

# *State of Michigan*

## *Department of Human Services*

*Special Reviews for Higher Risk Cases*

*January 1, 2011 – March 31, 2011*



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## *Preface*

The Michigan Department of Human Services (DHS) is responsible for administering the state's child welfare programs. The DHS mission includes a commitment to ensure that children and youth served by our public and private providers are, first and foremost, safe, receive high quality services that enhance their well-being, and have permanent and stable families and lives. This mission is executed with help from the Children's Services Administration (CSA), which is responsible for planning, directing, and coordinating statewide child welfare programs.

On July 3, 2008, Governor Granholm, on behalf of Michigan, reached an out-of-court agreement with Children's Rights, Inc. regarding the Dwayne B. v. Granholm, et al. lawsuit. The agreement provides Michigan with a valuable opportunity to reform our existing child welfare system. The agreement builds upon reform efforts already under way and improves safety for children while providing stronger support and oversight for those responsible for them. This agreement is generally referred to as the "consent decree" and is often cited in this report.

## *Introduction*

The Children's Services Administration developed a quality assurance (QA) unit which is now housed within the Continuous Quality Improvement Division. The focus of this division is to ensure the provision of services is in accordance with DHS philosophy and federal standards of safety, well-being, and permanency. Part of the Child Welfare QA unit's aim is to foster a continuous quality improvement (CQI) culture throughout DHS by introducing CQI concepts at all levels of the child welfare system. A key role is the training of staff on improvement processes and integrating CQI philosophy into long-term and everyday decision making. The QA unit is working to develop an internal capacity to undertake data collection, verification, and analysis in addition to completing case record reviews for the higher risk cases identified in the consent decree.

In April 2009, the QA unit began to conduct special reviews as specified by the consent decree. The Data Management unit (DMU) provides an initial list of identified cases for the high-risk categories. The QA unit reviews each identified case in the Services Worker Support System (SWSS) to pre-screen for possible data errors and ensure that the case meets the cohort definition.

The QA unit completed special reviews of higher risk cases as defined by the consent decree for Jan. 1, 2011 through March 31, 2011. As of March 31, 2011, the QA unit has authored five state reports on the special reviews of higher risk cases:

- Review of Higher Risk Cases: 7/1/09 – 9/30/09, Maltreatment Cohorts A & B.
- Special Review of Higher Risk Cases Period Three: 10/1/09 – 3/31/10.
- Special Review of Higher Risk Cases Quarterly Report: 4/1/10 – 6/30/10.
- Special Review of Higher Risk Cases Quarterly Report: 7/1/10 – 9/30/10.

- Special Review of Higher Risk Cases Quarterly Report: 10/1/10 – 12/30/10.

The Special Reviews for Higher Risk Cases Executive Report of Findings and Analyses was completed in May 2011. The Executive Report outlines the cumulative findings for 2010 and actions implemented by DHS to improve the outcomes for children in foster care.

The following information is a summary of the findings for the special case reviews conducted for the Jan. 1, 2011 through March 31, 2011 review period. This report compares the current findings to the 2010 data in an effort to assess the results of the action steps that were outlined in the executive report, as well as identify any new or continuing trends.

### *Review Process*

The case reads were completed by CQI analysts by reviewing SWSS documentation, actual case files and, if deemed necessary, direct communication with the services worker.

The QA unit developed a comprehensive case-reading tool to conduct the special reviews. The case review process has evolved and will continue to change as we strive to improve the structure of the tool and refine the steps to obtain required information. The current version is in Microsoft Excel and is designed to structure a review of the file and capture information relevant to each high risk category.

The Data Management unit provides the QA unit with an initial list of cases identified as meeting the requirements of each special review cohort. Prior to conducting a full review, CQI analysts screen each case on the initial list to determine if the case information on SWSS confirms that the case meets the requirements of the cohort. For all cohorts, except Cohorts A and B, if a case was previously reviewed by the QA unit, it will be screened out for future reviews. However, in Cohorts A and B, if a case had been reviewed and a new complaint of child abuse/neglect is received while the youth remains in the home, the CQI analyst will review the case again. The focus of this second review is to determine the quality of the investigation and what, if any, actions or patterns are evident since the initial case review.

Once the CQI analyst screens each child on the list and determines eligibility, the analyst completes a full case review, which includes reading information contained in SWSS-FAJ (Social Work Contacts and Updated Services Plans/Permanent Ward Services Plans), the foster care case file (review and verification of necessary documentation corresponding to the time frame), Children's Protective Services Investigation Reports (DHS-154) as needed, and the licensing file, when appropriate. Case worker interviews are conducted for clarification as necessary.

Upon completion of a case review, the analyst provides feedback to each local field office through exit interviews and county summaries. The analyst discusses recommendations for improvement with the local management team and requests the development of a Quality Improvement Plan (QIP) based on the review findings. The QIP is a tool used to identify, track, and update progress on targeted areas for improvement in each county or district office. It is the responsibility of the analyst and the local office to monitor and assess the county's progress on the QIP to track and verify the improvements.

## *Quality Assurance Assessment: Cohorts A and B*

*Cohort A definition: Children who have been the subject of an allegation of abuse or neglect in a residential care setting or a foster home, whether licensed or unlicensed, between June 2007 and September 2008, and who remain in the facility or home in which the maltreatment is alleged to have occurred.*

As of 10/3/2010, all cases that met the definition of the Cohort A had been reviewed. There were no reviews or re-reviews completed for Cohort A this quarter.

*Cohort B definition: Children, not in Cohort A, who have been the subject of three or more reports alleging abuse or neglect in a foster home, the most recent of which reports was filed during or after July 2007, and who remain in the foster home in which maltreatment is alleged to have occurred.*

The Data Management unit identified 86 cases as meeting the definition of this cohort in the 1/1/2011 data pull.

- Fifty-eight of the 85 cases were screened out as they had either been previously reviewed by the QA unit and there was no change since the last review or it was determined that the case did not meet the requirements of the cohort at the time of review.
- Overall, 28 cases remained. These 28 cases received comprehensive reviews of SWSS and the case records.
- Nine of the 28 cases were previously reviewed by the QA unit; however, because a new complaint of child abuse/neglect was received, the CQI analyst completed another assessment of the most recent complaint. The purpose behind this second review is to evaluate if any new patterns have been detected due to the new allegations.
- Fourteen of the 28 cases were under the direct responsibility of DHS and 14 were under the direct responsibility of private child placing agencies.
- These 28 children resided in 18 distinct households. The assessments made are based on individual CPS investigations per household, not child.

Fifty-eight percent of children meeting this cohort definition were temporary court wards with the permanency goal of reunification. This is a shift from the 2010 demographic information for this cohort where the children were more likely MCI wards with the goal of adoption. Additionally, there was a noticeable increase in the number of these children placed with a relative when compared with the cases reviewed in 2010. The QA unit has

found no evidence in the case records that would explain this variation in the data. Complete demographic information is included in Appendix I of this report.

Data assessments from the 2010 special reviews identified communication among programs (CPS, foster care, licensing), and documentation of that communication as specific areas of concern for this cohort. This has been a consistent finding by the QA unit. DHS has identified and initiated action steps to address this concern. Of the cases reviewed in Cohort B this quarter, 77 percent of the CPS case files contained documentation that contact was made with the assigned foster care worker. This is a 10 percent improvement over 2010, which supports the efforts DHS is making for more consistent case management and supervision, including the implementation of the maltreatment in care (MIC) CPS units.

Of the cases reviewed this quarter, the correlating foster care service plan documented that a CPS complaint had been made and investigated for 37 percent of the complaints. This is a four percent increase over 2010.

The DHS-154, Investigative Summary, is another important communication tool. In 2010, the QA unit found that 20 percent of the foster care case files included the DHS-154. For the current quarter, 27 percent of the investigated complaints had a copy of the CPS Safety Assessment and the DHS-154 in the foster care case record.

The QA unit noted preliminary improvements this quarter as compared with the baseline data from 2010 and will continue to monitor the progress in this area by completing targeted case reviews of the MIC unit investigations.

## *Quality Assurance Assessment: Cohort C*

*Definition: Children who, at the time of review, have been in three or more placements, excluding return home, within the previous 12 months.*

The Data Management unit identified 2,327 cases that met the definition for this cohort in the 1/1/2011 data pull.

- Of the 2,327 cases, 1,048 cases were previously reviewed by the QA unit or it was determined that the case did not meet the requirements of Cohort C at the time of review. After excluding these cases, 1,279 cases remained eligible for review.
- QA utilized a web-based sample size calculator called Raosoft to determine a statistically significant sample size of 299 cases for this cohort.
- One hundred seventy-six of the 299 cases were under the direct responsibility of DHS and 123 were under the direct responsibility of private child placing agencies.

The 299 foster care children whose cases were reviewed this quarter experienced 1,139 total placements over the past 12 months. Each child had an average of 3.8 placements in the past 12 months and spent an average of 4.1 months in each placement. The QA unit collected data on each of the 1,139 placements for analysis regarding the root cause(s) of the instability these children. Information was gathered from the reasons for the placement, completion of DHS required documents, and evidence that relatives, siblings, and/or reunification was considered at the time of replacement.

Prior reviews identified the lack of documentation of child preparation for replacement and reasonable efforts to prevent the replacement as a prominent area of concern. This finding has been noted in every Quality Assurance state report since Cohort C reviews began in September 2009. For the cases reviewed this quarter, 69.9 percent of the replacements included documented efforts to maintain the previous placement, if efforts were necessary. Efforts would not be necessary if the child was moving to a less restrictive placement. Only 28.2 percent of the new placements were less restrictive than the former placement. This data is consistent with the baseline data identified in 2010, indicating no significant change in these areas.

The QA unit made a recommendation to the foster care program office to amend policy to include mandates for documenting what efforts were made to prevent replacement. This new policy is scheduled for release in June 2011. This mandated information will assist the QA unit in determining if the worker has failed to provide services to prevent replacements or if DHS is lacking the proper services to meet the special needs of these children in order to stabilize their home setting.

The Action Summary, DHS-69, is a vital communication tool in which the reasons for, efforts to prevent, and preparation of the child for replacement are documented. The QA unit continues to track the utilization of this form. This quarter's reviews found a slight increase in compliance. For the 1,139 placements reviewed this quarter, a copy of the Action Summary was filed 68.9 percent of the time, compared against 64.8 percent in 2010. During county reviews and exit interviews, the QA unit stresses the importance of this form to the local offices, as the DHS-69 includes information about replacements that is necessary for future case planning. Future quality assurance projects include foster care case reviews and will incorporate continued monitoring of the Action Summaries. The QA unit also continues to recommend that a procedure be implemented in the field offices requiring routine supervisory case reviews in order to assist in monitoring compliance with this current policy.

The QA unit assessed the replacement reasons from 2010 and found a correlation between age and reason for replacement. Replacements based on child behavior increased with age while replacements made for safety reasons decreased as the children got older. This quarter's data supports these patterns. Safety-related moves are more common for younger children than teens. The trend steadily declines from 13.4 percent for birth through 3-year-olds to 3.7 percent for teenagers. However, safety is not the most common reason for a placement change in any of the age groups based on this quarter's reviews. Children 12 and older are most frequently replaced due to movement to a more restrictive setting or at the caregiver's request due to the child's behavior. Behavior related reasons account for 36.3 percent of moves for children 12-15 years old and 42.4 percent of moves for youth over 16. For children ages 8-11, the reasons for replacement do not show a clear pattern as the replacement reasons occur at similar frequencies for a wider variety of causes. For children 7 years old or younger, the two most common reasons for replacement were at the caregiver's request (*not* due to the child's behavior) or for placement with a relative.

Replacements made in an effort to reunify the children with relatives steadily decline from 26.7 percent for zero through three-year-olds to 15.1 percent for teenagers. Comparably, the replacement reason of "move to relative" decreases from 14 percent for children seven and under to 7.4 percent for children eight years old and older. The highest portion of children in this cohort are teenagers 16 years or older, 27.8 percent. Sixty-six percent of these youth have a permanency goal of Another Planned Permanent Living Arrangement (APPLA) or Another Planned Permanent Living Arrangement-Emancipation (APPLA-E). The decrease in relative involvement for this age group is a significant concern as these children are preparing to exit the foster care system. In this quarter, 63.9 percent of the service plans were found to include quality information outlining current efforts to contact relatives; this is a significant decrease from the 82.7 percent noted during 2010. There has been improvement in policy compliance regarding the DHS-987. This document was found in 31.4 percent of the cases reviewed this quarter, a 10 percent increase from 2010.

Through the case reviews, the QA analysts found discrepancies in the case file social work contacts, placement information, and/or child status updates that contradicted the relative search information in the applicable section of the USP/PWSP. These discrepancies compelled the QA unit to be more diligent in assessing the overall quality of the case planning, as opposed to focusing only on the quality of the individual service plans. A case is now determined to be of insufficient quality if the relative documentation contains the same repeated wording from service plan-to-service plan, with no verification of any continuous efforts.

Through continued recommendations and quality improvement plans (QIPs), the QA unit is working to assure that all counties recognize the importance of family involvement at all ages and the benefits of appropriately documenting all relative information on the DHS-987, Relative Documentation form. Proper documentation of familial supports is essential for continued case planning to ensure permanence and well-being.

Along with permanency and well-being, the safety of the children is always assessed for the cases reviewed in this cohort. There were no imminent safety concerns noted for this cohort in regards to the current placement.

## *Quality Assurance Assessment: Cohort D*

*Definition: Children who, at the time of review, have been in residential care for one year or longer.*

Two hundred ninety-five cases were identified as meeting the definition for this cohort in the 1/1/2011 data pull. After the CQI analyst screened each case and determined eligibility, 45 cases were reviewed for this cohort.

- Two hundred forty-nine of the 295 cases were either previously reviewed by the QA unit or it was determined that the case did not meet the requirements of the cohort at the time of review. One case was excluded in error and will be reviewed during the 2011 Quarter Two (April - June) reviews.
- Forty-four cases were under the direct responsibility of DHS and one was under the direct responsibility of a private child placing agency.
- The average length of time in the current residential placement for the cases reviewed was 11.1 months and the median was 14 months. The longest amount of time was 32 months.
- The average length of *total* time in residential settings for these children was 15 months.
- Thirty-six of the 45 youth had previous residential placements.

Documentation of reasonable efforts to achieve permanency is mandated by federal guidelines. These guidelines are outlined in foster care policy FOM 722-6, Reasonable Efforts. Without documentation of reasonable efforts in the DHS service plan, it is difficult to determine if these youth and their families are being provided services to achieve permanency. Reasonable efforts to finalize permanency include providing services to the child and family and efforts to locate relatives for placement and/or support. Of the 45 cases reviewed for this cohort this quarter, 73.3 percent included documentation of efforts to achieve permanency, 84.4 percent of the cases included documentation of services provided to address the identified needs, and 57.8 percent of the cases included documented attempts to locate relatives. Relative notification information was collected for all of the cohorts, and it was found that for the children identified for this cohort, the frequency in which workers continually documented efforts to involve relatives is lower than the other high risk categories, 44.4 percent. This supports the finding that continuous efforts to locate familial or other kinship support for these youth are essential. In an effort to address any lack of efforts to achieve permanency and document reasonable efforts, the Executive Summary included an action to implement a foster care supervisory tool to improve supervision quality. The QA unit also recommended the implementation of a foster care supervisory case review process,

one that emulates the process already in place for CPS supervisors. These action steps are expected to increase compliance in documentation of all efforts to achieve permanency.

Furthermore, action steps have been identified that will address the special needs of these youth. DHS is making efforts to implement a mentoring program for the youth that are involved with foster care. A workgroup is looking to collaborate with Mentor Michigan, an existing support system for mentor programs, which will provide expertise and technical assistance in this endeavor. In addition, DHS has partnered with the Michigan Department of Community Health to provide effective mental health services for foster children in a community setting who otherwise may be at risk of psychiatric hospitalization or institutionalization.

In compliance with “Section X: Limits on Residential Care Placements” of the consent decree, DHS has executed a residential placement exception request process. Twenty-eight of the 45 cases (62.2%) reviewed in this cohort include a current approved, or copy of a pending approval, residential placement exception request in the case file. The consent decree states that “no child shall be placed in a residential treatment center without express written approval by the county Administrator of Children’s Services in a designated county, or by the Children’s Services Field Manager in any other county.” (Section X.B.7, Limitations on Residential Care Placements.) This process was identified in the Executive Summary as an identified action step and the QA unit will continue to track compliance.

While the QA unit did not track the total length of time in residential care throughout all of 2010, the unit did start tracking this data during the last quarter of the year. For the 2010 Quarter Four review period, the average total length of time in residential care was 23 months. Of the cases reviewed this quarter, the average total length of time in care was less at 15 months. This indicates progress in transitioning these youth to less-restrictive settings.

Along with permanency and well-being, the safety of the children is always assessed for the cases reviewed in this cohort. There were no imminent safety concerns noted for this cohort. Although the permanency goal rates for the older youth in this cohort are proportionate to the permanency goal rates for the older youth in the child welfare population, other factors specific to this population could hinder successful transitions from foster care. The QA unit did find ample documentation that supports the youth’s need for placement in structured treatment facilities: 75 percent of the residential service plans included documentation of compelling reasons for continued placement and reasonable efforts during the report period to transition the child to less restrictive setting. This is a continued trend from the 2010 reviews. Seventy-eight percent of the youth identified for this cohort are ages 14 or older, and 44.4 percent of the youth have identified permanency goals of AAPLA or APPLA-E. The youth’s needs, ages, federal permanency goals, and lack of another appropriate placement setting could lead to a pattern of older youth aging out of foster care directly from the residential setting. As indicated in prior reviews, including the Executive Summary, the QA unit determined

that in order to decrease the length of stay in residential settings, there needs to be an increased number of structured treatment foster homes that meet the identified needs of these children, and this recommendation was included in the Executive Report.

## *Quality Assurance Assessment: Cohort E*

*Definition: Children who, at the time of review, are in an unrelated caregiver placement, 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.*

One hundred forty-four cases were identified as meeting this cohort on the 1/1/2011 data pull. Ultimately, the QA unit completed a comprehensive review of 32 cases.

- One hundred twelve cases were either previously reviewed by the QA unit or it was determined that the case did not meet the requirements of the cohort at the time of review.
- Twenty-two children were temporary court wards and 10 were MCI wards.
- Twenty-nine of these 32 cases were under the direct responsibility of DHS and three were under the direct responsibility of private child placing agencies.

Child safety and permanence are primary factors of the QA reviews for this cohort. One hundred percent of the cases reviewed this quarter included documentation within the service plan that this placement is in the child's best interest. Of the 32 cases reviewed three children were involved in CPS investigations while living in the identified caregiver's home. Two of the children are siblings residing in the same home. The identified caregivers were licensed foster parents, but due to the CPS investigation and subsequent substantiation, the license was revoked. Due to a court order, the children remain in the home, now identified as an unrelated, unlicensed caregiver situation. There have been no CPS complaints or any other new safety concerns since that time. Proper safeguards have been implemented, and the quality assurance assessment found no safety concerns. In the other case, there was one CPS investigation into improper supervision, which was appropriately denied as a Category IV. The QA analyst found no concerns with the disposition of the investigation, and found the placement to be safe and in the child's best interest.

The rate of compliance with current policy mandates has improved. For this quarter, only two of the 32 cases (12 percent) did not include the required home study on a DHS-197, Relative Caregiver Home Study Outline. In 2010, 39.3 percent of the cases did not include the DHS-197. In order to ensure the child's safety in those two homes where the home study was not found, the QA analyst verified that the local office had determined through some other means that the living conditions were safe but the worker had failed to fill out the actual DHS-197 form.

The QA unit tracked other documentation including court orders, referrals to licensing, and county director approvals as required by current policy. QA noted missing

documentation as required by current foster care policy, but the case review found the youth to be safe despite these policy non-compliances. The rate of documentation of approval by the local office director has stayed about the same: 60 percent for this quarter compared to 59 percent for all of 2010. There has also been an increase in compliance with court orders: 81 percent of the cases reviewed this quarter included some form of court order, while 75.7 percent of the cases reviewed in 2010 included a court order. In the Executive Report, the QA unit made recommendations to the foster care and CPS program offices to review current policy on unrelated caregivers and assess it for consistency and effectiveness. CPS and foster care program offices have initiated action to address the policy inconsistencies and are working not only with the QA unit but also with the Bureau of Child and Adult Licensing to ensure collaboration between programs. This collaboration will expedite all necessary safeguards.

The QA unit noted that the number of placements with unlicensed, unrelated caregivers continues to rise. In an effort to determine the reason for these increasing placements, the unit has begun to track the reason for this placement, as opposed to other placement arrangements, in the review tool. However, based on the data collected since January 2010, the QA unit maintains that these placements with unrelated caregivers are safe and have been in the children's best interest.

## *Conclusion*

The Quality Assurance system is driven by the department's commitment to delivering high quality services that provide functional, positive outcomes for the children and families we serve. The QA unit is required to perform reviews of higher risk cases to look for patterns or trends and to make appropriate recommendations based on the findings. Analysis of the information gathered from these reviews continues to indicate an on-going need for improved case management, training, and supervisory oversight across all cohorts. For the youth identified in Cohorts C and D, the QA unit has noted a need for specialized, preventative behavioral or other counseling services and transitioning services for our older youth.

Through a thorough review of the data collected throughout 2010, the QA unit was able to present a cumulative analysis report, which included observations, hypotheses, and recommendations based on the findings. The data and results of the 2011 Quarter One special reviews mirrored those found in the Executive Report. This quarter's data revealed many improvements, such as CPS joint investigation documentation, increased compliance with the DHS-69 and DHS-987, and decreased length of time in residential care, that can be attributed the implementation of identified action steps. Other action steps are still in process, and based on the continued findings from this review period, DHS maintains that these identified action steps will produce the desired results. Overall, DHS maintains that the termination of these special reviews will allow the QA unit to broaden their scope to assess the efficiency of action steps and delve deeper into the availability of appropriate services for our youth.

## *Recommendations*

The following recommendations are the result of this quarter's cohort reviews.

Foster Care Program Office:

- During the case reviews it was noted that the specifics for Reason for Replacement are only indicated by a check box which does not provide detail. Consider amending the Action Summary to include a required narrative in Section I that explains consideration of placement with parent, relative or siblings prior to the replacement. Consider amending Section IIB (1-10) to include a required narrative for each of the numbered components.
- The QA unit recommends that foster care program office consider amending the Foster Care Action Summary (DHS-69) to include a required narrative that explains consideration of placement with parent, relative or siblings prior to the child's replacement. Also, amend this form to include a required narrative for each of the numbered components (1-10).

#### Contract Compliance Unit:

As the QA unit reviews children's case files in the DHS local offices, the foster care monitor may be interviewed. During a number of these interviews, QA analysts have shared specific elements of an adoption, child placing agency, or residential contract with them to illustrate what they can and should expect from the provider. Many times the workers have expressed they found the information helpful as they were unaware of each requirement of the provider and did not fully understand what they could and should be receiving from them. Also, when approaching DHS front-line supervisors and/or upper-administrators to discuss areas of concern in which a contractor was involved, the DHS staff have consulted outdated copies of the contracts and were unaware of the revised and current requirements in those documents.

- The QA unit recommends the Contract Compliance unit forward revised and/or amended general contracts (PAFC, residential and adoption) to local DHS offices for use as reference materials by FC workers and their supervisors.

#### *Follow Up*

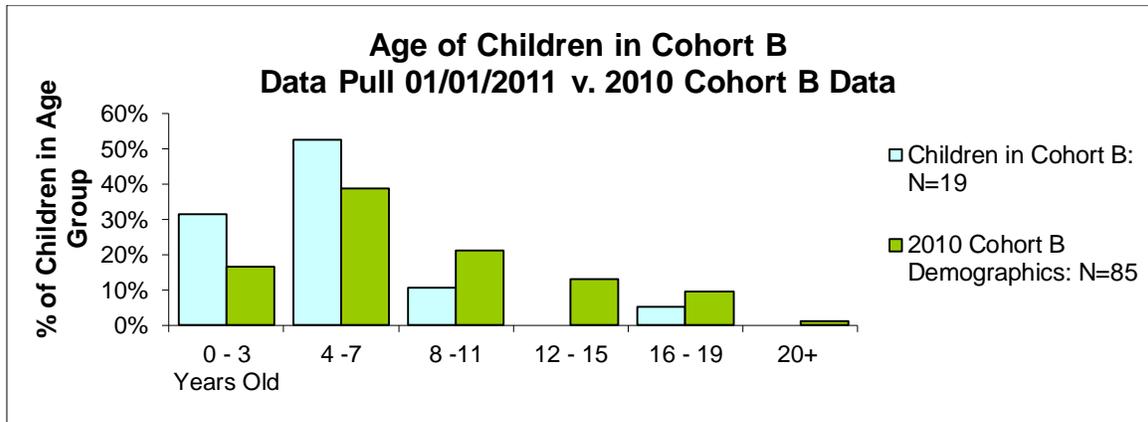
DHS continues to implement policies and develop training aimed at improving the quality of service to children and families in the child welfare system. As a result of prior recommendations made by the Quality Assurance unit, the following steps have been taken by DHS, since last quarter's case reviews to address some of these recommendations.

- In an effort to clearly define requirements regarding entry of face-to-face contacts made by foster care workers (specifically, expand policy to require workers to include any information obtained during a visit to be documented in the comments section of the respective social work contact in SWSS) foster care program office issued L-10-140, Summary of Policy, Federal Standards and Consent Decree Requirements for Caseworker Visits with Children, and updated policy FOM 722-6; Developing the Service Plan. Training regarding visits was developed and presented in 2010 and policy was updated to indicate where in the service plan to document specific information.
- To clarify policy regarding the documentation of a CPS complaint and investigation of a foster home in the foster care service plan, foster care program office has updated policy and workers are now required to document CPS involvement in the foster homes in the "Best Interest of Current Placement" section of the service plan.
- The QA unit recommended that the foster care program office develop policy regarding safe sleep requirements for children 12 months of age or younger to reflect licensing rule 400.9306(3). Foster care workers can access the BCAL-3130, Initial Foster Home/Adoption Evaluation, through the DHS website under "Licensing Resources." The BCAL-3130 will document that the licensing/certification worker ensured that the caregiver is in compliance with safe sleep in the course of the licensing process. In addition, foster care program

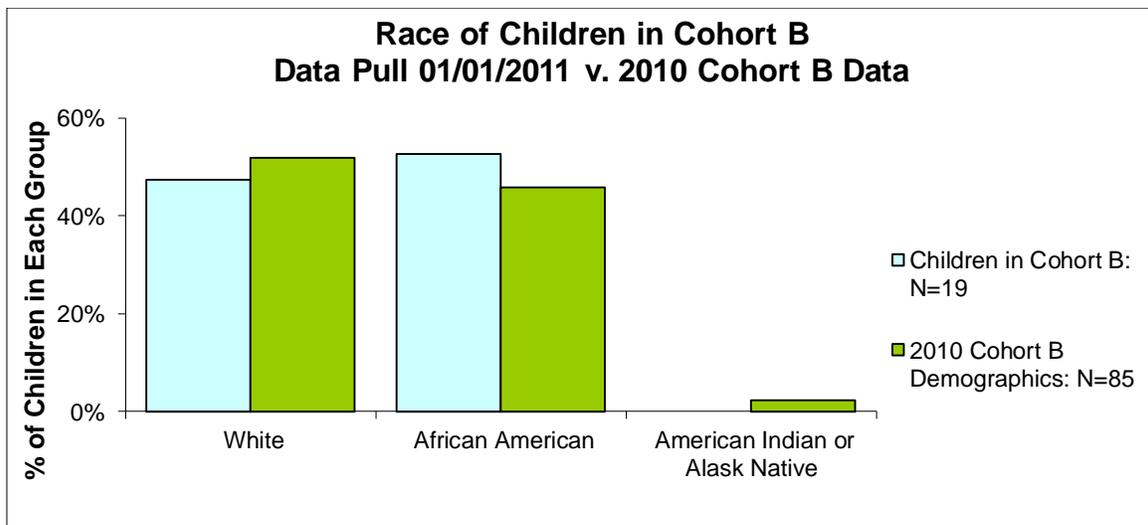
office added review of safe sleep requirements and documentation to policy. It appears in FOM 722-6, Developing the Service Plan, FOM 722-8, Initial Service Plan, FOM 722-9, Updated Service Plan, and FOM 722-8C, Parent-Agency Treatment Plan and Service.

## Appendix I: Cohort B

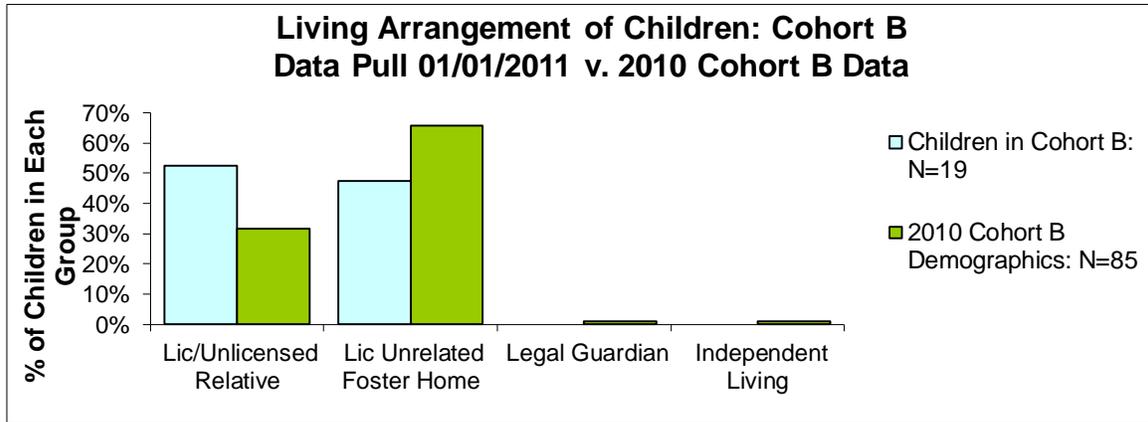
The following five graphs offer a demographic comparison of the children identified in this cohort for this review period to the overall data from 2010. For data accuracy, the demographic information of the nine previously reviewed cases is not duplicated in this report despite the multiple reviews of the same cases. Therefore, the information in this report is derived from 19 case reviews.



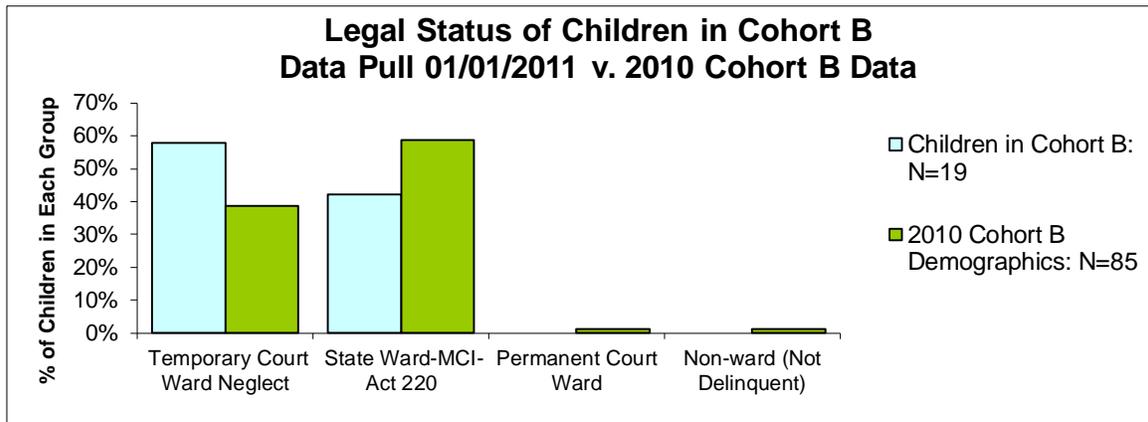
The chart above compares the ages of the identified for Cohort B this quarter to the children from the special case reviews completed in 2010. In 2010, 39 percent of the children fell in the age range of 4 to 7 years old, making it the highest population in this cohort, and significantly higher than those ages represented in the child welfare population, which was 20.3 percent. This age trend continues, as 52.6 percent of the children identified for review for this period fall in the age range of 4 to 7 years old.



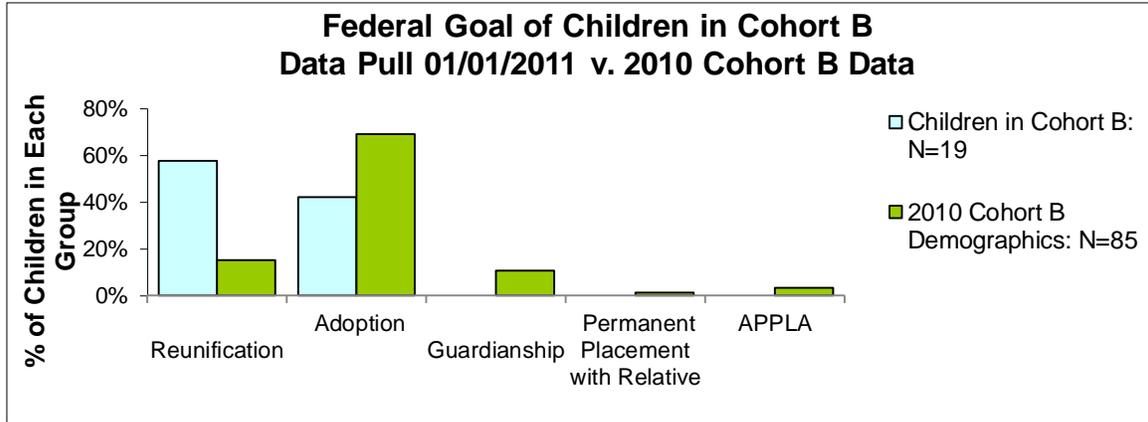
Three races have been represented in this cohort: White, African American, and American Indian/Alaskan Native. Overall, there has been no clear indication that one race was disproportionately represented in this cohort.



Of all the cases reviewed for Cohort B, placement in licensed foster homes and relative homes has consistently remained the prominent living arrangements for children identified for this cohort.

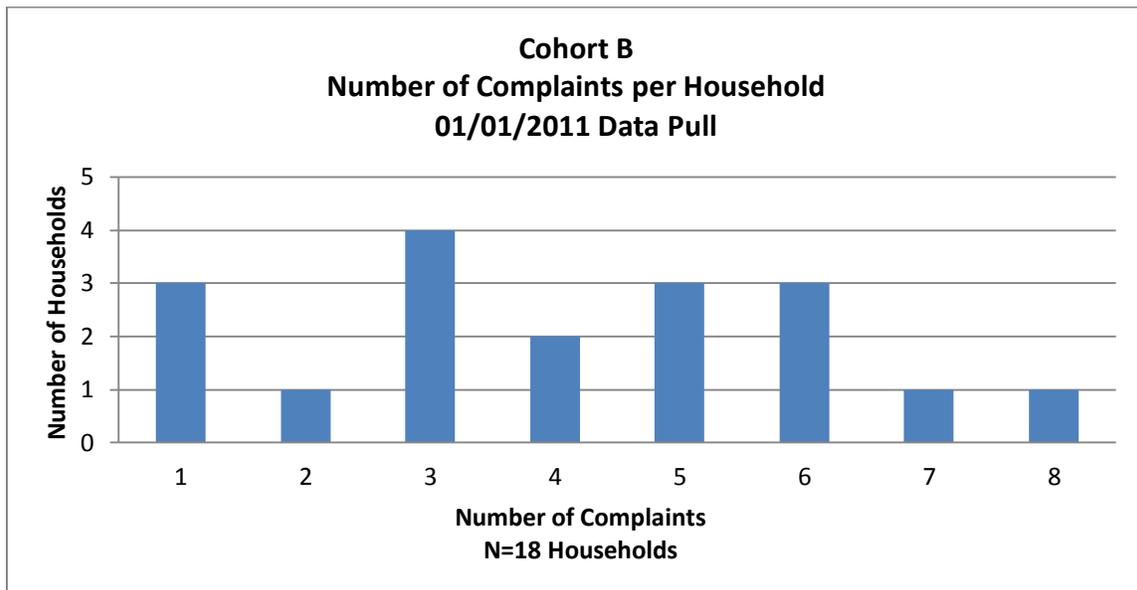


The above graph identifies the legal status of the children identified for this cohort: permanent court wards, temporary court wards, Michigan Children’s Institute (MCI) wards, and non-wards. In 2010, MCI ward was the most prominent legal status at 58.8 percent. However, for this review period, temporary court ward was the most-identified status at 57.9 percent. At this time, the QA unit cannot determine a change in trend from the data for one quarter.



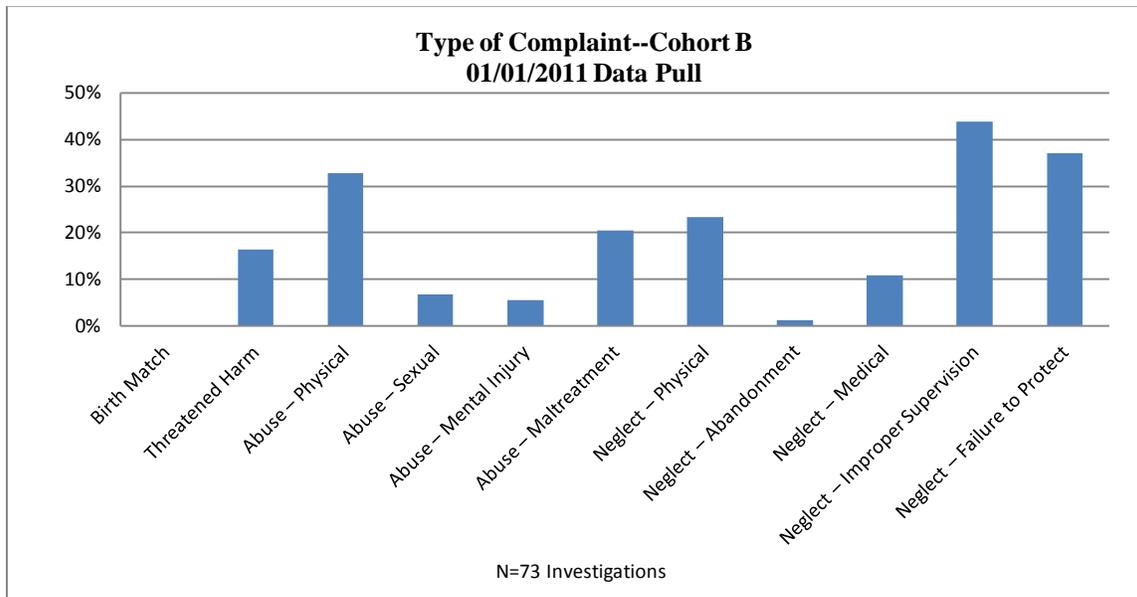
The above graph identifies the federal permanency goals of the children identified for this cohort. Adoption was the most prominent federal permanency goal in 2010. For the current quarter, reunification is the most prominent goal, which correlates to this quarter's high number of temporary court wards.

*The following graphs outline cohort-specific information for the cases reviewed this quarter. The 2011 Quarter One data pull identified 28 individual foster care cases that required review. However, due to siblings placed in the same foster homes, there were only 18 identified households. The data reported below is per child, not per household, and therefore does not accurately represent the number of CPS complaints.*



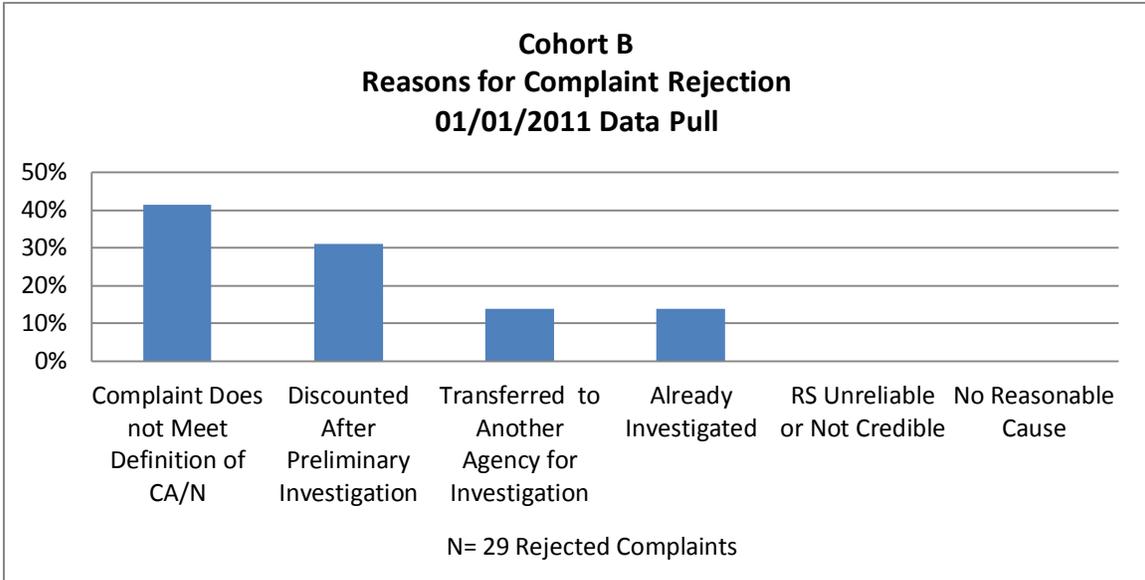
The above graph shows that 73 total CPS complaints were reviewed for the 18 households involved in these cohort reviews. The above graph illustrates that the number of complaints ranged from one to eight per home. Six households had been previously

reviewed in 2010, and new allegations of child abuse/neglect were received since that time. This summary includes information on the new allegations only.

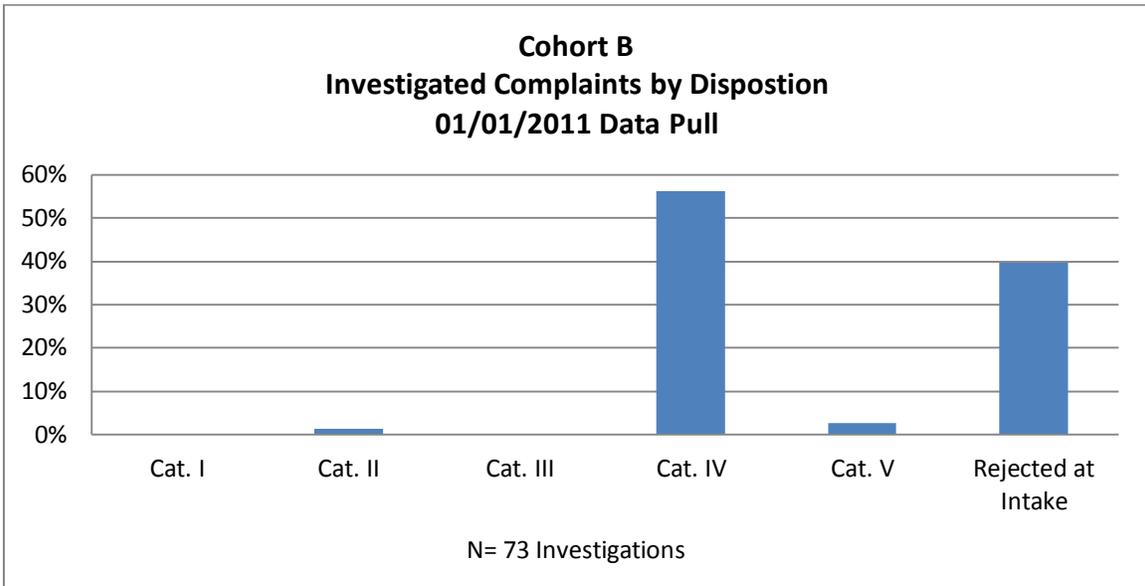


The graph above illustrates the types of allegations contained within the complaints. Within each complaint there was at least one, but sometimes several, different types of allegations of child abuse or neglect. Of the cases reviewed in 2010, physical abuse and improper supervision were the two most frequently noted types of abuse. This trend continues for this quarter's data, with 32.9 percent of the complaints alleging physical abuse, and 43.8 percent of the complaints alleging improper supervision.

The identified living arrangement was with a relative caregiver for 45.2 percent of the reviewed complaints, and with a licensed, unrelated caregiver for in 50.7 percent. The alleged perpetrator was a relative caregiver in 43.8 percent of the complaints and 52.1 percent were licensed foster parents. The complaints were conveyed by mandated reporters 72.6 percent of the time.



Of the 73 complaints identified for Cohort B this quarter, 29 were rejected at intake. CQI analysts found that all rejections met policy criteria and were appropriately rejected. The above graph identifies the reasons for rejections.



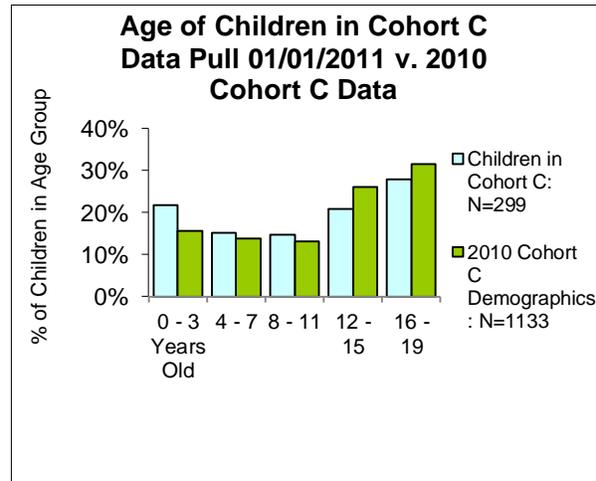
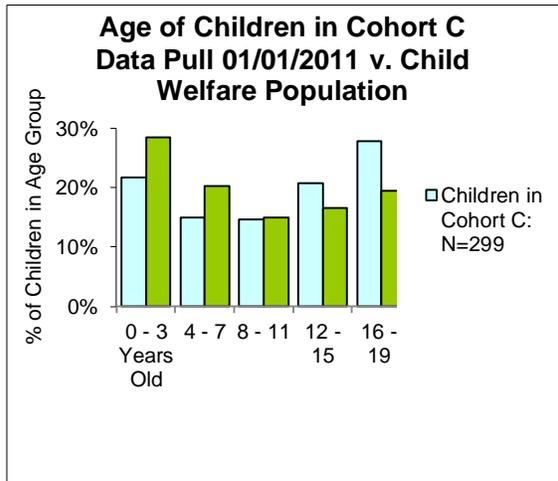
Forty-four complaints received full investigations and disposition. One foster child was involved in an investigation that was opened as a Category II for improper supervision. The caregivers are unlicensed relatives who are in the process of adopting the child and based on the findings from the QA case review, the investigation was deemed to have been completed appropriately and the current placement appears to be in the best interest of the child. Provided services included a Permanency Planning Conference (PPC),

psychological evaluations, and Families Together Building Solutions. A representative from the MCI office was involved in the PPC and in the case planning.

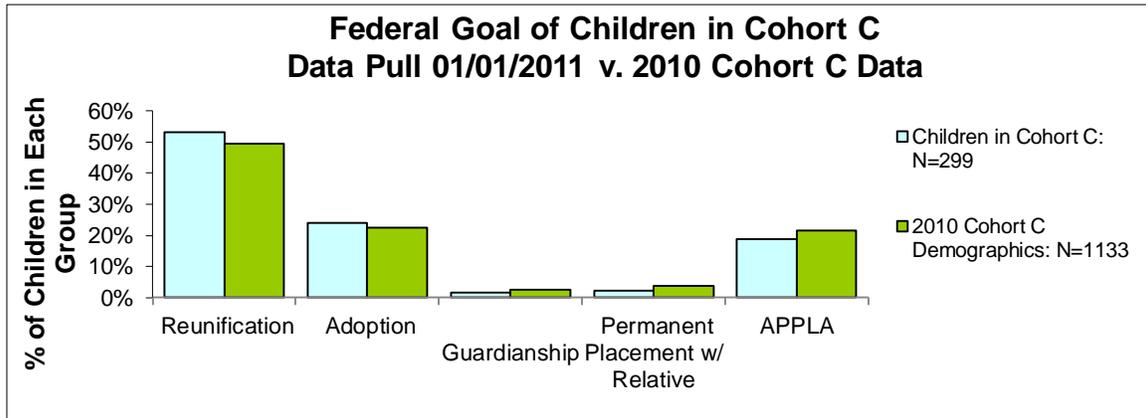
The safety of the child was the primary focus of the QA reviews for this cohort. Of the cases reviewed this quarter, only the above-mentioned Category II case was brought to the attention of the local office management as having a possible safety concern due to the substantiation and subsequent listings on Central Registry. After discussion and verification of a safety plan, it was determined that there was no imminent risk of harm and no further action was taken in the matter.

## Appendix II: Cohort C

The following five graphs offer a demographic comparison of the children identified in this cohort for this review period to the overall demographic data from cohort C youth reviewed in 2010.

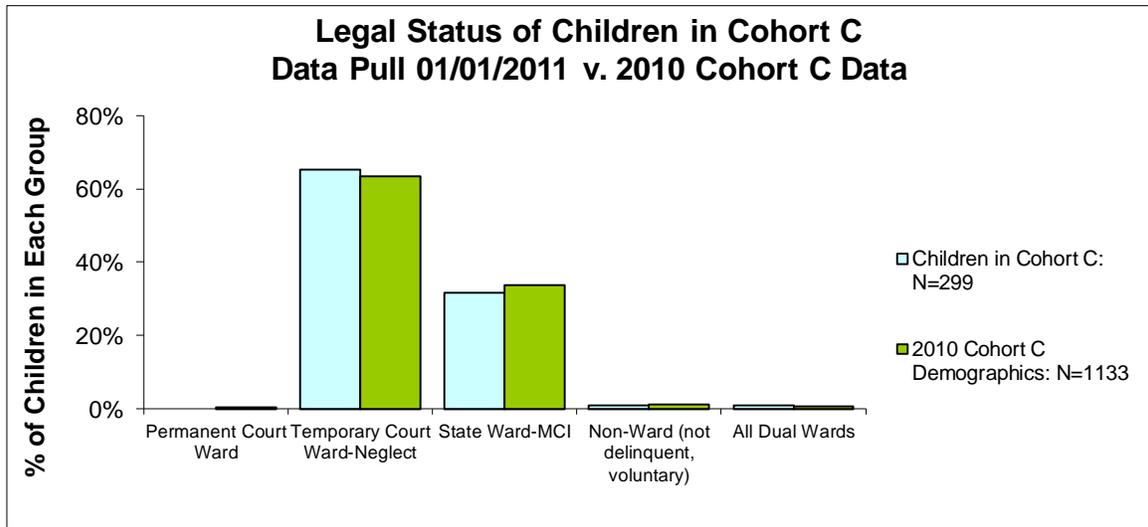


The above graphs illustrates the ages of the children identified in this cohort: the graph on the left compares the data from the current quarter to the child welfare (CW) population. The graph on the right compares the data from the current quarter to the data from 2010. When assessing the data from 2010, the QA unit found that children ages 0-11 are represented at a lower frequency than the children in the state child welfare population. However, youth ages 12 and older are disproportionately represented at a higher rate in comparison to the child welfare population. This trend continued in the 2011 January - March reviews, as noted in the graph on the left.

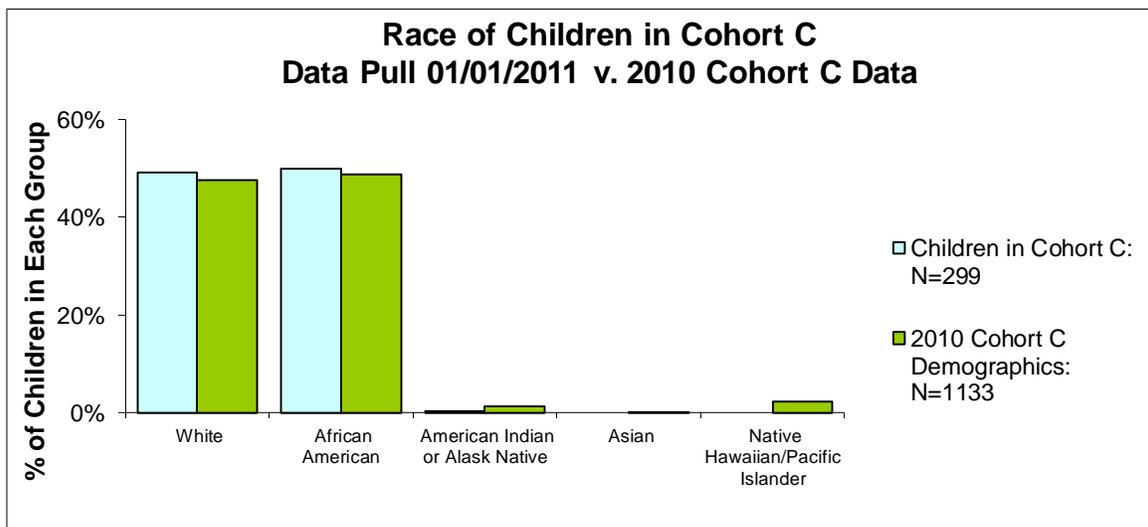


The above graph identifies the federal permanency goals of the children identified for this cohort for the four quarters in 2010. When assessing the data from 2010, the QA unit

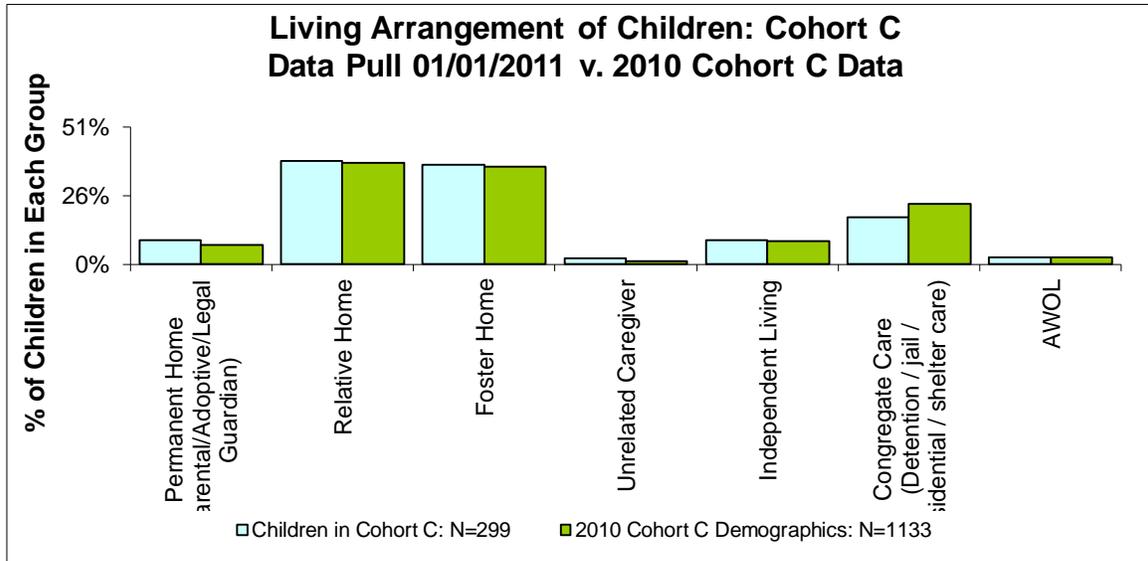
noted a high number of children in this cohort with permanency goals of Another Planned Permanent Living Arrangement (APPLA). While reunification continues to be the prominent permanency goal for the children identified for this cohort, the percentage of children with goals of APPLA has decreased since 2010, from 21.7 percent to 18.7 percent. Furthermore, the number of children with a permanency goal of reunification has increased, and continually grown throughout 2010. This is correlated to the large percentage of temporary court wards in this cohort as illustrated below.



The above graph identifies the legal status of the children identified for Cohort C this quarter versus 2010 data. A legal status of temporary court ward was the prominent legal status for the children identified in this cohort in 2010, and remains consistent this quarter.

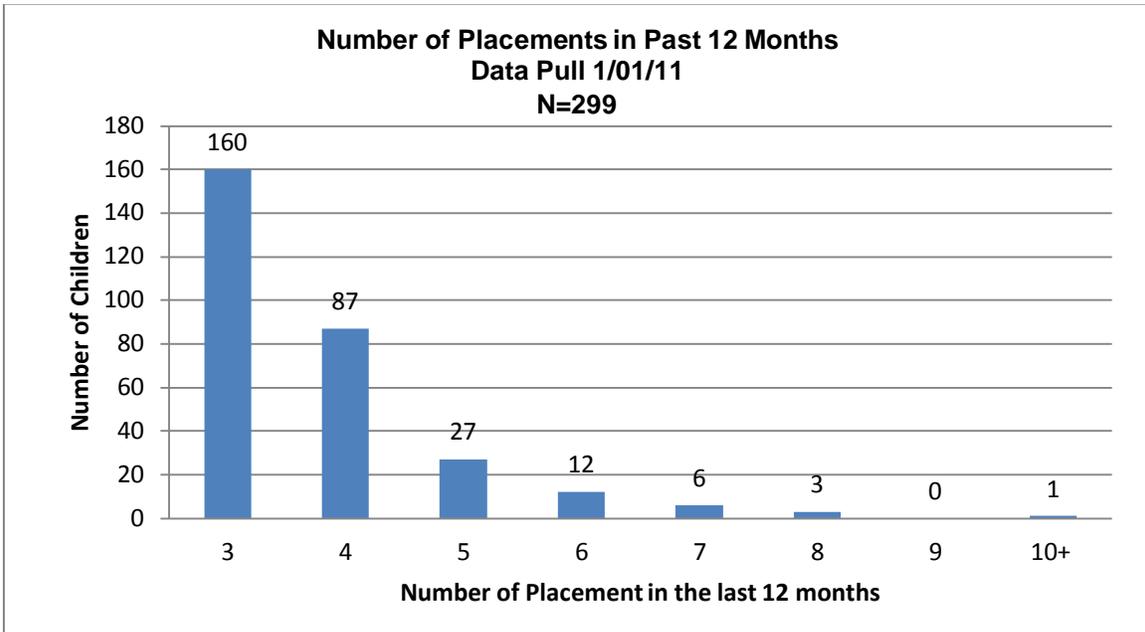


The above graph illustrates the represented races for the children in this cohort. The races of the children identified for this cohort have remained proportionate throughout all reviews. No specific race has been disproportionately represented in this cohort.



The above table compares the living arrangement of each youth at the time of review. As noted in the table, placement in congregate care is consistently the third most frequent placement type for both the current data and the 2010 data. Congregate care includes placements in private child care facilities (residential care). The percentage of youth placed in residential facilities for this cohort this quarter is 16.4 percent. This percentage is significantly higher than the state child welfare population, which is 5.2 percent, but has decreased since 2010. During 2010, the percentage of placements in residential treatment facilities stayed consistent at 20 percent throughout the entire year. At this time, the QA unit cannot determine if the percentage of current placements in residential care will continue to decrease.

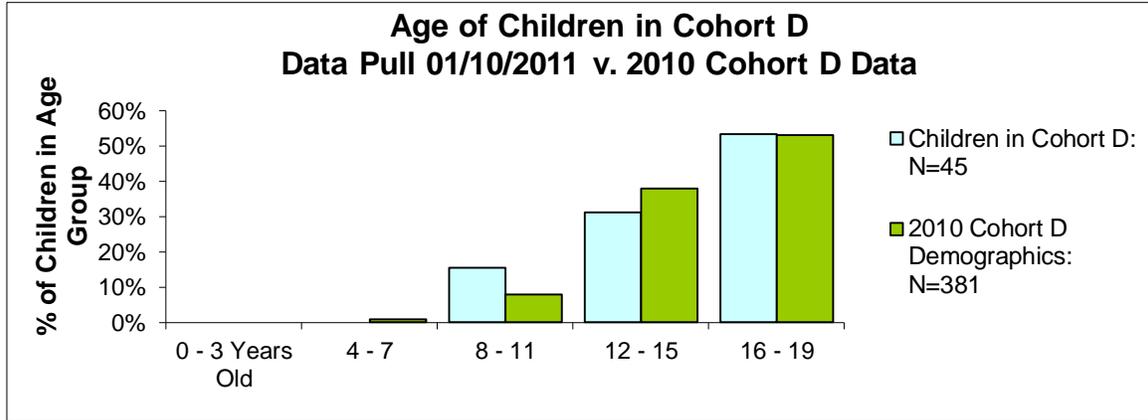
The following graph outlines cohort-specific information for the cases reviewed this quarter.



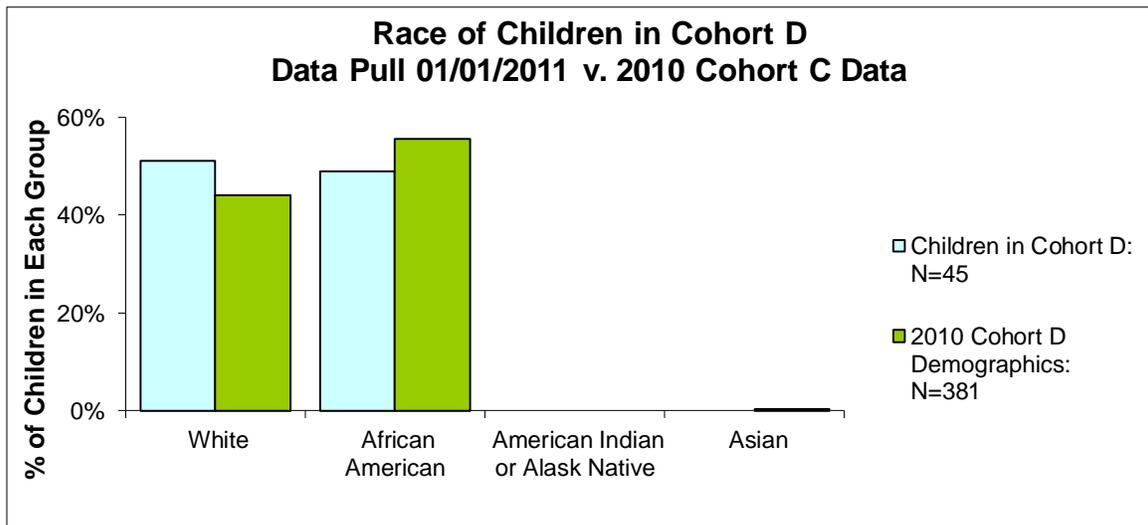
The above table illustrates the number of placements in the past 12 months for the children identified in this data pull. The average length of stay per placement is 4.1 months. The average length of stay per placement in 2010 was four months.

### Appendix III: Cohort D

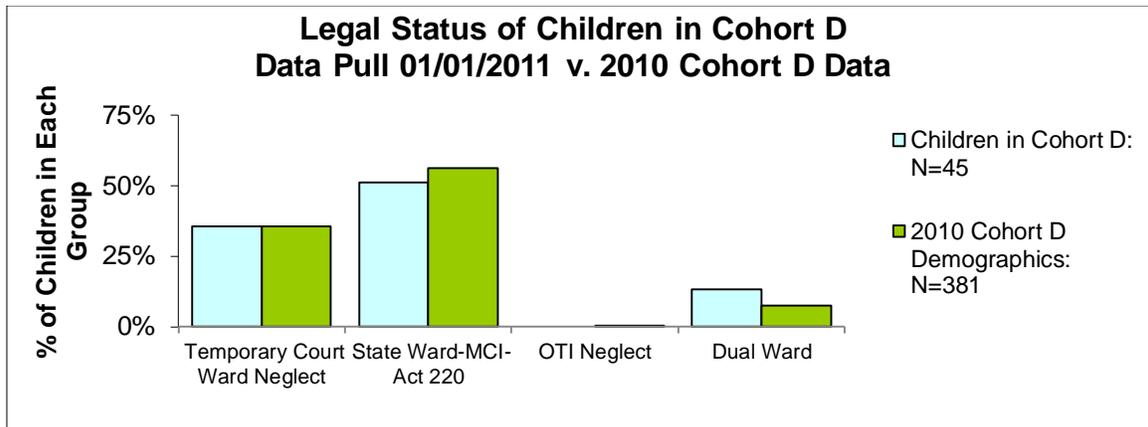
The following graphs offer a demographic comparison of the children identified in this cohort to the data from 2010.



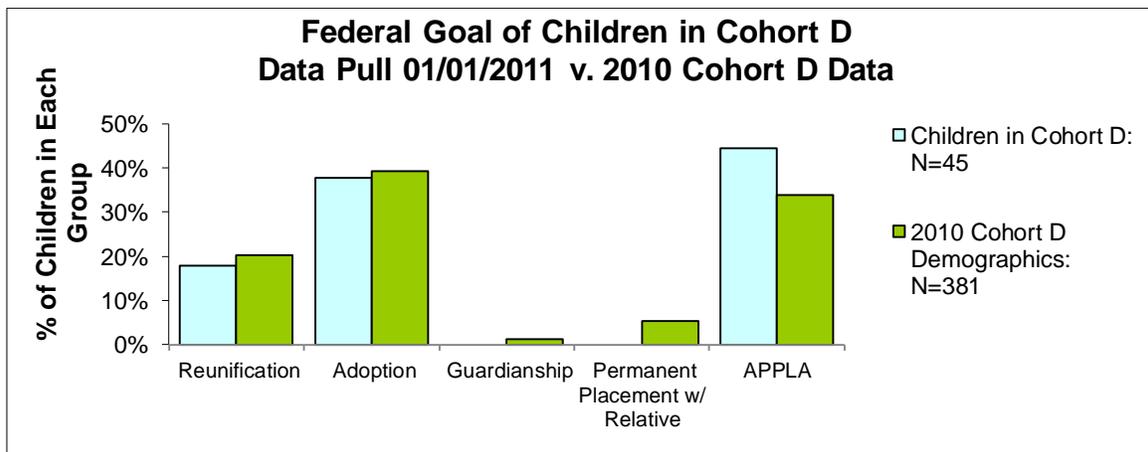
The above graph compares the ages of the youth identified for this cohort from this review period against the ages of the youth for this cohort from 2010. The median age of the children in this group was 16 years throughout 2010 and in this quarter. This is older than all of the other special review cohorts and is eight years older than the median age of the children in the child welfare population, which is eight years. This large gap in median age was a trend throughout all cases reviewed in 2010 and continues into 2011.



The above graph illustrates the represented races for the children in this cohort for this quarter and from 2010. The races of the children identified for this cohort have proportionately remained about the same. No specific race has been disproportionately represented in this cohort.



The above graph compares the legal statuses of the children identified for this cohort in this quarter to the 2010 data. Legal statuses of temporary court ward and state ward-MCI are most often represented. The legal statuses of the children have proportionately remained the same throughout all reviews.



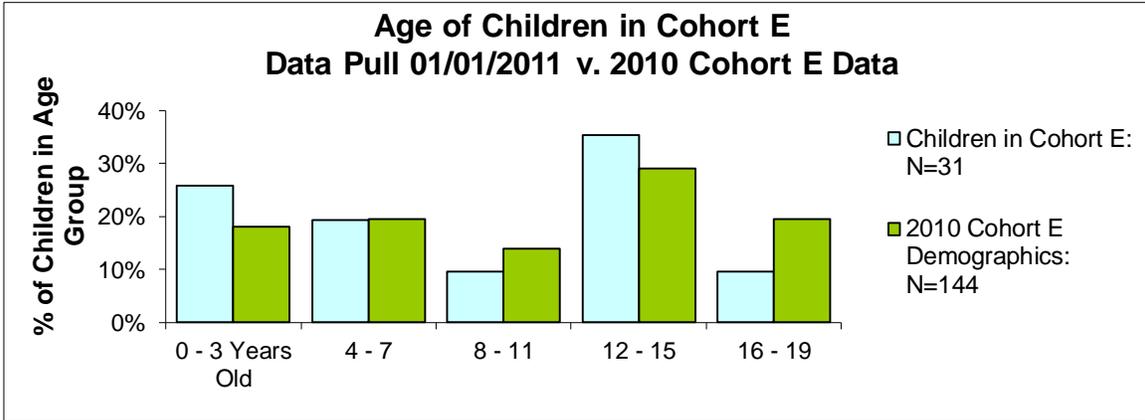
The above graph compares the permanency goals of the children identified for this cohort in this quarter to the 2010 data. APPLA, reunification, and adoption are the permanency goals most often identified. There was an 11 percent increase in youth with the goal of APPLA this quarter.

Because the ages of the children in this cohort are skewed toward older youth, the QA unit completed an age-specific assessment of federal permanency goals by comparing the identified goals of only youth ages 14 and older. When comparing this older cohort population to the total child welfare population of the children 14 and older, the rate of youth with goals of APPLA was disproportionate: 57.1 percent of cohort D youth ages 14

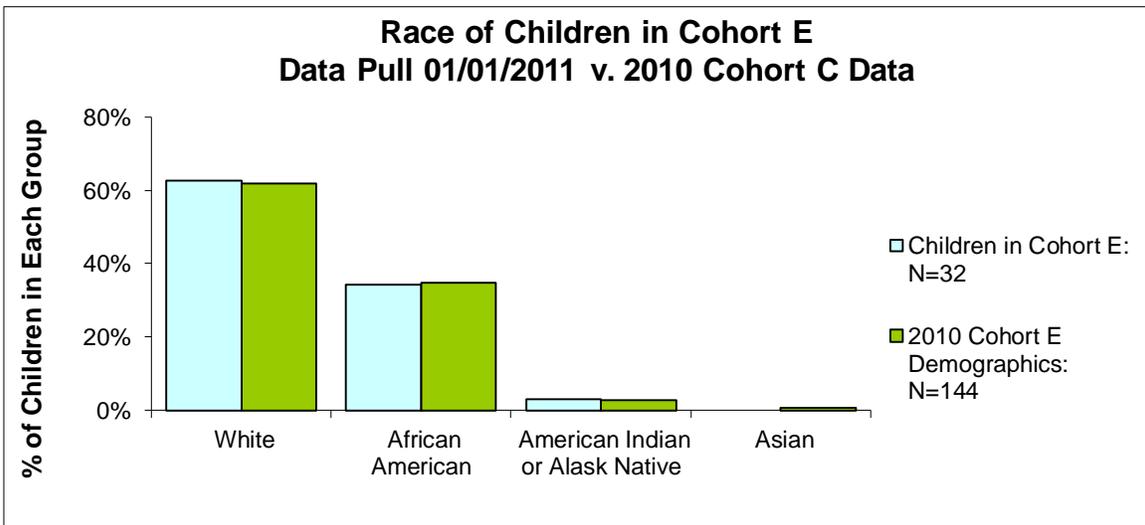
or older have a goal of APPLA compared to 42.5 percent of the youth ages 14 and older in the child welfare population.

### Appendix IV: Cohort E

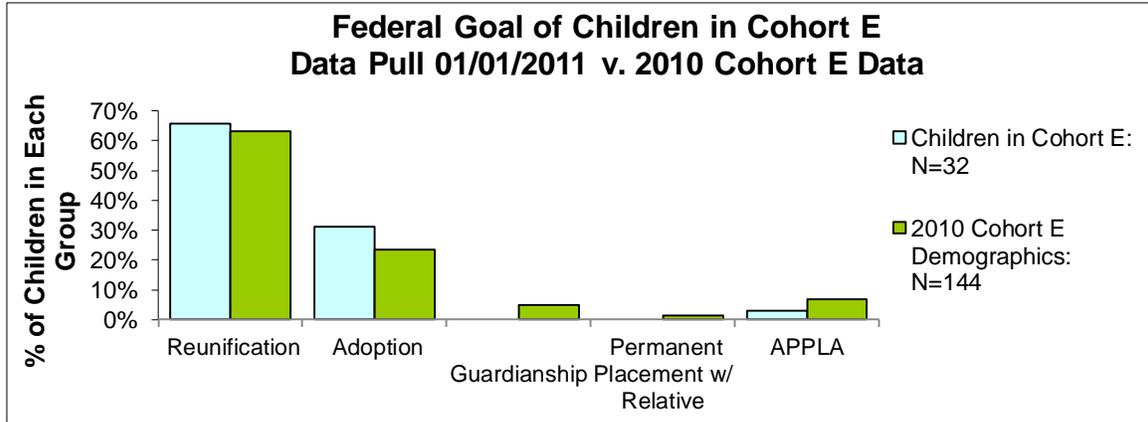
The following graphs offer a demographic comparison of the children identified in this cohort to the data from 2010.



This chart compares the ages of the identified for Cohort E this quarter against the 2010 data. The QA unit has not identified a significant pattern or trend when comparing the ages.

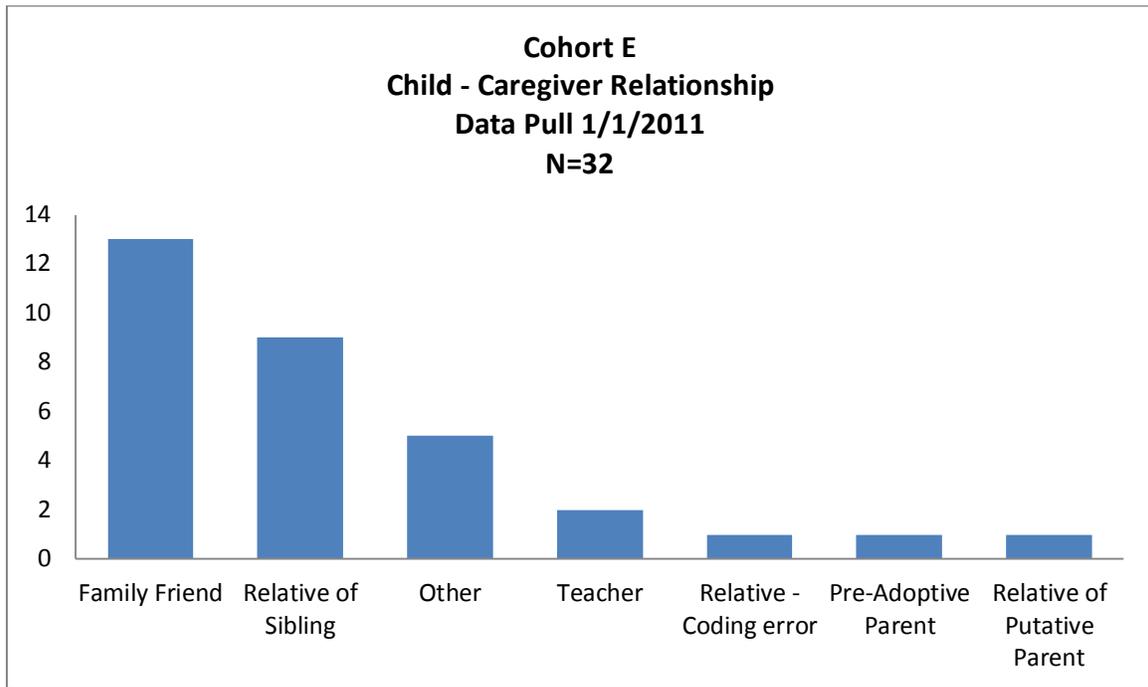


The above chart illustrates the represented races for the children in this cohort. The races of the children identified for this cohort have proportionately remained the same. No specific race has been disproportionately represented in this cohort.



The above graph identifies the federal permanency goals of the children identified for this cohort for 2010. Reunification is consistently the most frequent federal permanency goal for the children identified for this cohort.

*The following graph outlines cohort-specific information for the cases reviewed this quarter.*



The above graph illustrates the child-caregiver relationship for the cases reviewed this quarter. “Family friend” and “relative of sibling” were the two most frequently identified relationships in 2010. This trend continued into 2011, as noted in the above graph.