

Quality Service ReviewMidland and Gladwin Counties

Review Conducted January/February 2019

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Introduction

The Michigan Department of Health and Human Services (MDHHS) Division of Continuous Quality Improvement (DCQI) conducted a Quality Service Review (QSR) to provide a comprehensive view of case practice in Midland and Gladwin Counties on January 28-February 1, 2019, but due to inclement weather and office closures, a second review was extended to February 25-28, 2019.

The QSR is a real-time assessment of how children and their families are benefiting from services, identifying practice strengths as well as opportunities where coordination and collaboration can be improved. The QSR examines the county's progress implementing the MiTEAM case practice model, which focuses on seven competencies: Engagement, Assessment, Teaming, Case Planning, Placement Planning, Case Plan Implementation, and Mentoring using two distinct domains or sets of indicators, "Child and Family Status Indicators" and "Case Practice Performance Indicators." Child and family status is based on a review of the focus child and the parent(s) or caregiver(s) for the most recent 30-day period, unless stated otherwise in the indicator. Practice performance is based on a review of the most recent 90-day period for cases that have been open and active for at least the past 90 days.

The QSR includes in-depth interviews with case participants, stakeholder interviews, focus groups and surveys. While the QSR process allows an opportunity for participants to share their perceptions in individual and focus group interviews, the validity of the statements made are not verified by the reviewer or facilitators. Child welfare communities may use the information gleaned from the focus groups, stakeholder interviews, and the case reviews collectively, to inform improvement efforts. Following the QSR, a Practice Improvement Plan (PIP) is developed by the county director to address identified areas needing improvement.

The QSR uses a six-point rating scale to determine whether an indicator is acceptable. Any indicator scoring at a four or higher is viewed as acceptable. Indicators that are scored as a three or lower are considered unacceptable. All indicators with an overall baseline score of 75 percent or above are identified as a strength and an area to maintain. Any indicator scoring at 74 percent or lower would be included and addressed as an opportunity for improvement.

The rating scale is also broken into three categories: maintain (5-6), refine (3-4) and improve (1-2). The ranges are as follows:

UNACCEPTABLE			ACCEPTABLE		
<u>1</u> – Adverse Status/ Performance:	<u>2</u> – Poor Status/ Performance:	3 – Marginally Inadequate Status / Performance:	<u>4</u> – Fair Status/ Performance:	<u>5</u> -Good Ongoing Status/ Performance:	<u>6</u> – Optimal & Enduring Status /
Status/practice may be absent	Status/practice is fragmented,	Status/practice may be	Status/practice is minimally or	At this level, the status/practice is	Performance:

or substantially	unreliable,	insufficient,	temporarily	functioning	At this level,
inadequate.	lacking	inconsistent, or	adequate to	reliably and	there is
Performance	necessary	not well matched	meet short-	appropriately	exceptional,
may be missing	intensity, or	to need.	term needs or	under changing	steady, and
or not done.	validity.	Performance may	objectives.	conditions and	effective
Strategies may	Performance	be falling below	There is a	over time.	status/practice
be inadvisable	warrants	the acceptable	reasonable	Performance has	in the function
and in need of	prompt	range and there is	prospect of	continued to be	area.
immediate	attention and	a need for	achieving the	generally effective	Performance
action to	improvement.	adjustment at the	desired	and dependable	has shown an
address the		present time.	outcomes if this	with signs of	enduring
situation.			performance	stability being	pattern of
			level continues	apparent.	stability.
			or improves.		
IMPROV	'EMENT	REFINEMENT		MAINTENANCE	

Michigan has developed a four-prong approach to illustrate the connection between the implementation of the MiTEAM case practice model to positive outcomes for children and families in the areas of safety, permanency and well-being for children and families. The four prongs include the use of the evaluation to MiFidelity, results from a Quality Service Review, measurement of Key Performance Indicators and the Child and Family Service Review Outcomes.

The QSR findings in concert with these metrics support local offices and the state to understand the strengths and opportunities within a child welfare community.

When child welfare members implement the key behaviors or activities of the practice model and track key performance indicators on a regular basis, the direct outcomes experienced by children and families as measured by the federal Child and Family Services Review in the areas of safety, permanency and well-being can be achieved.

Midland and Gladwin Counties are made up of small rural communities. During the summer months, these counties are known for their outdoor recreation and vacation destinations. Dow Chemical Company has multiple locations in Midland County and is the largest employer in this dual county area. Dow Chemical Company is a support to the community and provides many charitable contributions to the child welfare community. Midland and Gladwin Counties are part of Business Service Center (BSC) 2 situated in the northern middle part of the state. Each county is assigned the same director and share one program manager.

At the time of the initial review in January 2019, Midland and Gladwin Counties were providing foster care services to 116 and 27 children respectively¹. In Midland and Gladwin Counties the number of children in care at the time of the review accounted for approximately one percent of the total number of children in the State of Michigan's foster care population. Children under the age of nine represented 65 percent of the foster care population in Midland County and 59 percent in Gladwin County¹.

Findings

Fifteen cases, ten Midland County and five Gladwin County, were randomly selected from a sample that was stratified based on children's age, placement type and case status. In Midland County eight foster care and two child protective services (CPS) on-going cases were reviewed. In Gladwin County, three foster care and two child protective services (CPS) on-going cases were reviewed. In Midland County, the case reviews included 70 interviews. In Gladwin County the case reviews included 34 interviews. A total of 104 interviews were completed over the two QSR weeks in both locations.

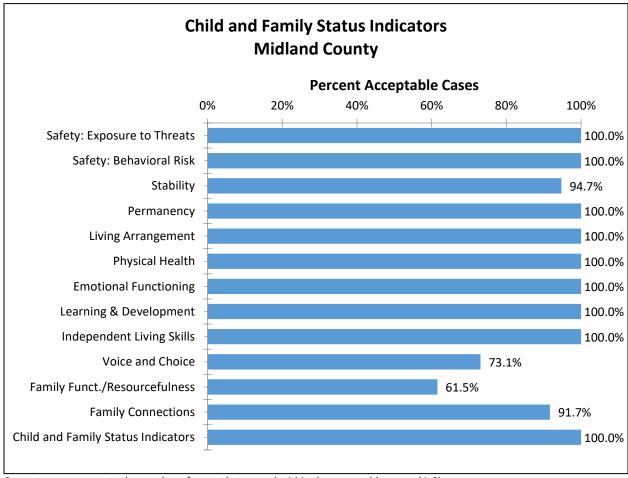
QSR weeks in both locations.	National Country	Gladwin County
	Midland County	-
Age of Children	Number of Cases	Number of Cases
0 to 4 years old	2	2
5 to 9 years old	2	1
10 to 13 years old	3	2
14 to 17 years old	3	0
18 to 21 years old	0	0
TOTAL	10	5
Time in Care	Number of Cases	Number of Cases
7 to 9 months	4	2
10 to 12 months	1	0
13 to 18 months	1	2
19 to 36 months	2	1
37 months or more	2	0
TOTAL	10	5
Type of Placement	Number of Cases	Number of Cases
Parental Home	3	2
Unlicensed Relative	1	0
Licensed Relative	3	0
Unrelated Licensed Foster Home	3	2
Pre-Adoptive	0	1
Residential	0	0
Independent Living	0	0
TOTAL	10	5

¹ Data provided in the Monthly Fact Sheet January 2019 produced by the Data Management Unit within the Division of Continuous Quality Improvement.

MDHHS Division of Continuous Quality Improvement, January and February 2019

Child and Family Status Indicators

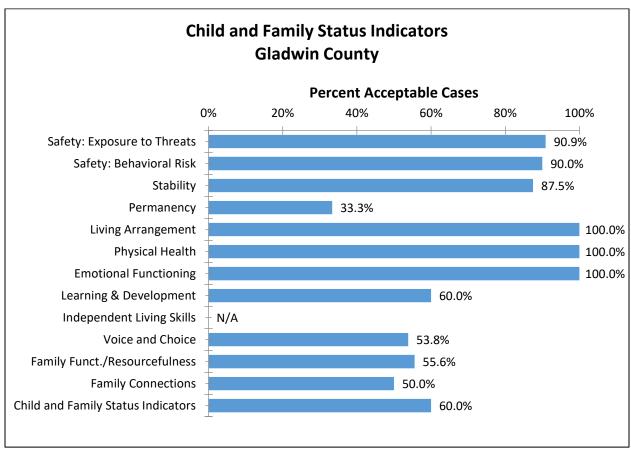
Child and Family Status Indicators provide a picture of where the child and the family are functioning at the time of the review. The length of time a case is open can impact a rating and should be considered when reviewing the overall score. Child and Family Status Indicators concentrate on the outcomes of safety, well-being and permanence. The following scores reflect only those that fell in the acceptable (4-6) range.



Percentages represents the number of cases that scored within the acceptable range (4-6)

In Midland county, the children's current living arrangements were found to be safe, the least restrictive setting and appropriate to meet the focus children's needs. Children were found to be healthy and receiving regular medical and dental appointments. Children are stable in their current placement and education setting. Children are placed in appropriate school settings and receiving services as needed. Most individuals interviewed expressed that they did feel as though they were included and had a voice in the planning process. Family connections are being maintained and contact is occurring frequently. It appears some barriers exists for parents. However, parents reported the services provided were helpful. A vast number of parents struggle with substance abuse. A need for additional substance abuse services was identified. The lack of this resource may tie directly in with the lower assessed score of 61.5

percent with Family Functioning and Resourcefulness. Permanency was assessed extremely high at 100 percent. This demonstrates that legal permanency is being achieved timely and children are establishing long-term relationships with their caregivers. Although permanency is occurring timely, children are returning or had previous contact with the child welfare community. In Midland, 50 percent of cases reviewed had previous contact with either an open ongoing CPS case or foster care case with in the last three years.

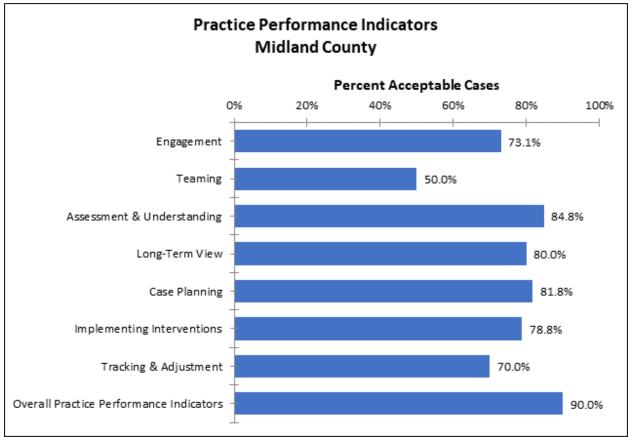


Percentages represents the number of cases that scored within the acceptable range (4-6).

Much like Midland County, in Gladwin County children were safe, with minimal risk being identified in the home, school or other settings. Children remain stable in their home and educational settings. Children are healthy and receiving all the needed medical and dental services. In Gladwin County, children are enrolled in school but may be missing some needed services leading to a lower assessed score of 60 percent in Learning and Development. Contacts between family members are not occurring consistently. Most people interviewed did not feel they had a voice in the planning process. Some felt like workers listened to them but failed to hear or implement what they were expressing. The most significant difference between the two counties was seen in the area of permanency. Gladwin County was assessed at 33.3 percent. Challenges were noted with delays in the court proceedings. Parents were identified as struggling with substance abuse or mental health needs which often take a longer period to service.

Practice Performance Indicators

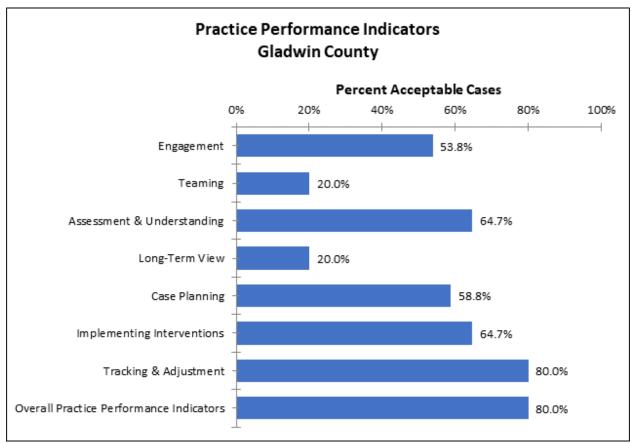
Practice Performance Indicators are a set of activities that correlate with the seven MiTEAM competencies and is the primary tool used to measure how well the child welfare community is implementing the case practice model. The practice indicators are assessed based on (1) whether the strategies and supports are being provided in an adequate manner; (2) whether the strategies and supports are working or not based on the progress being made; and (3) whether the outcome has been met. The following scores reflect only those that fell in the acceptable (4-6) range.



Percentages represents the number of cases that scored within the acceptable range (4-6).

Midland County scored extremely high in most indicators leading to a high assessed overall score. Although the overall score is not an average of assigned practice performance indicators, it is a rating based on patterns of case practice observed with in the last 90 days. Some practice indicators can be scored in the improvement or refinement zone and still be assessed with an overall acceptable score. This score does not indicate that improvement and refinement is not needed. A closer evaluation will pinpoint the practice areas to be addressed. In Midland County, the areas of Engagement, Teaming, and Tracking and Adjustment all scored as an opportunity for improvement.

Teaming appears to be one area where challenges exist. In most cases, a formation of the team had been established; however, in the areas of functioning and coordination improvement was needed. When team meetings are held, key members are not participating. Communication between team members is lacking and important information is not being shared. One example offered during focus groups was drug screen results are not shared with service providers. This was identified as crucial information in the treatment process. But team members do not learn about this information until a court hearing. This can cause barriers in the case planning process.



Percentages represents the number of cases that scored within the acceptable range (4-6).

In Gladwin County, the areas of Engagement, Teaming, Assessment and Understanding, Long-Term View, Case Planning, and Implementing Interventions all scored as an opportunity for improvement. A need for additional parenting classes, substance abuse services and mental health services was identified. Many individuals identified that although services did exist in Gladwin County, they are often shared with multiple counties and wait lists can be long. These barriers present challenges in the case planning and implementing interventions processes. Staff are forced to use the available services and not necessarily the most appropriate service. Parents or children's needs persist often resulting in a poor Long-Term View. With barriers to providing a positive Long-Term View, family often have multiple contacts with MDHHS and return to the child welfare system. In Gladwin County, 80 percent of cases reviewed had

previous contact with either an open ongoing CPS case or foster care case within the last three years.

Currently, one of the most significant challenges for Midland and Gladwin County is staff turnover. Staff reported that supervisors are very supportive. Staff also expressed concern that there does not appear to be a plan on how to resolve this barrier. Staff turnover was also reported among the private agency partners. Staff turnover has had a direct impact on workers ability to engage with children and families. Many children interviewed reported having multiple workers assigned to their case which posed a challenge with building a relationship and trust. These are key components to engagement.

A strong foundation for teamwork has been established through the collaboration with law enforcement and service providers in Midland and Gladwin Counties. Strong and experienced foster parents were identified as a strength by multiple focus groups. One of the cross-cutting issues identified by the State of Michigan resulting from the Child and Family Service Review (CFSR) was a need for overall engagement. But more specifically, engagement with fathers. In the cases reviewed, Midland and Gladwin Counties demonstrated a uniqueness with their ability to work directly with fathers. This differs from other statewide trends observing an increase in all indicators for mothers versus scores assessed for fathers and is an identified strength for these counties.

	Midland County		Gladwin County	
Child and Family				
Status Indicators	Father	Mother	Father	Mother
Voice and Choice	100.0%	50.0%	66.7%	33.3%
Family Functioning				
and Resourcefulness	75.0%	66.7%	66.7%	50.0%
Family Connections	100.0%	75.0%	100.0%	50.0%

Percentages represents the number of cases that scored within the acceptable range (4-6).

	Midland County		Gladwin County	
Practice Performance				
Indicators	Father	Mother	Father	Mother
Engagement	100.0%	66.7%	66.7%	33.3%
Assessment and				
Understanding	100.0%	71.4%	66.7%	25.0%
Case Planning	100.0%	71.4%	66.7%	25.0%
Implementing				
Interventions	100.0%	57.1%	66.7%	25.0%

Percentages represents the number of cases that scored within the acceptable range (4-6).

Summary from Focus Groups and Stakeholder Interviews

Midland and Gladwin Counties

Six individual stakeholder interviews were conducted and seven focus groups with a total of 51 participants. The findings from the individual focus groups are outlined in Appendix A and B.

Strengths:

- Teamwork occurs between both the Midland and Gladwin offices. Staff support each other when needed. Positive work environment for staff, supervisors and private partners.
- A strong and supportive collaboration with the local Community Mental Health providers exists and is useful in completing assessments and implementing services.
- The assigned position of the community resource worker is helpful to staff and families. The community resource worker assists in building partnerships and collaboration with private partners and service providers.

Opportunities for Improvement:

- The limited amount of resources (mental health, substance abuse, parenting classes) often leads to lengthy wait lists and presents challenges for team members and families.
- Additional foster homes are needed to ensure children can remain in the community.
- Substance abuse is prevalent in the counties and often lead to other concerns such as: domestic violence, mental health and neglect.

Ongoing Monitoring Systems

The QSR is one-step in measuring and monitoring the ongoing progress within the statewide child welfare system. Although the QSR uses a unique and qualitative approach, other monitoring systems examine the compliance of statewide standards.

The Fidelity Tool is used to ensure that the main competencies of the case practice model: teaming, engagement, assessment and mentoring, are being implementing and used effectively by field staff.

Key Performance Indicators (KPI) are identified areas of compliance used to benchmark progress within the child welfare system statewide. All these areas of measurement are used to lead to the desired outcomes as measured in the CFSR.

The CFSR assesses the outcomes of services provided to children and families. The CFSR examines systemic factors that affect the ability of the state to help children and families achieve positive outcomes. The CFSR includes a review of the Michigan AFCARS and NCANDS data, statewide self-assessment, case reviews conducted by federal and state reviewers and interviews with key stakeholders.

The CFSR assesses the following areas to promote child safety, permanency, and well-being outcomes:

- Safety Outcome 1: Children are first and foremost, protected from abuse and neglect.
- Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.
- Permanency Outcome 1: Children have permanency and stability in their living situations.
- Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.
- Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.
- Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.
- Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs.

The CFSR focuses on the entire statewide welfare system and examines the effectiveness using the following seven systemic factors:

- Statewide information system
- Case review system
- Quality assurance system
- Staff and provider training
- Service array and resource development
- Agency responsiveness to the community
- Foster and adoptive parent licensing, recruitment, and retention

The University of Michigan with the collaboration of the MDHHS has developed a monitoring tool. The CFSR Observed Performance dashboard is a useful resource in monitoring county and BSC performance. The dashboard allows users to monitor Michigan's performance on CFSR measures by county and BSC, on a monthly basis. The dashboard can be found at http://ssw-datalab.org/project/cfsr-in-michigan/.

Observed Performance Behaviors Measuring and Monitoring Progress - Midland KEY PERFORMANCE INDICATORS CFSR OUTCOMES Data Source: CSA MMR Data Source: U of M **Practice Model** (September 2018, October 2018, November 2018 Average) **Quality Performance** As of September 2018 Competencies **QUALITY SERVICE REVIEW FIDELITY** Face to Face KPI 1 Safety: Maltreatment in Data Source: QSR Results **CPS Initial Worker Contacts** Foster Care Data Source: Initial face-to-face contacts required for CPS MiTEAM Fidelity Data not available investigations Tool Coming Soon Midland 95% State 93% Safety: Recurrence of **QSR: Selected Practice Performance Indicators** Face to Face KPI 2 Maltreatment Worker-Child Social Work Contacts Engagement Midland State of MI Data not available Child welfare professionals visiting children as required. FY19 FY18 Midland CPS 91% State 58.8% Engagement 73.1% 89.61% Midland CFC 96% State 89% Permanency in 12 Teaming 50.0% 25.0% Months for Children Assessment & Understanding 55.1% 84.8% KPI3 **Entering Foster Care** * Timely Initial Home Studies Long-term View 80.0% 50.0% & Licensing Waivers Midland 6.9% Case Planning 81.8% 58.3% Timely initial home studies and licensing waivers for 28.9% State children placed in unlicensed relative placements. Implementing Interventions 78.8% 56.3% Tracking & Adjustment 43.8% 70.0% **Teaming** Permanency in 12 KPI 4 Medical & Dental Months for Children in Children in care are provided updated and current Foster Care 12 to 23 medical, dental and mental health examinations and 86.36% when necessary, appropriate follow uptreatment. Months Midland 72.2% **QSR: Child and Family Indicators** Midland 94% State 83% State 45.2% Midland State of MI Timely & Thorough KPI 5 FY19 FY18 Permanency in 12 **Completion of Case Plans** Months for Children in Assessment •Safety: Exposure to Threat 100% 94.1% Completion of timely and thorough case plans. Foster Care 24 Months Safety: Behavioral Risk 100.0% 100% Midland CPS 90% State 84% or Longer Stability 94.7% 81.8% Midland CFC 85% State 86% Midland 28.6% 71.08% Permanency 100% 72.7% State 40.4% Living Arrangement 100% 100% KPI 6 Parent/Child Visitation Physical Health 100% 100% Child welfare professionals will ensure children with a Re-entry into Foster Emotional Functioning 100% 100% reunification goal will visit with their parents if Care in 12 Months Learning & Development 100% 81.3% available. Midland 0.0% Mentoring Independent Living Skills 100% NA Midland 75% 44% State 4.9% State •Voice & Choice 73.1% 48.5% **Formal 90 Day 80.19% Family Function & Resource 61.5% 52.4% KPI 7 Placement Stability **Discharge Planning for Older Youth** Family Connections 91.7% 55.0% Midland 2.3 Engagement of older youth aging out of foster care system in a formal 90-day discharge planning meeting 3.5 State to support their transition to independence. * Data not yet available Midland 100% State 53% Michigan Strengthening Our Focus -- March 2019 ** Data source Infoview

Observed Performance **Behaviors Measuring and Monitoring Progress - Gladwin** KEY PERFORMANCE INDICATORS CFSR OUTCOMES Data Source: CSA MMR Data Source: U of M **Practice Model Quality Performance** (September 2018, October 2018, November 2018 Average) As of September 2018 Competencies **QUALITY SERVICE REVIEW FIDELITY** KPI 1 Face to Face Safety: Maltreatment in Data Source: QSR Results **CPS Initial Worker Contacts** Foster Care Data Source: Initial face-to-face contacts required for CPS MiTEAM Fidelity Data not available investigations Tool Coming Soon Gladwin 99% State 93% Safety: Recurrence of OSR: Selected Practice Performance Indicators Face to Face KPI 2 Maltreatment **Worker-Child Social Work Contacts** Engagement Gladwin State of MI Data not available Child welfare professionals visiting children as required. FY19 FY18 Gladwin CPS 98% State 80% Engagement 53.8% 55.8% 95.18% Gladwin CFC 96% 89% Permanency in 12 State Teaming 20.0% 25.0% Months for Children Assessment & Understanding 64.7% 55.1% * Timely Initial Home Studies **Entering Foster Care** Long-term View 20.0% 50.0% & Licensing Waivers Gladwin 44.4% Case Planning 58.8% 58.3% Timely initial home studies and licensing waivers for State 28.9% Implementing Interventions 64.7% 56.3% children placed in unlicensed relative placements. Tracking & Adjustment 80.0% 43.8% **Teaming** Permanency in 12 KPI4 Medical & Dental Months for Children in Children in care are provided updated and current Foster Care 12 to 23 medical, dental and mental health examinations and 93.94% Months when necessary, appropriate follow uptreatment. Gladwin 54.5% **QSR: Child and Family Indicators** Gladwin 98% State 83% State 45.2% Gladwin State of MI Timely & Thorough KPI 5 FY19 FY18 Permanency in 12 **Completion of Case Plans** Months for Children in Assessment Safety: Exposure to Threat 90.9% 94.1% Completion of timely and thorough case plans. Foster Care 24 Months Safety: Behavioral Risk 90.9% 100% Gladwin CPS 98% State 84% or Longer Stability 87.5% 81.8% Gladwin CFC 86% State 86% 92.25% Gladwin 60.0% Permanency 33.3% 72.7% State 40.4% Living Arrangement 100% 100% Parent/Child Visitation Physical Health 100% 100% Child welfare professionals will ensure children with a Re-entry into Foster Emotional Functioning 100% 100% reunification goal will visit with their parents if Care in 12 Months Learning & Development 60.0% 81.3% available. Gladwin 0.0% Mentoring Independent Living Skills N/A NA Gladwin 72% State 44% State 4.9% Voice & Choice 53.8% 48.5% **Formal 90 Day 94.17% Family Function & Resource 55.6% 52.4% Placement Stability **Discharge Planning for Older Youth** Family Connections 50.0% 55.0% Gladwin 2.3 Engagement of older youth aging out of foster care system in a formal 90-day discharge planning meeting State 3.5 to support their transition to independence. * Data not yet available Gladwin State 53% Michigan Strengthening Our Focus -- March 2019 ** Data source Infoview

Next Steps

Midland and Gladwin's County child welfare director, in partnership with the child welfare community will utilize the results of the QSR focus groups and practice performance measurements to develop a Practice Improvement Plan (PIP) to address identified areas needing improvement. The BSC director will provide oversight to the county director on the development of the plan, its implementation and tracking of progress. A copy of the final approved plan will be provided to the director of the Division of Continuous Quality Improvement, as well as the executive director of the Children Services Agency.

It is recommended that Midland and Gladwin Counties use their Continuous Quality Improvement (CQI) team to explore ways to address staff retention and staff training. Some other areas of focus for the team may be:

- An ongoing training and implementation of the case practice model. Focus should be in the areas of teaming, case planning and service implementation. This may assist in closing the gap between the Fidelity scores and the scores of the QSR and CFSR. Building on each county's identified strengths could be beneficial in the training process.
- Specialized focus on the teaming process. Midland and Gladwin Counties have strong
 foundations of collaboration with many community partners. Family team meetings are
 being held but key members are not being included. Teams are working individually, and
 communication is lacking. Working on the key components of the teaming process will
 assist with improved engagement of the current partnerships and building additional
 collaborations and positive outcomes for children and families. Developing plans that
 will allow for the meeting location to be convenient and timeframes for all team
 members to participate.
- Active efforts to engage mothers in the case planning has been ongoing. A focus on engaging mothers and maintaining family connections should be a priority. Identify challenges and develop steps for team members to decrease these barriers.
- Address the identified service gaps, including the need for substance abuse treatment, mental health services and parenting classes. Re-evaluate county service contracts and adjust as needed.

Appendix A Midland & Gladwin County Interviews and Focus Groups

Individual Stakeholder Interviews

Individual stakeholder interviews were held with the MDHHS county director, presiding family court judge (Midland), presiding family court judge (Gladwin), referee (Midland), program manager, and a foster parent.

<u>Strengths:</u> There is a strong foundation of resources due to the presence of Dow Chemical in Midland allowing the county to implement various programs. Good collaboration with Community Mental Health and "Baby Court" occurs in both counties.

Workers care about their clients and work hard to ensure they are provided with quality services. Staff members have vast knowledge and experience.

<u>Opportunities for Improvements:</u> Struggles exist with private foster care agencies in both courts because the court would like a higher quality of work and additional court preparation which may be related to the fact that they are not local. Additional resources are needed, including housing, parenting classes, trauma informed and psychological services.

Focus Groups

The QSR process allows an opportunity for participants to share their perceptions in individual and focus group interviews. It should be noted that the validity of the statements made during group sessions are not verified by the group facilitators, but rather the information is intended to be an opportunity for further exploration by the county child welfare leadership. Focus groups were conducted with the following groups:

Foster Youth

A total number of nine youth participated and provided feedback in this focus group.

<u>Strengths:</u> A strength identified by all youth was the opportunity to participate in the Michigan Youth Opportunity Initiative (MYOI) group. They explained that it provides support from other peers and opportunities to learn new things. The group provided an example of the group going to a Detroit Pistons game and learning new skills like cooking, pottery and art.

Youth reported seeing their attorney prior to court hearings and they feel heard.

Youth reported being placed with siblings. Some reported if they weren't placed with siblings, they had visits.

Youth reported being invited to and attending family team meetings. Most youth reported that they were allowed to offer input during the meeting.

<u>Opportunities for Improvement:</u> Some youth reported that sibling visitation or contact stopped when they weren't placed with siblings.

Some youth reported disagreeing with case plans because of inaccurate information that was provide and being "forced" to participate in a service they did not believe they needed.

Youth discussed that they are not allowed to have friends over to the foster home like the foster family's biological children.

MDHHS Child Welfare Supervisors (CPS and Foster Care)

A total of five individuals participated in this focus groups, including two CPS supervisors, two MDHHS foster care supervisors, and one MDHHS supervisor who supervises both CPS and foster care. The experience within the participants ranged from eight to 20 years.

<u>Strengths:</u> A strength identified by all supervisors was the good working relationships with each other and staff. Workers are very knowledgeable and understand the resources and services available for children and families. Overall, supervisors report that families are serviced "well" in their community and do a good job of accessing those services.

Supervisors reported good collaboration and relationship with the courts and Community Mental Health (CMH) in Gladwin and Midland. They reported having monthly "Lunch and Learn" meetings with CMH, MDHHS and others. Supervisors added good relationships exist between law enforcement in Midland and Gladwin, and the Child Advocacy Center in Midland.

<u>Opportunities for Improvement:</u> Supervisors shared an opportunity for improvement being an improved relationship with the prosecutors in both counties.

Supervisors reported services are available, but there are wait lists. They reported sometimes it is due to not having enough participants.

Supervisors added there is a need for more workers. This would decrease the caseload size and allow workers to engage clients and write better reports. They added that case aides, transporters and clerks are also needed.

MDHHS and Private Agency Foster Care Workers/CPS Workers

A total of twenty individuals participated in this focus group. Four MDHHS foster care workers, one Homemaker, three licensing workers and eleven CPS workers provided feedback in this focus group. The experience within the participants ranged from three months to 10 years.

<u>Strengths:</u> Staff conveyed that their supervisors are very supportive. They also reported that the two counties work as a team and are supportive to each other.

Another identified strength is the strong relationship described by staff with service providers such as Community Mental Health and 1016.

Workers report being dedicated and wanting to provide quality services. Workers are willing to put in time outside of work hours to do their jobs.

<u>Opportunities for Improvement:</u> Staff expressed training is an obstacle. Workers reported not all training offered is beneficial and doesn't adequately prepare them for the job.

Staff reported a service gap for psychological evaluations. Staff reported only having one provider who is located out of town. Staff stressed appointments are inconsistent and could last 15 minutes to two hours. They added that the quality of the reports is an opportunity for improvement.

Service Providers

Three individuals participated and offered feedback in this focus group.

<u>Strengths:</u> Most providers identified positive relationships with the courts and workers. They added that the community resource staff person at DHHS is involved with collaboration and this is helpful.

Providers explained collaboration does exists and reported monthly meetings are held with Community Mental Health, MDHHS and the court.

<u>Opportunities for Improvement:</u> The biggest barrier identified was not knowing what families really need. Providers said this is due to workers not contacting providers initially to share the needs of clients who may not understand their own needs.

Service gaps noted for families were identified as having wait lists or non-specific parenting programs for clients who need parenting classes; substance abuse services such as providers who offer drug screens.

Appendix B

Child and Family Status Indicators

f * The following scores reflect only scores that fell in the acceptable (4-6) range.

The Johnwing scores rejlect only scores th	integer in the acceptable (r o) rung	Statewide		
Category	Item	2018	Midland	Gladwin
Safety: Exposure to Threats	a. Home	97.4%	100.0%	100.0%
Safety: Exposure to Threats	b. School	96.1%	100.0%	100.0%
Safety: Exposure to Threats	c. Other Settings	88.5%	100.0%	66.7%
Safety: Behavioral Risk	a. Risk to Self	91.4%	100.0%	100.0%
Safety: Behavioral Risk	b. Risk to Others	91.4%	100.0%	80.0%
Stability	a. Home	83.1%	90.0%	80.0%
Stability	b. School	82.4%	100.0%	100.0%
Permanency	Permanency	75.4%	100.0%	33.3%
Living Arrangement	Living Arrangement	97.4%	100.0%	100.0%
Physical Health	Physical Health	94.7%	100.0%	100.0%
	Emotional			
Emotional Functioning	Functioning	93.4%	100.0%	100.0%
	a. Early Learning /			
Learning & Development	Development	96.9%	100.0%	100.0%
Learning & Development	b. Academics	73.8%	100.0%	33.3%
la den en deut living Chille	Independent Living	00.00/	100.00/	N1 / A
Independent Living Skills	Skills	80.0%	100.0%	N/A
Voice and Choice	a. Child/Youth	77.3%	100.0%	50.0%
Voice and Choice	b. Mother	44.4%	50.0%	33.3%
Voice and Choice	c. Father	23.3%	100.0%	66.7%
Voice and Choice	d. Caregiver	68.9%	85.7%	66.7%
Voice and choice	e. Other	33.3%	0.0%	50.0%
Family Functioning/Baseursefulness	a. Mother	44.0%	66.7%	50.0%
Functioning/Resourcefulness Family	a. Mother	44.0%	00.7%	50.0%
Functioning/Resourcefulness	b. Father	38.9%	75.0%	66.7%
Family	S. Father	30.370	73.070	00.770
Functioning/Resourcefulness	c. Other	50.0%	33.3%	50.0%
Family Connections	a. Mother	48.4%	75.0%	50.0%
Family Connections	b. Father	53.3%	100.0%	100.0%
Family Connections	c. Siblings	60.7%	100.0%	0.0%
Family Connections	d. Other	68.0%	100.0%	N/A
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Practice Performance Indicators

f * The following scores reflect only scores that fell in the acceptable (4-6) range.

		Statewide		
Category	Item	2018	Midland	Gladwin
Engagement	a. Child/Youth	78.3%	83.3%	50.0%
Engagement	b. Mother	55.6%	66.7%	33.3%
Engagement	c. Father	26.7%	100.0%	66.7%
Engagement	d. Caregiver	75.6%	85.7%	66.7%
Engagement	e. Other	30.8%	0.0%	50.0%
Teaming	Teaming	24.7%	50.0%	20.0%
Assessment & Understanding	a. Child/Youth	74.0%	90.0%	80.0%
Assessment & Understanding	b. Mother	48.1%	71.4%	25.0%
Assessment & Understanding	c. Father	30.4%	100.0%	66.7%
Assessment & Understanding	d. Caregiver	77.8%	100.0%	100.0%
Assessment & Understanding	e. Other	21.4%	33.3%	50.0%
Long-term View	Long-term View	55.8%	80.0%	20.0%
Case Planning	a. Child/Youth	70.1%	90.0%	80.0%
Case Planning	b. Mother	48.1%	71.4%	25.0%
Case Planning	c. Father	36.2%	100.0%	66.7%
Case Planning	d. Caregiver	77.3%	100.0%	66.7%
Case Planning	e. Other	30.0%	0.0%	50.0%
Implementing Interventions	a. Child/Youth	70.1%	90.0%	80.0%
Implementing Interventions	b. Mother	40.4%	57.1%	25.0%
Implementing Interventions	c. Father	23.9%	100.0%	66.7%
Implementing Interventions	d. Caregiver	80.0%	100.0%	100.0%
Implementing Interventions	e. Other	33.3%	0.0%	50.0%
Tracking and Adjustment	Tracking and Adjustment	45.5%	70.0%	80.0%