COLORADO DEPARTMENT OF HUMAN SERVICES



CHILD AND FAMILY SERVICES REVIEW

Performance Improvement Plan



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CDHS Acronym List

APSR Annual Progress and Services Report
ARD Administrative Review Division
Pale Progress Health Organization

BHO Behavioral Health Organization
CFCIP Chafee Foster Care Independence Program

CFSR Child and Family Services Review
CAC Colorado Assessment Continuum

CAPTA Child Abuse Prevention and Treatment Act
CDHS Colorado Department of Human Services

CFSP Child and Family Services Plan CPA Child Placement Agency **CPS** Child Protective Services CPI Colorado Practice Initiative **CPM** Colorado Practice Model CQA Continuous Quality Assurance CQI Continuous Quality Improvement **CRDC** Colorado Resource Disparities Center

C.R.S. Colorado Revised Statutes
CWAC Child Welfare Action Committee

DBHH Division of Behavioral Health and Housing

DBH Division of Behavioral Health DCC Division of Child Care

DCWS Division of Child Welfare Services
DDD Division for Developmental Disabilities

DYC Division of Youth Corrections
EOC Executive Oversight Committee

FFY Federal Fiscal Year FSP Family Service Plan

HCPF Health Care Policy and Financing, Colorado's Medicaid Single State Agency

MPCWIC Mountains and Plains Child Welfare Implementation Center

NCANDS National Child Abuse and Neglect Data System

NRC National Resource Center
OAD Office of the Associate Director

OPPLA Other Planned Permanent Living Arrangement

OOH Out-of-Home

PAC Policy Advisory Council
PIP Program Improvement Plan

POIT Project Operations and Implementation Team

QA Quality Assurance QPT Quality Practice Team

RGAP Relative Guardianship Assistance Program SCPPS State Child Protection Program Staff

SFY State Fiscal Year

SPIIG State Practice Initiative Implementation Group Sub-PAC Child Welfare Sub Policy Advisory Committee

TA TABOR TANF Technical Assistance

TDM

Taxpayer Bill of Rights
Temporary Assistance for Needy Families
Team Decision Making
The State's automated case management system (SACWIS) and is the official Trails

record for CDHS

I. INTRODUCTION

Organizational Structure and Function

The Colorado Department of Human Services (CDHS) is the agency responsible for the development and oversight of the Child and Family Services Review (CFSR) Performance Improvement Plan (PIP) for the CFSR Onsite Review, conducted March 16-20, 2009. CDHS administers a broad range of child-serving programs and entities including: the Division of Youth Corrections, the Division of Behavioral Health and, the Division for Developmental Disabilities. These entities deliver services in a regionalized model, which impacts Colorado's community resources for families served by the child welfare system.

CDHS through the Division of Child Welfare Services (DCWS) is designated to administer the Title IV-B Programs for Colorado, and is located in the Office of Children, Youth and Families. DCWS consists of a group of services intended to protect children from harm and to assist families in caring for and protecting their children. These services are provided directly by county departments of human/social services and direct contract programs. Some of the administration highlights are itemized below.

- Colorado operates a state-supervised, county-administered social services system. Sixty-four
 county departments of social/human services administer all protective services. CDHS engages
 county departments through a continuum of progressive supervision to improve outcomes for
 children, youth and families.
- State supervision is management as exercised through program development, practice and workload standards development, technical assistance, monitoring, program evaluation, rule promulgation and, performance improvement or corrective action plans. The 64 counties are classified as large (10), mid-sized (23), or small (31). The ten large counties manage 85% of the child welfare workload. Two counties, Denver and Broomfield, have consolidated city-county governments. Boards of county commissioners serve as human/social service boards and manage the other 62 counties. There are two Native American Tribal Reservations in Colorado, the Ute Mountain Ute and the Southern Ute, both being located in the southwest portion of the state.
- The funding for county departments is typically 80% federal and state funds and 20% county funds. The state allocation process is defined by statute: C.R.S. 26-5-104, et seq. The CDHS Executive Director determines the final county allocations based on the recommendations of the Child Welfare Allocation Committee. Counties provide the 20% match through county funds, derived from property tax mill levies, which vary greatly. During times of economic downturn and decreased property taxes, funding bases shrink. A number of counties also have revenues from local voter-approved tax initiatives. Local Boards of County Commissioners may provide extra funding or reduce county services. County funding levels have a significant impact on the level of staffing and programs in child welfare.
- The Taxpayer Bill of Rights (TABOR), an amendment to Colorado's constitution, is projected to result in a financial shortfall of \$1.1 Billion to the SFY 2012 budget.
- The State may transfer up to 10% of its Temporary Assistance to Needy Families (TANF) funds for Child Welfare services and up to 20% for Child Care. Counties may transfer up to 10% of the TANF allocation to fund child welfare activities, and 20% to fund child care activities, as long as the State transfer limit is not exceeded.
- Core Services Program funding has a key role in child welfare services. Established in 1994, the Core Services Program is mandated in Colorado Revised Statutes (C.R.S.) 26-5.5-103, et seq. to provide strength-based resources and support to families when children are at imminent risk of

Out-of-Home (OOH) placement and/or are in need of services to maintain a least restrictive setting or promote permanency. To ensure that the counties spend at least a baseline amount on mental health and substance abuse services, the Core Services Program earmarks over \$7 Million to provide those services. In SFY 2009-2010, counties expended \$4,888,933 in mental health and \$2,916,407 in substance abuse services. In addition, the Division Of Behavioral Health provides Additional Family Services funds as a match to the Core Services Substance Abuse funds in the amount of \$2,501,989 annually. Counties spend much of the remaining \$37,651,371 Core Services funding on services such as, but not limited to: Intensive Family Therapy, Home Based Intervention, Sexual Abuse Services, Multi-Systemic Therapy, and Family Functional Therapy, and other county designed services.

CDHS engages in policy development and communication with county departments through a formalized system. This system, complete with by-laws, is the CDHS Policy Advisory Committee (PAC), comprised of county directors from each of six regions and Deputy Executive Directors representing all Offices of CDHS. Four Sub-PACs provide program-specific policy and rules recommendations to the PAC. The Sub-PACs are comprised of county directors, county staff, and CDHS staff from the appropriate divisions. It is through this system of collaboration, cooperation and effective communication on a statewide basis that improvements in the process of service delivery for children, youth, families and adults are achieved. Final authority to approve recommendations for policy and rules from the PAC rests with the Executive Director of CDHS.

Division of Youth Corrections

Colorado's Youth Corrections system is within CDHS. The Division of Youth Corrections (DYC) uses Trails, the Statewide Automated Child Welfare Information System (SACWIS). DYC has a regionalized administrative structure comprised of four management regions: Central, Northeast, Southern, and Western. County departments work directly with staff in the DYC regions on local policy issues, procedural matters, and specific child and family cases. Policy and procedural coordination between the child welfare system and the youth corrections system is achieved within CDHS at the state level. District and Juvenile Court judges make determinations whether youth will be served in the child welfare or the youth corrections systems. Studies have shown that with the exception of violent crimes, there is no real difference between the severity of offenses committed by youth who are served in the child welfare system and those served in the youth corrections system. The main differentiating factor appears to be the level of parental involvement and local court practice. There are approximately twice as many delinquent youth in the Child Welfare system as in DYC at any point in time. Given the high volume of youth in juvenile detention facilities, more delinquent youth will be served in DYC over the course of a year. Youth with delinquent and pre-delinquent behavior are served in the child welfare system in the "Youth in Conflict" program described later in this document.

Division of Behavioral Health

Colorado's mental health, substance abuse treatment services, and Supportive Housing and Homeless Programs are delivered through the Office of Behavioral Health and Housing, a subdivision of CDHS. Community mental health services are delivered through contracts with seven specialty clinics and 17 not-for-profit community mental health centers. The roles and functions of both community mental health centers and clinics are statutorily defined in C.R.S. 27-1-201, et seq. There are five Behavioral Health Organizations (BHOs) responsible for implementing the Medicaid Mental Health Capitation Program

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through contracts with the Colorado Department of Health Care Policy and Financing (HCPF). The BHOs operate managed care programs serving all of Colorado's 64 counties. Each BHO is responsible for managing the delivery of mental health services to Medicaid-eligible individuals in its assigned geographic service area. Each regional area has unique community resources.

Division for Developmental Disabilities

Services for children (birth through age 17, in-home only) and adults (age 18 and older) with developmental disabilities, are administered by the Division for Developmental Disabilities. Three service areas, Children's Extensive Support, Early Intervention, and Family Support assist families with enhanced in-home supports for those children considered to be most in need, provide early intervention to infants and toddlers, and assist with costs beyond those normally experienced by other families. Services are administered through Community Center Boards.

Division of Child Welfare Services

In 2010, DCWS implemented the Culture of Excellence in Child Welfare, redefining its vision, mission and guiding principles:

Vision

All of Colorado's children live in a safe, healthy, and stable home.

Mission

To provide leadership, innovation, oversight, and resources to enhance the effective delivery of child welfare services statewide.

Philosophy

Children and youth are the foundation of a strong society. Healthy families are the cornerstone of that foundation.

Role

To provide policy direction, standards, support, supervision and oversight to counties as we collaboratively achieve successful outcomes for Colorado's children, youth and families.

Guiding Principles

- Professionalism: We conduct ourselves respectfully, ethically, and with the highest level of competence in what we know, do, and say.
- Respect: We value diverse perspectives, differing opinions, and individual differences.
- Collaboration: We effectively engage others to achieve shared goals and successful outcomes.
- Accountability: We are responsible for clear and reliable information, actions, policies, and decisions.

• Cultural Competence: The diverse traditions, experiences, values, and needs of our consumers and communities guide our actions and decisions about policy, program, and practice.

Child Welfare Program Areas

Four programmatic areas define the target populations served in Child Welfare at the county level.

Program Area 4

Youth in Conflict: Services are provided to reduce or eliminate conflicts between youth and their family members or the community when conflicts affect the youth's well-being, the normal functioning of the family, or the well-being of the community. The focus of services is: alleviating conflicts, protecting the youth and the community, re-establishing family stability, or assisting the youth to emancipate successfully.

Program Area 5

Child Protection: Services are provided to protect children whose physical, mental or emotional well-being is threatened by the actions or omissions of parents, legal guardians or custodians, or persons responsible for providing OOH care, including a foster parent, an employee of a residential child care facility, or a provider of family child care or center-based child care. The focus of services is providing for the child's safety, enhancement of family functioning, and addressing the child's need for permanency.

• Program Area 6

Children or Youth in Need of Specialized Services: Statutorily authorized services to specified children and families when the primary focus of services is no longer protective or youth-in-conflict. These services include: children with subsidized adoptions; children with Medicaid-only services; and, children for whom the disposition is no longer reunification (i.e. Other Planned Permanent Living Arrangement (OPPLA), or independent living).

Program Area 7

Resource Development: The development and coordination of the external resources, volunteers and foster care providers necessary to fulfill the objectives of the Human/Social Services programs.

Quality Assurance

Colorado's quality assurance (QA) system includes a blend of activities. DCWS continues to partner with the Administrative Review Division (ARD), the Division of Youth Corrections (DYC), the Division of Child Care (DCC), and county departments in evaluating practices related to the ability of the service delivery system to assure child safety, permanency and well-being. Following are the elements of each entity's contribution to Colorado's QA system:

ARD

ARD operates an identifiable QA system that is in place in every county and DYC region in which
the services included in the Child and Family Services Plan (CFSP) are provided. A combination
of processes are used: reviews that include OOH, in-home services, assessment, screen-out, adhoc requests, and various surveys. ARD evaluates the quality of services, identifies the strengths
and needs of the service delivery system, provides relevant reports, and evaluates implemented
program improvement measures and provides relevant reports.

Administrative/Case Reviews

Since 1996, the case file of every child and youth in OOH care for at least six months has been
reviewed with a review instrument that closely mirrors the CFSR onsite review instrument. During
the face-to-face reviews, parents and other participants are given an opportunity to be heard and to
thoroughly discuss their participation, goals, and improvements. Through the first half of State
Fiscal Year (SFY) 2011, ARD conducted approximately 4,800 Administrative/Case Reviews and
will have conducted approximately 9,600 reviews by the end of the state fiscal year.

In-Home Services Reviews

• Within each county, ARD reviews a random sample of children who have been receiving in-home services for at least six months. The sample is selected to provide a 90% confidence level with a 10% confidence interval. ARD conducts these reviews once every six months for Colorado's ten largest counties, with the remaining counties being reviewed over a two-year time span. In the first six months of SFY 2011, ARD conducted these reviews in 29 counties, reviewing a total of 606 children. By the end of SFY 2011, ARD will have conducted these reviews in 41 of Colorado's 64 counties.

Assessment Reviews

ARD reviews a random sample taken from all child protection referrals accepted for an assessment
in the six months prior to the review. The sample is selected to provide a 90% confidence level with
a 10% confidence interval. In the first six months of SFY 2011, ARD conducted these reviews in 29
counties, reviewing a total of 886 assessments. By the end of SFY 2011, ARD will have conducted
these reviews in 41 of Colorado's 64 counties.

Screen-Out Reviews

Each September, in collaboration with DCWS and the county departments of human/social services, ARD facilitates a review of referrals that were not accepted for assessment. ARD selects a random sample of screened-out referrals from each county. The sample is selected so that the results for each county have a 90% confidence level with a 10% confidence interval. This allows the information to be meaningful for each county, while still allowing the data to be weighted to compile an estimate of statewide performance as well. In September 2010, the fourth annual Screen-Out Review was held, during which 1,413 screened-out referrals were reviewed. Throughout the four years of this review process, ARD has made recommendations for enhancements to Trails, policy clarifications, and changes in referral screening practices. In the most recent edition of the American Humane Association's Protecting Children Journal, ARD

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- authored a paper highlighting the Screen-Out Review process and its positive impact on referral acceptance decision-making.
- ARD provides a data collection system which tracks and reports on indicators collected from case files, face-to-face interviews with required participants, written findings, and other data. The data collection system measures compliance with Federal Title IV-B, including the IV-E requirements, as well as program requirements. The ARD Steering Committee, comprised of county department administrators, state program staff, state court personnel, and members of the community, works in conjunction with other entities to define and develop reports that provide key stakeholders with relevant information that clearly identifies programmatic strengths and areas needing improvement.
- Administrative reviews also assess the quality of services delivered. Areas of focus include: safety of the child; special needs; cultural needs; health and educational needs; mental health; progress in care; parent's progress; visitation; compliance with treatment plans; progress towards alleviating the causes of placement; due process; appropriateness of services; continuing necessity for and appropriateness of placements; barriers to permanency; whether additional or different services are needed; appropriateness of the permanency goal and date to be achieved; and, reasonable efforts to achieve permanency. Quality practice principles are reflected in the review protocol to communicate to staff the type of case practice that is expected.
- ARD recently conducted research on the efficacy of the Administrative and Case Review process, as designed and implemented in Colorado. Results indicated that children who had timely reviews (e.g., reviewed every six months they were in OOH care) had a median length of stay that was 10.67 months shorter than those children who were not reviewed timely (e.g., in the eighth month of care). The results indicate that ARD's review process is an effective social work intervention that, through its capacity to mediate quality of casework practices, can have a positive impact on child welfare outcomes. This study was conducted as part of a doctoral dissertation and is currently being submitted for publication in reference journals.

DYC

DYC's QA practices are intended to assure that youth in custody in secure and non-secure settings
are receiving quality services that assure child safety and well-being, as well as community safety.

DCC

DCC's QA includes quality childcare initiatives and licensing, and regulation of OOH providers.
 DCC's monitoring of 24-hour OOH care assures quality in provider practices as well as compliance with regulations.

County Departments

County departments use information from their QA systems, DYC, DCC, DCWS and Trails. The
information is used to change, correct and modify county practice to improve outcomes for children
and families.

DCWS

 DCWS QA is multi-level. DCWS conducts reviews of county programs including the foster home certification program and the subsidized adoption program, child fatalities in which county departments had contact with families within the previous 5 years, county use of Trails, and other risk-based program reviews of county policies and procedures. DCWS also reviews county practices implemented to improve CFSR outcomes using indicators drawn from the Trails system. DCWS uses information from the DCWS program staff and ARD QA efforts to evaluate whether CDHS policies support effective practice in service delivery to achieve child safety, permanency and well-being.

- DCWS and ARD have adopted the circle of Continuous Quality Assurance.
- Stakeholders are involved in examining and improving the quality of the service delivery system, through state and county Collaborative Management Councils, Youth Advisory Boards and Placement Alternatives Commissions.
- CDHS has defined practice principles and trained state and county staff in practice skills related to the outcomes of safety, permanency and well-being for the children served. CDHS is committed to improving its oversight and QA programs through:
 - Partnering and coordinating more closely with county department QA programs.
 - Utilizing and analyzing the available data to direct system changes and improve outcomes.
 - Partnering more closely with Judicial in the Court Improvement Projects and crosssystem trainings.

II. BUILDING THE MOMENTUM FOR CHILD WELFARE SYSTEMS CHANGE

Since the CFSR onsite review, Colorado has actively worked on areas identified as needing improvement. The PIP has undergone numerous revisions as items are addressed and new strategies are identified to address remaining areas needing improvement. Throughout this section, areas that the Department believes are completed are noted for easy reference.

Colorado's need for child welfare reform is well documented in a series of eight reports/audits, completed from 2007-2009. The 2009 CFSR Final Report reinforces the need for change with findings of the need for consistency in practice and adherence to State policy in the review sites. The combination of findings presents the need for accountability, consistency and accessibility in the child welfare system. To date, comprehensive reform has been limited by the prevailing economic conditions, both nationally and at the state level. In spite of this barrier, however, a convergence of activities has influenced the future and direction of Colorado's child welfare services, starting with the former Governor's Child Welfare Action Committee (CWAC) as the catalyst and conveyor of initial systems improvement strategies.

CWAC recommendations and subsequent changes and improvements led the State to apply for and obtain a resource grant from The Mountains and Plains Child Welfare Implementation Center in November 2009. The detail and timeline of this momentum building provides an informational background that supports the readiness for change. It is within the context of this readiness that DCWS has developed and revised the PIP. DCWS is committed to shaping and implementing practice and system reform to achieve improved child and family outcomes.

The Former Governor's Child Welfare Action Committee

The momentum for DCWS structural change has been aided by the Governor's Child Welfare Action Committee (CWAC), which met from 2008-2010. The Committee, established by former Governor Bill

Ritter's Executive Order B 006 08, issued April 16, 2008, charged the committee with the mission of providing recommendations to improve the child welfare system. The impetus for the Executive Order was the findings of the 2007 Child Maltreatment Fatality Report, initiated by former CDHS Executive Director Karen L. Beye after 13 child fatalities occurred in families that had received child welfare services. The Fatality Report may be accessed at http://www.cdhs.state.co.us/childwelfare/Fatalities.htm.

The Committee's work was completed in 2010 and twenty-seven of the twenty-nine recommendations were adopted and implemented. Two recommendations, involving regionalization of the Department's organizational structure and development of a centralized call center for child abuse and neglect; were referred for further study. The adopted recommendations have resulted in a number of significant changes that will be identified throughout this document. The following recommendations were implemented in 2009-2010, due to funding availability and enacted legislation:

- DCWS Organizational Assessment, Clarification of the State's Supervisory Role and Responsibility
- DCWS Restructure and Staffing
- Implementation of the Child Welfare Training Academy
- Implementation of the Differential Response Pilot Project
- Development of Colorado Disparities Resource Center

All reports and recommendations may be accessed at: http://www.cdhs.state.co.us/documents/Final OVERVIEW07-30.doc

DCWS Organizational Assessment and Clarification of the State's Supervisory Role And Responsibility

DCWS' systems change was launched with the CWAC recommendation for an organizational assessment, which was completed by Policy Studies, Inc. and American Humane Association. The organizational assessment is available at:

http://www.cdhs.state.co.us/childwelfare/PDFs/cworgassessment4-15-09FinalReport.pdf. One of the most significant changes resulting from the assessment involved the promulgation of rules for The Department of Human Services Volume I, General Policies and Administration, clarifying the State's supervisory role and defining a Corrective Action Plan process.

DCWS Restructure and Staffing

With CWAC's recommendation that DCWS be staffed to improve oversight capacity, and with the support of the General Assembly, staff hires occurred in Child Protection, Research and Evaluation, and Recruitment and Retention. In addition, the following occurred:

- DCWS restructured with both a program and an operation sector.
- Two new Associate Directors were hired to manage the new structure.
- Child safety was reprioritized with oversight of the Colorado Assessment Continuum (CAC), the safety/risk protocol used in all counties that was developed in 2002 and modified in 2009.

- DCWS and ARD collaboration was strengthened around oversight of the CAC and county safety practices.
- Two new hires, a Research and Evaluation Manager and a Data Integrity Specialist, focused on the improvement of data integrity, and the production and quality of data provided to the counties.

The State Child Protection Team developed a statewide visitation plan involving each of the 64 counties, with the following structure:

- The State Child Protection Team developed a Safety and Risk Coaching Schedule and protocol.
- County visits focused on a review of the CAC and explored concerns and challenges the counties were experiencing.
- State program staff provided over-the-shoulder support, processing referrals in real time with the county.
- State program staff is designated for each county.
- Contact is initiated with the county director for the visit.
- State program staff visits with the counties and assists with the support and training that is needed by child welfare staff in the use of the CAC.
- State program staff remains assigned to the counties for consultation and assistance.
- State program staff reviews ARD safety findings for assigned counties.
- All Community Child Protection Teams were trained in the CAC on August 18-20, 2010.

The activities of the State Child Protection team have positively affected CFSR Safety Outcomes 1 and 2 and Safety Items 1, 3, and 4.

The Research and Evaluation Team developed new Trails reports for the counties providing data on Timeliness of Investigations, Caseworker Contacts and Timeliness of Service Authorization Entries. These reports have resulted in state/county dialogue about the data and discussion about county practice and outcomes. This has also addressed CFSR Systemic Factor Item 24 Timeliness of Data Entry in the Statewide Information System.

The Permanency Team added a new Rural Recruitment and Retention Specialist to increase the availability of support with foster and adoptive family recruitment and retention for all counties. A rural foster care coordinators' password protected website has resulted in reducing the geographical barriers to networking and support. These supports work in conjunction with the Division's Kinship Care Specialist, ensuring that counties are assisted in their efforts to maintain placement resources, including sibling placements for children that reflect the ethnic and racial diversity of children in the State's custody. **These actions have addressed item 36, service array in rural areas of the state.**

The Division renewed its collaboration with the Office of Self-Sufficiency and Child Support Enforcement to strategize around father involvement and diligent search opportunities. As a result, new fatherhood training was provided to five regions in 2010, and a special website for child welfare caseworkers was built into the Promoting Responsible Fatherhood Site: http://www.coloradodads.com/caseworkers. The incentive-based site awards participation points to child welfare caseworkers and their counties. The goals of the site include peer participation and problem solving, current information about fathering and the role of the

custodial parent, and assessments for father-friendly agencies. This activity impacts item 18, involvement of fathers in case planning.

Additional CWAC recommendations resulted in improved systemic changes, the first of which was revamped child welfare training and certification requirements for new child welfare caseworkers and supervisors.

Child Welfare Training Academy

The Child Welfare Training Academy (Academy) represents one of the most significant modifications in child welfare training since Child Welfare Caseworker Core training was instituted in 1996. Initiated as a CWAC recommendation, statutory changes were effected May 19, 2009, to C.R.S. 26-5-109 establishing the Academy. The statutory changes required certification for specific job titles, established minimum standards of competence that a person must achieve to practice, and, alternative methods for attaining certification from the Academy by persons who have already completed comparable training. Rules promulgated September 15, 2009 required establishment of the Academy to ensure that persons hired to work within child welfare services receive the necessary training to perform the functions of their jobs responsibly and effectively. The rules also established new standards for ongoing training. All ongoing child welfare caseworkers and supervisors are required to complete 40 hours of training annually, with 16 hours related to their practice specialty.

New Child Welfare Caseworker Training consists of Computer Based Training Modules that are completed prior to the in-class sessions. The caseworker training consists of 33 separate modules and the new Child Welfare Supervisor Training consists of 12 separate modules. Detailed information about the competencies is located in Appendix C. Both training series are completed in cohorts. The cohort ensures continuity of class composition and may also serve as a support to the attendee post-certification. Cohorts must have a minimum of four registrants to run, with a maximum of 24 participants. The training is available within the first two weeks of the caseworker's hire. The supervisory cohort runs every 8-10 weeks. The classes are followed by on-the-job training oversight provided by the Academy's regional training specialists, who meet with the trainee and his/her county supervisor to structure onsite activities. Certification requires successful completion of computer-based training, classroom sessions and on-the-job training.

The Academy's development involved six months of intense work by the Family and Children's Training Division. Two state/county workgroups developed training content and rules, and researched training standards and competencies through the National Institute of Human Services and Child Welfare League of America. To ensure continuous quality of training, the two groups meet regularly. The first group, the Curriculum Review and Evaluation Team, comprised of state and county program experts, evaluate current trainings and meet every two months. The second group, the Quarterly Provider and Program Group, is comprised of training contractors and state program staff. Both groups provide information about the quality and relevance of current trainings, and the additional needs that evolve over time and with practice and policy changes. In addition to the groups, a statewide needs assessment is conducted every 4-5 years to ensure training needs of county and state program staffs are met.

The Academy has been instrumental in Colorado's accelerated improvement in access to training for new workers and supervisors. Since the Academy's opening in January 2010, there have been no waitlists for training. Training generally is available during the first two weeks of hire. DCWS staff participates in both

child welfare caseworker and supervisor training to maintain current skills that will aid them in their supervisory and monitoring role with counties. Competence is maintained in the event state child welfare protection staff would need to assume county duties. The CFSR Systemic Factor 32, Initial Staff Training, determined to be an area needing improvement in the onsite review, has been addressed as there have been no waitlists for supervisors or workers to access training since the inception of the Academy in January of 2010. These activities closely align with SF 32, and it is requested that it not be included in the PIP.

In addition to staff hires and training, CWAC recommended that Colorado improve its efforts in family engagement with a multi-tiered response system for child abuse and neglect referrals, also known as Differential Response. Statutory changes were enacted to facilitate this recommendation.

The Colorado Consortium on Differential Response

The Colorado Consortium on Differential Response, a group comprised of five counties and CDHS, applied for and received a \$1.8 million federal research and development grant through the American Humane Association in December 2009. This grant funds a pilot project examining the effects of a differential response practice model on outcomes for children and families. In addition to CDHS/DCWS, the consortium consists of Colorado State University and Arapahoe, Fremont, Garfield, Jefferson, and Larimer counties.

The Consortium, under the direction of a state/county management team, has implemented and will evaluate the dual-track response model in the participating counties as a four-year research pilot project between February 1, 2010 and June 30, 2013. The Consortium provides the opportunity to test and evaluate a new services delivery method centered on family engagement.

The project's dual track response system, operationalized on October 5, 2010, provides an abundance of new services experiences for child welfare staff. Evaluation of the initiative's outcomes will be an important part of the continuous quality improvement work that is done as part of current system reform. Although county participation is limited, the learning and evaluation is shared with the entire state. The information gathered about caseworker time and practices will be important in determining funding, workload shifts and county needs to implement family engagement. Evaluation of statewide implementation will occur during the timeframe for the PIP, but will not be included in the action steps and benchmarks.

Development of the Colorado Disparities Resource Center

The CWAC recommended that DCWS address its long-standing issues of service disparities based on race and ethnicity. The Colorado Disparities Resource Center (CRDC), developed by CDHS in partnership with the Children's Division of the American Humane Association, was launched with funding provided by the Statewide Strategic Use Fund (funded with TANF surplus) in May 2009. CDRC is currently identifying and evaluating the level of disparities within the 64 counties and 22 judicial districts. The Center's goals focus on increasing awareness of the levels of service disparities; monitoring the development of state and county plans to reduce/eliminate disparities; use of Trails data to determine baseline state/county disparities; and, monitor change over the funding period. The reduction of disparities in services represents a significant long-term systemic effort to improve permanency outcomes for children in OOH placement.

The Mountains and Plains Child Welfare Implementation Center

As DCWS completed the recommendations of CWAC, it was determined that larger system reform required sustained resources and technical assistance. An application was submitted to the Mountains and Plains Child Welfare Implementation Center (MPCWIC), and Colorado was designated as an implementation site in November 2009. Colorado's plan centered on the development and implementation of a child welfare practice model to improve consistency, accountability and accessibility to services for families, youth and children.

The initial step in the MPCWIC work plan was the synthesizing of the eight reports, generated from multiple sources between 2007-2009 that provide specific recommendations for child welfare system and practice improvements. The entities, task forces and committees responsible for the studies and recommendations were convened by multiple sources of authority including state statute, commissioned by the CDHS Executive Director and by a Governor's Executive Order. These included the CWAC reports and recommendations. The purpose and focus of the different reports fall into two categories: Reports with a specific, limited, programmatic or topical focus:

- Foster Care Services Performance Audit (2007)
- Foster Care Financial Audit (2007)
- Child Maltreatment Fatality Report (2008)
- Foster Care & Permanence Task Force Report (2008)

Reports with a more general, child welfare system improvement focus:

- Governor's Child Welfare Action Committee Interim Report (2008)
- Policy Studies, Inc./American Humane Association Organizational Assessment (2009)
- Governor's Child Welfare Action Committee 2nd Interim Report (2009)
- Governor's Child Welfare Action Committee Final Report (2010)

When the assessments and recommendations across the eight reports are compared and contrasted, the following priorities emerge:

- A cohesive, clear and consistent approach to child welfare practice and service delivery.
- Data-driven decision making and practice with transparent, measurable outcomes among individuals, both internal and external to DCWS.
- Careful consideration and dedication of resources to support the individuals who are a part of this system.
- Building and maintaining strong and mutually supportive relationships among DCWS staff, clients, county departments, providers, stakeholders and cross-system professionals as the foundation for practice and system improvement.

The synthesized recommendations from the reports and the CFSR Final Report are congruent in the assessment of the need for services consistency, accountability and accessibility. The development of a Child Welfare Practice Model is critical to achieve a major systems change to improve child and family outcomes. Armed with the MPCWIC resources, Colorado has been working with county partners on the

development of a consensus-based practice model. This effort is called the Colorado Practice Initiative and it began in January 2010. The Colorado Practice Initiative represents a major reform effort in Colorado's child welfare system.

The Colorado Practice Initiative

The Colorado Practice Initiative (CPI) advances the State's plan for improving child welfare outcomes by facilitating a change management process between the state, counties, judicial, families, children, youth, and stakeholders by implementing systems reforms. The goal of CPI is to collaboratively design, develop, implement, and evaluate a state and county-wide consensus-based child welfare practice model by June 2015.

The CPI "Base" Practice Model, completed in September 2010, represents the culmination of ten months of planning formed with the input of many of Colorado's state, county and tribal child welfare professionals. The Base Practice Model will be further developed and defined by the counties, reflecting Colorado's diversity and best practices. Implemented in January 2011, the Base Practice Model is comprised of a framework, which the counties will augment with promising practices and business processes that improve outcomes for children, youth and families. With the shift of the Base Practice Model to the counties, it will be known as the Colorado Practice Model (CPM). The CPM will be completed with a consensus-based process, which engenders the sharing of practices and procedures by the counties, and development of a peer-supported culture. A Compendium of Promising Practices will be published and disseminated to counties during the course of implementation. The timing of the implementation provides the opportunity for convergence of the CPM and the PIP into an integrated framework, streamlining the efforts in which Colorado will engage to improve child and family outcomes.

Two oversight groups support CPI and the development and implementation of the CPM: the Executive Oversight Committee (EOC) and the Project Operations and Implementation Team (POIT). EOC maintains a steering role, both for CPI and the PIP. POIT maintains the function of overall project management and evaluation and also oversees eleven additional work groups, each comprised of state and county members that include:

- Practice Model Design and Development
- Communications
- Education and Training
- Implementation
- Financial
- Rewards and Recognition
- Evaluation
- Policy, Rules, Procedures
- Performance Management
- Continuous Quality Improvement
- Diversities and Disparities

In addition to the above workgroups that support the initiative, a State Implementation Team, comprised of members of the DCWS Leadership Team and Program Staff has been developed to augment resources for model implementation. The State Implementation Team supports the participation of all counties that apply

to participate in each phase and sustains replication of the implementation process through the completion of the initiative.

The Base Practice Model will be implemented in three phases with all 64 counties over a five-year timeframe. The initial CPI implementation will be a fluid process that is dependent upon MPCWIC resources, adjustments and negotiations of the work plan activities and the needs of the counties. The first phase of implementation provides the opportunity for testing of initial processes and determining changes that need to be made. The learning occurring during phase one will serve as a piloting of processes, with a tightening and refining of the implementation processes occurring during phase two. Changes are made easily with a fluid process that allows for adjustment.

The initial county implementation is comprised of a number of activities that are required for start up and are described in the CPI Facilitator Guidebook developed for counties and state program staff. The initial county roles include:

- Preparing for implementation by reading and understanding materials about the practice model and gathering documents that guide county child welfare practice.
- Selection, training and activation of the quality improvement team, known as the Quality Practice Team (QPT).
- Engagement of the QPT in continuous quality improvement.
- Participation as a member of the State Practice Initiative Implementation Group (SPIIG), who will complete the Compendium of Practice.

As counties are selected for CPM implementation, each will form a Quality Practice Team (QPT), comprised of county and state child welfare staff whose work will be guided by the MPCWIC Practice Model Implementation Specialist. The county QPTs and the State Implementation Team will train together on the implementation process. The cohort sessions, facilitated by the MPCWIC implementation specialists, will include a cohort decision-making environment and familiarization with the implementation method. Interspersed with the QPT training are sessions for the State Implementation Group focusing on their work with the counties and training and technical assistance that may be provided to the counties during the implementation. Upon completion of the three-month initial cohort working sessions, the CQI training will begin.

CQI training is facilitated by DCWS Quality Assurance Manager and is developed through consultation with MPCWIC and the National Resource Center for Organizational Improvement. The training is a theory-based management system that examines processes and outcomes. County department staff looks at the agency as a whole and develops a plan for improvement. The focus is self-directed and results in self-determined change rather than change imposed by an external entity. It is a process that engages staff empowerment, creativity and accountability. CQI evaluates the effectiveness and efficiency of service delivery. Practice is driven by data collection, analysis and implementation. It determines whether services meet predetermined expectations of quality and outcomes. It also attempts to correct observed deficiencies identified by team members, thus improving overall accountability. The CPI CQI process is intended to be team-based, structured, strengths-based, solution focused, common sense driven, and culturally sensitive. The CQI training is set for June 2011 implementation with approximately 100 state and county staff. The training is two full days and includes on-site technical assistance for the QPTs.

In each county, the QPT will identify and document practice methods, approaches, tools, promising practices, and standard operating procedures. Counties will start with the alignment of their vision, mission and practice principles to those of the CPM. If counties do not have these guiding documents, the

implementation process will start with what is available. "Beginning with where the county is" is the underlying philosophy of the implementation process.

As an example to illustrate this process, a county may discover after the alignment work, that although one of their values is to keep siblings together in placement, in examining practice, it is determined that their roster of foster homes has no homes that will take siblings. The county would reconcile the practice by committing to change their recruitment to focus on homes to take sibling groups.

Counties will continue in the process, evaluating their practices, using the Base Practice Model to determine areas of strength and areas needing improvement. The areas needing improvement will use PIP/CFSR measures against which to measure performance outcomes, with counties prioritizing their areas of focus. All promising practices identified through the process will be referred to the SPIIG, whose role it is to review and respond to promising practices as well as areas needing Improvement. The workgroup will determine promising practices that will comprise the Practice Compendium, providing for consistency in child welfare services. Information about county promising practices will be disseminated statewide through regional meetings and/or agency letters as they are selected by SPIIG.

The expansion of a state/county continuous quality improvement system supports Colorado's shift to a child welfare system that is managed by child and family outcomes and that responds strategically to the needs of children, youth and families. It is anticipated that the roles and functions of the practice model work groups will evolve with the practice model and will become part of an outcomes based infrastructure that sustains reform. Supporting the CQI process that evolves from CPM implementation are statewide processes driven by DCWS. These activities include facilitation of the Performance Management workgroup, oversight of continuous improvements in safety in intake and ongoing services, quarterly PIP monitoring and reporting, and ongoing collaboration with ARD. The DCWS Research and Evaluation Team assists all program staff with the data and analysis needed to evaluate county administered child welfare services. The establishment of CQI in the counties and connection to state processes heralds significant change in the State's leadership role in management by child, youth, and family outcomes.

The MPCWIC resources provide the project with sustained levels of resources and technical assistance that take CPM implementation from the beginning piloting/testing period to a fully operational practice model, facilitating change in Colorado's child welfare services system, improving consistency and accessibility of services for children, youth and families. The long-term effects of CPM are the improvement in consistency of practice, development of infrastructure for a CQI process that involves both the state and the counties, and the establishment of a culture of peer learning and support. These project outcomes are sustainable into the future and embrace the richness of a state-supervised county-administered child welfare system.

The CPM will be completed by 2015. It is anticipated to extend beyond the PIP reporting period, and should be viewed as a long-term project with both long-range and short-range activities. During the PIP reporting period, 12 counties will implement the CPM, and their activity is detailed in the PIP Work Plan. The remaining 52 counties that implement the CPM will be reported in the Annual Progress and Services Reports.

The full CPI Base Practice Model is located in Appendix B, including the vision and mission:

CPI Vision

Colorado's children and youth have the opportunity to thrive in safe, nurturing, and stable families in their communities.

CPI Mission

The Colorado child welfare system, in partnership with families and communities, will protect children and youth by striving to achieve their safety, permanency and well-being. This mission will be achieved by consistently and effectively:

- Engaging families;
- Collaborating with federal, state, local and tribal entities;
- Practicing in a culturally responsive manner:
- Providing individualized services that strengthen children, youth and families and remove barriers; and.
- Developing a competent, professional, responsive, and accountable staff.

III. PIP DEVELOPMENT, APPROACH AND OVERALL STRATEGY

PIP Development

Improvements to child welfare services were initiated prior to the CFSR Onsite Review. Although having successfully completed the 2002 CFSR PIP, it was determined through the 2009 CFSR Statewide Assessment that improvements in child and family outcomes had not reached federal substantially achieved thresholds. In the 2009 Onsite Review, Colorado achieved four of six National Standards, two of seven systemic factors, and had four of 23 outcome items rated as strengths. Themes of the need for consistency in county practice and state oversight and monitoring are persistent throughout the 2009 CFSR Final Report.

Prior to the onsite review, the state focused on improvements in the areas of placement stability and reentries into foster care, with state program staff visiting many of the 64 counties, focusing on outcomes and their role in the CFSR. In follow-up activities, counties met with their local Court Improvement Programs and submitted individual work plans for improvement. Foster care re-entries were rated as a strength in the onsite review. The work plans were followed by additional plans for improvement in county-specific action steps for improving permanency and well-being factors. These activities laid the groundwork for the CFSR as a continuous quality improvement process and for the PIP's function. The work shifted the review process from a five-year event and linked it to improvements in practice and the need for management by child and family outcomes.

Prior to receipt of the CFSR Final Report, the state and counties engaged in a PIP Workday, using the Onsite Review Exit Conference summary to develop overarching strategies that would be used in PIP development. The work provided the opportunity to shift from an item-based PIP to strategies that would result in practice improvements in multiple areas. Upon receipt of the CFSR Final Report, the Sub-PAC Permanency and Child Protection Task Groups, comprised of state and county representatives, focused their work on the safety and permanency areas for the initial PIP draft. ARD engaged its state-county steering committee on the revision of the In-Home and Out-of-Home Review Instruments, ensuring closer alignment with the CFSR review instrument. The change was needed to produce data more predictive of areas of strength and those needing improvement. The Sub-PAC task groups and the ARD Steering Committee have been instrumental in the discussion of revisions. In total, approximately 125 individuals, representing state and county staff, have maintained an ongoing role in the PIP revision. Due to the amount of work focused on the PIP development, Colorado did not have a PIP Kick Off event.

PIP Approach

Colorado enters this PIP with the resources and commitment to continuous quality improvement. The research and evaluation staff has the expertise and capacity to improve data integrity and develop reporting mechanisms that are integral to management by child, youth and family outcomes. New reports developed include: Timeliness of Investigations, Service Authorization Entries, Monthly Caseworker Visits and Adolescent Care Exceptions Summary. All reports track both statewide and individual county data. Child Safety has the benefit of staff that was hired to fill multiple year vacancies in that area. ARD and DCWS have focused on child safety, with prompt follow-up of review concerns. The permanency area has been augmented with additional hires specializing in kinship and foster parent recruitment and retention. There is a strong working partnership with the Court Improvement Program, both at the state and local levels. The Family Justice Information System (FAMJIS), representing the partnership between the Colorado Judicial System and CDHS, links Trails to court data and is readily available for PIP actions. The PIP will be available to interested parties on the CDHS home page. It is coordinated and integrated with the 2010-CFSP. available 2014 which is also the CDHS home οn page: http://www.cdhs.state.co.us/childwelfare/reports.htm

The PIP's framework is composed of two distinct tracks: 1) Colorado Practice Model implementation, which is targeted in focus and 2) statewide improvements. The two tracks are concurrent and represent a two-pronged, coordinated approach that is both current and futuristic. The CPM implementation represents the future, with reform of the child welfare services system. The statewide improvements represent a path of progressive incremental improvements. Both efforts are important to Colorado achieving sustained child, youth and family outcomes. The two tracks are integrated throughout the three primary strategies that comprise the PIP.

PIP Overall Strategy

The PIP's three Primary Strategies are overarching, selected to target multiple areas needing improvement. They are synthesized in purpose and timing and each strategy reinforces the others:

- CPM implementation is critical to the development of a continuous quality improvement process that involves the state and the counties.
- CQI is key to improving safety, permanency and well-being outcomes.
- Improvements in permanency and individualization of services are critical to the well-being of children and families.

The PIP Primary Strategies are achieved through Action Steps with both targeted and statewide operational benchmarks, as defined in the PIP Work Plan. The three primary strategies are:

- Primary Strategy (PS) 1: Improve Consistency in Practice and Performance on Outcomes for Children, Youth and Families.
- Primary Strategy (PS) 2: Strengthen and Reinforce Safety Practices.
- Primary Strategy (PS) 3: Improve Permanency and Well-Being Outcomes by Increasing Access to Consistent Services Irrespective of where in the State the Children, Youth, and Family Live.

Each of the Primary Strategies contains a "core activity" that is the foundation of its benchmarks:

- PS 1: CPM implementation is the foundation of all CQI processes that will shift the State and counties to outcomes management.
- PS 2: State oversight of child safety is instituted and maintained.
- PS 3: Family engagement and engagement of systems external to child welfare services are critical to children, youth, and families receiving the services they need.

All three strategies reflect the effort to establish consistency in child welfare services, while maintaining the local flexibility of state-supervised, county-administered system.

The Primary Strategies are outlined in the next section. Each strategy contains information about specific areas needing improvement as identified in the CFSR Final Report and information about the activities in which the State and counties have engaged since the review. Each strategy is detailed with Goals, Action Steps and Benchmarks in the PIP Work Plan Matrix, followed by the:

- Key Concerns and TA Plan.
- PIP Measurement Matrix
- Appendices (includes CFSR Review Tables)

Primary Strategy (PS) 1: Improve consistency in practice and performance on outcomes for children and families.

<u>CFSR Items</u>: Systemic Factor (SF) Quality Assurance; SF Item 31, SF Item 24, Quality Assurance System; S1 Item 1, Timeliness of Investigations. Key Concerns from the CFSR Onsite Review:

- The State's QA process is not integrated into a larger QA system and it is focused primarily on the 10 largest counties.
- The State cannot readily identify the placement of every child who is in foster care due to delayed data entry of placement changes in some counties.

Post Onsite Review Activities and Accomplishments

- Efforts to strengthen Continuous Quality Improvement (CQI) include:
 - CPM development with emphasis on development of a continuous quality improvement process both for individual counties and between the state and counties.
 - Facilitation of changes to ARD's OOH and In-Home Review Instruments, with closer alignment to the CFSR instrument, by a state/county workgroup.
 - The new instruments were operationalized July 1, 2010.
 - Development of new rules to Volume 7 by ARD, which require county written response
 to case review issues that are identified. The rules are a response to CFSR findings of
 the lack of follow up to ARD review concerns are as follow:
 - Based in Trails, the process requires the county to be notified of "any unresolved issue directly impacting a child's safety, permanency, or well-being."
 - Counties and regions do not have to follow the reviewers' recommendations, but must enter a response indicating agreement or disagreement with a finding. The county provides email notification of the response to the assigned reviewer for the county.

- The ARD Review Team reviews the response, determines if the issue has been adequately addressed and notifies the county of the determination. The information is permanently stored as part of the case file in Trails.
- In the event of lack of response or timely response or determination that the concern has not been adequately addressed, ARD forwards the issue to both the DCWS Director and the Deputy Executive Director of the Office of Children, Youth and Families, or other appropriate division for follow up.
- Focus on data integrity by the Research and Evaluation Team and Colorado Trails Users Group.
- Agency Letter CW-09-24-P, issued May 21, 2009 to counties with specifications for Trails entry of OOH Service Authorization data. The entry has improved from over 30 days to 14 days, as established with Trails Reports of Service Authorizations. This activity is aligned with SF Item 24, and it is requested that it not be included in the PIP.
- The Sub-PAC Child Protection Task Group has focused on Timeliness of Investigation Reports, produced by the DCWS Research and Evaluation Team, for the last 18 months.
 - The report consists of each county's performance and the statewide performance.
 - It provides a platform for discussion of the data and the solutions for improvement.
 - Counties have taken the report back to their agencies and addressed practice issues.
 - Simultaneously, the state Child Protection Team and the Research and Evaluation Team have followed up with counties with data entry issues and data runs with countyspecific issues, such as furlough days, and Intake/Ongoing assessment issues.
 - Counties have also assessed their data, determining data systems issues, caseworker performance issues and systemic/policies issues. The state and the counties have synchronized the use of data fields, to ensure that the same information is being used by both entities.
 - Timeliness of Investigations has improved from the onsite result of 73% to 83%, as evidenced by Trails reports and ARD findings for the first and second quarters (92.6%; 92.7%, respectively) of SY 2011. The activities are closely aligned with CFSR Items 3 and 4, and it is requested that these items not be included in the PIP.
 - Colorado has maintained improvement in meeting the mental health needs of children, according to ARD data, for 2 quarters, both in assessing mental health needs (Qtr. 1, 98.8% and Qtr. 2 (98.2%) and in providing mental health services (Qtr. 1, 83.3%) and Qtr. 2, 81.4%). These items are closely aligned with the CFSR Item 23, and it is requested that this item not be included in the PIP.
- Formation of the CPI Performance Management Work Group, comprised of state and county staff, to develop high-level domains and both the process and outcomes measurement of the CPM.

PS 1 establishes development of an effective continuous quality improvement system that links the State and the counties and provides the foundation for management by outcomes. It is a significant reform that blends the implementation of the CPM with the establishment of a permanent CQI plan and builds on the work of ARD. It establishes the responsibility for and the accountability by DCWS for monitoring and reporting processes for the PIP. A new Divisional level of monitoring is established in which the

performance of 22 counties, comprising 91% of the total child welfare workload, will be regularly reviewed by state child welfare program staff. The monitoring continues the use of reports developed for establishment of baselines and processes for improvement upon receipt of the CFSR Final Report. These reports have been developed for Timeliness of Investigations, Adolescent Care, Caseworker Visits and Service Authorizations. The reports have been effective work with the counties to improve performance through identification of barriers. These reports are effective, in addition to ARD data in a continuous monitoring process. The key to the State's accountability in regular monitoring is assignment of key staff with the responsibility to distribute reports and to coordinate follow up and completion of any performance improvement plans or corrective actions that may be necessary. Colorado is prepared maintain accountability for monitoring of all CFSR items and systemic factors needing improvement and the communications needed to correct trends and negative performance.

The need for good data production as a framework for CQI development between the State and the counties is well established. One of the barriers to an effective data system has been the need for reconciliation of key data between the State and the counties. It is a task that requires persistence in focus, dialogue and matching of data elements. Since the onsite review, CQI has been evolving. It has involved prolonged discussion and adjustment of reports, and the need for a multi-inquiry approach to the data and solutions for improvements has emerged. The quest for consistency has resulted in a singular finding or solution, as determined through individual county consultation.

PS 1, Goal 1: Implement the Colorado Practice Model

Action Step 1.c: Customize the Colorado Practice Model (CPM) in 6 Phase One counties.

Operational Benchmarks (targeted): Action Step 1.c encompasses the initial activities of the CPM Implementation: It establishes a repeatable process for the subsequent three phases of implementation.

- Counties establish QPTs and begin to analyze business processes for strengths and areas need improvement.
- Examine processes leading to positive safety and permanency outcomes.
- QPTs forward county safety and permanency practices to the State Practice Initiative Group (SPIIG) for review, approval and selection of practices for the Compendium of Practice, for dissemination to phase-two counties.

Action 1.d: Customize the Colorado Practice Model in Phase Two counties.

Benchmarks: Repeat all of the Benchmarks contained in Action Step 1.c to the mapping of safety practice.

PS1, Goal 2: Establishment of a QA Process that Supports the Colorado Practice Model and Statewide Incremental Improvements

Action Step 1.e: Develop and implement a child welfare quality assurance and quality improvement process that builds on existing processes.

Operational Benchmarks (statewide): Action Step 1.e is designed to improve statewide continuous quality improvement, concurrent with CPM implementation and through the PIP reporting period. It builds on:

- Development of a quality assurance process framework used by DCWS and the counties, that is based on Trails reports, ARD reports and quality assurance mechanisms.
- The quality assurance framework is both specialized to county QPTs and generalized to ensure CFSR items needing improvement are consistently tracked and evaluated by DCWS. It ensures that areas needing improvement receive focus throughout the PIP reporting period, starting in the first quarter, and limits additional activities for counties that maintain performance standards.
- The framework establishes a regular reporting/monitoring process for CFSR items needing improvement that may be measured quantitatively: #'s 7, 10, 12, 21 and 23.
- Dissemination of information to all counties about baselines for statewide improvements, quarterly reporting placements and a copy of the approved PIP will be completed via Agency Letter.
- Quarterly review of PIP measures by the DCWS Leadership Team.
- Counties with declining performance below the established PIP standards will receive follow up by assigned state program staff.
- Counties that demonstrate declining performance for two consecutive quarters will follow the Volume 1 corrective process to determine appropriate actions.

Primary Strategy 2: Strengthen and Reinforce Safety Practices

CFSR Items: S1, S2, Items 1,3,4. Key concerns identified during the onsite review:

- Lack of consistency across review sites in the use of the Colorado Assessment Continuum (CAC) throughout the life of the child.
- Lack of consistent safety and risk assessments throughout the life of the child's experience with the county.
- Lack of documentation of safety and risk assessments in the case record (Trails) that
 would enable any county working with the family to obtain necessary case history to
 assure child safety, and to facilitate evaluation of the quality and comprehensiveness
 of the use of the safety and risk assessments.
- Lack of accountability of county departments in the use of the CAC.

Post Onsite Review Activities and Accomplishments:

- Thirty-five of the 64 counties have been visited, and the schedule is structured for the remaining county visits.
- Training in the CAC has been provided as needed.
- Consistency in the understanding and the use of the CAC has improved.
- DCWS Child Protection staff has provided ongoing consultation as requested by counties.
- Alignment of the Research and Evaluation and the State Child Protection Team to assess the impact of the CAC on child safety.
- Collaboration between ARD and the State Child Protection Team on county child safety issues.
- Timeliness of investigations statewide has improved from 73% in 2007 to 83% for 2010, as measured with Trails Timeliness of Investigations Reports, from September 2009 to present.

PS 2 establishes the state's lead role in reprioritizing child safety, building on the strength of its safety/risk protocol, the CAC developed and implemented during the 2002 CFSR PIP. With the onsite review finding of inconsistent use of assessments and lack of matching of services to needs, it was recommended that the State improve its monitoring role. Initial monitoring was predicated on determining how the protocol is used prior to developing a solution. The plan to visit all counties was established to gather information, provide support and training. To date, it has been consistently determined that counties are using the CAC, but there is confusion about the instructions for the protocol. With county input, changes were made to the instructions. Throughout the visitation with counties and provision of technical assistance, safety practices have improved. It has been demonstrated by the state program staff that relationships that support the county safety practices have been effective in improving outcomes. There were no performance improvement plans developed as a result of the visitation that has occurred in the last 18 months, and improvement in the use of the protocol is now monitored quarterly with ARD data by state program staff. State Child Protection program staff remain assigned to specific counties. With PIP approval, state program staff, under the direction of the State Child Protection Administrator, will monitor quarterly reports for CAC utilization and monthly Timeliness of Investigation Reports to ensure safety practices are maintained. Matching families' assessed needs to appropriate services is a more complex issue, and will require additional improvements evolving through PS 3.

PS 2, Goal 1: State Supervision of Counties Will Assure That Child Safety is the Priority of Staff During Each Contact With A Child.

Action Step 2.a: Assessments will be completed according to State Policy.

Operational Benchmarks (targeted): Action Step 2.a formalizes the state/county collaboration in determination of thresholds for county performance (Sub-Pac Child Protection Task Group) and the State Child Protection Program Staff (SCPPS) supervisory role in its work with the counties and its collaboration with ARD to improve statewide outcomes in child safety:

- The Child Protection Task Group of the Child Welfare (CW) will develop the threshold
 of county performance related to safety measures including timeliness of investigation,
 services to prevent removal and completion of the CAC.
- SCPPS will complete the Safety and Risk Coaching Schedule, completing visits to thirty-two counties in the next two years, visiting six counties per quarter, and complete written summaries.
- Additional visits or changes to the schedule, are made based on notification of safety concerns by ARD, stakeholders and/or community individuals.
- Technical assistance is provided to counties based on the review of ARD safety and well-being findings, specific concerns arising from a referral to DCWS, and contact with county administration to determine assistance that is needed.
- SCPPS accompanies ARD staff for In-Home and Safety Assessment Reviews when potential issues are identified prior to the review.
- Formal follow up is initiated as needed, with SCPPS and the county developing a corrective action or performance improvement plan when performance, as measured by ARD, remains consistently low or declines over two quarters.
- SCPPS maintains monitoring, oversight and support to the county until the performance issues are successfully completed.
- Four State DCWS program staff attends the Training Academy for certification or recertification at either the caseworker or supervisory level.

Primary Strategy 3: Improve Permanency and Well-Being Outcomes by Increasing Consistent Services Irrespective of where in the State the Children, Youth and Family Live

<u>CFSR Items</u>: Systemic Factor Staff and Provider Training, SF Items 31, 32, 44; Systemic Factor Service Array and Resource Development; SF Items 35, 36, 37; Systemic Factor Case Review System, SF Items 24, 25, 28; P1, Items 6, 7, 8, 9, 10; P2, Items 12,13,14,15,16; WB1, Items 17,18,19, 20; WB2, Item 21; WB3, Item 23, Key Concerns from the CFSR Onsite Review:

- ASFA requirements are not met in the areas of achieving termination of parental rights (TPR), documentation of compelling reasons, permanency goal establishment, and adoptions.
- There is a lack of accessibility and quality of some key services in the state, particularly mental health services. The lack of services may contribute to placement instability and delays in permanency.
- There is a shortage of foster parents in the state that creates challenges in placing children in OOH placements that are carefully matched to their needs. This lack of adequate matching may contribute to placement instability and to delays in permanency. Some county-certified foster parents may not be attending ongoing training.
- Diligent efforts to maintain family connections were found to be inconsistent, siblings were not consistently placed together, visits with parents and siblings were not consistently occurring.
- There were placement issues involving multiple and unstable placements for children and youth and inconsistent timely Trails entries of placement information.
- Independent living services were not consistently provided to youth who were likely to transition from foster care to independent living.

Post Onsite Review Activities and Accomplishments:

- Development of the Statewide Foster and Adoptive Recruitment and Retention Plan (Appendix E) with the assistance of the National Resource Center for the Recruitment and Retention of Foster and Adoptive Parents at Adopt US Kids. The completion of the Plan is closely aligned with the activities of SF Item 44, and it is requested that this item not be addressed in the PIP.
- The DCWS Quality Assurance Team's increased county foster care certification program oversight of ongoing foster parent training. Program review results indicate the need for training resources for small counties. Improvement is evidenced by a 2007 total of 38% of ongoing foster care certification files with missing or incomplete ongoing training hours, reduced to 14.41% for 2010. It is determined that the activities to improve performance are aligned with the activities of SF item 36, and it is requested this item not be addressed in the PIP.
- Development of the rural foster care coordinators website, increasing the network of support and resources with the involvement of 39 rural counties.
- County support and technical assistance provided by DCWS Recruitment and Retention Specialists.
- Development and publication of the Colorado Kinship Resource Guide.
- Completion of two annual exit surveys of foster parents leaving the system, determining retention trends of foster/adoptive/kinship resource families.
- Implementation of the Relative Guardianship Assistance Program (RGAP) effective October 2009:

- Rules adopted February 2010, with eligibility backdated to October 2009.
- RGAP is open to both IV-E (federal/state/county) and non-Title IV-E (state/county) eligible youth and children whose permanent goal of reunification or adoption is no longer appropriate based on their individual needs.
- The youth/child must have lived at least six (6) consecutive months with a relative in the fifth (5th) degree of kinship and who was fully certified as a kinship foster home.
- The child must have a significant relationship with the prospective guardian.
- The guardian must be committed to the permanency of the youth/child.
- The guardian must be fully informed about the benefits of permanency and the merits of adoption as a more permanent living arrangement for the youth or child.
- The amount of reimbursement (less respite amounts) is achieved through negotiation, based on the child's needs. Daily rates are established in Volume 7 Rule.
- The guardian may receive reimbursement in an amount of up to \$2000.00 for nonrecurring expenses.
- The Juvenile Court agrees to the petitioning of the Probate Court by the guardian.
- A three-year agreement is developed with the guardian, who must also submit annual reports verifying that the child is still in his/her care. The county manages the agreement and it is renewed every three years.
- Colorado has focused on improving Monthly Caseworker Visits via a state-county steering committee and through the Sub-PAC Child Protection Task Group. The accomplishments include:
 - Surpassing yearly Monthly Caseworker Visits targets.
 - New Volume 7 Rules passed for the Designated Visitation Caseworker.
 - Hands-on Trails training session provided to all counties for the Designated Visitation Caseworker documentation.
 - County visits by State Child Protection Team Program Staff for consultation on methods counties are using to improve visitation rates and data entries.
 - Established regular reviews of Trails Caseworker Monthly Visitation Reports by the Sub-PAC Child Protection Task Group.
 - Although National Standards for Placement Stability were met, Colorado continues to focus on the
 improvement in this area. The youth population has been targeted with improving the placement
 stability for youth with trainings in runaway prevention and the delivery of independent living
 services. The Adolescent Care Exceptions/Summary Batch Report has been developed to provide
 better tracking of all children, age 15 years, 9 months in OOH Placement. The report provides
 concise information on Independent Living Plans, Emancipation Transition Plans, adjudications
 and placements (including history). The report is provided to counties to assist with their CQI
 processes and caseload management.
 - Improvements, according to ARD data, have been made in the following CFSR Items, as a
 path to placement stability.
 - # 13: Parent and Sibling Visitation: Qtr. 1, (mother) 81.2%; (father) 70.1%, (siblings)

87.1%

14: Preserving Connections: Qtr. 1, 99.0%; Qtr. 2, 99.5%

• #15: Relative Placements: Qtr. 1, 97.6%, Qtr. 2, 98.6%

It is requested that the measurement of these items is closely aligned with the CFSR and that they not be addressed in the PIP.

PS 3 is a multi-pronged strategy encompassing both permanency and well-being domains. It is comprised of three separate goals:

- Increase Family Involvement in Case Planning (Items 6.13,14,15,16,18,20,21, SF 25)
- Address service array for children in out of home placement (Items 12, 23, SF 36, SF 37)
- Reduce barriers to timely and appropriate permanency for youth and children (Items 8, 9, SF 28)

The strategy involves the complex nature of relationships: of children with their families, families with county agencies; and with the external systems that are critical to children youth and families receiving child welfare services. Each goal addresses an area that is at the heart of permanency, starting with the child, youth and family, the services that are needed to improve individual and family functioning, and out to the external systems that are intricately involved, but not controlled by the child welfare system. The goals, action steps and benchmarks address the largest group of items and systemic factors requiring improvement, with many of the measures being qualitative and accomplishment of the work being dependent upon collaboration with other systems and their resources. PS 3 is concurrent with the work of the CPM implementation counties as they identify their promising practices and areas needing improvement.

PS 3, Goal 1: Increase Family Involvement in Case Planning

Action Step 3.a: Develop, implement and monitor Family Engagement Policy.

Operational Benchmarks (statewide): Action Step 3.a initiates the establishment of state basic standards for family engagement, through the Sub-PAC Permanency Task Group, resulting in:

- Development of a threshold of county performance related to permanency and wellbeing measures that includes
 - Visiting with parents and siblings in care;
 - o Relationship of children in care with their parents
 - Needs and services of children and parents,
 - o child and family involvement in case planning and,
 - o caseworker visits with children and parents.
- State-county representation of both the existing and future family engagement strategies and principles.
- Establishment of the basic standard/expectations for family engagement by all counties.
- Description of appropriate family engagement caseworker practice
- Determination of policy/rules changes to effect improved outcomes
- Revision of the Training Academy's training curriculum will be reviewed to ensure that the family engagement defined standards included reflect the most current standards for new caseworkers and supervisors.

- Training of ongoing caseworkers and supervisors.

PS 3, Goal 2: Address Service Array issues for Children in OOH Placement

Action Step 3.b: Improve access to placement resources for sibling groups.

Operational Benchmarks (statewide): Action Step 3.b impacts recruitment and retention with the State Recruitment and Retention Plan developed with the National Resource Center for the Recruitment and Retention of Foster and Adoptive Parents at Adopt US Kids that is specific to the recruitment of resources for sibling groups. The State will have a dual focus with information sharing from the Plan and work with county departments on their annual plans that include recruitment of the sibling group resources.

Action Step 3.c: Improve access to mental health services for children in placement.

Operational Benchmarks (targeted): Action Step 3.c engages DCWS and Behavioral Health in a joint needs assessment of the mental health needs and access to services for children, youth and families receiving child welfare services and will:

- Build on the information in the Colorado Population in Need 2009 (COPIN) report completed by the Division of Behavioral Health, Office of Behavioral Health and Housing and CDHS that includes Medicaid data.
- Involve all sectors of Colorado's regionalized system of community mental health services delivery, Behavioral Health Organizations that provide services to families with Medicaid, combined with the availability of DCWS Core Services Program, in an assessment of its complex services delivery system.
- Collaborate with the Division of Behavioral Health to determine solutions required to improve services access.

PS 3, Goal 3: Reduce Barriers to Timely and Appropriate Permanency For Children

<u>Action Step 3.d.</u>: Partner with the judicial system and external service providers to improve outcomes for children, youth and families.

Operational Benchmarks (targeted): Action Step 3.d combines the expertise of the CFSR Executive Oversight Committee (EOC) and the Court Improvement Program (CIP) in the assessment of current and historical FAMJIS data to determine the evaluation process for three judicial districts, resulting in the:

- Determination of barriers to consistency and timeliness of permanency practices.
- Evaluation of the need for changes to existing judicial directives.
- Dissemination of information to all other judicial districts for information and comparison with their individual jurisdictional practices.

<u>Action Step 3.e:</u> Improve timely completion of adoption home studies and associated paperwork. Operational Benchmarks are statewide and focus on training adoption supervisors to requirements for timely completion of home studies, followed by monitoring of county actions and follow-up, including program improvement or corrective action.

IV. ORGANIZATIONAL STRUCTURE TO SUPPORT AND IMPLEMENT PRACTICE CHANGES

The organizational structure that supports and implements practice changes is changing with Colorado's election of its 42^{nd} Governor, John W. Hickenlooper, who assumed office on January 11, 2011. Prior to assuming office, Governor Hickenlooper served as the Mayor of Denver, Colorado's largest metropolitan area, from 2003 to 2011. The newly appointed CDHS Executive Director is Reggie Bicha, former Secretary of the Wisconsin Department of Children and Families. The DCWS restructure is supporting the implementation of practice changes by county departments to improve services to children and their families.

V. COORDINATION AND INTEGRATION OF THE PIP AND THE CFSP

The 2010-2014 CFSP provides the foundation for coordination and integration of the PIP. It is anticipated that both of these documents will be fluid for the next 24 months as DCWS proceeds through the change management activities supported by the MPCWIC work plan. DCWS restructuring activities are included in the 2010-2014 CFSP. CFSP strategies are integrated into the planning for PIP action steps and benchmarks in the PIP matrix.

VI. DATA SOURCES AND METHODS FOR MONITORING IMPROVEMENTS

Trails and ARD data will be used to establish baselines and monitor improvements of the PIP. The DCWS Research and Evaluation Team will provide the data and trend analysis for DCWS Program Staff to evaluate and work with counties on improvements.

A six-month data collection time frame is used in establishing base lines that results in information spanning one year. ARD reviews the case of every child in OOH care every six months that he/she is in care. There may be an occasional late review, but it would be completed by the seventh month. Because each review goes back six months, the total timeframe of review spans included in each rolling six-month report actually consists of 12 months. For example, reviews held in January would have a review span going back to July of the previous year, and continue up to the date of the review. Likewise, reviews held in June would have a review span of January of that year through the date of the review. Therefore, the total months considered as a part of all these reviews would be from July of the previous year through June of the current year, or 12 months.

ARD reviews approximately the same amount of cases each month. The methodology used to determine who is reviewed stays the same, fluctuations would be primarily driven by changes in the overall eligible population. This is the cleanest source of baseline data—combining other populations or reviews to obtain a 12-month time frame would make it difficult to quickly identify trends and take corrective steps, or to identify positive practices to replicate.

VII. STAKEHOLDERS

The input and feedback from stakeholders is important in informing CDHS and counties about the status of the Child Welfare system and effective practices for improvements of the system. The development, implementation, monitoring, and reporting of progress of the PIP incorporates regular stakeholder input through the Collaborative Management Program consumer groups and the county youth advisory boards.

CFSR GENERAL INFORMATION FORM

Colorado Chil	d and	Family	Ser	vices	Plar	n Perfo	rma	nce	lm	orove	eme	ent Pla	an (Genera	al Info	ormat	ion		
CB Region:				III	1	IV		٧		VI		VII		VIII	X	IX		Χ	
State:							1			1									
Telephone Number: 303										03-844	-120	14							
Lead Children's Bureau Regional Office Contact Person: Ms. Marilyn Kennerson								E-mail Address:											
Mr. Sam Martinez						Marilyn.Kennerson@acf.hhs.gov Sam.Martinez@acf.hhs.gov													
State Agency Name:								Address: 1575 Sherman Street											
Colorado Department of Human Services Division of Child Welfare							Telephone Number: 303-866-4207												
Lead State Agency Contact Person for the CFSR:										none 66-40		mber:							
Judy Rodriguez Manager, Child Welfare Division						E-mail Address:													
						Judy.Rogriguez@state.co.us													
Lead State Agency PIP Contact Person (if different):							Tel	epl	none	Nu	mber:								
						E-mail Address:													
						Telephone Number: 303-866-4054													
Lead State Agency Data Contact Person: Judy Rodriguez			E-mail Address:																
. •						Judy.Rodriguez@state.co.us													
State PIP Team Mer	nbers	* (name	e, titl	le, orç	ganiz	ation)													
1. Lloyd Malone, Dire	ector,	Divisio	n of	Child	Wel	fare, C	DHS	3											
2. Judy Rodriguez, A	Associ	ate Dire	ecto	r, Div	ision	of Chil	ld W	elfa	re,	CDH	IS								
3. Gayle Ziska Stack	, Dire	ctor; De	epar	tmen	t of F	Regulat	ory	Affa	irs	and	Em	ploym	ent	, CDH	S				
4. Sharen Ford, Man	ager,	Divisio	n of	Child	l Wel	fare, C	DHS	3											
5. Dan Makelky, Mar	nager	Divisio	n of	Child	Wel	fare, C	DHS	3											

6 Mary Griffin, Program Administrator, Division of Child Welfare, CDHS
7. Connie Vigil, Program Administrator, Division of Child Welfare, CDHS
8. Carol Wahlgren, Program Administrator, Division of Child Welfare, CDHS
9. Norman Kirsch, Program Administrator, Division of Child Welfare, CDHS
10. Bill Madura, Data Analyst, Division of Child Welfare, CDHS
11 Greg Smith, Data Analyst, Division of Child Welfare, CDHS
12. Bob Coulson, Program Administrator, Division of Child Welfare, CDHS
13. Shirley Dodd Program Administrator, Division of Child Welfare, CDHS
14. Laurel Moore, Program Administrator, Division of Child Welfare, CDHS
15. Roni Spaulding, Program Administrator, Division of Child Welfare, CDHS
16. Brian Field, Consultant, CDHS
17. Art Atwell, Director, Workforce Development Services, CDHS
18. Mary Bush, Manager, Administrative Review Division, CDHS
19. Sue Nichols, Manager, Administrative Review Division, CDHS
20. Marc Mackert, Acting Director, Administrative Review Division, CDHS
21. Charles Smith, Deputy Director, Division of Behavioral Health, CDHS
22. Karen Mooney, Manager, Division of Behavioral Health, CDHS
23., Pamela Neu, Manager, Division of Behavioral Health, CDHS
24., Bill Delisio, Family Law Program Manager, Colorado State Court Administrator's Office
25. Connie Linn, Manager, Broomfield County Department of Health and Human Services
26. Angela Mead, Supervisor, Arapahoe County Department of Human Services
27. The Honorable Karen Ashby, State Judicial
28. The Honorable Michael O'Hara, State Judicial
29. The Honorable Steven Patrick, State Judicial
30. Frank Bennett, COCAF/Parent Representative
31. Debra Campeau, Attorney, Office of the Guardian Ad Litem
32. Shirley Rhodus, Child Welfare Director, El Paso County Department of Human Services
33. Roy Reed, Administrative Review Division, CDHS
34. Skip Barber, CAFCA
35. Sherri Heath, Mesa County Department of Human Services
36. Amy Berry, Intake Administrator, Denver County Department of Human Services
37. Chris Cowperthwaite, Adams County Department of Human Services

- 38. Catherine Craig, Intake Manager, Garfield County Department of Human Services
- 39. Ida Drury, DR Program Manager, CDHS
- 40. Brooke Elymilen, Domestic Violence Program Specialist, Division of Behavioral Health and Housing
- 41. Carrie Emmot, Ongoing Child Protection Supervisor, Jefferson County Department of Human Services
- 42. Jacque Frenier, Administrator, Morgan County Department of Human Services
- 43. Ruth Glenn, Domestic Violence Program Director, CDHS
- 44. Erin Hall, Program Specialist, Child Welfare, CDHS
- 45. Gail Harwood, Manager Child Protection Services, El Paso County Department of Human Services
- 46. Todd yman, Administrator, Arapahoe County Department of Human Services
- 47. Jill Jordan, PSSF Program Administrator, Division of Child Welfare, CDHS
- 48. Susan Ludwig, Administrator, Adams County Department of Human Services
- 49. Alisa Marlatt, Program Specialist, Division of Child Welfare, CDHS
- 50. Sue McDonald, Child Protection Program Manager Jefferson County Department of Human Services
- 51. Michael Gallegos, Quality Assurance Manager, Division of Child Welfare, CDHS
- 52. Marie Peer, Director, Moffat County Department of Human Services
- 53. Ashleigh Rankin, Supervisor, Division of Child Welfare, CDHS
- 54. Stacee Read, Program Specialist, Division of Child Welfare, CDHS
- 55. Lynn Renick, Director, Garfield County Department of Human Services
- 57. Terri Ryan-Thomas, Manager, Boulder County Department of Health and Human Services
- 58. Pat Sweeney, Administrator, Douglas County Department of Human Services
- 59. Melissa Carson, Deputy Director, Child Welfare/Youth Services, Denver County
- 60. Joanne McLain, Deputy Director, Elbert County Department of Human Services
- 61. Edie Winters, Permanency Manager, Adams County Department of Human Services
- 62. Kathie Snell, Deputy Director, Family Services, Aurora Mental Health Center
- 63. Joanna Parker, Child Welfare Manager, Prowers County Department of Human Services
- 64. Roxanne Sabin, Caseworker Supervisor, Jefferson County Department of Human Services
- 65. Peggy Meis, Child Welfare Supervisor, Logan County Department of Human Services
- 66. Jeff Koy, Attorney, Rocky Mountain Law Center
- 67. Ki'i Kimhan Powell, Research and Evaluation Manger, Division of Child Welfare, CDHS
- 68. Jane Looney, Supervisor, Larimer County Department of Human Services
- 69. Art Navalta, Manager, El Paso County Department of Human Services
- 70. Blythe Chapman, Regional Specialist, CDHS

71. Jodie Sherrier, Elbert County Department of Human Services
72. Lily Boyce, EOC Parent Representative
73. David Menefee, Associate Director, Division of Child Welfare, CDHS
74. Ron Ozga, Office of Information and Technology, CDHS
75. The Honorable Robert Lowenbach, State Judicial
76. Sister Michael Delores Allegri, Colorado State Foster Parent Association
77. Elizabeth Donovan, Director, Gilpin County Department of Human Services
78. Al Estrada, DYC, CDHS

PIP Agreement Form

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

State child welfare agency
Children's Bureau (Child and Family Services Review staff)
Child Welfare Review Project, c/o JBS International, Inc.
Agreements
The following Federal and State officials agree to the content and terms of the attached Program Improvement Plan:
Name of State Executive Officer for Child Welfare Services Date
Children's Bureau Date

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