covering all reports completed prior to Period Three and one report for Period Three, which became public during Period Four. DHS compiled quarterly reports for the two quarters of Period Four. At the time of this writing, DHS had made public both Period Four quarterly reports on their website. Moving to quarterly reporting is a step in the right direction with regard to compliance with the Agreement.

Period Four also brought the start of a new initiative by the QA unit, which is leading the effort to build continuous quality improvement (CQI) capacity in the agency by developing local CQI teams. During Period Four, the CQI analysts began to convene the teams, provide information to the team members on the role of CQI and their roles as team members, and secure consensus on team projects.

The Agreement also requires that DHS develop a quality assurance process to ensure that reports of abuse and neglect are competently investigated and that, in cases in which abuse and/or neglect is indicated, actions are taken and services are provided appropriate to the circumstances. As reported previously, DHS to date has opted to develop the existing practice of requiring local case reads by supervisors and local management, reporting they are making that practice more robust by instituting a better case sampling methodology, improving the case reading tool, and building a process to collect these reviews electronically so that they can be reviewed centrally. However, there is not yet a process in place for regular centralized

reviews, integrating outside reviewers or otherwise providing the level of independent insight and cross-county and statewide analysis necessary to meet the quality assurance standard set forth in the Agreement. Local CPS practice varies widely in Michigan, as reflected in the extremely wide range of performance with respect to timeliness and referral and substantiation rates. Such wide variation underlines the purpose for this provision in the Agreement. The QA manager is considering options for integrating elements of independent review – whether through the QA analysts, a centralized periodic review process, cross-county reviewers, or another device – in order to develop the CPS QA process contemplated in the Agreement. The special review analytic and reporting process provides one model and as the volume of those reviews declines DHS reports they may be able to redeploy some analytic capacity to help develop the CPS QA process. Currently, DHS is not in compliance with this element of the Agreement.

A further quality assurance activity described in the Agreement involves DHS' implementation of a process for reviewing the case handling of all children who die while in out-of-home placement, regardless of cause, and to integrate lessons learned from these reviews in ongoing continuous quality improvement efforts. Specifically, DHS committed to review all cases where children died while in care, using qualified and competent individuals to complete the reviews and ensuring that the reviewers are independent of the county in which the fatality occurred. Child fatality reviews were due within six months of the date of death, and were shared under a protective order of the federal court with plaintiffs and the monitoring team.

The DHS Office of the Family Advocate (OFA) conducted all fatality reviews and sent all findings and recommendations for individual fatality reviews to the agencies and units involved for corrective action. OFA provides completed plans to the QA unit and the field operations leadership. The QA Unit reviews all information from the reports and compiles information that is used for analysis. Any recommendations that are made by OFA and QA that are not case-specific are put into a quality improvement plan (QIP) by QA and sent to the appropriate program/policy offices. The QA unit publishes reports of its work reviewing child fatalities as well.

Ten youth died in the care of the state between April 1, 2010 and September 30, 2010. Of the ten child fatalities reported by DHS in Period Four, five were referred to CPS and accepted for investigation. Of the cases investigated, two were ongoing at the conclusion of Period Four, one resulted in a preponderance of the evidence determination of child abuse and neglect and two investigations resulted in findings that there was not a preponderance of the evidence supporting child abuse or neglect.

DHS agreed to make all reports completed by the QA unit public record.⁶ As of February 24, 2011, DHS had made six QA reports public including three child fatality review reports and three special review reports.

IX. Improving Safety

A. Establishing a Statewide Child Abuse Hotline

DHS committed in the Agreement to phase out its local office screening systems and to establish a 24/7 centralized hotline with the necessary staff, information technology and telecommunications systems to receive and manage calls alleging child maltreatment across the state by October 2011. Doing so will create a system for all reporters to call one well-publicized child abuse hotline number; trained screeners and supervisors will be expected to make consistent decisions for all calls across the state; and investigations will be sent to field offices in a timely manner. Continuous quality improvement of statewide screening practice will also be possible with a centralized hotline system.

In order for DHS to evaluate how to best design and implement a statewide hotline, the Agreement required that the existing centralized screening office in Wayne County function as a pilot site beginning in Period Three. DHS did not implement the pilot in Period Three and reports that they did not in Period Four either. However, throughout Period Four DHS leadership planned for the implementation of the statewide hotline. Specifically, DHS reports that they have identified a site in Kent County for the hotline, a location that reportedly has adequate capacity, technology access, and expansion capability. DHS reports that they have established a staffing allocation based on extensive analysis of data on statewide call volume, complaint volume, and standards for response. According to DHS, 104 positions have been allocated during FY2011 and that interviews for hotline positions will be scheduled during Period Five in order for DHS to hire staff by July 2011. Hiring staff prior to the hotline becoming operational will enable the agency to train and prepare them for statewide implementation in October 2011. DHS further reports that SWSS system changes are being made to ensure that there is adequate tracking capacity as referrals are assigned to field offices. DHS intends to begin this effort with Kent County DHS functioning as centralized intake for a number of surrounding counties. The goal is to identify any issues in the centralized intake process prior to statewide rollout. The monitoring team will report on DHS' ongoing progress in implementing the statewide hotline in future reports.

⁶ All individually-identifying information in relation to the temporary or permanent wards in DHS foster care custody is to be redacted from such reports consistent with applicable state and federal confidentiality laws.

B. Assessing CPS Capacity and Performance

DHS agreed to ensure that its system for receiving, screening, and investigating reports of child abuse and neglect is adequately staffed and that investigations of all reports are initiated and completed within the time period required by law. CPS staffing is discussed in the caseload section of this report, and DHS did not meet CPS caseload standards. DHS reported initial data regarding timeliness for Period Four and will be providing additional data on timeliness at the monitoring team's request for Period Five. In particular, the monitoring team would like to understand better the range of performance with regard to timeliness on a local level before drawing a judgment.

X. **Addressing Abuse and Neglect in Placement**

A. Specialized Investigative Units

In the Agreement, DHS committed to establish separate units throughout the state with responsibility for investigating allegations of abuse and neglect of children in DHS custody. The establishment of these units was intended to eliminate the historical bifurcation of this investigative responsibility between the Bureau of Child and Adult Licensing (BCAL) and field offices. Additionally, the units would be staffed with trained employees whose primary responsibility would be to conduct these investigations. Each of the five urban counties was required to establish maltreatment in care (MIC) units and three additional units were to be established to serve the remainder of the state.

At the conclusion of Period Three, MIC units were established in Wayne, Macomb, Oakland, Genesee and Kent counties, with one supervisor for each unit and several investigative staff. Ingham County, reporting to the Urban Field Operations Director, did not establish a specialized MIC unit locally, nor are they covered by a regional MIC unit. Rather, Ingham developed a rotational assignment process in which referrals are assigned to investigative staff. The Ingham County process does not comport with the commitment in the Agreement to assign MIC cases to specialized investigative staff.

During Period Four the three additional units became operational; however these units have not yet taken full responsibility for maltreatment in care investigations in their planned catchment areas due to staff vacancies. The unit supervisors are located in Crawford County (originally slated to be located in Grand Traverse County), Saginaw County, and DHS central office in Lansing. These units will have four investigators assigned throughout their geographical area of responsibility. At the end of Period Four, two of the supervisor positions were filled and one remained vacant. All but four investigator positions were filled. The vacancies have been posted and DHS is actively interviewing and attempting to fill the

positions. The BCAL child welfare director, the CPS program manager, and the SWSS CPS lead for technical assistance provided training for staff in the non-urban units as they became operational.

DHS reported that during Period Four, administrative and operations field staff met to review, analyze, and amend policy to ensure that MIC investigations are handled in a consistent manner statewide. DHS reported that changes in policy, forms and any needed SWSS enhancements will be released during Period Five.

During Period Four, the MIC units received 1,708 complaints of alleged abuse and neglect involving 3,465 alleged child victims. Of these complaints, 1,147 – involving 2,386 children - were assigned for investigation. At the beginning of March, 1,112 complaints were disposed of while 35 cases were pending completion of the investigation. DHS reports that of the completed investigations, a preponderance of evidence was found to support a finding of abuse or neglect in 73 cases, or seven percent of assigned complaints, with a total of 118 confirmed child victims, five percent of the total alleged victims.

B. Maltreatment in Care Private Agency Accountability Tools

Failure to Report

When a private agency fails to report suspected abuse or neglect, the Agreement requires that DHS conduct an investigation and determine appropriate corrective action, which could include termination of the contract or placing the agency on provisional licensing status. If the agency fails to report twice within a twelve-month period, the Agreement requires that DHS terminate the contract. During Period Four, four agencies were cited by BCAL for failure to report; of these four agencies, one had two failures to report within twelve months. Although initially DHS reported that they were working to terminate this contract, the monitoring team was later advised that the agency had submitted a corrective action plan and DHS was considering accepting the plan in lieu of contract termination. The three remaining agencies who were cited by DHS for failure to report have received official notice that any future failure to report within one year of the date of the initial occurrence will result in termination of that agency's contract.

Due Consideration at Time of License Renewal

BCAL has the responsibility for reviewing all licensed programs at regulated intervals. BCAL staff conduct in-person inspections of the programs/facilities, review records, and meet with staff, residents and clients as appropriate. As required by the Agreement, during Period Four BCAL began implementing a process to ensure that substantiated incidents of abuse, neglect and corporal punishment are taken into consideration during licensure renewal. To that end,

BCAL amended their renewal template to include a summary of all incidents of substantiated abuse, neglect and/or corporal punishment for the licensing consultant to review during renewal. The consultant also reports on the contract agency's compliance with any requested corrective action plans. BCAL has instituted an internal quality assurance process to evaluate the implementation of due consideration. Administrative staff at BCAL review a sample of renewal reports to ensure that due consideration is being utilized appropriately by all licensing consultants. The findings are shared with staff during monthly administrative meetings.

The monitoring team reviewed a random sample of renewal inspection reports and found that for all of the licensing renewal reports reviewed BCAL staff were documenting due consideration for any such situations. Although some reports were much more detailed and evaluative, it is clearly evident that the practice has taken hold.

Corporal Punishment

DHS is required to give due consideration to all incidents of substantiated corporal punishment at the time of processing a licensing renewal application from a contract agency. According to DHS, the current administrative rules for foster homes do not adequately define corporal punishment. As a result, DHS drafted a new corporal punishment rule, which was approved by the State Office of Administrative Hearings and Rules. DHS reports that the rule will take effect shortly.

XI. Improving Placement Practice

A. Implementing a Child Placement Process

DHS committed to implement a high quality process to match children placed into foster care with compatible foster families. DHS first committed to review and analyze Wayne County's existing child placement process, the Child Placement Network (CPN), to determine whether it would be effective to expand it statewide. Based on that analysis, DHS committed to deploy a new process (either the CPN with or without modification, or some other process) in Oakland, Genesee, Kent, and Macomb counties by October 2009, followed by deployment in the nine next largest counties by October 2010, and the remainder of the state by October 2011.

DHS reviewed and analyzed the Wayne County CPN and determined that, with enhancements in process and supporting technology, it could be expanded statewide. However, during Period Four, DHS reported that limitations in the SWSS system make it impractical to expand the Wayne County CPN. Additionally, the Michigan Department of Technology, Management and Budget does not support the creation of stand-alone data bases, and, therefore, will not maintain the current CPN system or support the expansion of the system. As a result, DHS did

not meet its commitment to deploy a child placement process in Oakland, Genesee, Kent and Macomb counties by the end of Period Four.

As an interim measure, DHS is pursuing a work request to build a placement search feature into its existing SWSS system. When functional, it will allow DHS workers to conduct a foster home search based on a limited set of criteria. DHS is exploring whether a web-based portal can be created that will allow private agency staff access to the system as well. DHS' progress in establishing such a system will be evaluated in future monitoring periods.

B. Changing Specific Placement Practices

As a key element of the reform, DHS committed to making significant changes designed to improve their placement practice. Those commitments:

- Value placing children consistent with their individual needs;
- Maintain DHS' long-standing commitment to placing children with relatives whenever possible;
- Recognize the benefit of keeping siblings together, which can provide much needed stability along with a built-in support system;
- Support placing children in their home neighborhoods to aid parental visitation and to create the opportunity for children to continue attending their own schools and spending time with their friends;
- Strongly favor placing children in relative and foster homes over institutional placement; and
- Emphasize the need to place children with a permanency goal of adoption in a home where adoption is a possibility.

Other commitments are designed to guard against negative placement practices that grow in systems under strain:

- Overloading individual foster homes with too many children, particularly too many young children or children with special needs;
- Placing high-risk children, like those with a history of violence or sexual acting out behavior, with children vulnerable to abuse;
- Placing children in detention centers;
- Over-using temporary placements, like shelters; and
- Moving children and youth multiple times.

Finally, the parties agreed that no child should be barred from a placement – or delayed in receiving the best placement – because of race, ethnicity or religion, and DHS agreed not to contract with any provider who gives preference on any of those bases.

With respect to the list of placement policies and processes set forth in the Agreement, some are mandatory and cannot be waived. Others include a waiver exception process that requires documentation that the placement is in the best interests of the child followed by review and approval at the highest levels of DHS. Both the DHS Urban Field Operations Director overseeing the six largest counties and the Children's Services Field Manager for the remaining counties set up tracking systems to monitor the waiver exception process.

Limitations on Placement Proximity

The Agreement provides two alternatives for measuring whether or not children are being placed proximately to their home communities – placement within county or placement within a 75-mile radius, whichever is greater. DHS has consistently opted to analyze proximity utilizing the 75-mile standard. DHS reports a total of 15,149 placements were made during Period Four. Of those, DHS was only able to calculate the distance from home for 12,115, or 80 percent. DHS reports that geo-coding challenges accounted for the missing 20 percent. Of the 12,115 children for whom DHS had data, they reported that 11,358, or 94 percent, met the standard for proximity. However, with 20 percent of the data missing, in the absence of DHS demonstrating the data provided is a representative sample, DHS falls short of demonstrating fulfillment of this provision.

The previous provision requiring that children be placed within 75 miles of their home communities can be waived if the caseworker demonstrates that it is in the best interests of the child to be placed farther away. Waivers are requested, for example, to place children with a relative. Waivers must be approved at the senior management level as provided in the Agreement. Based on the previously referenced data, at least 757 children and youth were placed during Period Four beyond 75 miles and approval for each of those placements would require a waiver. DHS reports processing exception requests for 134 children. Of those 134, two were withdrawn; three were denied; the outcome of fourteen is unknown; 19 were approved with conditions; and the 96 remaining were granted. In comparing the number of approvals (96) with the number of children known to have been placed outside the 75 mile radius (757), it is clear that DHS did not meet its commitment to achieve this provision of the Agreement.

Limitations on Separation of Siblings

The parties agreed that siblings who enter care together should be placed together unless such placement is harmful to one or more of the siblings; one of the siblings has exceptional needs that can only be met in a specialized placement; or the size of the sibling group makes such placement impractical. As documented in the Needs Assessment, DHS has much work to do to improve sibling placement rates. The majority of the children in care in Michigan are part of a sibling group – two out of every three. The majority of sibling groups consist of two or three

siblings, 80 percent, but one out of every five children is part of a sibling group of four or more. In the past, DHS has provided the monitoring team with sibling placement information, but in Period Three indicated that that data was inaccurate. For Period Four, DHS has provided limited data on sibling groups entering care, but cannot yet report with accuracy on all siblings and whether they are placed together. As a result, the monitoring team does not have sufficient information to evaluate DHS' performance with respect to this provision.

DHS did provide placement tracking information with respect to the limitations on the number of children in a home. That information contained some exception requests that were approved precisely to keep siblings together. The Urban Field Operations (UFO) reported 111 requests to keep siblings together (with one request per child), all of which were approved either in full or with conditions. The Field Operations Administration (FOA) reported 205 exception requests to keep siblings together, 203 of which were approved. Although the increase in volume since Period Three suggests that more staff are learning that they can request exceptions to keep siblings together, the overall volume seems very low given the volume of placements in the urban areas and the number and size of sibling groups in Michigan. As noted, without comprehensive data regarding all siblings, the monitoring team cannot determine the number of children in care who are placed with some or all of their siblings.

Limitations on the Number of Children in Foster Homes

The parties agreed that beginning in March 2009, no child would be placed in a foster home if that placement would result in more than three foster children in that foster home, or a total of six children, including the foster family's natural and/or adopted children, and that no placement would result in more than three children under the age of three residing in a foster home. Exceptions to this restriction are permitted, but must be made on an individual basis justifying the placement as in that child's best interest. Such placements must be approved by the county child welfare director, if the child is from one of the six largest counties, or the Children's Services Field Manager if the child is from one of the remaining counties. The instructions to the field recognize that the request for an exception, review, and approval, if warranted, must occur swiftly as most children are placed in care under emergent circumstances.

DHS cannot provide data on the number of children placed in foster homes that exceed the cap. DHS did provide information from the tracking exception logs demonstrating that staff do request exceptions to the placement cap to place siblings together and for other reasons. However, the tracking system does not include information on whether all of the children placed in a home in excess of these limitations were the subject of an exception request. The number of exception requests is relatively modest but increasing over time – 386 in all with 138 from the UFO, with 124 approved and 14 approved with conditions; and 247 from the FOA, 244

of which were approved and three of which were denied. In the absence of information statewide on the number of children who should have been subject to an exception request, the monitoring team cannot currently assess DHS' performance on this commitment.

Limitations on Placement in Jail, Correctional or Detention Facilities

Foster youth continued to be locked in detention centers in Period Four with no underlying delinquency charge and in some instances with the knowledge and support of DHS. The Agreement requires that no child in DHS custody will be placed, by DHS or with the knowledge of DHS, in a jail, correctional, or detention facility unless placed pursuant to a delinquency charge. DHS reported that in Period Four, 267 youth were detained on 337 separate occasions, with some children detained more than once. Alarming, 27 confinements occurred with no underlying delinquency charge or basis, and in 189 instances DHS either requested or supported the court's decision to detain the youth.

Limitations on Placement of High-Risk Youth

In the Agreement, DHS also committed not to place children who are at high risk for perpetrating violence or sexual assault in any foster care placement with foster children not so determined. DHS reported previously that it intended to incorporate this commitment into a comprehensive policy that would guide workers' decision making regarding placement settings and that it had drafted policies to implement this commitment during Period Three. At the last minute, however, DHS decided not to issue the policy because of the concern that it would be inconsistently applied. As a result, DHS has begun the work to develop a standardized tool to assess whether a youth is high-risk. DHS is currently finalizing the tool and considering whether to issue it as a standalone or as a modification to an existing assessment tool. DHS expects to finalize the tool during Period Five; for Period Four, however, DHS is noncompliant with this provision.

Limitations on Residential Placements

The Agreement contains several provisions designed to limit the use of residential placement and lengths of stay in residential placements. The parties agreed on a strict approval process in advance of placing a child in a residential treatment center or any other group setting with a capacity in excess of eight children (campus-wide). Approval is premised on documentation that the child's needs cannot be met in any other type of placement; that those needs can be met in the placement requested; and that the facility is the least restrictive placement that can do so. Approval can only be granted by the child welfare director in the six largest counties and the Children's Services Field Manager for the remaining counties. Placement in such a facility is to be reassessed every 90 days and any stay beyond six months must once again be approved

at the same management level as the initial placement. If the stay extends beyond 12 months, the CSA Director or DHS Director must approve it.

DHS reports that there were 1,432 children placed in residential care facilities resulting in 1,909 placements during Period Four. According to DHS, 312 of those were initial placements into residential care, but DHS only had documentation of 115 initial placement approval requests, or 37 percent of the total, placing DHS out of compliance with this provision of the Agreement. For the children and youth already residing in residential placement prior to Period Four who required a review for approval, DHS provided data documenting receipt of 75 six-month approvals, 54 twelve-month approvals, and 179 approvals for beyond twelve months. DHS could not report on how many children and youth should have been reviewed for approval. Nonetheless, the volume of children and youth in residential placements suggests there should have been many more than DHS reported. DHS has acknowledged this gap and indicated that they need to establish better tracking systems and training for staff in order to meet the terms of this provision.

Limiting Use of Shelters & Temporary Placements

The Agreement emphasizes the importance of family settings for children and provides that children shall not remain in emergency or temporary facilities, including shelter care, for more than 30 days. Moreover, DHS agreed not to place children in shelter care more than once in a given 12-month period unless one of three exceptions exists: (1) the child had been AWOL and is just returning to care; (2) the child's safety is at risk; or (3) the child has a significant change in behavior and the county director approves the placement. Multiple placements cannot exceed seven days in any circumstances.

In Period Four, DHS reports there were 567 children placed in shelter care with no prior shelter placement. Of those, DHS data indicates that 425 (75 percent) were placed in shelter care for 30 days or fewer. DHS also indicates that 64 children who were reportedly in a shelter placement during Period Four had a single prior shelter placement within 12 months. Of these 64 children, DHS was able to demonstrate that ten (16 percent) fell within the exceptions described in the Agreement and were less than seven days in duration. Moreover, an additional seventeen children had at least two prior shelter placements within 12 months – a frequency not contemplated or authorized by the Agreement, which explicitly provides that children experiencing a second emergency or temporary-facility placement within one year should not remain in an emergency or temporary facility for more than seven days.

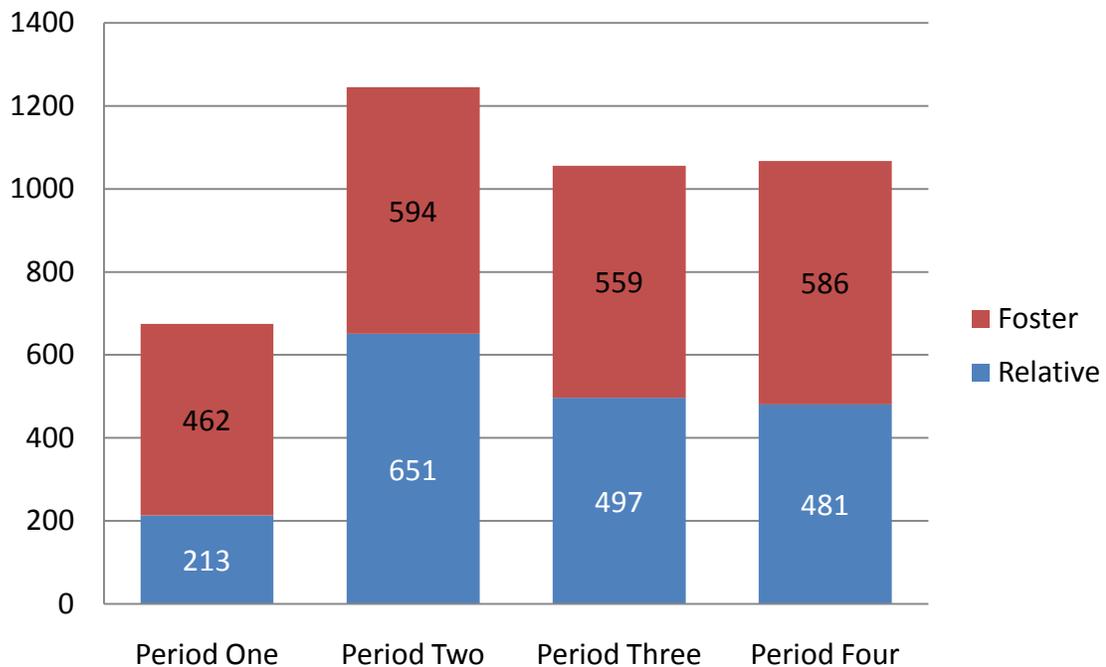
XII. Recruitment, Retention & Licensing Capacity

In order to ensure that children who have to be removed from their families due to abuse or neglect are placed in the most appropriate and least restrictive setting, DHS agreed to develop an array of family-based placement resources. This commitment includes licensing additional new foster homes, developing strategies to ensure additional homes are recruited, and developing retention strategies to support existing homes.

A. Developing Placement Resources

In Period Four, DHS licensed a total of 1,067 foster homes, including 481 relative foster homes and 586 non-relative foster homes. This represents an overall increase of 11 homes licensed during Period Three, when DHS developed 1,056 homes. A total of 2,123 homes were licensed in FY2010, 203 more homes than were licensed in FY2009.

Figure 5 – Foster and Relative Homes Licensed



DHS committed to license 1,373 non-relative foster homes statewide during FY2010. To achieve that goal DHS established targets for each county, including homes developed by DHS local offices and by private agencies. DHS did not, however, achieve that commitment, licensing 83 percent of the non-relative foster home target. For detail by county, please see Appendix B.

During Period Four, DHS established targets for non-relative foster home licensure for FY2011 based on recruitment plans developed by each county. The total statewide target for FY2011 is 1,269 foster homes, 104 homes less than FY2010. It is a concern that DHS reduced its target despite the inadequate supply of foster homes that DHS has available for children in its custody.

Special Populations

In the Agreement, DHS agreed to develop a statewide plan that would address the need to license additional homes for three distinct populations: adolescents who are 14 years old and older, sibling groups, and children with disabilities. For FY2010, DHS established county-based targets to license 441 adolescent homes statewide. DHS reports that 838 homes were licensed. However, based on issues described below, DHS acknowledges that the number of adolescent homes developed is most likely inflated.

Targets for the other special populations were not established as DHS reports they did not have adequate data to evaluate and determine the need for sibling groups and children with disabilities.⁷

DHS issues licenses for foster homes based on age ranges of children acceptable to the licensed foster parent. However, DHS also indicates that practice in the field is to recommend that a home be licensed for children ages 0-17, thus enabling any age child to be placed in a foster home without securing additional approval from BCAL. Thus, DHS cannot accurately determine how many foster homes actually accept children by age range. This is particularly problematic, as staff in DHS and private agencies routinely discuss with the monitoring team the urgent unmet need for adolescent homes. DHS must determine a mechanism to accurately reflect the preference of the foster parents regarding ages of children they will foster so that specialized capacity can be identified when needed.

DHS further made the commitment to place siblings together in the same placement whenever possible and to develop homes for children with disabilities. DHS was unable to provide data regarding these special populations, but nonetheless reports that both they and private agencies are targeting these populations in their recruitment activities for FY2011.

B. Recruitment

In the Agreement, DHS committed to have a designated person or unit within the central office to be responsible for the development and implementation of the county foster and adoptive home recruitment and retention plans. DHS identified a statewide recruitment and retention

⁷ Although DHS states they cannot collect this information from SWSS there are other ways to gather this information such as hand counts or case samplings and reviews.

coordinator position for this purpose. The position became and remained vacant for most of Period Four and, as a result, DHS did not begin to work on the development of annual county Adoptive and Foster Parent Retention and Recruitment Plans (AFPRR) until Period Five.

DHS developed several large statewide initiatives that they believe will prove valuable in their recruitment efforts for both foster and adoptive homes. These are:

- Comcast, a cable TV company, will be airing recruitment advertisements on their “on demand” channel which will allow a consumer to hit a button on their remote control and their contact information will be sent to DHS for response. This initiative is a free service and is part of the federal DHHS Adopt Us Kids “you don’t have to be perfect to be a perfect parent” campaign.
- The Faith Community Coalition, an established faith-based group, has shown significant interest in assisting with the support and recruitment of foster and adoptive parents. DHS has taken an active role in utilizing this coalition for recruitment and retention and invited members to the DHS Permanency Forum in October 2010.
- In September 2010, DHS was awarded a \$3.5 million adoption incentive grant from the federal government for increasing the number of adoptions in FY2009. DHS has committed to use these dollars for projects that support adoptive parents and to recruit additional foster homes.
- DHS, in collaboration with Spaulding for Children, received a three-year \$2 million grant for diligent recruitment from the U.S. Department of Health & Human Services. The overall goal is to provide supportive services to foster and adoptive families in Wayne, Oakland, and Macomb counties, as well as to provide resources to child placing agencies for recruitment. Additionally, this grant will focus on strategies for the recruitment of homes for children with disabilities, sibling groups, and adolescents.

C. Retention

DHS recognizes that in addition to the commitment to license new foster and adoptive parents, they must also retain quality foster and adoptive parents. DHS’ work in this area centers around support activities, many of which are sponsored by private child placing agencies and are often run by foster and adoptive parents. Some examples of specific retention work include:

- Various types of respite care, such as summer respite activities;
- Newsletters that provide information, resources, recognition, and training announcements;

- Monthly fun nights where activities are scheduled for foster children while the adoptive/foster parent attends a support group meeting; and
- Decreasing the financial impact on foster parents by utilizing DHS funds to send children to summer camp, participate in recreational activities, etc.

It will be important for DHS to develop additional strategies to ensure retention of foster and adoptive parents in light of the fact that home development has not increased significantly over the past monitoring periods.

D. Licensing of Relative Homes

New Placements in Relative Homes

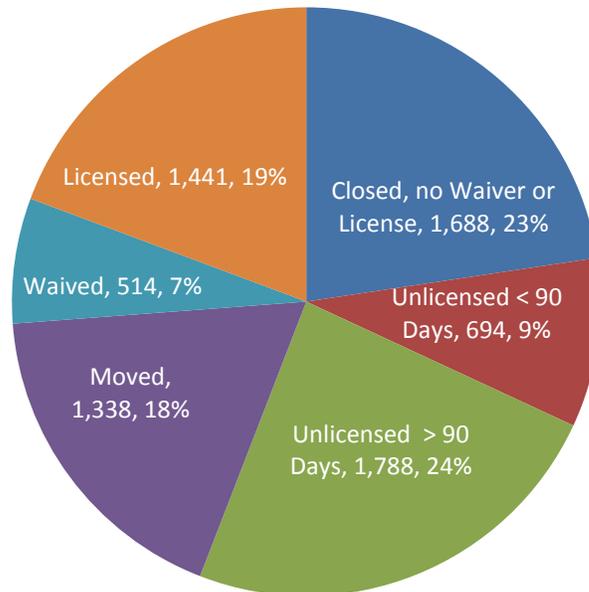
DHS committed to license or to obtain a waiver of licensure for all children newly-placed in the care of their relatives. Since the signing of the Agreement, DHS reports that 7,463⁸ children had been placed with relatives and are subject to the relative licensure provisions of the Agreement. Of these children, 1,923 were placed with relatives during Period Four.

As of the end of Period Four, of 7,463 children placed with relatives since the signing of the Agreement, 1,441 children resided in licensed relative homes; 514 resided in relative homes that had an approved waiver of licensure; 1,338 moved from the relative home to another placement; 1,688 children's cases closed prior to licensure or waiver; 1,788 children resided in unlicensed homes for more than 90 days, pending licensure or waiver; and 694 children were placed in relative homes for less than 90 days at the end of the Period Four and licensure or waivers are pending.

⁸ With the submission of Period Four data, DHS excluded 403 children from the baseline indicating that these children either returned home or their case was closed within 90 days of the initial placement.

Figure 6 – New Relative Cohort

*(As of September 20, 2010;
n=7,463)*



DHS has acknowledged that they are unable to license a relative home within 90 days as required by the Agreement. During Period Four, DHS reports that it took an average of 6.7 months to license a relative home (in addition to the initial 30-day home assessment). This represents an increase in the time to licensure from Period Three, when the average time to licensure was 5.5 months.

DHS has been providing assistance to the field offices to enhance practice regarding relative licensure and to resolve barriers that may be contributing to delays. Some examples of these strategies include community outreach presentations for unlicensed relatives in Wayne, Ingham and Macomb counties during which DHS staff explained the benefits of licensure. DHS also developed a pilot relative mentor program in Wayne County where an unlicensed relative is matched with a licensed relative who offers support and guidance through the licensing process. Additionally, DHS has developed a relative licensing informational packet that describes the following: the benefits of licensure, resources to support the relative through the licensing process, permanency living arrangement options, and the court process

DHS reports that, in partnership with their Child Welfare Training Institute, they are developing a full-day training for front line staff that will highlight engaging relatives as well as educating

staff on licensing rules. In addition, DHS reports that they have reinforced the expectations and policies for relative licensure during existing trainings of DHS and private agency staff.

DHS reports that during Period Four progress was made on the development of enhancements to the SWSS system for tracking home studies. These enhancements became operational in Period Five. Some of the features enable staff to track the completion of the initial 30-day relative home assessment and the date of referral for licensing and waiver information. In addition to the SWSS enhancements, DHS is developing a statewide database to track additional home study requirements for field offices and private agencies in lieu of the current practice of staff completing manual spreadsheets. However, DHS does not expect this database to be operational until Period Six.

E. Relative Home Backlog Cohort

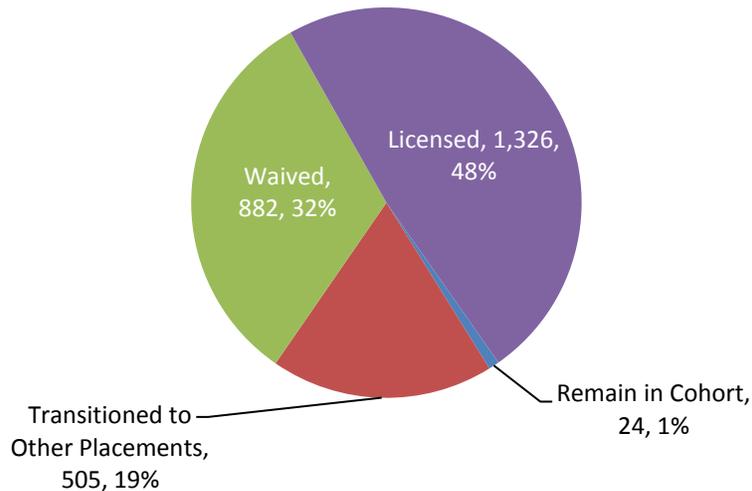
At the time the Agreement was signed, 6,315 children were living in unlicensed relative homes. For this cohort of children, DHS committed to review each home and to either license the home or, under very specific limited situations, grant a waiver of licensure. The initial goal was to review 50 percent of the relative backlog cohort by September 30, 2009. As discussed in previous reports, DHS achieved this goal. The remaining 50 percent were required to be resolved by September 30, 2010.

At the beginning of Period Four, 2,604 children from the backlog cohort remained in the custody of DHS and in homes requiring licensure or a waiver.⁹ DHS reports that they were able to resolve an additional 49 percent of the cohort, with only 24 children, or one percent remaining in unlicensed relative homes.

⁹ DHS reports that 133 children were originally excluded from the Relative Caregiver Backlog baseline as it appeared that these children had exited to permanency through reunification, rather than licensure, waiver or move. Upon review DHS determined that these children had moved from a relative home into a licensed foster home prior to reunification and therefore have been added to the cohort. These children are included in the Transitioned to Other Placements category.

Figure 7 — Relative Caregiver Backlog Cohort

(As of September 30, 2010; n=2,737)



As the chart above illustrates, at the conclusion of Period Four, 1,326 children resided in licensed relative homes. Waivers of licensure were approved for an additional 882 children, with 506 of these waivers approved during Period Four. DHS reports that the majority of waivers were for children who are permanent wards of the court. In these cases the relative caregivers were already receiving a full foster care board payment equal to the amount the relative would receive if they became licensed. In these cases, per policy, the relative could chose not to pursue licensure.

F. The Capacity Challenge

DHS made extensive commitments in the Agreement with regard to both foster and relative home licensure – and those commitments begin by ensuring there is sufficient, trained licensing staff to conduct safety screens, do home studies, review criminal and central registry databases, train families, and provide all of the other supports necessary to achieve licensure.

DHS did not meet its commitment to provide sufficient capacity to license unlicensed homes within 90 days nor with respect to meeting targets for licensing foster homes. With respect to training, performance improved, but a continuing lack of coordination and prioritization kept DHS from meeting this commitment.

Staff Capacity

Pursuant to the Agreement, DHS committed to increase the number of new licensing staff and maximize the efficiency of existing licensing staff. The monitoring team is charged with assessing licensing staffing capacity for four commitments in the Agreement, two that pertain to relative homes, one that pertains to foster homes, and one that pertains to both:

- Relative Homes - During Period One, DHS was to have hired or contracted for 40 full-time staff to be devoted to the licensing of relative homes in the backlog cohort.
- Unlicensed Homes - With respect to unlicensed homes (almost all of which are relative homes), the Agreement requires the monitoring team to assess whether DHS has designated sufficient licensing staff to review all current unlicensed foster homes and to complete the licensing process for each family within 90 days.
- Foster Homes – Beginning in October 2009, the monitoring team must assess whether DHS has sufficient staffing capacity in order to execute the plans for recruitment, licensing and retention of foster homes, particularly the specialized recruitment plans for adolescents, sibling groups, and children with disabilities.
- Both Relative and Foster Homes - Beginning in October 2009, all licensing staff have to meet caseload standards.

For Period Four, DHS reported the following FTE¹⁰ counts:

Table 9 – Licensing FTEs

Reported FTEs	Public	Private	TOTAL	
Relative FTE	60	99	159	52%
Foster Home FTE	65	82	147	48%
TOTAL FTE Reported	125	181	306	
Period Four Caseload Report	126	214	340	

¹⁰ As discussed in the caseload methodology available at www.public-catalyst.com, FTE stands for “Full Time Equivalent.” If a person works full-time as licensing staff, that person is 1.0 FTE. However, if that person works part-time, as many reported staff do, he or she is less than 1.0 FTE. The level of FTE depends upon the amount of time each such staff spends on licensing duties. If they spend half of their time, they are .5 FTE; if they spend a quarter of their time, they are .25 FTE, for example. Adding those FTEs together produces the totals for this section. DHS did not correctly add those FTEs together for 13 staff. The monitoring team did not include those staff in the FTE count.

While reporting has improved, DHS still has work to do to in order to provide complete and accurate FTE information, particularly with respect to the private agencies.

As set forth in the above chart, DHS documented the equivalent of 159 staff devoted to relative licensure. Based on this information and interviews with private and public agency staff, the monitoring team concludes that DHS met its specific commitment to fund an additional 40 relative licensing staff.

With respect to the second commitment, that DHS would designate sufficient licensing staff in order to meet its commitment to license all unlicensed homes within 90 days, DHS continues to struggle to meet this commitment. DHS' failure to meet the 90-day requirement is documented above in this report. Based on the number of relative licensing staff DHS reported above - approximately 159 full-time staff – each staff person licensed, on average, three homes during Period Four, or about one home every two months. During that six-month period, DHS took an average of 6.7 months to license a relative home (excluding the initial 30-day home study period). Based on that performance and the fact that DHS itself had determined that it needed to license relative homes for a minimum of an additional 1,788 children in unlicensed homes during Period Four, the monitoring team concludes that DHS did not meet its commitment to have sufficient licensing staff to license all unlicensed homes within 90 days.

With respect to sufficient licensing staffing to execute DHS' own foster home recruitment plans (including the plan for the need for additional homes for specialized populations described above), performance varies significantly by county, with 22 counties meeting or exceeding licensing targets. Statewide, DHS had achieved only 83 percent of its FY2010 target at the end of Period Four. With 586 foster homes licensed during Period Four and just about 147 foster home licensing staff, each full-time staff licensed an average of four homes each over the six-month period, or less than one per month. Given that level of performance and the performance with respect to DHS' own targets, the monitoring team concludes that DHS did not have sufficient licensing capacity to meet the goals of their recruitment plans.

Training

DHS agreed that all staff engaged in licensing work would receive licensing training. BCAL provides certification and complaint training, the two types of training DHS has designated for licensing staff. In practice, most licensing staff perform certification and complaint functions.

Table 10 – Licensing Training

Licensing Training - Period Four	Public	Private	TOTAL	
Completed all training ¹¹	126	241	367	56%
Completed certification but not complaint training	86	101	187	28%
Completed complaint training but not certification training	6	17	23	4%
No training reported	35	45	80	12%
TOTAL	253	404	657	

DHS improved its reporting on licensing training during Period Four and also improved on the percentage of licensing staff who were trained. For Period Three, the monitoring team assessed the percentage of licensing staff who had received certification training at 80 percent. For Period Four that percentage rose to 84 percent, but more work is needed to fully meet this commitment.

XIII. Achieving Permanency for Children and Youth

In the Agreement, DHS committed to make improvements in permanency practice throughout the system to achieve better outcomes for children and families. At the same time, DHS also committed to move two identified groups of children - those who have been legally free for adoption or with a goal of reunification for more than one year as of January 1, 2009 - to permanency expeditiously. These groups are referred to as the legally free and reunification backlog cohorts.

During Period Four, DHS continued its work assigning children appropriate permanency goals, obtaining permanency goal approvals for children and youth with certain permanency goals, implementing concurrent permanency planning in three counties and continuing to implement team decision making meetings (referred to as permanency planning conferences) in the 14 largest counties. DHS struggled with other commitments such as achieving permanency for youth in the reunification and legally free backlog cohorts, defining and implementing an adoption process, and ensuring that fewer youth exit care without achieving permanency. Additionally, DHS continues to struggle with limitations in its information systems and, as a

¹¹ DHS has defined licensing training as completing both modules of training. But where DHS reported a licensing staff person served only one function - certification or complaint investigation - that staff person's training was deemed complete once they had the relevant training.

result, had difficulty gathering and reporting information the monitoring team needed to assess progress with the permanency provisions of the Agreement.

A. Permanency Planning Goals

DHS committed to review and assign only federally recognized permanency goals for children in its custody. Under the Agreement, DHS committed to assign only goals of:

- Reunification;
- Adoption;
- Guardianship;
- Permanent Placement with a Fit and Willing Relative (PPWFWR);
- Another Planned Permanent Living Arrangement (APPLA), which involves the child continuing to live with the foster parent while the case is open with the family agreeing to maintain a significant role after the child exits custody; and
- Another Planned Permanent Living Arrangement-E (APPLA-E), which involves a significant connection to a caring adult who is willing to be a permanent connection but with whom the youth may not be residing.

If field staff believe that the appropriate goal is PPWFWR, APPLA or APPLA-E, they must obtain the approval of the Director of the Bureau of Child Welfare. Those goals require this approval because they are less optimal than permanency through reunification, adoption or guardianship. Unlike those goals, a responsible adult does not take full legal responsibility for children who achieve PPWFWR, APPLA or APPLA, but they do commit to care for them. As a result, DHS maintains a role with the family, keeping the child's case open and providing services to the child and family.

There were no significant changes in the percent of goals assigned to children from Period Three through Period Four. The following chart documents permanency goals as reflected in DHS' SWSS system as of September 30, 2010:

Table 11 – Federal Goals

Federal Goal Code Description	Children with Goal	Percent
Reunification	8,610	52%
Adoption	4,666	30%
Guardianship	473	3%
Permanent Placement with Relative	505	3%
Another Planned Permanent Living Arrangement (APPLA)	1,923	12%
<i>Sub-goal APPLA</i>	301	2%
<i>Sub-goal APPLA-E</i>	1,622	10%
Unknown	24	.002%
Total	16,201	

Based on the data above, at the end of Period Four, 2,428 children and youth had been assigned permanency goals of PPFWR, APPLA, and APPLA-E. As noted, these goals must be approved by the Director of the Bureau of Child Welfare. During Period Four DHS and CPA staff submitted 651 goal approval requests, in addition to the 851 requests submitted in prior periods. Of those 1,502 goal approval requests, 1,162 were approved; 15 were denied; 43 were withdrawn, and 282 remained pending in the review process at the conclusion of Period Four.

Table 12 – Permanency Goal Approval Requests

Request Status	PPFWR Goals	APPLA Goals	APPLA-E Goals	TOTAL
Approved	261	210	691	1,162
Pending	29	60	193	282
Withdrawn	13	18	12	43
Denied	4	4	7	15
Total	307	292	903	1,502

When the Bureau of Child Welfare approves the child’s goal, staff must then submit that information to the court for formal permanency case goal approval. Of the 1,162 goals that were approved by the Bureau of Child Welfare, the court approved the goals for 939 children with PPFWR and APPLA goals, thus finalizing the permanency process for those children and youth. It should be noted that during the special review process required in the Agreement the

DHS Quality Assurance unit identified concerns with the quality of the APPLA approvals. Specifically, the QA unit reports that the “review of the APPLA approvals found a qualitative concern that the support persons are professionals connected to the child only by virtue of their employment within the foster care system or within the residential setting. This raises a concern as to whether or not this person will really continue to support the youth when the placement is terminated or when the child ages out of the system”. DHS will need to ensure the quality of APPLA approvals improves over time so that youth exiting foster care with APPLA goals have real connections to committed and concerned adults.

Concurrent Permanency Planning

DHS committed to implement concurrent permanency planning, the process of working toward a child’s reunification while, at the same time, establishing an alternative permanency goal in the event a child cannot be safely reunified with his or her family. Throughout Period Four, DHS continued implementation in the pilot sites of Clinton and Gratiot counties. During the monitoring period DHS selected a larger county, Ingham, as the third pilot site. Since the inception of concurrent permanency planning in September 2009, all children removed from their homes in Clinton and Gratiot counties with a permanency goal of reunification were identified as concurrent permanency planning cases. At the conclusion of Period Four, DHS reports that there have been a total of 32 such cases.

The DHS foster care program office has been working with Clinton and Gratiot counties to identify the strengths and challenges of implementing concurrent planning practice at the local level. DHS reports that they have learned a great deal during the past year and the following are highlights of lessons learned that will help to inform the agency as it develops strategies for statewide implementation:

- Parental participation in case planning improved at removal permanency planning conferences. Clinton County reports 100 percent parental participation with Gratiot County reporting 79 percent parental participation.
- Service needs have been identified early in case planning with referrals for services provided within 30 days in 100 percent of cases in Clinton County and 71 percent of cases in Gratiot County.
- Parent/child contact has increased with 89 percent performance with visitation requirements in Clinton County and 64 percent in Gratiot County.
- Relative search efforts were initiated in 100 percent of cases in both counties. However, follow up efforts to identify relatives need to occur when children are initially placed in non-relative foster homes.
- Children were placed with relatives in 61 percent of Clinton County cases while only 29 percent of children were placed with relatives in Gratiot County.

- Children are achieving high rates of permanency when placed with relatives, with 67 percent in Clinton County and 100 percent of children in Gratiot County having achieved permanency.
- Placement stability is an issue in Gratiot County. Placement disruptions, defined as two or more placement changes while a child is in care, occurred in 50 percent of cases in Gratiot County. Conversely, only one case disrupted in Clinton County.
- The timely completion of initial service plans and timely court dispositions have proven challenging in both counties.

DHS reports that 33 percent of children identified as concurrent planning cases in Clinton County and 45 percent of those children in Gratiot County have achieved permanency since the pilot began. In order to improve the percentage of children achieving timely permanency, DHS must continue its ongoing collaboration with the counties, child placing agencies, the courts, parents, foster parents, and service providers, all of whom play a critical role in ensuring positive permanency outcomes.

DHS' efforts to expand the concurrent permanency planning to Ingham County, to develop a statewide concurrent permanency planning strategy, and to develop statewide concurrent planning policies and protocols will be discussed in future monitoring reports.

B. Assessments and Service Plans

In the Agreement, DHS committed to complete written assessments of child and family strengths and needs and to develop comprehensive initial and updated service plans for children in DHS' custody. Comprehensive, individualized, and quality assessments of strength and needs are critical to effective child welfare practice. The Agreement also recognizes the critical role of the supervisor in guiding caseworkers through this process, requiring that supervisors review the plan and have a face-to-face meeting with the worker to discuss it, as well as meetings at least monthly on all cases.

For Period Four, the monitoring team requested data and analysis from DHS regarding the timely completion of initial and updated service plans. DHS reports that it was unable to provide statewide information as it could only report on cases supervised by DHS. It could not report the information for child placing agency cases, as the SWSS system does not accurately capture service plan completion for child placing agency cases. DHS reports that it is exploring solutions to this issue in order to accurately report on its service plan timeliness commitment, but was unable to do so for Period Four.

C. Team Decision Making/Permanency Planning Conferences

DHS committed to implement team decision making, also known as permanency planning conferences (PPCs), a strategy designed to engage families and to include every person with a connection to a child in key decisions regarding the child and family. PPCs are intended to empower children and families to drive decision making regarding their needs, services and case plans. DHS committed to implement PPCs at seven critical points in each case.

The Agreement included a phase-in of PPCs during Period Three, during which the five largest counties were required to implement PPCs at all seven case decision points and the nine next largest counties were required to implement initial placement PPCs.

At the conclusion of Period Four, DHS reports that there were 372 trained PPC facilitators statewide, in both DHS county offices and child placing agencies. Of those, 38 were full-time, non-caseload carrying facilitators; three were full-time facilitators with reduced caseloads; 192 were part-time facilitators; 62 were back up facilitators and 77 were inactive facilitators. DHS reports that each of the 14 largest counties now has at least one full-time facilitator at its DHS county offices, meeting a commitment it made in the 2010 Implementation Plan.

DHS reports that during Period Four they developed a web-based database in the JJOLT system that is accessible to both DHS and private agency staff in order to document PPCs. In April 2010, DHS and private agencies in Kent County began piloting the new database and were asked to provide feedback. DHS developed training materials and trained 216 users between June 2010 and August 2010. DHS-facilitated PPCs began to be entered in the database in July 2010. Private agencies were then instructed to enter PPC data in the new database retroactive to April 2010.

Developing a database in JJOLT and training staff statewide was a major initiative during Period Four, requiring staff throughout the state to capture PPCs into a new system. As a result, DHS reports that during the data gathering and validation process for Period Four, DHS identified areas that require ongoing attention in case practice, data entry, and system capabilities. Based on those issues, DHS reports that additional data cleansing is required and that it is unable to ensure 95 percent accuracy of the data reported below. Therefore, while the information below is informative, the monitoring team is unable to verify DHS' performance with the PPC commitments in the Agreement for Period Four. It should be noted, however, that during verification visits to both DHS offices and private agencies it has been clear that staff are working very hard to implement the PPCs and routinely express their support for PPCs as a family engagement strategy. Even with that support, however, staff have reported difficulty with the time required to fully comply with all of the various PPC provisions in the Agreement.

Table 13 – Permanency Planning Conferences (14 Required Counties)

Period Four Event Type	PPCs Required	PPCs Completed	Percent Achieved
Removal	2,237	1,536	69%
Placement Change	2,737	1,369	50%
Reunification	1,000	456	46%
Goal Change	1,200	363	30%
Return from AWOLP	393	148	38%
In Care Nine or More Months	750	151	20%
TPR Three or More Months	98	14	14%

Permanency Tracking System

As discussed more fully in the Period Two monitoring report, DHS committed in the Agreement to develop a robust permanency tracking system that it could use to evaluate, manage, and implement the Agreement’s reforms and to report on the progress of those reforms to the monitoring team. In support of that commitment, DHS has developed and deployed an ambitious array of reports that they have advised are now accessible to the field. DHS has continued to work to solve data quality issues, but there is more work ahead to ensure that the separate reports truly constitute a tracking system that offers the field offices reliable management data presented in a way that is easily accessible and understandable.

D. Caseworker Contacts and Visitation

As described in more detail in previous monitoring reports, a key element of permanency practice involves visitation, both between the caseworker and the child in custody and the child and his or her parents and siblings. Because more frequent visitation leads to improved safety, permanency, and well-being outcomes for children, DHS made several commitments in the Agreement to improve its visitation practice including:

- By October 2009, DHS committed to ensure that caseworkers visit parents of children with a goal of reunification at least twice during the first month of placement (with at least one visit in the home) and call at least twice, and for subsequent months visit at least once (with one visit in every three-month period in the home) and call as needed;
- By October 2009, DHS committed to ensure that children with a goal of reunification visit their parents at least twice monthly unless specified exceptions exist;

- By October 2009, DHS committed to ensure that siblings in custody visit each other at least monthly unless specified exceptions exist; and
- By October 2011, DHS committed to ensure that caseworkers visit children in custody at least two times during each child’s first month of placement (with at least one visit in the placement and including a private meeting), and at least one time during each subsequent month.

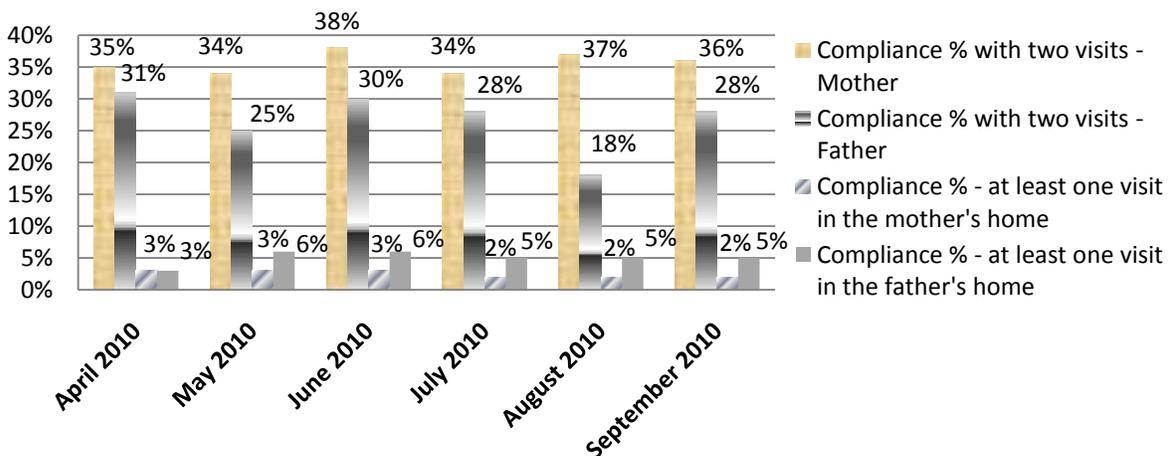
For this monitoring period, DHS committed to produce data regarding performance on caseworkers visiting parents, children visiting their parents, and children visiting their siblings. DHS did not produce data regarding sibling visitation and therefore, cannot demonstrate adherence to that commitment.

Caseworker Contacts with Parents

Because this commitment includes additional requirements for children in the first month of custody (two visits as opposed to one for subsequent months), DHS has created two separate reporting mechanisms. The first identifies the number of parents of children who have entered custody within the preceding month and reports on the percentage of those parents who received at least two visits in total and the percentage of those parents who received at least one visit in the home. The following table shows DHS’ reported performance on this commitment:

**Figure 8 – Worker Contacts with Parents
During First Month Child is in Care**

(April 2010 - Sept. 2010)

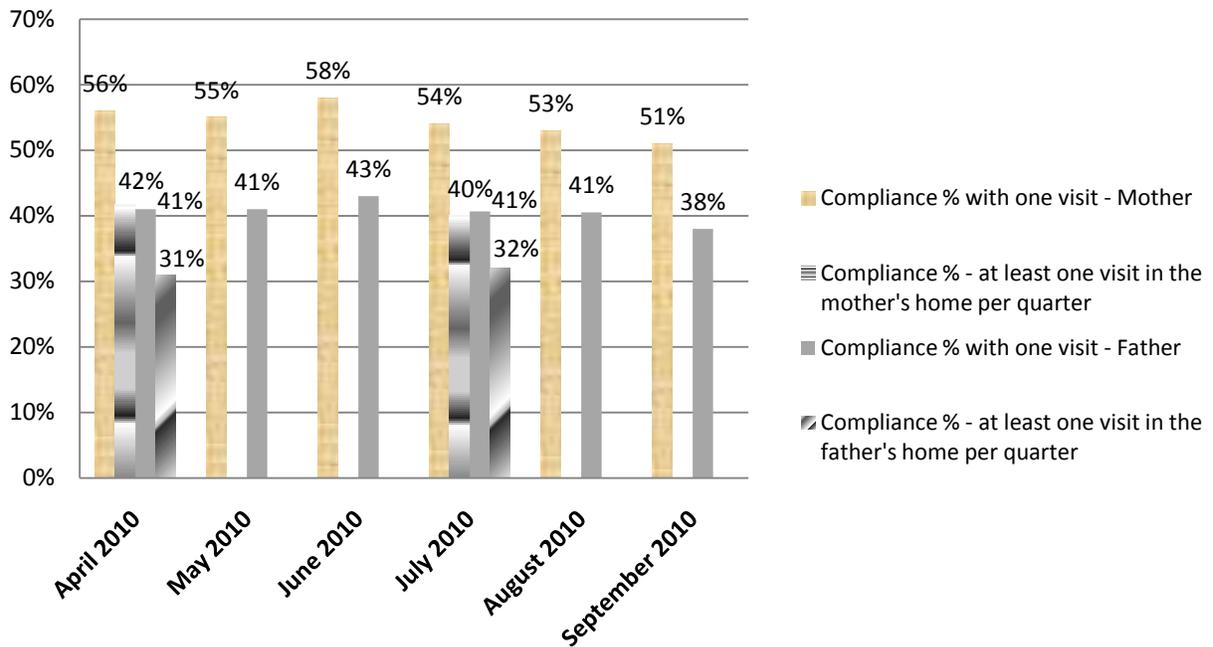


As that chart illustrates, during Period Four caseworkers visited mothers of children in their first month in foster care at least twice between 34 and 38 percent of the time. Caseworkers visited fathers less often, between 18 and 31 percent of the time. At least one of those visits occurred in the home in far fewer cases: between three and six percent of the time for fathers, and between two and three percent of the time for mothers. As the data makes clear, DHS did not ensure that caseworkers visited parents in accordance with the Agreement. In addition, DHS did not provide data regarding the commitment that it would ensure that parents receive at least two telephone calls from their caseworkers during the first month the child is in care. Therefore, for both the Agreement’s provisions regarding contacts and telephone calls during the first month a child is in care, DHS was did not meet its commitments.

As the following chart demonstrates, DHS’ reported performance during subsequent months (after the first) also falls far short of the standard set in the Agreement:

**Figure 9 – Worker Contact with Parents
Months Subsequent to the First**

(April 2010 - September 2010)



As the chart illustrates, during Period Four caseworkers visited mothers of children after their first month in custody at least once between 51 and 58 percent of the time. Caseworkers visited fathers less often, between 38 and 43 percent of the time. In fewer cases, at least one

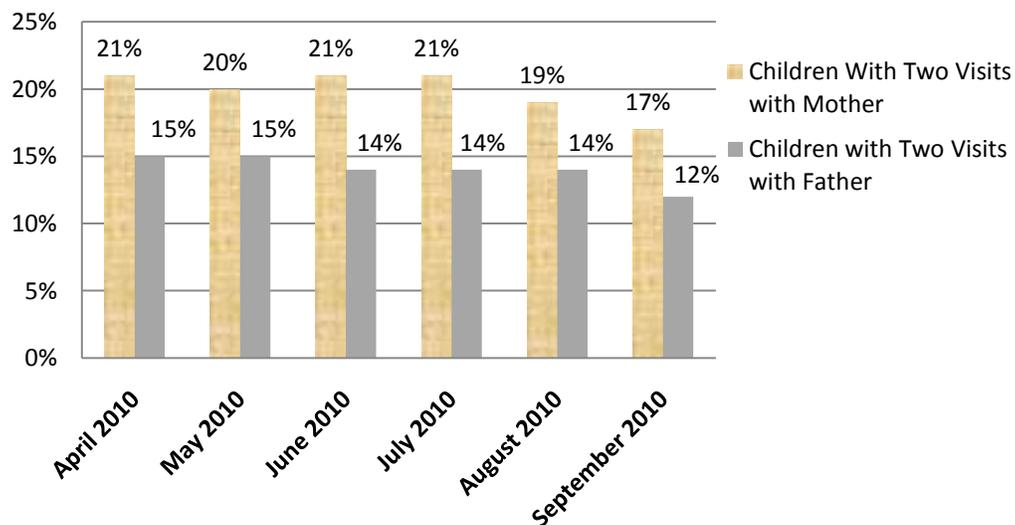
of those visits occurred in the home per quarter. As the data again makes clear, caseworkers did not visit parents of children in care in accordance with the commitments in the Agreement.

Parent/Child Visitation

In the Agreement, DHS committed to ensure that children with goals of reunification will visit their parents at least twice each month in ordinary cases. As the chart below demonstrates, DHS reports that they are significantly below the level of performance contemplated by the Agreement:

Figure 10 – Parent and Child Visits

(April 2010 - Sept. 2010)

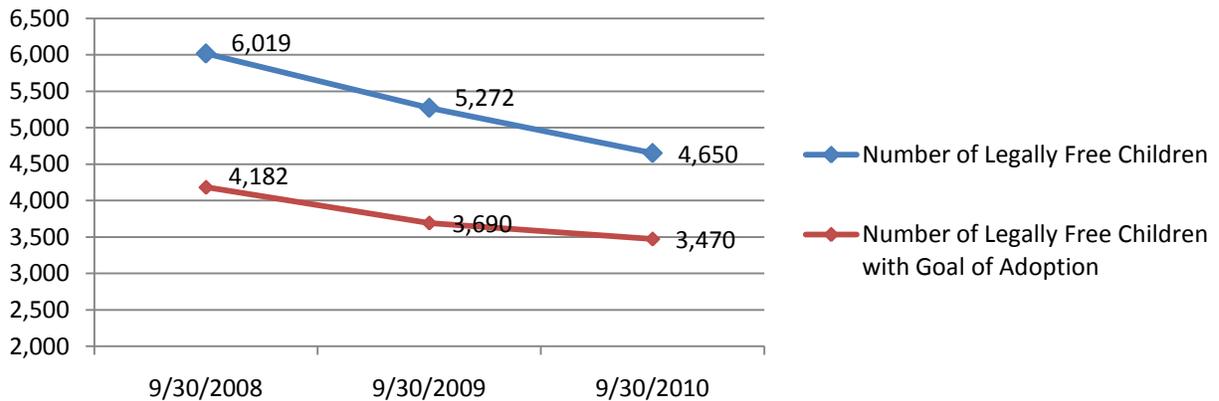


During Period Four, DHS reported that children visited with their mothers at least twice each month between 17 and 21 percent of the time. DHS reported that children visited their fathers between 12 and 15 percent of the time. In sum, DHS reported falling far short of the standard set in the Agreement.

XIV. Adoption

During FY2009, DHS finalized 3,030 adoptions, an historically high amount. During FY2010, DHS reported that they finalized 2,579 adoptions, a decrease of 451. DHS attributes the decline to the decrease in the number of legally free children with adoption goals. The following chart shows that trend with data for September 30, 2010, the conclusion of Period Four:

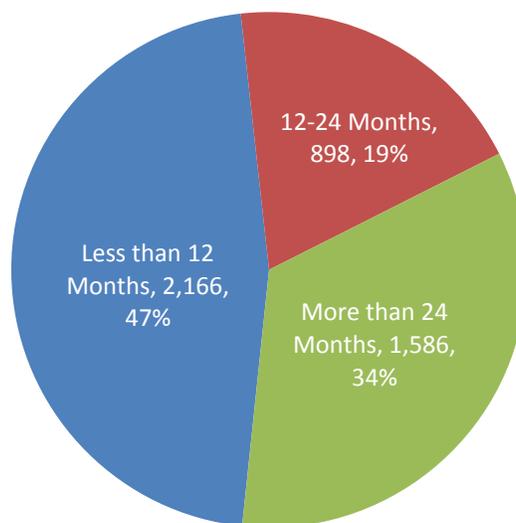
Figure 11 – Number of Legally Free Children with Adoption Goals



Although the number of legally free children with a goal of adoption declined from the beginning of FY2009 to the beginning of FY2010 (and continuing on to the beginning of FY2011), there were and are still a significant number of legally free children – 4,650 – and legally free children with goals of adoption – 3,470. Moreover, of the 4,650 children whose parents’ rights have been terminated, 53 percent (2,484) have been legally free for more than 12 months:

**Figure 12 – Legally Free Children in Care
By Length of Time Since Legally Free**

(As of September 30, 2010; n=4,650)



DHS also reports that 1,320 children became legally free during Period Four (the vast majority of whom likely were still in care on September 30, 2010, and are included above).

While DHS has made progress in finalizing adoptions and reducing the number of children legally free awaiting adoption, there remain 1,180 children and youth, 25 percent of the legally free population, who do not have adoption goals. In this group, there are 29 children and youth with a reunification goal; 138 with a goal of guardianship; 252 with a goal of permanent placement with relative; and the largest group are the 761 youth with the goal of APPLA. DHS must also focus its attention on this population to ensure that permanency is achieved for them as well.

DHS relies on its private agency partners to complete the vast amount of adoption work for legally free children in its custody. Since the signing of the Agreement, private agencies are held to the same standards as DHS in terms of caseloads and other adoption practice requirements. As such, private agencies requested a renegotiation of the terms of the adoption contracts that were expiring at the conclusion of Period Four. Significant issues regarding that process were brought to the attention of the monitoring team during Period Four by both DHS and private agencies. Specifically, the monitoring team was advised that the renegotiation of the adoption contracts remained unresolved. As a result, private agencies had been providing adoption services without signed contracts since October 2010 and had not been compensated for services provided since that time. The new administration resolved this issue in February 2011 with the renegotiation of the adoption contracts that now remain effective through September 2011.

Improving the Adoption Process

DHS committed to implement an adoption process that would ensure the timely movement of cases when the decision is made to seek adoption for the child. The adoption process requires that DHS and the assigned contract agency shall within 30 days of the goal change:

- a. Assign a worker with adoption expertise to the case;
- b. Determine whether the child's foster parents or relatives are prepared to adopt the child, and if so, take appropriate steps to secure their consent to adopt;
- c. If no adoptive resource has been identified, register the child on adoption exchanges; and
- d. Develop a child-specific recruitment plan if no adoptive resource has been identified.

As discussed in the Period Three report, DHS leadership participated in discussions with the courts to develop a common agreement regarding the point at which a child's goal would be changed to adoption, as there had not previously been common practice in this regard. It was determined that the goal would change when termination of parental rights occurs, thus creating a clear point at which the Agreement commitments regarding the adoption process must commence. DHS then issued L-Letter instructions to DHS staff in August 2010 regarding implementation of the new adoption process.

DHS has selected the Michigan Adoption Resource Exchange (MARE) to track DHS and private agency performance with the adoption process requirements. Adoption workers are required to register legally free children with MARE. DHS provides a monthly report of all legally free children from its SWSS system to MARE to cross reference to the registrations sent by adoption workers. MARE staff then track and monitor information for legally free children with adoption goals and send a monthly report to private agencies and DHS. For children who do not have an identified adoptive resource, child-specific recruitment plans must be completed and submitted to MARE for tracking and quality review. During Period Four, MARE developed a standardized child-specific recruitment template and provided technical assistance seminars for adoption staff regarding the development of the plans.

During Period Four DHS and MARE reported difficulty in accurately reporting on implementation of the adoption process requirements as the SWSS system does not identify the assignment of an adoption caseworker, the first step in the adoption process. Additionally, while MARE is required to provide reports to DHS, it does not have the ability to access information in the SWSS system and relies on reports sent directly from caseworkers. DHS reports that it is working to address these issues and hopes to report accurate adoption process information for Period Five.

A. Adoption Disruptions

In the Agreement, DHS committed to provide the monitoring team with a list of all children whose pre-adoptive placements disrupted prior to finalization. For Period Four, DHS identified 23 children whose pre-adoptive home placements disrupted.¹² Three children were age 0-5; ten children were age 6-9; and ten youth were age 13-17. The reasons for disruption were identified as: for 16 children, serious behavior problems that the prospective adoptive parents were unable to handle; two pre-adoptive placements disrupted when the Supreme Court

¹² Subsequent to the conclusion of Period Four, DHS reported that the adoption disruption information produced to the monitoring team was inaccurate. The agency is working on a methodology that will accurately identify adoption disruptions in SWSS.

overtaken termination of the father's parental rights; and five children were removed from their pre-adoptive placements due to child abuse allegations or substantiated child abuse. Upon disruption, 12 children were placed in foster homes, six children were placed with relatives, and three youth were placed in residential treatment centers. Two older youth had permanency goal changes to APPLA and it is unclear where they resided after removal from the pre-adoptive homes.

Given the number and circumstances surrounding the identified pre-adoption disruptions during Period Four, the monitoring team would suggest that DHS review the disruptions to identify how safety was assessed; how parents were informed of children's needs; how they were prepared to address the identified needs; and if services were made available to them. There may be important lessons learned from these situations that can inform DHS' plans to support children and families involved in the adoption process.

B. Supporting Adoptive and Guardianship Families

Adoption Subsidy

In the Agreement, DHS committed to make timely determinations regarding eligibility for adoption subsidies. DHS has established that it will determine eligibility within 30 days of the receipt of a family's complete application in the adoption subsidy unit. DHS has not yet met that standard of promptness target. Additionally, during site visits private agency staff have routinely advised the monitoring team that DHS' delays in processing adoption subsidy requests is an ongoing concern that impacts timely permanency for children and youth awaiting adoption. DHS has advised the monitoring team that they are addressing this issue, recognizing the problems that adoption subsidy delays are creating for children and their families.

At the conclusion of Period Three, 555 adoption subsidy applications remained in pending status. DHS resolved all but three of these applications during Period Four. The DHS subsidy unit received an additional 1,118 applications during Period Four. In total, 1,157 were approved, 98 were denied, 72 were returned to the sending office, and 346 applications remained in pending status at the end of Period Four. DHS has created an Access database to track subsidy applications and continues to work on improving timely and accurate tracking of subsidy applications. DHS cannot, however, track their performance on the companion commitment, that they provide an identified adoptive family with a subsidy application within 14 days. Therefore, the monitoring team cannot assess performance with this commitment.

Medical Subsidy

To support families who adopt children and to ensure that children's needs continue to be met, DHS committed to develop and implement a full range of post-adoption services to assist all

eligible special needs children. DHS also committed to maintain sufficient resources to deliver such post-adoption services to all children in the plaintiff class who qualify for these services.

DHS provides post-adoption services to families who adopt eligible children through a post-adoption medical subsidy program. The program funds medical services, assisted care services, educational services, summer camp, outpatient psychological counseling, and out-of-home placement, including short-term residential placement. This program is the payer of last resort and uses solely state funds (rather than any federal funds).

At the conclusion of Period Three, 562 medical subsidy applications remained in pending status. All but three of those applications were resolved during Period Four. During Period Four, DHS received 1,147 requests for medical subsidy. In total, 1,298 applications were approved and 87 were denied. Twenty-one incomplete applications were returned to the sending office and 303 applications for medical subsidy remained pending at the end of the monitoring period. The same timeliness and tracking issues described above apply to medical subsidy processing.

Subsidized Guardianship

DHS reported that there were 128 applications for subsidized guardianship received during Period Four, in addition to 67 pending subsidized guardianship applications that had been submitted during Period Three. During Period Four, 64 of those 195 applications were approved, no applications were denied, 23 were withdrawn, and 108 remained pending at the end of the monitoring period.

DHS reported that since creation of the guardianship subsidy program, there have been 11 requests for medical subsidy received for children in the program.

DHS provided the following historical information regarding funding, expenditures and the number of children served through the adoption medical subsidy program:

Table 14 – Subsidy Expenditures

Fiscal Year	Allocation	Expenditures	Children Served
2008	\$12 million	\$11,954,977	1,862
2009	\$12 million	\$ 7,529,428	1,787
2010	\$9 million	\$ 4,420,105	1,864

At the signing of the Agreement in FY2008, the DHS budget for post-adoption medical subsidy services was \$12 million. In FY2010 the budget was reduced by 25 percent, to \$9 million. Between those fiscal years, annual expenditures plummeted by over 62 percent, from almost

\$12 million to \$4.4 million. DHS reports, however, that an equal number of children were served in each fiscal year. In previous periods DHS reported that the reduction in expenditures can be attributed to the reduction in the number of children in residential treatment, a costly service. While less residential treatment is clearly the preferred option, the monitoring team is concerned that the number of children served annually has not increased and the budget has been reduced. This is of particular concern given the state’s commitment to timely permanency for legally free children and to provide a full array of services for families who are willing to adopt children in their care. The monitoring team will be following up with DHS leadership on this issue and requesting a full analysis of expenditures from the agency in future monitoring periods.

C. Focusing on Waiting Youth in Need of Permanency: The Backlog Cohorts

Under the Agreement, DHS was required to move 85 percent of the children in each cohort to permanency – not to exit – by September 30, 2010. In the Period Three report, the monitoring team documented, based on what DHS reported, that DHS had moved 65 percent of the reunification cohort and just 39 percent of the legally free cohort to permanency by March 31, 2010. That performance was based solely on the number of children who left to permanent exits as opposed to aging out, leaving to other nonpermanent exits, or remaining in care. For Period Four, DHS for the first time reported and factored into their consideration of performance children in care who had properly approved PFWR, APPLA, and APPLA-E goals. With that understanding, as of September 30, 2010, DHS’ performance on both backlog cohorts was as follows:

Table 15 – Backlog Cohort Performance

	Legally Free		Reunification	
Full Cohort	4,376		5,017	
<i>Permanency Outcomes Achieved</i>				
Exit to Adoption	1,787	41%	2,738	55%
Exit to Reunification	5	0%	703	14%
Exit to Relative	131	3%	128	3%
Exit to Guardianship	41	1%	180	4%
PPFWR Goal Approved	185	4%	33	1%
APPLA Goal Approved	100	2%	35	1%
APPLA-E Goal Approved	430	10%	101	2%
Total	2,679	61%	3,918	78%

	Legally Free		Reunification	
<i>Permanency Outcome Not Achieved</i>				
Aged Out of Foster Care	770	18%	124	3%
Other Non-Permanent Exits	46	1%	21	0%
Children Remaining In Care without approved PPFWR, APPLA, or APPLA-E Goal	881	20%	954	19%
Total	1,697	39%	1,099	22%

DHS did not achieve the 85 percent commitment for either cohort.

Permanency Planning Specialists

In order to focus on moving children in the backlog cohorts to permanency, DHS committed to create 200 Permanency Planning Specialists (PPS) positions. The PPS positions are defined in the Agreement as limited term, specialized assignment positions responsible for reviewing cases of and pursuing legal permanency for children in the backlog cohorts. As discussed in previous reports, DHS identified caseload-carrying staff in the PPS role but also created 26 permanency resource managers (PRM), supervisory level non-caseload carrying positions working in the DHS Permanency Division. The PRMs review cases of children in the backlog cohorts supervised by both DHS and CPAs and have the authority to provide direction and technical assistance to staff in the field offices. As evidenced by the steep increase in permanency goal approvals that were completed during Period Four, creation of the PRM positions has proven to be helpful in focusing staff on reviewing cases and moving some children and youth to permanency. However, as the results for Period Four demonstrate, DHS was insufficiently staffed to achieve the permanency targets for children in the legally free and reunification backlog cohorts and, as a result, did not fulfill its commitment to this provision of the Agreement.

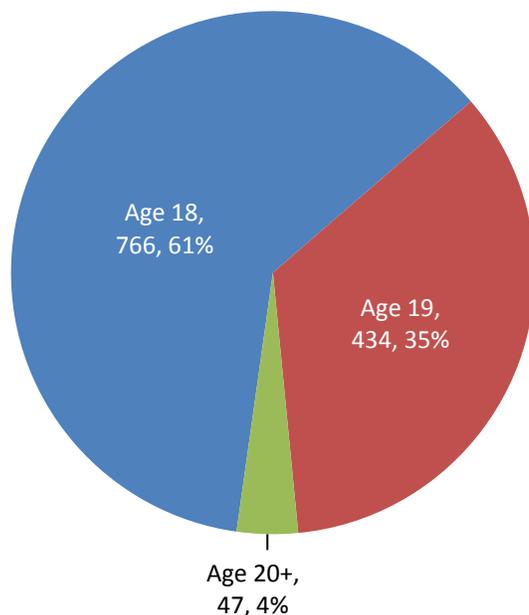
D. Focusing on Youth Who Do Not Achieve Permanency: Youth Aging Out of Care

DHS developed a policy to extend all foster youths' eligibility for foster care placement until age 20 and to make available independent living services through age 21. As of March 2010, DHS reported that there were a total of 1,277 youth in care. Six months later, on September 30, 2010, there were 1,247 youth in care, a decline of 30. DHS had not meaningfully increased the number of youth 18 and older who remain in care as contemplated by the Agreement.

Figure 13 – Ages of Older Youth in Care

(September 2010)

(n=1,247)



The monitoring team confirmed this trend in field visits across Michigan and in focus groups with homeless youth who had recently exited from DHS' custody, during which the monitoring team continued to identify youth whose child welfare cases were closed at age 18 despite the youth not achieving permanency. A number of agencies advised the monitoring team that their service contracts with DHS are restricted to serving youth up to age 18 and that older youth are ineligible to be served in these programs, often leading to the closure of the youth's case despite provisions in the Agreement entitling older youth to remain in care and receive services longer. In order to expand the safety net for older youth, DHS will need to grow services and expand its existing contracts' client age eligibility.

Youth Placed in Independent Living Programs

In the Agreement, DHS committed that it would not place youth under the age of 16 in independent living placements and would instead continue to work to achieve permanency for those youth. At the end of Period Four, 1,148 youth were placed in independent living. Of those, one youth (a 15-year-old) was under the age of 16. The remaining 1,147 were sixteen or older.

Independent Living Services

In March 2009, DHS published an amendment to its Children's Foster Care Manual describing a variety of independent living services available until the youth is discharged from foster care, establishes independence or reaches 21 years of age. Youth do not need to be in custody in order to continue to receive these services. These programs offer youth essential life skills that can help them cross the bridge from DHS custody to independence. DHS has begun to offer some new programs and opportunities for older youth in care as well.

At the beginning of Period Four, there were 4,796 children in custody who were 14 and older. DHS could not, however, provide comprehensive data on the number of those youth who received independent living services.

Health Insurance

DHS also committed to ensure that older youth exiting custody have health insurance. The federal government makes significant funds available to the states, at their option, to extend health insurance coverage to these youth. Michigan's program is known as Foster Care Transition Medicaid (FCTMA). DHS' performance ensuring youth receive health care coverage after they age out of custody has improved quite significantly over the past three years, but does not yet ensure that all eligible youth are enrolled.

During Period Four, DHS reported that 532 youth exited custody at age 18 or older, and 325 (61 percent) of the exiting youth were enrolled in FCTMA. An additional 128 youth exiting care received Medicaid through programs other than FCTMA, bringing the total number of exiting youth who were insured upon exit to 85.2 percent, a dramatic and encouraging improvement from prior monitoring periods.

Referrals to Michigan Works!

In Period Four DHS was required to, but did not, refer all youth age 14 and older in custody and youth transitioning from custody to Michigan Works! agencies for participation in public programs designed to expand vocational skills and opportunities.

Housing for Youth Aging-Out of Care

In Period Four, DHS was committed to refer all youth without an identified housing situation at the time of emancipation from DHS' custody to the Michigan State Housing Development Authority (MSHDA) for rental assistance and services under the Homeless Youth Initiative (HYI). DHS was unable to do so.

XV. Improving the Well-Being of Children in DHS Custody

A. Ensuring the Physical and Mental Health of Children in Custody

In the Agreement, DHS committed to ensure access to physical and mental health services for children in placement. DHS also committed to develop and submit a detailed Health Services Plan during Period Two that would set forth the specific steps DHS will undertake to ensure that each child entering care receives the screenings, examinations and immunizations contemplated in the Agreement. DHS submitted a draft plan in June 2009 but requested additional time to revise the plan after discussions with the monitoring team. Plaintiffs agreed to allow DHS a further extension to September 2010 because DHS' plan relies heavily on the conversion of children's health care coverage to the Medicaid managed care system scheduled to occur this fall. DHS submitted its plan in September 2010 as required, and the new administration, as well as plaintiffs, was reviewing the document as of this writing.

DHS agreed to ensure that each child entering custody will be assigned a Medicaid number and that foster parents and other placement providers will receive a Medicaid card, or an alternative verification of the child's Medicaid status and number, within 30 days of the child's entry into care. DHS has difficulty tracking and verifying its field performance with respect to this commitment, but made a good faith effort to do so in Period Four. Its best data – a manually aggregated data set developed with field staff input – reflected that most reported first placements (88 percent) included issuance of a Medicaid card within 30 days of placement. Of the reported replacements, Medicaid cards were issued timely in 70 percent of cases. But, as DHS acknowledged, the weaknesses of the reporting methodology raise significant data quality concerns.

Beginning in Period Three, DHS committed to ensure that children entering care receive needed emergency medical, dental, and mental health care, as well as a full medical examination within 30 days of the child's entry into care. The monitoring team found no evidence to support that DHS had been able to comply with these commitments by the close of Period Four.

DHS agreed to strengthen its policies and procedures surrounding the use of psychotropic medications for foster children. The DHS Medical Director conducted a review of other state systems and proposed in Period Four that Michigan adopt, in full, the general principles regarding the use of psychotropic medication for children and the criteria triggering further review of a child's clinical status developed by the Texas Department of State Health Services and adapted by the Tennessee Department of Children's Services Pharmacy and Therapeutics Committee. DHS did not meet its timeliness for implementing the new policies and procedures because it did not, in Period Four, have success in establishing an agreement between two of its agencies, DHS and the Michigan Department of Community Health (MDCH), to use Medicaid

pharmacy claims data to flag cases with prescribing patterns that fell outside acceptable guidelines.

Provision of Educational Services

DHS is responsible to ensure that every reasonable effort is made to meet the educational needs of children in custody. DHS is required to ensure that each child is screened for general and educational needs within 30 days of entry into custody and to take reasonable steps to ensure that school-age foster children are registered for and attending school within five days of placement. Furthermore, DHS is required to make reasonable efforts to ensure the continuity of a child's educational experience by keeping the child in a familiar or current school and neighborhood when in the child's best interests and feasible, and by limiting the number of school changes the child experiences.

In the Agreement, DHS committed to hire 14 regional education planners to offer support to youth age 14 and older in accessing educational services and in developing individualized education plans, including identifying all available financial aid resources. All education planners were hired during Period Four. Thirteen of the 14 were actively working as education planners at the end of the period.

DHS conducts its educational assessment of children using a question within the Child Assessment of Needs and Strengths (CANS), but data and system limitations do not allow DHS to track whether the CANS was completed within 30 days of a child's entry into placement in Period Four as the Agreement contemplates.

DHS undertook an extensive effort to build a tracking system to show whether, and to what extent, school-aged foster children were registered for and attending school within five days of initial placement or any placement change. The initial reporting is imperfect and contains a number of significant limitations, but of 8,426 children's records reviewed for the purposes of this report in Period Four, only 65 percent (5,508) of children had been enrolled within five days of placement.

Appendix A – Caseload Detail

Child Protective Services – Investigations							
Period Four	All Staff	1 Staff to 16 Cases Target = 95%		1 Staff to 14 Cases Target = 60%		1 Staff to 13 Cases Target = 80%	
Urban	306	168	55%	126	41%	91	30%
Genesee	46	17	37%	13	28%	11	24%
Ingham	20	17	85%	13	65%	12	60%
Kent	43	27	63%	22	51%	14	33%
Macomb	35	12	34%	7	20%	3	9%
Oakland	44	23	52%	19	43%	16	36%
Wayne Central	0	0	N/A	0	N/A	0	N/A
Wayne North	40	29	73%	19	48%	12	30%
Wayne South	35	28	80%	21	60%	14	40%
Wayne West	43	15	35%	12	28%	9	21%
Outstate	443	231	52%	176	40%	123	28%
Alcona-Iosco	4	3	75%	2	50%	2	50%
Alger-Schoolcraft	3	2	67%	2	67%	1	33%
Allegan	8	6	75%	6	75%	5	63%
Alpena-Presque Isle	7	1	14%	1	14%	1	14%
Antrim	3	2	67%	1	33%	1	33%
Arenac	3	1	33%	1	33%	1	33%
Baraga-Keweenaw	2	1	50%	0	0%	0	0%
Barry	5	2	40%	0	0%	0	0%
Bay	8	2	25%	2	25%	1	13%
Benzie-Manistee	5	3	60%	2	40%	2	40%
Berrien	11	4	36%	3	27%	2	18%
Branch	7	7	100%	7	100%	4	57%
Calhoun	11	2	18%	1	9%	1	9%
Cass	6	2	33%	2	33%	1	17%
Charlevoix-Emmet	6	3	50%	2	33%	0	0%
Cheboygan-Mackinac	7	5	71%	3	43%	1	14%
Chippewa	5	3	60%	3	60%	2	40%
Clare	3	2	67%	1	33%	1	33%
Clinton	6	0	0%	0	0%	0	0%
Crawford	3	3	100%	3	100%	3	100%
Delta	3	3	100%	1	33%	1	33%
Dickinson	4	4	100%	3	75%	2	50%
Eaton	11	2	18%	1	9%	1	9%
Gladwin	3	2	67%	2	67%	2	67%
Gogebic	5	4	80%	3	60%	2	40%
Grand Traverse-Leelanau	9	9	100%	7	78%	1	11%
Gratiot	4	2	50%	1	25%	0	0%
Hillsdale	6	5	83%	4	67%	2	33%
Houghton	4	3	75%	3	75%	2	50%

Child Protective Services – Investigations							
Period Four	All Staff	1 Staff to 16 Cases Target = 95%		1 Staff to 14 Cases Target = 60%		1 Staff to 13 Cases Target = 80%	
Huron	2	2	100%	2	100%	0	0%
Ionia	6	2	33%	2	33%	2	33%
Iron	4	4	100%	4	100%	3	75%
Isabella	7	1	14%	1	14%	1	14%
Jackson	12	2	17%	0	0%	0	0%
Kalamazoo	25	7	28%	4	16%	2	8%
Kalkaska	4	4	100%	4	100%	3	75%
Lake-Newaygo	9	5	56%	4	44%	1	11%
Lapeer	5	1	20%	0	0%	0	0%
Lenawee	7	5	71%	3	43%	1	14%
Livingston	7	3	43%	2	29%	2	29%
Luce	1	1	100%	1	100%	1	100%
Marquette	6	6	100%	5	83%	1	17%
Mason	5	2	40%	2	40%	2	40%
Mecosta-Osceola	7	4	57%	2	29%	2	29%
Menominee	3	2	67%	2	67%	2	67%
Midland	5	3	60%	0	0%	0	0%
Monroe	9	9	100%	7	78%	5	56%
Montcalm	7	3	43%	3	43%	3	43%
Montmorency-Oscoda	3	2	67%	2	67%	2	67%
Muskegon	20	14	70%	10	50%	8	40%
Oceana	5	1	20%	1	20%	1	20%
Ogemaw	3	1	33%	1	33%	1	33%
Ontonagon	2	2	100%	2	100%	2	100%
Otsego	4	4	100%	4	100%	4	100%
Ottawa	15	14	93%	14	93%	11	73%
Roscommon	4	1	25%	0	0%	0	0%
Saginaw	22	12	55%	7	32%	7	32%
Sanilac	5	3	60%	3	60%	3	60%
Shiawassee	5	3	60%	1	20%	1	20%
St. Clair	17	6	35%	4	24%	3	18%
St. Joseph	7	1	14%	1	14%	1	14%
Tuscola	6	1	17%	1	17%	1	17%
Van Buren	10	6	60%	6	60%	3	30%
Washtenaw	15	4	27%	3	20%	2	13%
Wexford-Missaukee	7	2	29%	1	14%	0	0%
Grand Total	749	399	53%	302	40%	214	29%

Child Protective Services - Ongoing							
Period Four	All Staff	1 Staff to 30 Cases Target = 95%		1 Staff to 25 Cases Target = 60%		1 Staff to 20 Cases Target = 80%	
Urban	319	187	59%	146	46%	104	33%
Genesee	54	26	48%	22	41%	19	35%
Ingham	23	20	87%	16	70%	13	57%
Kent	50	34	68%	29	58%	21	42%
Macomb	33	11	33%	6	18%	3	9%
Oakland	42	23	55%	19	45%	14	33%
Wayne Central	0	0	N/A	0	N/A	0	N/A
Wayne North	38	27	71%	17	45%	10	26%
Wayne South	37	30	81%	23	62%	13	35%
Wayne West	42	16	38%	14	33%	11	26%
Outstate	438	242	55%	192	44%	125	29%
Alcona-Iosco	3	2	67%	1	33%	1	33%
Alger-Schoolcraft	3	2	67%	2	67%	1	33%
Allegan	12	10	83%	10	83%	7	58%
Alpena-Presque Isle	6	0	0%	0	0%	0	0%
Antrim	5	4	80%	3	60%	3	60%
Arenac	4	2	50%	2	50%	2	50%
Baraga-Keweenaw	1	1	100%	0	0%	0	0%
Barry	6	3	50%	1	17%	1	17%
Bay	8	2	25%	2	25%	1	13%
Benzie-Manistee	5	3	60%	2	40%	2	40%
Berrien	11	4	36%	3	27%	1	9%
Branch	7	7	100%	7	100%	3	43%
Calhoun	13	4	31%	3	23%	2	15%
Cass	6	2	33%	2	33%	1	17%
Charlevoix-Emmet	6	3	50%	2	33%	0	0%
Cheboygan-Mackinac	6	4	67%	2	33%	0	0%
Chippewa	4	2	50%	2	50%	1	25%
Clare	3	2	67%	1	33%	1	33%
Clinton	6	0	0%	0	0%	0	0%
Crawford	1	1	100%	1	100%	1	100%
Delta	3	3	100%	1	33%	1	33%
Dickinson	5	5	100%	4	80%	3	60%
Eaton	11	2	18%	1	9%	1	9%
Gladwin	2	2	100%	2	100%	2	100%
Gogebic	4	4	100%	3	75%	2	50%
Grand Traverse-Leelanau	9	9	100%	7	78%	1	11%
Gratiot	2	1	50%	1	50%	0	0%
Hillsdale	7	6	86%	5	71%	3	43%
Houghton	3	2	67%	2	67%	1	33%
Huron	2	2	100%	2	100%	0	0%
Ionia	4	1	25%	0	0%	0	0%

Child Protective Services - Ongoing							
Period Four	All Staff	1 Staff to 30 Cases Target = 95%		1 Staff to 25 Cases Target = 60%		1 Staff to 20 Cases Target = 80%	
Iron	4	4	100%	4	100%	3	75%
Isabella	7	1	14%	1	14%	1	14%
Jackson	14	4	29%	2	14%	1	7%
Kalamazoo	25	7	28%	5	20%	5	20%
Kalkaska	5	5	100%	5	100%	4	80%
Lake-Newaygo	11	7	64%	6	55%	3	27%
Lapeer	6	2	33%	1	17%	1	17%
Lenawee	10	8	80%	6	60%	2	20%
Livingston	8	4	50%	3	38%	2	25%
Luce	1	1	100%	1	100%	1	100%
Marquette	6	6	100%	5	83%	1	17%
Mason	5	2	40%	2	40%	2	40%
Mecosta-Osceola	6	3	50%	1	17%	1	17%
Menominee	2	1	50%	1	50%	1	50%
Midland	3	2	67%	0	0%	0	0%
Monroe	8	8	100%	7	88%	5	63%
Montcalm	7	3	43%	3	43%	3	43%
Montmorency-Oscoda	3	2	67%	2	67%	2	67%
Muskegon	15	12	80%	9	60%	5	33%
Oceana	5	1	20%	1	20%	1	20%
Ogemaw	3	1	33%	1	33%	1	33%
Ontonagon	2	2	100%	2	100%	2	100%
Otsego	5	5	100%	5	100%	5	100%
Ottawa	11	10	91%	10	91%	8	73%
Roscommon	4	1	25%	0	0%	0	0%
Saginaw	30	22	73%	17	57%	12	40%
Sanilac	4	2	50%	2	50%	2	50%
Shiawassee	6	4	67%	2	33%	2	33%
St. Clair	15	4	27%	3	20%	1	7%
St. Joseph	8	2	25%	2	25%	1	13%
Tuscola	6	1	17%	1	17%	1	17%
Van Buren	3	3	100%	3	100%	1	33%
Washtenaw	14	4	29%	3	21%	2	14%
Wexford-Missaukee	8	3	38%	2	25%	1	13%
Grand Total	757	429	57%	338	45%	229	30%

Foster Care									
Period Four	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%	
Urban	333	318	95.5%	292	87.7%	259	77.8%	209	62.8%
Genesee	44	44	100.0%	43	97.7%	41	93.2%	28	63.6%
Ingham	21	20	95.2%	19	90.5%	15	71.4%	10	47.6%
Kent	15	15	100.0%	14	93.3%	14	93.3%	14	93.3%
Macomb	51	47	92.2%	37	72.5%	28	54.9%	20	39.2%
Oakland	38	38	100.0%	38	100.0%	38	100.0%	33	86.8%
Wayne Central	13	10	76.9%	9	69.2%	8	61.5%	7	53.8%
Wayne North	60	60	100.0%	58	96.7%	54	90.0%	47	78.3%
Wayne South	50	50	100.0%	48	96.0%	42	84.0%	36	72.0%
Wayne West	41	34	82.9%	26	63.4%	19	46.3%	14	34.1%
Outstate	318	283	89.0%	244	76.7%	190	59.7%	155	48.7%
Alcona-Iosco	2	2	100.0%	1	50.0%	1	50.0%	1	50.0%
Alger-Schoolcraft	2	2	100.0%	2	100.0%	1	50.0%	1	50.0%
Allegan	7	7	100.0%	6	85.7%	3	42.9%	2	28.6%
Alpena-Presque Isle	4	3	75.0%	2	50.0%	1	25.0%	1	25.0%
Antrim	2	2	100.0%	2	100.0%	2	100.0%	1	50.0%
Arenac	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Baraga-Keweenaw	2	1	50.0%	0	0.0%	0	0.0%	0	0.0%
Barry	3	3	100.0%	3	100.0%	3	100.0%	2	66.7%
Bay	6	6	100.0%	6	100.0%	5	83.3%	5	83.3%
Benzie-Manistee	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Berrien	20	15	75.0%	12	60.0%	10	50.0%	7	35.0%
Branch	6	6	100.0%	5	83.3%	3	50.0%	3	50.0%
Calhoun	9	6	66.7%	2	22.2%	2	22.2%	1	11.1%
Cass	4	1	25.0%	1	25.0%	1	25.0%	1	25.0%
Charlevoix-Emmet	4	4	100.0%	4	100.0%	4	100.0%	4	100.0%
Cheboygan-Mackinac	5	5	100.0%	4	80.0%	3	60.0%	3	60.0%
Chippewa	1	1	100.0%	1	100.0%	1	100.0%	1	100.0%
Clare	1	1	100.0%	1	100.0%	0	0.0%	0	0.0%
Clinton	8	5	62.5%	5	62.5%	5	62.5%	5	62.5%
Crawford	4	4	100.0%	4	100.0%	4	100.0%	4	100.0%
Delta	2	1	50.0%	1	50.0%	1	50.0%	1	50.0%
Dickinson	3	3	100.0%	2	66.7%	2	66.7%	2	66.7%
Eaton	7	6	85.7%	6	85.7%	3	42.9%	1	14.3%
Gladwin	2	1	50.0%	1	50.0%	1	50.0%	1	50.0%
Gogebic	2	2	100.0%	1	50.0%	1	50.0%	1	50.0%
Grand Traverse-Leelanau	4	2	50.0%	0	0.0%	0	0.0%	0	0.0%
Gratiot	3	3	100.0%	1	33.3%	0	0.0%	0	0.0%
Hillsdale	4	4	100.0%	4	100.0%	3	75.0%	3	75.0%
Houghton	3	2	66.7%	2	66.7%	2	66.7%	1	33.3%
Huron	1	1	100.0%	0	0.0%	0	0.0%	0	0.0%
Ionia	2	1	50.0%	0	0.0%	0	0.0%	0	0.0%

Foster Care									
Period Four	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%	
Iron	3	3	100.0%	2	66.7%	1	33.3%	1	33.3%
Isabella	5	5	100.0%	5	100.0%	5	100.0%	3	60.0%
Jackson	9	9	100.0%	9	100.0%	9	100.0%	9	100.0%
Kalamazoo	17	14	82.4%	12	70.6%	8	47.1%	3	17.6%
Kalkaska	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Lake-Newaygo	5	5	100.0%	4	80.0%	4	80.0%	3	60.0%
Lapeer	3	3	100.0%	3	100.0%	2	66.7%	2	66.7%
Lenawee	8	7	87.5%	7	87.5%	7	87.5%	7	87.5%
Livingston	4	3	75.0%	1	25.0%	0	0.0%	0	0.0%
Luce	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Marquette	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Mason	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Mecosta-Osceola	7	6	85.7%	5	71.4%	5	71.4%	3	42.9%
Menominee	1	1	100.0%	1	100.0%	0	0.0%	0	0.0%
Midland	5	5	100.0%	5	100.0%	5	100.0%	5	100.0%
Monroe	6	6	100.0%	3	50.0%	2	33.3%	1	16.7%
Montcalm	2	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Montmorency-Oscoda	1	1	100.0%	1	100.0%	1	100.0%	1	100.0%
Muskegon	16	16	100.0%	14	87.5%	8	50.0%	5	31.3%
Oceana	1	1	100.0%	0	0.0%	0	0.0%	0	0.0%
Ogemaw	2	2	100.0%	1	50.0%	1	50.0%	1	50.0%
Ontonagon	1	1	100.0%	1	100.0%	1	100.0%	1	100.0%
Otsego	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Ottawa	7	7	100.0%	7	100.0%	6	85.7%	5	71.4%
Roscommon	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Saginaw	17	16	94.1%	16	94.1%	15	88.2%	12	70.6%
Sanilac	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Shiawassee	5	5	100.0%	5	100.0%	2	40.0%	1	20.0%
St. Clair	17	16	94.1%	15	88.2%	8	47.1%	5	29.4%
St. Joseph	10	9	90.0%	8	80.0%	7	70.0%	7	70.0%
Tuscola	6	6	100.0%	6	100.0%	4	66.7%	4	66.7%
Van Buren	7	7	100.0%	6	85.7%	4	57.1%	2	28.6%
Washtenaw	6	6	100.0%	5	83.3%	2	33.3%	1	16.7%
Wexford-Missaukee	3	3	100.0%	3	100.0%	1	33.3%	1	33.3%
Private Agency	459	455	99.1%	452	98.5%	435	94.8%	400	87.1%
Adoption Option Inc	0	0	NA	0	NA	0	NA	0	NA
Adoption Options World Wide	0	0	NA	0	NA	0	NA	0	NA
Adoption Specialists	0	0	NA	0	NA	0	NA	0	NA
Alternatives for Children and Families	8	8	100.0%	8	100.0%	8	100.0%	8	100.0%
Bethany Christian Services	60	60	100.0%	60	100.0%	59	98.3%	52	86.7%

Period Four	Foster Care								
	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%	
Black Family Development	0	0	NA	0	NA	0	NA	0	NA
Catholic Charities Lakeshore	6	6	100.0%	6	100.0%	5	83.3%	3	50.0%
Catholic Charities Shiawassee Genesee Counties	5	5	100.0%	5	100.0%	5	100.0%	5	100.0%
Catholic Charities West Michigan Grand Rapids	10	10	100.0%	10	100.0%	10	100.0%	5	50.0%
Catholic Family Services of the Dioceses of Saginaw	0	0	NA	0	NA	0	NA	0	NA
Catholic Social Services of Washtenaw	0	0	NA	0	NA	0	NA	0	NA
Catholic Social Services of Wayne County	8	8	100.0%	8	100.0%	8	100.0%	8	100.0%
Child & Family Services Capital Area	7	7	100.0%	7	100.0%	7	100.0%	6	85.7%
Child & Family Services Northwestern Michigan	11	11	100.0%	11	100.0%	11	100.0%	11	100.0%
Child & Family Services of NE MI	0	0	NA	0	NA	0	NA	0	NA
Childhelp Inc.	3	3	100.0%	3	100.0%	2	66.7%	2	66.7%
Christ Child House - Adoption Program	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
DA Blodgett for Children	28	28	100.0%	27	96.4%	24	85.7%	23	82.1%
Don Bosco Hall	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Eagle Village	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Ennis Center for Children	28	28	100.0%	26	92.9%	24	85.7%	21	75.0%
Family & Children Services	11	11	100.0%	11	100.0%	11	100.0%	10	90.9%
Family Adoption Consultants	0	0	NA	0	NA	0	NA	0	NA
Family Counseling & Children Services	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Family Outreach Center	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%

Period Four	Foster Care								
	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%	
Family Services & Children's Aid of Jackson	3	2	66.7%	2	66.7%	2	66.7%	2	66.7%
Federation of Youth Services, Transitional Living Program	5	5	100.0%	5	100.0%	5	100.0%	5	100.0%
Fostering Futures	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Goodwill Farms	1	1	100.0%	1	100.0%	1	100.0%	1	100.0%
Hands Across the Water	0	0	NA	0	NA	0	NA	0	NA
Holy Cross Children Services	34	34	100.0%	34	100.0%	34	100.0%	32	94.1%
Homes For Black Children	5	5	100.0%	5	100.0%	5	100.0%	5	100.0%
Judson Center	11	11	100.0%	11	100.0%	11	100.0%	9	81.8%
Listening Ear	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Lutheran Adoption Services	0	0	NA	0	NA	0	NA	0	NA
Lutheran Child and Family Service of Michigan	23	23	100.0%	23	100.0%	21	91.3%	18	78.3%
Lutheran Social Services of Michigan	51	50	98.0%	50	98.0%	50	98.0%	49	96.1%
Methodist Children's Home Society	5	5	100.0%	5	100.0%	5	100.0%	5	100.0%
Michigan Indian Child Welfare Agency	6	6	100.0%	6	100.0%	6	100.0%	6	100.0%
New Light Child & Family Institute	2	2	100.0%	2	100.0%	1	50.0%	1	50.0%
Oakland Family Services	4	4	100.0%	4	100.0%	1	25.0%	1	25.0%
Orchards Children's Services	20	20	100.0%	20	100.0%	20	100.0%	20	100.0%
Sault Binogii Tribe Placement	4	4	100.0%	4	100.0%	4	100.0%	4	100.0%
Spaulding For Children	7	7	100.0%	7	100.0%	5	71.4%	3	42.9%
St. Francis Family Center Catholic Social Services of Oakland	7	7	100.0%	7	100.0%	7	100.0%	4	57.1%
St. Vincent Catholic Charities	8	8	100.0%	8	100.0%	8	100.0%	8	100.0%
Starfish Family Services	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%

Foster Care									
Period Four	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%	
Starr Commonwealth	13	11	84.6%	11	84.6%	11	84.6%	11	84.6%
The Children's Center	17	17	100.0%	17	100.0%	17	100.0%	17	100.0%
Upper Peninsula Family Solutions	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Vista Maria	7	7	100.0%	7	100.0%	7	100.0%	7	100.0%
Wayne Center	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Wedgwood Christian Services	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Wolverine Human Services	13	13	100.0%	13	100.0%	12	92.3%	10	76.9%
Grand Total	1110	1056	95.1%	988	89.0%	884	79.6%	764	68.8%

		Adoption							
Period Four	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%	
Urban	18	16	88.9%	14	77.8%	12	66.7%	11	61.1%
Genesee	6	5	83.3%	5	83.3%	5	83.3%	4	66.7%
Ingham	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Kent	1	1	100.0%	0	0.0%	0	0.0%	0	0.0%
Macomb	3	3	100.0%	2	66.7%	0	0.0%	0	0.0%
Oakland	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Wayne Central	4	4	100.0%	4	100.0%	4	100.0%	4	100.0%
Wayne North	0	0	NA	0	NA	0	NA	0	NA
Wayne South	0	0	NA	0	NA	0	NA	0	NA
Wayne West	0	0	NA	0	NA	0	NA	0	NA
Outstate	41	23	56.1%	16	39.0%	12	29.3%	11	26.8%
Alcona-Iosco	0	0	NA	0	NA	0	NA	0	NA
Alger-Schoolcraft	0	0	NA	0	NA	0	NA	0	NA
Allegan	1	1	100.0%	0	0.0%	0	0.0%	0	0.0%
Alpena-Presque Isle	0	0	NA	0	NA	0	NA	0	NA
Antrim	0	0	NA	0	NA	0	NA	0	NA
Arenac	0	0	NA	0	NA	0	NA	0	NA
Baraga-Keweenaw	0	0	NA	0	NA	0	NA	0	NA
Barry	2	1	50.0%	1	50.0%	0	0.0%	0	0.0%
Bay	0	0	NA	0	NA	0	NA	0	NA
Benzie-Manistee	0	0	NA	0	NA	0	NA	0	NA
Berrien	3	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Branch	0	0	NA	0	NA	0	NA	0	NA
Calhoun	2	2	100.0%	2	100.0%	0	0.0%	0	0.0%
Cass	0	0	NA	0	NA	0	NA	0	NA
Charlevoix-Emmet	0	0	NA	0	NA	0	NA	0	NA
Cheboygan-Mackinac	0	0	NA	0	NA	0	NA	0	NA
Chippewa	0	0	NA	0	NA	0	NA	0	NA
Clare	0	0	NA	0	NA	0	NA	0	NA
Clinton	2	1	50.0%	1	50.0%	0	0.0%	0	0.0%
Crawford	0	0	NA	0	NA	0	NA	0	NA
Delta	0	0	NA	0	NA	0	NA	0	NA
Dickinson	2	2	100.0%	1	50.0%	1	50.0%	1	50.0%
Eaton	0	0	NA	0	NA	0	NA	0	NA
Gladwin	0	0	NA	0	NA	0	NA	0	NA
Gogebic	0	0	NA	0	NA	0	NA	0	NA
Grand Traverse- Leelanau	5	0	0.0%	0	0.0%	0	0.0%	0	0.0%

Period Four	Adoption								
	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%	
Gratiot	0	0	NA	0	NA	0	NA	0	NA
Hillsdale	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Houghton	0	0	NA	0	NA	0	NA	0	NA
Huron	0	0	NA	0	NA	0	NA	0	NA
Ionia	0	0	NA	0	NA	0	NA	0	NA
Iron	0	0	NA	0	NA	0	NA	0	NA
Isabella	0	0	NA	0	NA	0	NA	0	NA
Jackson	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Kalamazoo	2	1	50.0%	1	50.0%	1	50.0%	1	50.0%
Kalkaska	0	0	NA	0	NA	0	NA	0	NA
Lake-Newaygo	1	1	100.0%	0	0.0%	0	0.0%	0	0.0%
Lapeer	0	0	NA	0	NA	0	NA	0	NA
Lenawee	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Livingston	0	0	NA	0	NA	0	NA	0	NA
Luce	0	0	NA	0	NA	0	NA	0	NA
Marquette	0	0	NA	0	NA	0	NA	0	NA
Mason	0	0	NA	0	NA	0	NA	0	NA
Mecosta-Osceola	1	1	100.0%	1	100.0%	1	100.0%	1	100.0%
Menominee	0	0	NA	0	NA	0	NA	0	NA
Midland	2	2	100.0%	1	50.0%	1	50.0%	1	50.0%
Monroe	0	0	NA	0	NA	0	NA	0	NA
Montcalm	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Montmorency-Oscoda	0	0	NA	0	NA	0	NA	0	NA
Muskegon	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Oceana	1	1	100.0%	0	0.0%	0	0.0%	0	0.0%
Ogemaw	0	0	NA	0	NA	0	NA	0	NA
Ontonagon	0	0	NA	0	NA	0	NA	0	NA
Otsego	0	0	NA	0	NA	0	NA	0	NA
Ottawa	1	1	100.0%	1	100.0%	1	100.0%	1	100.0%
Roscommon	0	0	NA	0	NA	0	NA	0	NA
Saginaw	2	2	100.0%	1	50.0%	1	50.0%	0	0.0%
Sanilac	0	0	NA	0	NA	0	NA	0	NA
Shiawassee	0	0	NA	0	NA	0	NA	0	NA
St. Clair	3	1	33.3%	1	33.3%	1	33.3%	1	33.3%
St. Joseph	1	1	100.0%	1	100.0%	1	100.0%	1	100.0%
Tuscola	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Van Buren	1	1	100.0%	1	100.0%	1	100.0%	1	100.0%
Washtenaw	1	1	100.0%	0	0.0%	0	0.0%	0	0.0%

Period Four	Adoption								
	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%	
Wexford-Missaukee	0	0	NA	0	NA	0	NA	0	NA
Private Agency	202	201	99.5%	200	99.0%	195	96.5%	184	91.1%
Adoption Option Inc	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Adoption Options World Wide	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Adoption Specialists	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Alternatives for Children and Families	4	4	100.0%	4	100.0%	4	100.0%	4	100.0%
Bethany Christian Services	28	28	100.0%	28	100.0%	25	89.3%	25	89.3%
Black Family Development	0	0	NA	0	NA	0	NA	0	NA
Catholic Charities Lakeshore	5	5	100.0%	5	100.0%	5	100.0%	5	100.0%
Catholic Charities Shiawassee Genesee Counties	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Catholic Charities West Michigan Grand Rapids	4	4	100.0%	4	100.0%	3	75.0%	2	50.0%
Catholic Family Services of the Dioceses of Saginaw	1	1	100.0%	1	100.0%	1	100.0%	1	100.0%
Catholic Social Services of Washtenaw	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Catholic Social Services of Wayne County	5	5	100.0%	5	100.0%	5	100.0%	4	80.0%
Child & Family Services Capital Area	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%
Child & Family Services Northwestern Michigan	6	6	100.0%	6	100.0%	6	100.0%	6	100.0%
Child & Family Services of NE MI	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Childhelp Inc.	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Christ Child House - Adoption Program	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%

Period Four	Adoption									
	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%		
DA Blodgett for Children	10	10	100.0%	10	100.0%	10	100.0%	10	100.0%	
Don Bosco Hall	0	0	NA	0	NA	0	NA	0	NA	
Eagle Village	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%	
Ennis Center for Children	9	9	100.0%	9	100.0%	9	100.0%	9	100.0%	
Family & Children Services	5	5	100.0%	5	100.0%	5	100.0%	5	100.0%	
Family Adoption Consultants	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%	
Family Counseling & Children Services	3	3	100.0%	3	100.0%	3	100.0%	3	100.0%	
Family Outreach Center	0	0	NA	0	NA	0	NA	0	NA	
Family Services & Children's Aid of Jackson	3	2	66.7%	2	66.7%	2	66.7%	2	66.7%	
Federation of Youth Services, Transitional Living Program	0	0	NA	0	NA	0	NA	0	NA	
Fostering Futures	0	0	NA	0	NA	0	NA	0	NA	
Goodwill Farms	0	0	NA	0	NA	0	NA	0	NA	
Hands Across the Water	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%	
Holy Cross Children Services	6	6	100.0%	6	100.0%	6	100.0%	6	100.0%	
Homes For Black Children	4	4	100.0%	4	100.0%	4	100.0%	4	100.0%	
Judson Center	4	4	100.0%	4	100.0%	4	100.0%	3	75.0%	
Listening Ear	0	0	NA	0	NA	0	NA	0	NA	
Lutheran Adoption Services	27	27	100.0%	27	100.0%	27	100.0%	27	100.0%	
Lutheran Child and Family Service of Michigan	4	4	100.0%	4	100.0%	4	100.0%	4	100.0%	
Lutheran Social Services of Michigan	0	0	NA	0	NA	0	NA	0	NA	
Methodist Children's Home Society	3	3	100.0%	3	100.0%	3	100.0%	2	66.7%	

Adoption									
Period Four	All Staff	1 Staff to 30 Children Target = 95%		1 Staff to 25 Children Target = 60%		1 Staff to 22 Children Target = 70%		1 Staff to 20 Children Target = 80%	
Michigan Indian Child Welfare Agency	4	4	100.0%	4	100.0%	4	100.0%	4	100.0%
New Light Child & Family Institute	1	1	100.0%	1	100.0%	1	100.0%	0	0.0%
Oakland Family Services	3	3	100.0%	3	100.0%	3	100.0%	2	66.7%
Orchards Children's Services	8	8	100.0%	8	100.0%	8	100.0%	8	100.0%
Sault Binogii Tribe Placement	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Spaulding For Children	4	4	100.0%	3	75.0%	3	75.0%	3	75.0%
St. Francis Family Center Catholic Social Services of Oakland	6	6	100.0%	6	100.0%	6	100.0%	4	66.7%
St. Vincent Catholic Charities	3	3	100.0%	3	100.0%	3	100.0%	2	66.7%
Starfish Family Services	0	0	NA	0	NA	0	NA	0	NA
Starr Commonwealth	0	0	NA	0	NA	0	NA	0	NA
The Children's Center	6	6	100.0%	6	100.0%	6	100.0%	4	66.7%
Upper Peninsula Family Solutions	2	2	100.0%	2	100.0%	2	100.0%	2	100.0%
Vista Maria	0	0	NA	0	NA	0	NA	0	NA
Wayne Center	0	0	NA	0	NA	0	NA	0	NA
Wedgwood Christian Services	0	0	NA	0	NA	0	NA	0	NA
Wolverine Human Services	3	3	100.0%	3	100.0%	2	66.7%	2	66.7%
Grand Total	261	240	92.0%	230	88.1%	219	83.9%	206	78.9%

Licensing Workers					
Period Four	All Staff	1 Staff to 36 Cases Target = 60%		1 Staff to 33 Cases Target = 75%	
Urban	32	30	93.8%	28	87.5%
Genesee	5	5	100.0%	5	100.0%
Ingham	3	3	100.0%	3	100.0%
Kent	3	3	100.0%	3	100.0%
Macomb	7	7	100.0%	5	71.4%
Oakland	3	3	100.0%	3	100.0%
Wayne Central	11	9	81.8%	9	81.8%
Wayne North	0	0	NA	0	NA
Wayne South	0	0	NA	0	NA
Wayne West	0	0	NA	0	NA
Outstate	94	69	73.4%	59	62.8%
Alcona-Iosco	1	1	100.0%	0	0.0%
Alger-Schoolcraft	1	0	0.0%	0	0.0%
Allegan	3	2	66.7%	2	66.7%
Alpena-Presque Isle	1	1	100.0%	0	0.0%
Antrim	0	0	NA	0	NA
Arenac	2	2	100.0%	2	100.0%
Baraga-Keweenaw	1	0	0.0%	0	0.0%
Barry	1	1	100.0%	1	100.0%
Bay	1	1	100.0%	1	100.0%
Benzie-Manistee	1	1	100.0%	1	100.0%
Berrien	5	3	60.0%	2	40.0%
Branch	1	1	100.0%	0	0.0%
Calhoun	5	4	80.0%	3	60.0%
Cass	1	0	0.0%	0	0.0%
Charlevoix-Emmet	1	1	100.0%	1	100.0%
Cheboygan-Mackinac	3	3	100.0%	2	66.7%
Chippewa	0	0	NA	0	NA
Clare	0	0	NA	0	NA
Clinton	2	1	50.0%	1	50.0%
Crawford	2	2	100.0%	2	100.0%
Delta	1	0	0.0%	0	0.0%
Dickinson	0	0	NA	0	NA
Eaton	2	2	100.0%	2	100.0%
Gladwin	1	0	0.0%	0	0.0%
Gogebic	1	0	0.0%	0	0.0%
Grand Traverse-Leelanau	1	0	0.0%	0	0.0%
Gratiot	1	0	0.0%	0	0.0%
Hillsdale	1	1	100.0%	1	100.0%
Houghton	1	1	100.0%	1	100.0%
Huron	1	1	100.0%	1	100.0%
Ionia	1	1	100.0%	1	100.0%
Iron	1	1	100.0%	0	0.0%
Isabella	1	0	0.0%	0	0.0%

	Licensing Workers				
Period Four	All Staff	1 Staff to 36 Cases Target = 60%		1 Staff to 33 Cases Target = 75%	
Jackson	2	2	100.0%	2	100.0%
Kalamazoo	4	2	50.0%	2	50.0%
Kalkaska	0	0	NA	0	NA
Lake-Newaygo	2	1	50.0%	1	50.0%
Lapeer	0	0	NA	0	NA
Lenawee	1	1	100.0%	1	100.0%
Livingston	2	1	50.0%	1	50.0%
Luce	1	0	0.0%	0	0.0%
Marquette	1	1	100.0%	1	100.0%
Mason	1	1	100.0%	1	100.0%
Mecosta-Osceola	1	1	100.0%	1	100.0%
Menominee	1	1	100.0%	1	100.0%
Midland	1	0	0.0%	0	0.0%
Monroe	1	1	100.0%	0	0.0%
Montcalm	0	0	NA	0	NA
Montmorency-Oscoda	0	0	NA	0	NA
Muskegon	4	4	100.0%	4	100.0%
Oceana	1	1	100.0%	0	0.0%
Ogemaw	2	2	100.0%	2	100.0%
Ontonagon	0	0	NA	0	NA
Otsego	1	1	100.0%	1	100.0%
Ottawa	2	2	100.0%	2	100.0%
Roscommon	0	0	NA	0	NA
Saginaw	6	5	83.3%	4	66.7%
Sanilac	1	1	100.0%	1	100.0%
Shiawassee	1	1	100.0%	1	100.0%
St. Clair	5	4	80.0%	4	80.0%
St. Joseph	1	1	100.0%	1	100.0%
Tuscola	2	1	50.0%	1	50.0%
Van Buren	2	1	50.0%	1	50.0%
Washtenaw	2	1	50.0%	1	50.0%
Wexford-Missaukee	1	1	100.0%	1	100.0%
Private Agency	214	191	89.3%	179	83.6%
Adoption Option Inc	4	4	100.0%	4	100.0%
Adoption Options World Wide	1	1	100.0%	1	100.0%
Adoption Specialists	0	0	NA	0	NA
Alternatives for Children and Families	3	1	33.3%	1	33.3%
Bethany Christian Services	31	30	96.8%	25	80.6%
Black Family Development	1	0	0.0%	0	0.0%
Catholic Charities Lakeshore	4	3	75.0%	2	50.0%
Catholic Charities Shiawassee Genesee Counties	3	2	66.7%	2	66.7%

Licensing Workers					
Period Four	All Staff	1 Staff to 36 Cases Target = 60%		1 Staff to 33 Cases Target = 75%	
Catholic Charities West Michigan Grand Rapids	4	3	75.0%	3	75.0%
Catholic Family Services of the Dioceses of Saginaw	1	1	100.0%	1	100.0%
Catholic Social Services of Washtenaw	0	0	NA	0	NA
Catholic Social Services of Wayne County	3	3	100.0%	3	100.0%
Child & Family Services Capital Area	3	3	100.0%	3	100.0%
Child & Family Services Northwestern Michigan	7	7	100.0%	7	100.0%
Child & Family Services of NE MI	3	3	100.0%	3	100.0%
Childhelp Inc.	2	2	100.0%	2	100.0%
Christ Child House - Adoption Program	0	0	NA	0	NA
DA Blodgett for Children	7	4	57.1%	4	57.1%
Don Bosco Hall	0	0	NA	0	NA
Eagle Village	1	1	100.0%	0	0.0%
Ennis Center for Children	9	8	88.9%	8	88.9%
Family & Children Services	4	4	100.0%	4	100.0%
Family Adoption Consultants	0	0	NA	0	NA
Family Counseling & Children Services	5	5	100.0%	5	100.0%
Family Outreach Center	1	1	100.0%	1	100.0%
Family Services & Children's Aid of Jackson	1	1	100.0%	1	100.0%
Federation of Youth Services, Transitional Living Program	0	0	NA	0	NA
Fostering Futures	1	1	100.0%	1	100.0%
Goodwill Farms	1	1	100.0%	1	100.0%
Hands Across the Water	1	1	100.0%	1	100.0%
Holy Cross Children Services	7	7	100.0%	7	100.0%
Homes For Black Children	3	2	66.7%	1	33.3%
Judson Center	7	7	100.0%	7	100.0%
Listening Ear	1	1	100.0%	1	100.0%
Lutheran Adoption Services	0	0	NA	0	NA
Lutheran Child and Family Service of Michigan	11	10	90.9%	10	90.9%
Lutheran Social Services of Michigan	32	31	96.9%	31	96.9%
Methodist Children's Home Society	3	3	100.0%	2	66.7%

	Licensing Workers				
Period Four	All Staff	1 Staff to 36 Cases Target = 60%		1 Staff to 33 Cases Target = 75%	
Michigan Indian Child Welfare Agency	1	1	100.0%	1	100.0%
New Light Child & Family Institute	2	2	100.0%	2	100.0%
Oakland Family Services	5	5	100.0%	5	100.0%
Orchards Children's Services	7	7	100.0%	6	85.7%
Sault Binogii Tribe Placement	2	2	100.0%	2	100.0%
Spaulding For Children	2	1	50.0%	1	50.0%
St. Francis Family Center Catholic Social Services of Oakland	3	3	100.0%	3	100.0%
St. Vincent Catholic Charities	4	4	100.0%	4	100.0%
Starfish Family Services	0	0	NA	0	NA
Starr Commonwealth	4	2	50.0%	2	50.0%
The Children's Center	5	4	80.0%	4	80.0%
Upper Peninsula Family Solutions	2	2	100.0%	2	100.0%
Vista Maria	3	2	66.7%	0	0.0%
Wayne Center	1	1	100.0%	1	100.0%
Wedgwood Christian Services	1	1	100.0%	1	100.0%
Wolverine Human Services	7	3	42.9%	3	42.9%
Grand Total	340	290	85.3%	266	78.2%

Purchase of Service Monitors					
Period Four	All Staff	1 Staff to 55 Cases Target = 60%		1 Staff to 50 Cases Target = 75%	
Urban	345	305	88.4%	276	80.0%
Genesee	51	50	98.0%	48	94.1%
Ingham	10	9	90.0%	7	70.0%
Kent	15	4	26.7%	4	26.7%
Macomb	53	49	92.5%	38	71.7%
Oakland	45	44	97.8%	44	97.8%
Wayne Central	16	10	62.5%	9	56.3%
Wayne North	59	59	100.0%	57	96.6%
Wayne South	52	47	90.4%	45	86.5%
Wayne West	44	33	75.0%	24	54.5%
Outstate	227	185	81.5%	157	69.2%
Alcona-Iosco	2	2	100.0%	1	50.0%
Alger-Schoolcraft	3	2	66.7%	2	66.7%
Allegan	5	5	100.0%	4	80.0%
Alpena-Presque Isle	3	3	100.0%	2	66.7%
Antrim	2	2	100.0%	2	100.0%
Arenac	2	2	100.0%	2	100.0%
Baraga-Keweenaw	1	0	0.0%	0	0.0%
Barry	4	3	75.0%	3	75.0%
Bay	5	5	100.0%	5	100.0%
Benzie-Manistee	1	1	100.0%	1	100.0%
Berrien	6	3	50.0%	3	50.0%
Branch	4	4	100.0%	3	75.0%
Calhoun	10	7	70.0%	3	30.0%
Cass	3	0	0.0%	0	0.0%
Charlevoix-Emmet	4	4	100.0%	4	100.0%
Cheboygan-Mackinac	5	5	100.0%	4	80.0%
Chippewa	1	1	100.0%	1	100.0%
Clare	1	1	100.0%	1	100.0%
Clinton	2	1	50.0%	1	50.0%
Crawford	5	5	100.0%	5	100.0%
Delta	2	1	50.0%	1	50.0%
Dickinson	2	2	100.0%	2	100.0%
Eaton	1	0	0.0%	0	0.0%
Gladwin	0	0	NA	0	NA
Gogebic	1	1	100.0%	0	0.0%
Grand Traverse-Leelanau	8	1	12.5%	0	0.0%
Gratiot	0	0	NA	0	NA
Hillsdale	3	2	66.7%	2	66.7%
Houghton	2	1	50.0%	1	50.0%
Huron	1	1	100.0%	0	0.0%
Ionia	1	0	0.0%	0	0.0%
Iron	2	2	100.0%	2	100.0%
Isabella	4	4	100.0%	4	100.0%

Purchase of Service Monitors					
Period Four	All Staff	1 Staff to 55 Cases Target = 60%		1 Staff to 50 Cases Target = 75%	
Jackson	6	5	83.3%	4	66.7%
Kalamazoo	10	6	60.0%	5	50.0%
Kalkaska	2	2	100.0%	2	100.0%
Lake-Newaygo	4	4	100.0%	3	75.0%
Lapeer	2	2	100.0%	2	100.0%
Lenawee	9	9	100.0%	9	100.0%
Livingston	2	2	100.0%	0	0.0%
Luce	1	0	0.0%	0	0.0%
Marquette	2	2	100.0%	2	100.0%
Mason	2	2	100.0%	2	100.0%
Mecosta-Osceola	6	5	83.3%	4	66.7%
Menominee	1	1	100.0%	1	100.0%
Midland	3	3	100.0%	2	66.7%
Monroe	4	4	100.0%	2	50.0%
Montcalm	2	0	0.0%	0	0.0%
Montmorency-Oscoda	1	1	100.0%	1	100.0%
Muskegon	9	7	77.8%	5	55.6%
Oceana	1	1	100.0%	0	0.0%
Ogemaw	2	2	100.0%	1	50.0%
Ontonagon	1	1	100.0%	1	100.0%
Otsego	3	3	100.0%	3	100.0%
Ottawa	6	6	100.0%	6	100.0%
Roscommon	2	2	100.0%	2	100.0%
Saginaw	17	16	94.1%	15	88.2%
Sanilac	2	2	100.0%	2	100.0%
Shiawassee	4	4	100.0%	4	100.0%
St. Clair	5	3	60.0%	3	60.0%
St. Joseph	9	8	88.9%	7	77.8%
Tuscola	2	1	50.0%	1	50.0%
Van Buren	1	1	100.0%	1	100.0%
Washtenaw	6	6	100.0%	5	83.3%
Wexford-Missaukee	4	3	75.0%	3	75.0%
Grand Total	572	490	85.7%	433	75.7%

	Supervisor to Staff Ratios		
Period Four	All Supervisors	1 Supervisor to 5 Staff Target = 50%	
Urban	141	86	61.0%
Genesee	18	6	33.3%
Ingham	10	9	90.0%
Kent	14	9	64.3%
Macomb	20	14	70.0%
Oakland	17	8	47.1%
Wayne Central	5	3	60.0%
Wayne North	19	10	52.6%
Wayne South	19	13	68.4%
Wayne West	19	14	73.7%
Outstate	187	141	75.4%
Alcona-Iosco	2	2	100.0%
Alger-Schoolcraft	1	1	100.0%
Allegan	3	0	0.0%
Alpena-Presque Isle	2	1	50.0%
Antrim	1	1	100.0%
Arenac	1	0	0.0%
Baraga-Keweenaw	1	1	100.0%
Barry	3	2	66.7%
Bay	3	2	66.7%
Benzie-Manistee	1	0	0.0%
Berrien	8	8	100.0%
Branch	3	3	100.0%
Calhoun	6	5	83.3%
Cass	3	2	66.7%
Charlevoix-Emmet	3	3	100.0%
Cheboygan-Mackinac	3	3	100.0%
Chippewa	2	2	100.0%
Clare	1	1	100.0%
Clinton	3	2	66.7%
Crawford	2	2	100.0%
Delta	2	2	100.0%
Dickinson	2	2	100.0%
Eaton	4	4	100.0%
Gladwin	1	1	100.0%
Gogebic	3	3	100.0%
Grand Traverse-Leelanau	4	3	75.0%
Gratiot	1	0	0.0%
Hillsdale	2	1	50.0%
Houghton	1	1	100.0%
Huron	1	1	100.0%
Ionia	4	4	100.0%
Iron	1	1	100.0%
Isabella	3	3	100.0%

Period Four	Supervisor to Staff Ratios		
	All Supervisors	1 Supervisor to 5 Staff Target = 50%	
Jackson	6	4	66.7%
Kalamazoo	9	3	33.3%
Kalkaska	1	1	100.0%
Lake-Newaygo	3	1	33.3%
Lapeer	2	1	50.0%
Lenawee	3	1	33.3%
Livingston	3	3	100.0%
Marquette	2	2	100.0%
Mason	2	2	100.0%
Mecosta-Osceola	4	3	75.0%
Midland	3	3	100.0%
Monroe	3	2	66.7%
Montcalm	1	0	0.0%
Montmorency-Oscoda	1	1	100.0%
Muskegon	9	6	66.7%
Oceana	1	1	100.0%
Ogemaw	1	1	100.0%
Otsego	2	1	50.0%
Ottawa	4	1	25.0%
Roscommon	1	0	0.0%
Saginaw	12	10	83.3%
Sanilac	1	0	0.0%
Shiawassee	3	3	100.0%
St. Clair	9	8	88.9%
St. Joseph	3	2	66.7%
Tuscola	3	1	33.3%
Van Buren	5	4	80.0%
Washtenaw	6	6	100.0%
Wexford-Missaukee	3	3	100.0%
Private Agency	200	168	84.0%
Adoption Option Inc	1	1	100.0%
Adoption Options World Wide	1	1	100.0%
Adoption Specialists	2	2	100.0%
Alternatives for Children and Families	4	4	100.0%
Bethany Christian Services	29	27	93.1%
Black Family Development	0	0	NA
Catholic Charities Lakeshore	3	1	33.3%
Catholic Charities Shiawassee Genesee Counties	2	2	100.0%
Catholic Charities West Michigan Grand Rapids	3	1	33.3%
Catholic Family Services of the Dioceses of Saginaw	1	1	100.0%
Catholic Social Services of Washtenaw	1	1	100.0%

Period Four	Supervisor to Staff Ratios		
	All Supervisors	1 Supervisor to 5 Staff Target = 50%	
Catholic Social Services of Wayne County	5	3	60.0%
Child & Family Services Capital Area	3	3	100.0%
Child & Family Services Northwestern Michigan	4	2	50.0%
Child & Family Services of NE MI	1	1	100.0%
Childhelp Inc.	3	3	100.0%
Christ Child House - Adoption Program	1	1	100.0%
DA Blodgett for Children	9	6	66.7%
Don Bosco Hall	1	1	100.0%
Eagle Village	2	2	100.0%
Ennis Center for Children	8	6	75.0%
Family & Children Services	3	3	100.0%
Family Adoption Consultants	1	1	100.0%
Family Counseling & Children Services	2	2	100.0%
Family Outreach Center	1	1	100.0%
Family Services & Children's Aid of Jackson	2	2	100.0%
Federation of Youth Services, Transitional Living Program	2	2	100.0%
Fostering Futures	1	1	100.0%
Goodwill Farms	1	1	100.0%
Hands Across the Water	2	2	100.0%
Holy Cross Children Services	13	11	84.6%
Homes For Black Children	3	2	66.7%
Judson Center	5	2	40.0%
Listening Ear	2	2	100.0%
Lutheran Adoption Services	6	4	66.7%
Lutheran Child and Family Service of Michigan	7	7	100.0%
Lutheran Social Services of Michigan	16	13	81.3%
Methodist Children's Home Society	2	1	50.0%
Michigan Indian Child Welfare Agency	3	2	66.7%
New Light Child & Family Institute	1	0	0.0%
Oakland Family Services	3	2	66.7%
Orchards Children's Services	7	7	100.0%
Sault Binogii Tribe Placement	1	1	100.0%
Spaulding For Children	4	4	100.0%
St. Francis Family Center Catholic Social Services of Oakland	4	4	100.0%
St. Vincent Catholic Charities	3	2	66.7%
Starfish Family Services	1	1	100.0%
Starr Commonwealth	4	4	100.0%
The Children's Center	6	6	100.0%
Upper Peninsula Family Solutions	1	0	0.0%

				Supervisor to Staff Ratios	
Period Four	All Supervisors	1 Supervisor to 5 Staff Target = 50%			
Vista Maria	2	2		100.0%	
Wayne Center	1	1		100.0%	
Wedgwood Christian Services	1	1		100.0%	
Wolverine Human Services	5	5		100.0%	
Grand Total	528	395		74.8%	

Appendix B – Foster Homes Licensing Targets and Performance (Non-Kin)

County	FY2010 Licensing Target	Homes Licensed During FY 2010	% Target Achieved	FY2011 Licensing Target
Alcona	3	1	33%	1
Alger	1	0	0%	2
Allegan	37	23	62%	25
Alpena	5	0	0%	1
Antrim	10	5	50%	6
Arenac	4	1	25%	1
Baraga	4	1	25%	1
Barry	12	15	100%	17
Bay	16	7	44%	8
Benzie	5	7	100%	9
Berrien	22	19	86%	20
Branch	7	5	71%	6
Calhoun	29	18	62%	21
Cass	14	8	57%	8
Charlevoix	7	5	71%	6
Cheboygan	5	6	100%	7
Chippewa	5	7	100%	8
Clare	5	4	80%	4
Clinton	11	9	81%	10
Crawford	7	3	43%	3
Delta	4	2	50%	2
Dickinson	3	1	33%	1
Eaton	23	22	96%	24
Emmet	8	11	100%	12
Genesee	76	48	63%	54
Gladwin	3	2	67%	2
Gogebic	6	4	67%	4
Grand Traverse	26	16	61%	17
Gratiot	6	4	67%	4
Hillsdale	8	5	62%	6
Houghton	9	4	44%	4
Huron	4	2	50%	2
Ingham	32	29	91%	33
Ionia	6	9	100%	10
Iosco	3	2	67%	2
Iron	3	0	0%	0
Isabella	12	5	42%	6
Jackson	19	14	74%	17
Kalamazoo	47	43	91%	47

County	FY2010 Licensing Target	Homes Licensed During FY 2010	% Target Achieved	FY2011 Licensing Target
Kalkaska	7	5	71%	6
Kent	95	106	100%	117
Keweenaw	1	0	0%	0
Lake	6	1	17%	1
Lapeer	4	7	100%	8
Leelanau	5	4	80%	6
Lenawee	22	15	68%	17
Livingston	14	12	86%	13
Luce	5	3	60%	3
Mackinac	4	1	25%	1
Macomb	127	86	68%	96
Manistee	3	3	100%	3
Marquette	6	8	100%	9
Mason	4	2	50%	2
Mecosta	12	7	58%	8
Menominee	10	2	20%	2
Midland	20	5	25%	6
Missaukee	6	4	67%	4
Monroe	9	14	100%	16
Montcalm	11	15	100%	18
Montmorency	1	0	0%	0
Muskegon	39	33	85%	37
Newaygo	3	7	100%	8
Oakland	104	92	88%	100
Oceana	6	6	100%	7
Ogemaw	6	4	67%	6
Ontonagon	4	0	0%	0
Osceola	8	7	50%	7
Oscoda	3	1	33%	1
Otsego	5	4	80%	7
Ottawa	39	60	100%	64
Presque Isle	2	1	50%	1
Roscommon	3	4	100%	4
Saginaw	26	34	100%	36
St. Clair	23	14	61%	15
St. Joseph	14	10	71%	11
Sanilac	4	1	25%	1
Schoolcraft	0	0	100%	0
Shiawassee	1	7	100%	8
Tuscola	17	5	29%	8
Van Buren	14	16	100%	18

County	FY2010 Licensing Target	Homes Licensed During FY 2010	% Target Achieved	FY2011 Licensing Target
Washtenaw	24	27	100%	30
Wayne	141	134	95%	144
Wexford	8	8	100%	9
Unspecified County	N/A	3	N/A	N/A
Totals	1,373	1,145	83%	1,269