

**Continuous Quality Improvement
Quality Service Review**

FINAL REPORT

September 15 – 19, 2008

Eau Claire County Department of Human Services

**Child Welfare Continuous Quality Improvement Program
Office of Performance and Quality Assurance
Department of Children and Families**

*A Report by
The Continuous Quality Improvement (CQI) Team*

January 5, 2009

I. INTRODUCTION

The Continuous Quality Improvement (CQI) Program, within the Office of Performance and Quality Assurance (OPQA), of the Wisconsin Department of Children and Families (DCF), uses the Quality Services Review (QSR) protocol to evaluate the case practice models of Wisconsin's county child welfare programs. The QSR generates useful information for county staff and community stakeholders as to outcomes for children and families served, strengths of local practice, and opportunities for improving system performance.

The QSR process also provides an opportunity to gather additional information the department will use in reporting some federally required information, which is part of the Child and Family Services Reviews (CFSR).

The Continuous Quality Improvement Team conducted a Quality Service Review in Eau Claire County during the week of September 15, 2008. During the same week, staff from the Children's Court Initiative (CCI) conducted a review of the Juvenile Court. CCI is a comprehensive, ongoing, collaborative project designed to strengthen court processing in Chapter 48 cases.

II. THE EAU CLAIRE COUNTY REVIEW

A. REVIEWERS

In the Eau Claire County review, twelve reviewers participated in reviewing the twelve cases selected. Four individuals were in the role of a "Shadow 2" reviewers. As a Shadow 2, each reviewer is observed and coached in their development as lead case reviewers. The remaining eight reviewers have completed their training and have been certified as QSR reviewers. All the lead case reviewers who provided coaching have extensive experience in child welfare. The reviewers who participated in the Eau Claire County review brought diverse backgrounds and experience. The twelve reviewers included two Continuous Quality Improvement Specialists, two Human Services Area Coordinators, two state Adoptions Quality Assurance Specialists, three retired child welfare professionals, one Initial Assessment worker from another county, one pediatric social worker from the child protection unit of a hospital and one state Adoption Services Planner.

B. CASE SAMPLE

Twelve cases were randomly selected for review in Eau Claire County. In each case, one child was selected as the "focus child." Every attempt is made to stratify the case sample across workers and ages and genders of children. A family must agree to participate in the review process and sign releases for participants to be interviewed by the review team, or the case is not selected. In the Eau Claire review, a total of 106 persons were

interviewed. Of the twelve cases, five of the children were living in their birth homes and seven were placed in out-of-home care. Three children were in the 0-4 age range, four children were in the 5-9 age range, three children were in the 10-13 age range, and two children were over the age of 13. There were six males and six females in the sample.

C. STAKEHOLDER INTERVIEWS

As a complement to the individual case reviews, focus groups were conducted with stakeholders from the local child welfare system. Site leaders Carrie Finkbiner and Julie Fliss conducted these sessions. In addition, Bridget Bauman of the Children's Court Initiative conducted sessions jointly with the Site Leaders for many of the focus groups. The external perspectives that were gathered provide a valuable source of insight and feedback about how the systems with which families are involved interface and perform with the child welfare agency, thereby affecting and influencing outcomes. The stakeholder focus groups and their perspectives are described in Section III.

D. DEMOGRAPHICS

Eau Claire County is a large rural county with a population of 94,741 in 2006. The county seat is the city of Eau Claire, where focus group participants noted that many of the county's services and resources are housed. Individuals noted this can impact a family's ability to access the services if they live outside of the city, especially because transportation is a challenge to many families. Focus group participants advised that they have seen an increase in service industry jobs that tend to pay workers lower wages and do not keep up with rates of inflation. According to the 2004 U.S. Census, 11.7 percent of the county's population was below the poverty level, compared with 10.4 percent of the state's population. Individuals in focus groups further indicated that schools have experienced an increase in the enrollment for free and reduced lunch programs.

Overall, Eau Claire was described as a conservative county and a safe, clean place to raise a family. With a major interstate running through it, Eau Claire County has attracted residents from more urban areas, such as Milwaukee and Chicago. Some of these people come to settle permanently. Others come in search of a better life for their families and an escape from the problems they faced living in a city, yet the struggles often remain despite the relocation. Focus group participants added that families working with the Department are exhibiting more co-occurring conditions, i.e., mental illness, poverty, alcohol and other drug use, in addition to generational involvement with the child welfare system. Furthermore, addressing the needs of families with a number of these conditions can challenge the child welfare system and the development of effective strategies to promote the safety, permanency and well-being of children.

III. THE SYSTEMIC PERSPECTIVE (MACRO VIEW)

A. ORGANIZATIONAL – STRENGTHS

A number of organizational strengths were identified by focus group participants. The staff was described as “upbeat,” with “a positive attitude.” Participants portrayed the county social workers to be respectful of families and committed to partnering with families to achieve positive outcomes. Individuals spoke of the “phenomenal” staff of the Coordinated Services Team (CST) and their responsiveness to families and service providers. Many also spoke highly of the Department’s supervisors, manager and director. The supervisors and manager are open to new initiatives and staff development. For example, some of the ongoing social workers have been allowed to partner with another worker on a few cases. Individuals noted that partnering on cases has proven beneficial because the workers are able to “bounce ideas off each other” and results in “two sets of eyes” on the child and the family. Focus group participants further acknowledged the experience and competence of the supervisory team, as well as their support and willingness to “pinch hit” for one another. In general, individuals expressed their appreciation that the supervisors, manager and director are accessible to discuss issues with the community and open to feedback from stakeholders.

Many also noted their gratitude for the Department’s willingness to collaborate with community stakeholders, including law enforcement, school personnel, contracted providers and others. Individuals added that there was a time when communication between the Department and stakeholders was not as effective or positive as it is currently. Focus group participants attributed the improvement to efforts made by the Department to partner with stakeholders and become more accessible when issues arise. For example, one individual stated, “we can agree to disagree” while noting the benefit of being able to have such discussions and respectfully disagree. Whether they agree or disagree, participants considered the Department’s efforts to collaborate and maintain open communication with stakeholders to be beneficial toward achieving positive outcomes for children and families.

One other strength that was identified in focus groups is the Human Services Board. Focus group participants described board members as active and supportive of the Department’s initiatives. Others added that the Human Services Board is open to learning about services and programs offered in the county. For example, they have invited staff from the Department and community providers to board meetings to speak about programs and provide information regarding the services they offer to the community. Individuals noted that this has helped the Human Service Board better understand the value of current programs to the community and the families in which they serve.

B. ORGANIZATIONAL – CHALLENGES

In addition to strengths, focus group participants also identified some challenges facing this organization. One identified challenge results from the handling of child abuse and

neglect cases. In Eau Claire County, the Juvenile Court Intake (JCI) is attached to the court and not to the Department of Human Services. The JCI worker takes and responds to all of the child abuse and neglect reports made outside of business hours, in addition to determining when a child needs to be removed from a parent or caregiver due to safety threats. While the Department and JCI maintain a positive relationship and open communication, challenges arise because each uses different practice criteria when addressing child abuse and neglect cases. For example, the Department social workers have been trained in the state safety standards that advise workers of requirements and other guidelines when addressing identified present and impending danger threats; however, only one of the JCI workers has participated in this training. Furthermore, both parties identify this to be a challenge, yet added that it is not within their abilities to change the current process.

Another challenge raised throughout the focus groups was the tenuous history between the Department and the courts. Individuals noted a time when the courts had lost confidence in the work generated by Department social workers. Thus, oversight was increased and the relationship between the courts and the Department reportedly experienced further strain. In February 2008, the Department of Human Services (DHS) instituted monthly meetings that included the Judges, Children's Court Services Director, DHS Director, and the manager and supervisors of the Family Services Unit with the primary goal of improving their working relationship. Although some focus group participants acknowledged that the relationship has since improved, other participants note that there is still some room for improvement.

The community's understanding of the role of social workers and of DHS was another identified challenge among focus group participants. Individuals stated that the community tends to believe that the role of DHS is to hand out money to individuals. Others noted that some community members and stakeholders perceive the county budget to influence decisions regarding child placement and service delivery to families and not child safety and well-being. For example, some focus group participants felt DHS would occasionally choose a relative placement over a foster care placement due to cost rather than the best interest of the child. However, others explained that a general belief in the community that "the apple does not fall far from the tree" and that some people do not feel that relative placements are in the best interest of the child in any circumstance.

Focus group participants further noted a general lack of understanding in the community and among some stakeholders regarding when DHS becomes involved with a family and when they are able to intervene. Individuals expressed uncertainty about "where lines are drawn" or "where the bar is" with regard to screening in cases for an initial assessment or opening a case for ongoing services with DHS. In addition, focus group participants also shared a perception that turnover was quite high among the social work staff of Children and Family Services Unit. It was later explained by DHS management that generally the Department is stable but that workers will sometimes post into other positions on units within DHS to gain experience in a different discipline or for other reasons.

Focus group participants further advised that the identification of children subject to the Indian Child Welfare Act (ICWA) does not always occur early on in the case, when the family first becomes involved with DHS. Focus group participants indicated that the parents or caregivers may not be forthcoming with such information or other challenges may arise that inhibit their ability to identify whether the child is subject to ICWA and notify the tribe. Moreover, when these cases do arise, DHS case workers and the court are not familiar with the requirements of ICWA because it is not something that comes up in their daily work with families. Therefore, individuals noted that parties' knowledge of ICWA was limited due to the small number of cases in this county and an uncertainty regarding whether the requirements of ICWA were always followed.

C. RESOURCES – STRENGTHS

Focus group participants were able to name many resources that provide valuable services to the residents of Eau Claire County. The Department's staff was one resource that was identified, in addition to the wide array of contracted providers, including Lutheran Social Services (LSS), Children's Service Society and others who provide diverse services to address the needs of children and families. The Family Resource Center was noted for the parenting classes it offers to mothers and fathers seeking to learn and demonstrate skills to safely provide for their child's needs. Individuals added that the Beacon House, a transitional living facility for families, has benefited families facing hard times and trying to get back on their feet. Furthermore, the Children's Advocacy Center (CAC) has been a valuable resource for both providers and for families. The CAC provides a venue for a child to be interviewed on video regarding abuse allegations. Individuals advised that this process limits the number of times that the child needs to be interviewed and limits further exposure to trauma experienced as a result of the incident. The CAC is also an example of the Department's willingness to collaborate with community stakeholders, as the director has had an ongoing role in its development.

The staff who facilitate the Coordinated Services Teams (CST's) were identified as an organizational strength, though many also identified CST's to be a valuable resource to the community and to families. One individual stated, "[CST's] allow participants to see the situation through a different set of eyes" due to the family's active involvement in the process. Another program highlighted by focus group participants was the Intensive Supervision Program (ISP). While this program primarily serves families with a youth involved in the delinquency system, the Department has chosen to use it on a very limited basis for some families with a child in need of protection or services (CHIPS) order. As noted in its name, the focus of this program is to maintain high-risk juveniles in the community through intensive supervision. Among other services, the program includes random home visits and urine analysis (UA's). With CHIPS cases, the program provides random UA's when a parent or caregiver struggles with substance use. Overall, individuals saw the value in the program's ability to help children remain safely in their family homes.

Two other resources that were identified serve as supports in the Department's effort to ensure the safety, well-being and permanency of children. The Western Training

Partnership was viewed as a beneficial resource due to the staff development trainings that they provide, as well as their willingness to add trainings on subjects that the county requests. Individuals also considered the State Permanency Consultant to be a helpful resource to agency staff. The State Permanency Consultant was described as very accessible and willing to consult with staff on individual cases. In addition, the State Permanency Consultant participates in case plan reviews, which occur every three months. Focus group participants found this to be helpful because it allowed the State Permanency Consultant to get regular updates on the family's progress and to be on the same page as everyone else.

The foster parents were also identified as a resource strength by focus group participants. Individuals described the foster parents as experienced and dedicated to the well-being of the children in their homes. All in all, people considered the foster parents to be a resource and support to DHS, children, parents and service providers in the community.

D. RESOURCES – CHALLENGES

Though many focus group participants described Eau Claire County as a community with a wealth of resources, individuals also noted that some of the resources can be difficult to access and are not always available when needed by families. For example, focus group participants advised that many of the children and families involved with DHS are on medical assistance (MA). However, very few medical, dental and mental health providers accept MA, limiting families' abilities to access such services. Individuals added that some families travel out of county, and possibly out of state, to find a provider who will serve them. Frequently, families must also travel a distance to access in-patient mental health and alcohol and other drug services for both children and adults. Furthermore, focus group participants noted that it is particularly challenging for biological and foster families to access specialized services, such as mental health services for children and youth; trauma-informed assessments and treatment; and sex offender treatment for adults and youth.

Accessing services and resources can be an even greater challenge for families who lack reliable transportation. Focus group participants advised that the only public transportation is located within the City of Eau Claire, which is also where most of the county's services and resources are located. Thus, families who live outside of the city often have to travel a greater distance to access services and may experience additional challenges in doing so if transportation resources are not available to them.

Focus group participants listed some services as beneficial in helping families achieve necessary changes; however, they added that these services can only work with a limited number of families and may have waiting lists at times. Supervised family interaction and in-home parenting services are examples of resources that focus group participants indicated sometimes have a waiting list. Individuals stated that DHS tries to address service needs in the interim, i.e., having workers supervise family interactions or seeking alternative resources. Yet, the limited availability of such services may delay the family's progress in making the changes necessary to achieve safe case closure.

Services for youth aging out of care and recruitment of foster parents were other identified resource challenges. Individuals noted that the services and supports tend to “drop off”, when the youth in out-of-home care reaches an age when they are no longer eligible for services under child protective services. Though the individual may be eligible for services from other divisions within DHS, focus group participants advised that the transition process is not smooth, generally resulting in gaps in resources and supports for this population. With regard to foster parents, individuals identified the current foster homes as a strength; however, focus group participants further noted a need for a larger pool of quality foster homes located within the county and that recruitment of such homes can pose a challenge.

Furthermore, focus group participants also expressed a need to increase the pool of mentors for children and youth. Individuals indicated that many of the children and youth involved with DHS are lacking healthy role models. While mentors have been assigned and are currently working with some of the children, focus group participants advised that there are not enough mentors to fill the current need.

E. PRACTICE – STRENGTHS

Many practice strengths were identified among focus group participants. As noted in previous sections, the Coordinated Services Teams (CST’s) were considered to benefit families and the community in a number of ways. With regard to practice, individuals felt that CST’s provide a venue for everyone to “get on the same page” and often results in the process “moving faster” because everyone involved is aware of his or her role. Focus group participants also valued that the family plays an active role in the CST, as well as a voice in decision making. Individuals added that DHS acknowledges the benefits of family teaming and is looking to expand its use across all families involved with DHS, in addition to those who are referred for a CST. Furthermore, focus group participants noted that DHS is very willing to collaborate with community stakeholders and understand “they can’t do it alone” when trying to accomplish positive outcomes for families.

Other practice strengths that were identified concerned children placed in out-of-home care. Focus group participants indicated that children in out-of-home care are generally stable and not experiencing disruptions in their placements. Data generated by the State of Wisconsin Bureau of Program Integrity (BPI) confirmed that the majority of children in out-of-home care only experience one to two placements. The federal measure requires that 86.7 percent of the children in out-home-care have no more than two placement settings within 12 months of the most recent removal. The data from Eau Claire County was above the 86.7 percent requirement in each quarter, averaging 88 percent or higher. This information indicates that DHS has been effective in matching each child’s needs to the caregiver. Another factor that may be attributed to placement stability is the use of relative caregivers. Focus group participants advised that case workers understand that children often feel more comfortable when placed with a relative and actively seek out relatives who are appropriate and willing to be a placement

resource. Individuals further noted that DHS makes efforts to locate and involve absent and uninvolved parents.

Focus group participants acknowledged that DHS is flexible when coordinating family interactions between parents and children placed in out-of-home care. Individuals stated that case workers understand the benefit of maintaining regular interactions among children, their parents and their siblings. As previously noted, supervised visitation was identified as a resources challenge due to intermittent waitlists. Focus group participants advised that DHS does not allow this to interfere with family interactions, while noting that case workers will sometimes supervise the interactions or seek out alternative resources to ensure the family interactions continue. Individuals acknowledged that DHS is open to having the family interactions take place in more natural settings, such as the family's home or a local park, rather than in a room at the agency. Focus group participants indicated that families appreciate spending time with their children in a more comfortable setting and that such interactions often lead to greater quality relationships between the parents and their children.

F. PRACTICE – CHALLENGES

One of the primary practice challenges raised by focus group participants concerned paper work demands and the intensity of the workload among DHS staff. Individuals noted that the paperwork requirements seem to be increasing, limiting the time that case workers are able to spend with families. Others added that the paperwork demands have had an adverse impact on supervisors' time and availability for case consultation and support for workers, as much of their time is spent approving paper work or advising workers which paperwork needs to be completed and when. With family situations becoming more complex, focus group participants advised that much of daily practice goes toward "putting out fires." As a result, individuals noted it can be a challenge for families, workers and other providers involved with the family to see past the day-to-day crises and establish a long-term view for what needs to occur for the family to achieve safe case closure and independence from DHS.

Engagement was another challenge raised by focus group participants. Focus group participants advised that engagement skills vary depending on who is working with the family; thus, some case workers are more effective in developing trust based relationships with families. Individuals further noted that some workers fault increasing workload for the challenges they experience with engaging families in the change process. However, focus group participants stated that some workers are successful in developing effective relationships with children and caregivers, despite experiencing the same workload demands. As detailed later in Section IV, the elements of case practice (the micro view), the engagement of children and youth was a notable strength in practice, whereas the engagement of mothers and fathers was more of a challenge. Information gained during focus groups was similar as individuals noted that the engagement of parents, absent or uninvolved parents in particular can be a struggle, both for DHS social workers and other providers. While individuals stated that DHS has

increased efforts to locate absent and uninvolved parents, engaging these parents in the change process continues to be a challenge.

As detailed in a previous section, specialized services and resources, such as mental health providers for children, trauma-informed assessments and sex offender treatment, are limited in Eau Claire County. Individuals advised that the limited availability of specialized services can impact the level at which they are able to identify, assess and understand the complex co-occurring conditions (such as substance abuse and mental illness) that challenge many of the families involved with DHS and other community providers. Focus group participants added that court ordered conditions for return challenge practice and positive outcomes for children and families. Individuals described some of the court conditions that are recommended by DHS to be “too broad” and expressed concern for the parents’ understanding of the conditions. For example, it was noted that a parent may be asked to participate in a specific service; however, focus group participants advised that the conditions do not detail how progress will be measured or the behaviors the parent must demonstrate to accomplish this court ordered condition. Moreover, others noted that the parents’ understanding of the court conditions may be further compromised by the fact that they are not given a copy of the court order that details the conditions. Focus group participants advised that the case workers go over the orders with the parents and this is confirmed by the judge, yet parents are not allowed to take a copy of the document with them. In conclusion, some individuals felt that the parent’s knowledge and understanding of the conditions are uncertain, which could delay progress toward achieving permanency and safe case closure.

G. LEGAL – STRENGTHS

Focus group participants identified strengths among the legal professionals in Eau Claire County. Individuals described the judges to be knowledgeable of the families coming into their courtrooms and that they read the information provided to them regarding the families’ progress. Focus group participants further viewed the Corporation Counsel to be accessible and responsive to inquiries. Individuals noted that the Corporation Counsel is willing to consult with agency staff regarding individual cases and whether the situation warranted a formal intervention, such as a CHIPS petition. The Corporation Counsel attends meetings with agency staff and community providers, as well as a monthly meeting with the judges, juvenile court intake and DHS management.

In addition to the judges and Corporation Counsel, individuals identified strengths among the guardians ad litem (GAL) assigned to the cases. Focus group participants noted that many of the GALs are taking the time to get to know the children on their cases, as well as their caregivers. One way that some of the GALs gain knowledge of the children and their families is by attending case plan reviews. Overall, individuals found it to be beneficial to the child when the GAL played an active role and was knowledgeable of the child’s situation.

Focus groups further noted that CHIPS cases are processed efficiently in court and that participants rarely experience unnecessarily delays. In general, all relevant parties are receiving notice of when future hearings will be held.

H. LEGAL – CHALLENGES

Focus group participants also identified some legal challenges. One such challenge is the lack of agreement between the courts and DHS on their roles in addressing the needs of children and families. In some focus groups, individuals felt that it was the responsibility of the judges to hold parents accountable when they did not follow through with recommendations or court ordered conditions; however, in other focus groups, individuals stated that it was the responsibility of the DHS case worker. The lack of mutual agreement in this regard presents a challenge for those involved.

Another challenge raised by focus group participants was the lack of legal representation for biological parents in some CHIPS cases. Some individuals questioned the parent's understanding of the court process in such circumstances. While noting that the DHS case workers do their best to explain the process to the parents, participants added that parents may hear things differently from an attorney appointed to them, compared to a case worker who may have removed their child(ren) from their care. Furthermore, this may also delay the court process. Individuals noted that parents will sometimes come to hearings, decide that they do not understand the process and choose to seek legal representation. When this occurs, focus group participants advised that the judge will adjourn the hearing and allow the parents additional time to seek counsel before proceeding with the hearing. Whereas individuals acknowledged the parent's right to representation, they further expressed a desire for the parents to access counsel earlier in the process to avoid such delays.

Other challenges that were identified were with regard to the filing of petitions for the Termination of Parental Rights (TPR) and in making the Title IV-E/Adoption and Safe Families Act (ASFA) findings on the oral court record. Individuals voiced concern that backlogs have developed in the past as a result of an influx in the filing of TPR petitions, creating delays in the process. Focus group participants indicated that the backlog did not exist at the time of the review; however, a backlog could develop again in the future if another influx of TPR's were to occur. Individuals further expressed inconsistencies with Title IV-E/ASFA findings being made orally on the court record. When these findings are not made on the oral court record, DHS is at risk for not being reimbursed for Federal Title IV-E funding.

IV. CHILD AND PARENT/CAREGIVER STATUS INDICATORS

The QSR uses eight indicators to assess a child’s status and five indicators to assess parents and/or caregivers. The QSR Interpretative Guide (below) provides definitions to understand the scoring system. The results for the 13 indicators are presented in aggregate and graphic format on the following pages and measure the child and parent/caregiver status in the 180 days prior to the review.

QSR Interpretative Guide for Child Status		
<p style="text-align: center;">Maintenance Zone: 5-6</p> <p>Status is favorable. Efforts should be made to maintain and build upon a positive situation.</p>	<p>6 = OPTIMAL STATUS. The best or most favorable status presently attainable for this child in this area [taking age and ability into account]. Child is doing great! Confidence is high that long-term goals or expectations will be met in this area.</p> <p>5 = GOOD STATUS. Substantially and dependably positive status for the child in this area, with an ongoing positive pattern. This status level is consistent with attainment of long-term goals in this area. Status is “looking good” and likely to continue.</p>	<p>Acceptable Range: 4-6</p>
<p style="text-align: center;">Refinement Zone: 3-4</p> <p>Status is minimal or marginal, maybe unstable. Further efforts are necessary to refine the situation.</p>	<p>4 = FAIR STATUS. Status is minimally or temporarily sufficient for the child to meet short-term objectives in this area. Status is minimally acceptable at this point in time, but may be short-term due to changing circumstance, requiring change soon.</p> <p>.....</p> <p>3 = MARGINAL STATUS. Status is marginal/mixed, not quite sufficient to meet the child’s short-term objectives now in this area. Not quite enough for the child to be successful. Risks may be uncertain.</p>	
<p style="text-align: center;">Improvement Zone: 1-2</p> <p>Status is now problematic or risky. Quick action should be taken to improve the situation.</p>	<p>2 = POOR STATUS. Status has been and continues to be poor and unacceptable. The child seems to be “stuck” or “lost” and is not improving. Risks may be mild to moderate.</p> <p>1 = ADVERSE STATUS. Child status in this area is poor and getting worse. Risks of harm, restriction, exclusion, regression, and/or other adverse outcomes are substantial and increasing.</p>	<p>Unacceptable Range: 1-3</p>

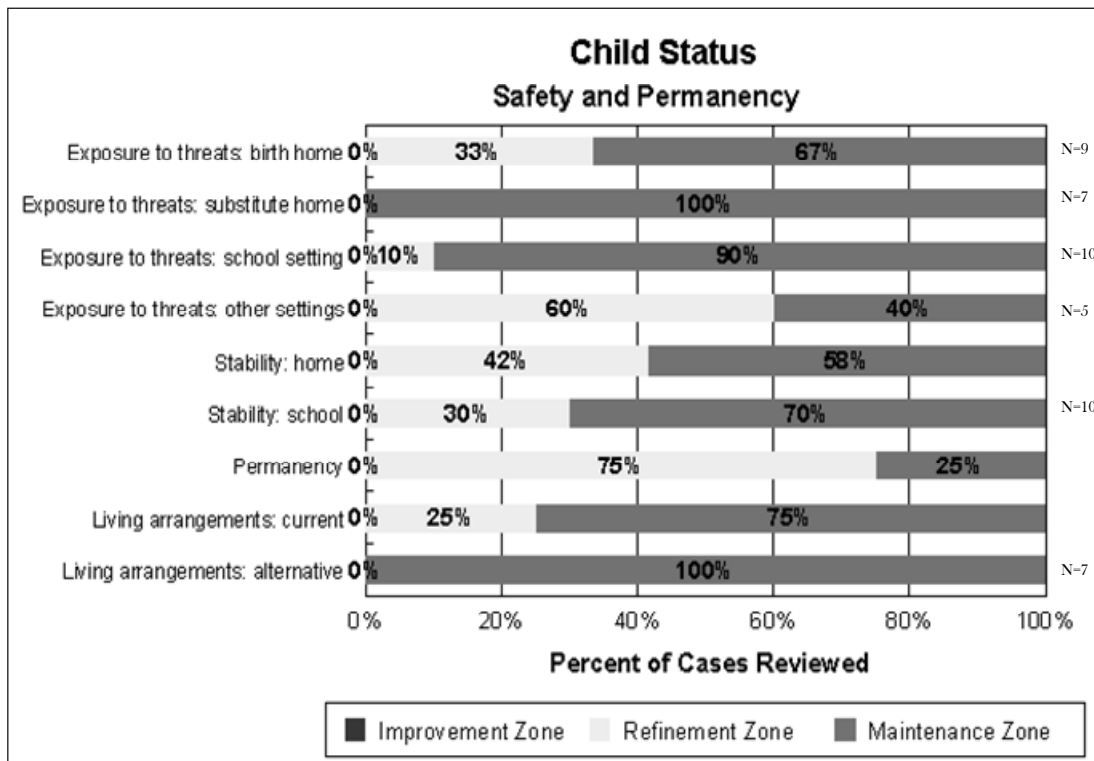
Note: n = (x) next to a bar in a graph signifies the number of cases meeting the specified criteria for the measurement. For some indicators, not all cases in the sample are scored.

CHARACTERISTICS OF THE SAMPLE

Though randomly selected, QSR sample cases can show variability in the range of factors that can impact Child and Caregiver Status and System Practice Performance. The following reflects co-occurring conditions of the children and parents in the Eau Claire County sample and how they compare with sample data from the first 30 Wisconsin counties reviewed.

*Co-Occurring Condition	Eau Claire County (N=12)		Combined 30 Counties (N=303)	
	<u>Child</u>	<u>Parent</u>	<u>Child</u>	<u>Parent</u>
Mental Illness	25%	33%	21%	43%
Trauma Exposed	83%	83%	28%	36%
Suicide Risk	0%	0%	5%	8%
Substance Abuse/ Addiction	0%	42%	5%	42%
Substance Exposed	17%	0%	10%	2%
Sensory Impairment	0%	8%	3%	2%

***Co-occurring conditions refer to personal factors present in sample individuals in addition to involvement in the child welfare system.**



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Exposure to Imminent Threats of Harm: To what degree is the child free of abuse, neglect, and exploitation by others in his/her place of residence and other daily settings? Is the child free from injury caused by others in his/her daily home, school, and community settings? Do parents and caregivers provide the attention, actions, and supports necessary to protect the child from known threats of harm in the home?

Comments: *Exposure to Imminent Threats of Harm* considers the birth home, substitute home, school and any other setting where the child spends time and assesses various circumstances that may put the child at risk of maltreatment. Children in the Eau Claire County sample are generally free from imminent threats of harm in the various settings where they spend significant time. Children are safe in their school settings and substitute homes, both areas scored 100 percent acceptable according to federal Children and Family Services Review (CFSR) standards—earning scores 4 and above. In regard to the birth home, 89 percent of the cases scored as acceptable; three cases scored in the refinement zone and six cases scored in the maintenance zone. Five cases were scored for “other settings;” two (40%) were in the maintenance zone and three (60%) were in the refinement zone.

Scores in the refinement zone for the home setting may be attributed to a variety of issues parents are dealing with that limit their ability to keep their children safe such as: alcohol and other drugs, inappropriate discipline techniques, severe mental health problems and domestic violence. In one case reviewed, “Mother continues to disregard and deny the

physical abuse to her child, while the father has proven to be dependant upon alcohol and other drugs per an [alcohol and other drug] AODA evaluation but is not cooperative with random urine samples, breathalyzer tests, etc.”

Stability: To what degree is the child’s daily living, learning, and work arrangements stable and free from risk of disruption? Are the child’s daily settings, routines, and relationships consistent? Are known risks being managed to achieve stability and reduce the probability of future disruption?

Comments: When evaluating a child’s stability, reviewers look at the number of disruptions or unplanned moves that the child has had in the past twelve months and also make a prediction as to the likelihood that the child will experience any life disruptions in the next six months. This indicator recognizes that while change is a natural part of life, movements for the child are often highly disruptive, stressful and affect many facets of the child’s life. The children from the Eau Claire sample are mostly stable in their home and school settings. Seven cases (58%) scored in the maintenance zone and five cases (42%) scored in the refinement zone for stability at home. For stability in school, seven of ten cases (70%) scored in the maintenance zone and three (30%) scored in the refinement zone.

In one case, where stability in both areas scored in the low refinement zone, there were custody issues between the parents, “[The focus child] had to change schools this fall due to his mother’s eviction from a trailer court and their subsequent move into the home of the mother-in-law [step-dad’s mother]. The father continues to reside in the original school district, so if the Guardian ad Litem recommends full-time placement be with the father, [the focus child] will immediately be enrolled back at the original elementary school.”

Permanency: Is the child/youth living with parents or out-of-home caregivers that the child, parents or out-of-home caregivers, and other stakeholders believe will sustain until the child reaches adulthood and continue onward to provide family connections and supports? If not, to what degree are permanency efforts presently increasing the likelihood that the child/youth soon will be enveloped in enduring relationships that provide a sense of family, stability, and belonging?

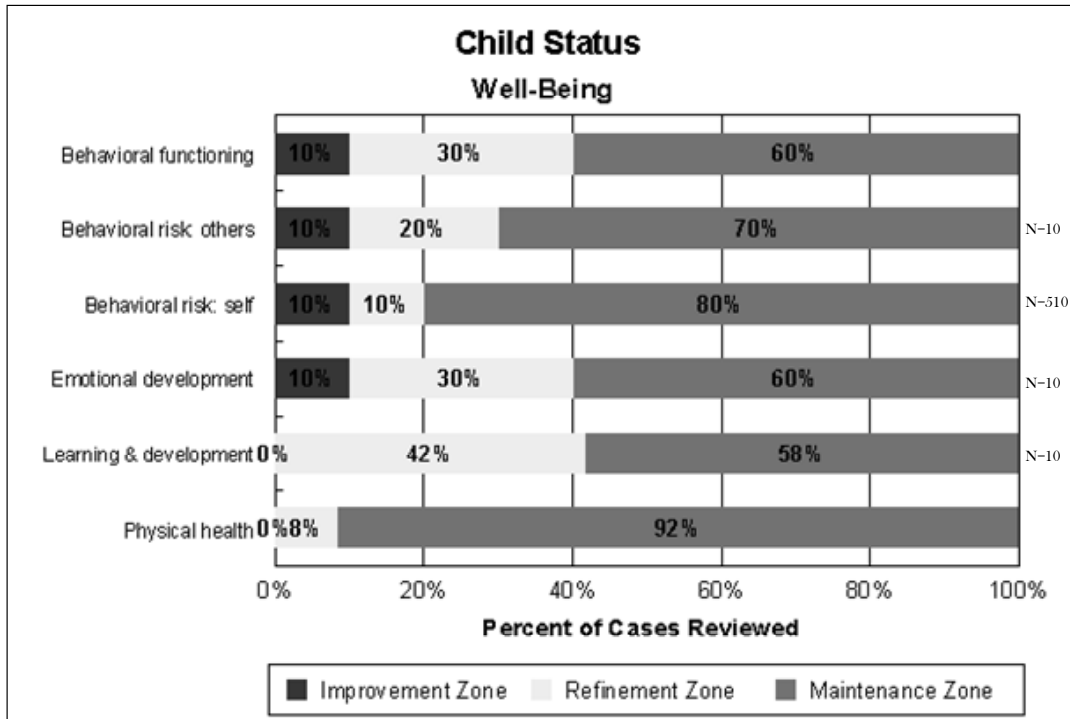
Comments: *Permanency* is rated for children in out-of-home care and for children who live in their biological parent’s home. Evidence of permanency includes resolution of guardianship, adequate provision of necessary supports for the caregiver, and the achievement of stability in the child’s home and school settings. The Eau Claire County review scores signal an opportunity to improve practice in this area: three of the twelve cases reviewed (25%) scored in the maintenance zone; nine cases (75%) scored in the refinement zone.

All of the cases that scored in the low refinement zone were out-of-home cases, the majority with a primary goal of reunification. The following case story illustrates the circumstances that lead to uncertain permanency: "...It is unclear whether the focus child will be living with her grandparents or will be reunified with her mother. While there were formal supports provided to the mother to assist with working towards the goal of reunification, the mother continues to struggle with drug related issues and maintaining employment and is not demonstrating the required behavioral changes necessary to parent the focus child. The grandparents have demonstrated that they are committed to providing a home for their granddaughter but are hopeful the family will be reunited both due to the heavy child care responsibilities and their support of the plan for reunification."

Living Arrangement: To what degree is the child in the most appropriate/least restrictive living arrangement, consistent with needs for family relationships, social connections, age, ability, special needs, and positive peer group affiliation? If the child is in temporary out-of-home care, does the living arrangement meet the child's needs to be connected to his or her language and culture, community, faith, extended family, tribe, social activities, and peer group?

Comments: *Living Arrangement* considers the present living arrangement in which the child resides and any other setting where the child has slept and received care within the past 90 days. According to the scores, the children in the Eau Claire County sample are living in the most appropriate, least restrictive settings. Both areas, current living arrangement and alternative living arrangement, scored 100 percent in the acceptable range according to federal (CFSR) standards.

Children in the Eau Claire County sample are doing well in their placements and maintaining or developing new connections as reflected in the case stories. One reviewer wrote, "[The focus child is]...flourishing in his current placement. He appears connected to his great aunt and engaged in play in the waiting area with the great aunt's daughter-in-law and the worker. He gets along and plays well with his sibling placed with him and the great aunt's grandchildren that are frequently at the house."



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Physical Health: To what degree is the child achieving and maintaining his/her optimum health status? If the child has a serious or chronic physical illness, is the child achieving his/her best attainable health status given the disease diagnosis and prognosis?

Comments: The *Physical Health* scores of Children in the Eau Claire County sample, consistent with QSR scores in other counties, is generally good. Although the sample included children with some health issues and disabilities, these issues are being addressed and managed well. All the cases scored were acceptable according to federal (CFPSR) standards; 11 cases (92%) scored in the maintenance zone.

Emotional Development: To what degree is the child presenting age-appropriate emotional development, adjustment, appropriate coping skills, and self-control?

Comments: This indicator addresses the child’s ability to appropriately express feelings, cope with difficult circumstances, regulate their emotions and connect with others and form relationships. Six (60%) of the ten cases rated for this indicator scored in the maintenance zone; three cases scored in the refinement zone and one case scored in the improvement zone. Due to the circumstances that often precede involvement in the child welfare system—abuse, neglect, poverty—and the additional traumatic experience of being removed from their home, children often struggle in the area of emotional development.

In one case, the focus child was exposed to six different traumas during her life with repeated exposure to some traumas and maltreatment by a caregiver. “In her current placement [the focus child] has demonstrated limited and sporadic periods when she has been unable to control her emotional and behavioral outbursts.” On the other hand, there were a number of cases reviewed where the focus child showed incredible resilience in light of dire past circumstances. In one case, the focus child had been exposed to seven different traumas by the age of nine yet emotionally was managing well: “. . . the focus child is well behaved and has never presented with any behavioral problems... Emotionally she has had some difficulties [and] did see a therapist to help process her feelings; she recently graduated from therapy.”

Behavioral Functioning: To what degree is the child achieving and maintaining an adequate level of behavioral functioning in daily settings, activities, and social groups?

Comments: Scores in *Behavioral Functioning* mirror those of *Emotional Development*: 60 percent were in the maintenance zone; 30 percent in the refinement zone and 10 percent in the improvement zone. The similarities between scores in *Behavioral Functioning* and *Emotional Development* are often due to the influence of co-occurring conditions (see page thirteen) and other challenges associated with being in the child welfare system.

In one case reviewed, the child had been exposed to nine different traumas over the course of his life and subsequently struggles emotionally and behaviorally. Nonetheless, the focus child is in a good, stable placement and making incredible progress: “Described as a ‘feral child’ who grunted and growled when first removed from his home, he now is able to display healthy attachment to his mother and to caregivers, and is able to express his emotions. He has previously perpetrated on other children but is now avoiding this behavior and has stopped displaying severe tantrums. He has thrived since placement outside of his parental home and shown remarkable progress while in this relative placement where he has maintained optimal stability.”

Behavioral Risk: To what degree is the child/youth consistently avoiding self-endangerment situations and refraining from using behaviors that may put him/herself or others at risk of harm?

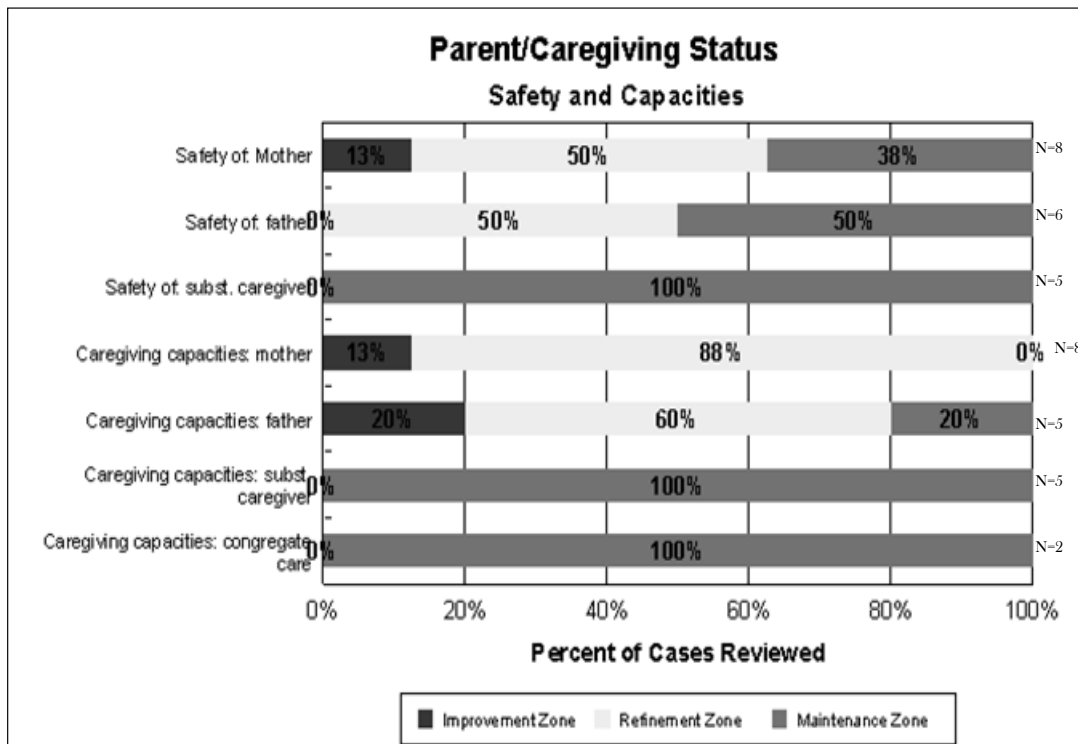
Comments: Most of the children involved in the review are refraining from activities and behaviors that result in self-harm or harm to others. For *Behavioral Risk to Self*, seven cases (70%) scored in the maintenance zone; two cases (20%) scored in the refinement zone; and one case (10%) scored in the improvement zone. For *Behavioral Risk to Others*, seven (70%) of cases scored in the maintenance zone; three (30%) scored in the refinement zone; and one case (10%) scored in the improvement zone.

A child with a history of threatening and assaultive behaviors in the community and in her living environments was viewed as putting herself and others at risk: “[The focus child’s] behavior included incidents where she threatened and followed through with physical assaults toward family and community members. While attending day treatment the focus child physically assaulted her teacher and verbally threatened the safety of other students.”

Early Learning & Development (Under Age 5): To what degree is the young child’s developmental status commensurate with his/her age and developmental capacities? Is the child’s developmental status in key domains consistent with age-appropriate expectations?

Learning and Development (Age 5 and Older): Is the child (according to age and ability): 1) regularly attending school; 2) in a grade level consistent with age; 3) actively engaged in instructional activities; 4) reading at grade level or Individual Educational Plan (IEP) expectation; and 5) meeting requirements for annual promotion and course completion leading to a high school diploma or equivalent?

Comments: *Learning and Development* focuses on the child’s current learning and academic status relative to access to, participation in, and fulfillment of basic educational requirements for entry into the next school or vocational program. Seven cases (58%) scored in the maintenance zone and five (42%) scored in the refinement zone; all of the cases were 100 percent acceptable according to federal (CFSR) guidelines.



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Safety of the Parent/Caregiver: Is the parent/caregiver in the child’s household safe from manageable risk of harm at home? Is the parent/caregiver free from intimidations and reasonable fears of domestic violence in the home?

Comments: *Safety of the Parent or Caregiver* assesses the parent’s or caregiver’s exposure to risk of harm in their home and in their community. When parents or caregivers are in volatile relationships or make lifestyle choices such as using, buying or selling drugs, their safety at home and sometimes in their community is more likely to be jeopardized. Furthermore, these risk factors increase the likelihood that children who live or stay at the home will be vulnerable.

Eight mothers in the Eau Claire County sample were rated for this indicator. Three cases (38%) scored in the maintenance zone; four cases (50%) scored in the refinement zone; and one case (13%) was in the improvement zone. Fathers fared slightly better. Of the six that were rated, three (50%) were in the maintenance zone and three were in the refinement zone. Finally, all five substitute caregivers scored in the maintenance zone. The following example illustrates circumstances that increased the mother’s risk of harm in her home: “Her only informal supports are both her parents and her sister. She continues to associate with individuals who are part of the drug community. She has a history of drug use and legal issues which have made her repeatedly unavailable to parent her child.”

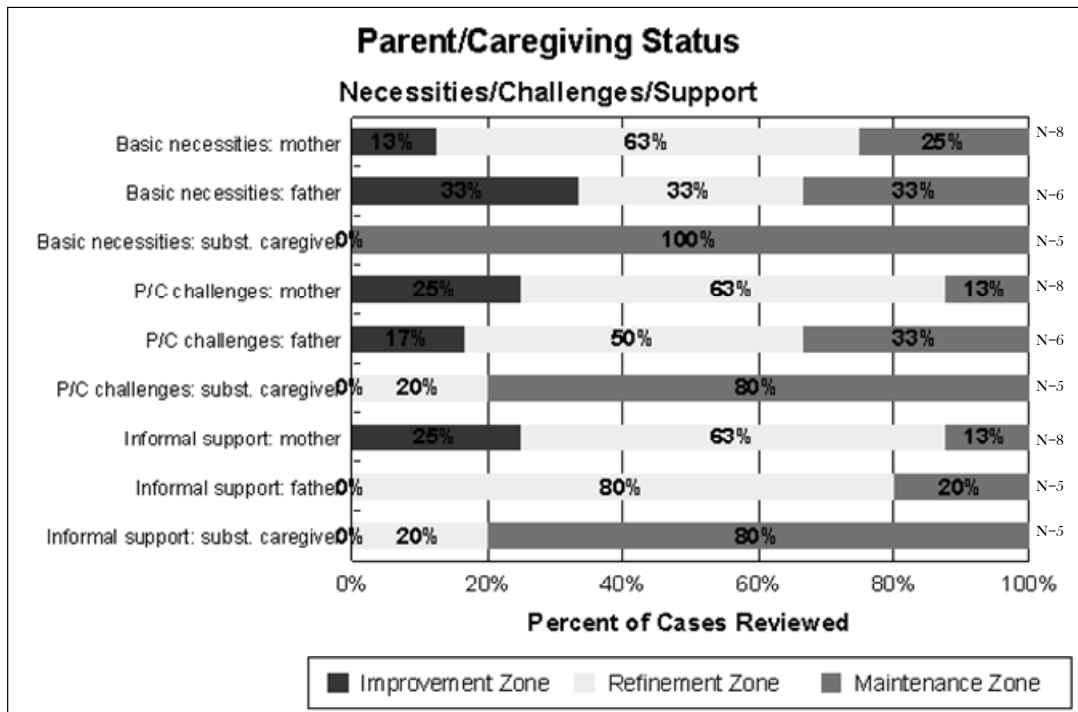
Caregiving Capacities (Home Settings): To what degree does the parent/caregiver demonstrate adequate caregiving capacities on a reliable daily basis commensurate with that required to provide the child(ren) with appropriate nurturance, guidance, protection, care, and supervision? If the child(ren) have special medical, emotional, behavioral, and/or developmental needs, does the caregiver have and use any special knowledge, skills, and supports that may be required to meet the needs of the child(ren)?

Caregiving Capacities (Congregate Settings): To what degree are the child's/youth's primary caregivers in the group home or facility supporting the education, development, and independence of the child/youth adequately on a consistent daily basis (as appropriate to age and need)?

Comments: Results in this area indicate an opportunity to refine and improve practice. Seven (88%) of the eight mothers evaluated for *Caregiving Capacities* fell in the refinement zone, while one (13%) scored in the improvement zone. Five fathers were rated; one (20%) scored in the maintenance zone; three (60%) in the refinement zone and one (20%) in the improvement zone. Substitute caregivers and providers at congregate care settings scored 100 percent in the maintenance zone.

This indicator considers the extent to which parents and caregivers are able to provide guidance, nurturance, supervision and age-appropriate discipline to the children in their care. *Caregiving capacities* are often taxed by varying challenges, such as poverty, physical disabilities, mental health issues and alcohol and other drug problems. There are often parallels seen in the scores between this indicator and the indicator *parenting challenges* which is discussed on page twenty-three. Moreover, sometimes parents involved in the system did not receive appropriate parenting and guidance while growing up, limiting their exposure to positive modeling.

In one case: “[The] parents understand that [the focus child] needs structure, but they do not always follow through in providing it. For example, they will reward him when he has not demonstrated the expected behaviors to earn the reward. His mother specifically struggles with follow through.” In another case where the mother’s caregiving capacities rated in the high refinement zone, the mother’s choice in partners and specific parenting skills affected her overall score: “[The focus child’s] mother is said to be male dependent and migrates toward abusive men. She has not indicated any acknowledgement of the risk she places her children in when involving herself with men who have histories of volatile relationships and criminal records. . . Mother interacted warmly with the children and redirected them at times, but follow through was lacking when the children did not listen.”



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Basic Necessities: To what degree are the family’s earned income and/or economic supports adequate to cover the family’s basic living requirements (i.e., shelter, food, clothing, transportation, health care/medicine, childcare)? Is the parent/caregiver accessing, receiving, and adequately managing the economic supports to which he/she is entitled? Does the parent/caregiver have economic security and skills sufficient for meeting the family’s basic needs and maintaining a stable living arrangement for the children? Does the current living arrangement provide the family with adequate space and living conditions?

Comments: *Basic Necessities* considers whether earned income and/or economic supports adequately meet the family’s basic housing, nutrition, clothing and health care needs. While 100 percent of substitute caregivers scored in the maintenance zone, biological mothers and fathers did not fare as well. Twenty-five percent of mothers scored in the maintenance zone; 63 percent in the refinement zone and 13 percent in the improvement zone. There were six fathers scored for this indicator and all three zones--maintenance, refinement and improvement-- scored 33 percent.

In many instances parents’ overall economic security is low. In the following example the mother appears to be completely reliant on others to meet basic sustenance needs: “Currently mother is unemployed, has past rent bills and is relying on her husband, who is in jail and on Huber and thus working and earning a paycheck, to help pay bills. She does receive help (food stamps, badger care) from the county but still finds it difficult to meet her financial responsibilities. While her husband was in jail, she developed a short

term relationship with another man who was helpful in paying bills. However she did not feel safe with him...”

Special Parenting/Caregiving Challenges: To what degree do parents/caregivers, with whom the child is currently residing or has a goal of reunification, present or experience a pattern of significant, ongoing challenges that limit or adversely affect the parent/caregiver’s capacity to function successfully as an adequate caregiver for this child? Does the family have any special life challenges that interfere with or prevent them from living together safely and functioning successfully?

Comments: *Parenting/Caregiver Challenges* examines the various factors that could hinder optimal parenting and management of the home. In regard to mothers, one (13%) scored in the maintenance zone; five (63%) were in the refinement zone; and two (25%) were in the improvement zone. For fathers, two (33%) were in the maintenance zone; three (50%) were in the refinement zone; and one (17%) was in the improvement zone. Scores for substitute caregivers were 100 percent acceptable according to federal (CFSR) guidelines, with one case falling in the high refinement zone.

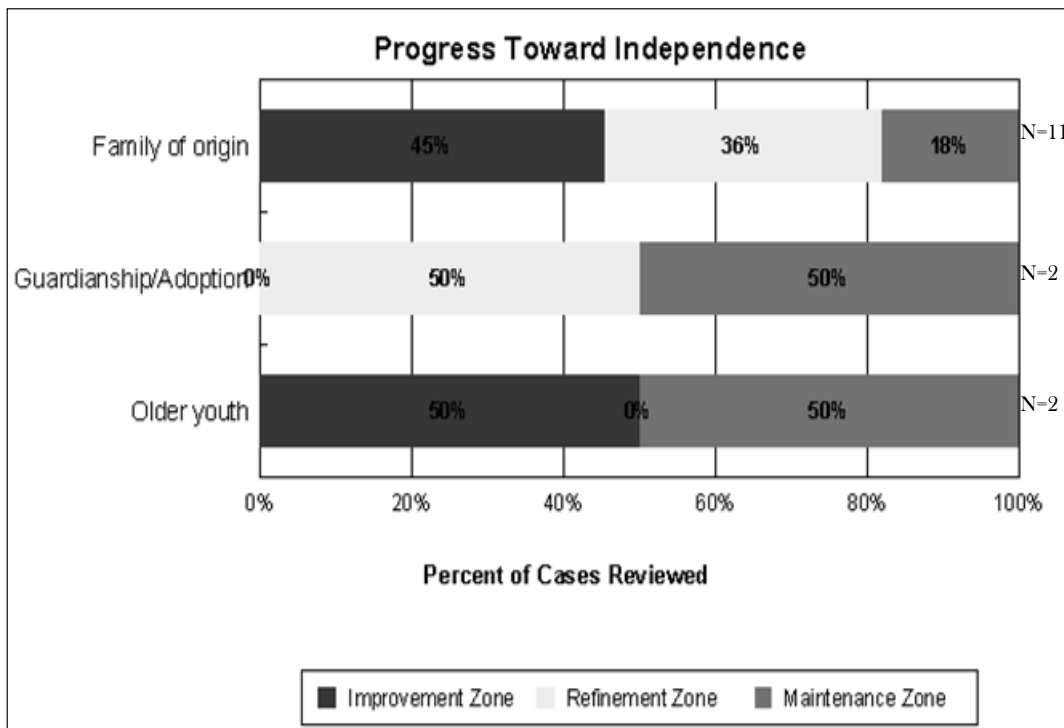
Considering the co-occurring conditions with which parents in the Eau Claire County sample are struggling, it’s not surprising that they are challenged in such profound ways. Referring to the chart on page thirteen, eighty-three percent of parents were exposed to trauma during the course of their life, forty-two percent have alcohol or other drug addictions and twenty-five percent have a chronic health condition. Moreover, caregiver challenges often inform case plans and referrals, and lack of progress around reducing or eliminating parenting challenges often prevents safe case closure. The case stories demonstrate a diverse range of challenges that many parents are trying to overcome. For example: “As much as reviewers heard about [the father’s] genuine love for his children, we also heard about how overwhelmed he is and unable, perhaps, to see beyond tomorrow and envision the future. . . His struggles include coping with the loss of a loved one, poverty, being a single parent, and finding coping mechanisms other than substance use.”

Informal Support System: To what degree is the family engaged with an informal support system that assists them with essential caregiving responsibilities? Do families having special needs children, recovery/relapse prevention plans, and/or family safety plans have adequate levels of informal support provided by family, friends, neighbors, or other supporters involved who will help them manage adequately on an enduring basis? When a family has a child with special needs (physical, developmental, emotional, behavioral), do parents/caregivers have opportunities to exchange experiences, strategies, and successes with parents/caregivers of similar circumstances?

Comments: *Informal Supports* looks at the quality, quantity and range of informal supports that surround caregivers and their families. This indicator underscores the importance of establishing trusting, dependable, healthy relationships that families can turn to for help, human connection and support. This can be a challenge for the families involved in the child welfare system. Some families have moved away from their own families to begin a new life, other families choose to isolate themselves to stay away from "trouble" and other families are not sure how to make healthy choices and connections.

In the Eau Claire County sample mothers were struggling in this area. One case (13%) scored in the maintenance zone; five (63%) were in the refinement zone; and two (25%) were in the improvement zone. Fathers scored 20 percent in the maintenance zone and 80 percent in the refinement zone, while substitute caregivers were 100 percent in the maintenance zone.

In one story the reviewer wrote: "[The mother] indicated to reviewers that she has limited to no informal supports. She stated that her father, mother and step father can be a support 'for some things,' mainly money to help pay bills. She has stayed for short periods of time at her mother's house when needed, but doesn't view her mother's as a safe place for her children due to the drinking and drug use [at her mother's house]."



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V. PROGRESS INDICATORS

Progress to Independence (Family of Origin): To what degree is the family making progress toward their permanency goal of maintaining the child safely at home and/or successful reunification? As necessary to reunify/preserve the family, to what degree have: 1) protective provisions necessary for keeping children safe been established and maintained within the home; 2) necessary parent/caregiver behavior changes been made, demonstrated, and sustained; and 3) necessary and sustainable conditions and supports been established within the home and family situation (e.g., housing, childcare, income, health care)?

Comments: *Progress to Independence* assesses the forward movement towards achieving permanency. The planning, strategizing and action-steps used to attain safety, stability and sustainability in a child's placement is considered in determining a score. In the Eau Claire County sample all but one of the twelve cases had a permanency goal of reunification. Among these cases, two (18%) scored in the maintenance zone; four (38%) in the refinement zone; and five (45%) in the improvement zone.

In one case the reviewer noted: “[Progress toward independence suffered] due primarily to the up and down progress of the focus child’s mother and the lack of involvement of the birth father. It was reported that the mother can do well caring for herself and the children for periods of time, but this is inconsistent and when she fails, she often ends up in jail and becomes unable to care for the children.” In another case, the family was making a lot of progress and thus this indicator scored in the maintenance zone: “Mother has successfully completed a ten week AODA (Alcohol and Other Drug Abuse) class. She has procured a therapist and attended her first session. The focus child has graduated from her individual therapy and is doing well emotionally. The therapist has agreed to reinstate therapy for the focus child should it be needed in the near future . . . The father is viewed by all as doing a good job as a single parent . . . Father has maintained his sobriety and has ongoing solid informal supports to rely on.”

Progress to Permanency (Guardianship/Adoption): To what degree is the child living in an environment that supports achievement of permanency through guardianship or adoption? Has the permanent family been identified? To what extent has this child and family: 1) accepted new members and formed realistic expectations; 2) moved through family formation and adaptation stages with necessary adjustments made, demonstrated, and sustained; 3) established sustainable conditions and supports within the home and family situation (e.g., childcare, health care, respite, crisis support, in-home assistance) necessary to meet any special care requirements that the adoptive child presents in the home and family situation?

Comments: Two cases that were reviewed had a primary or concurrent goal of guardianship or adoption; one case scored in the maintenance zone and the other scored in the refinement zone. Following is an example of good progress toward permanency: “Before placement even occurred, the social worker sought out assistance from the Permanency Consultant in an effort to search out and select a legal-risk foster home that would be interested in adoption should reunification cease to be the permanency plan. A concurrent plan of TPR/Adoption has been established and the team has been discussing this option with the parents on a regular basis at team meetings.”

Progress to Independence (Older Youth): To what degree has the youth been making progress toward living safely and functioning successfully independent of agency services over the past six months? Is the youth demonstrating a developing ability to live safely and function successfully without outside supervision, assuming that any necessary supports continue after reaching the age of majority? Is the youth developing long-term connections that will support him/her into adulthood?

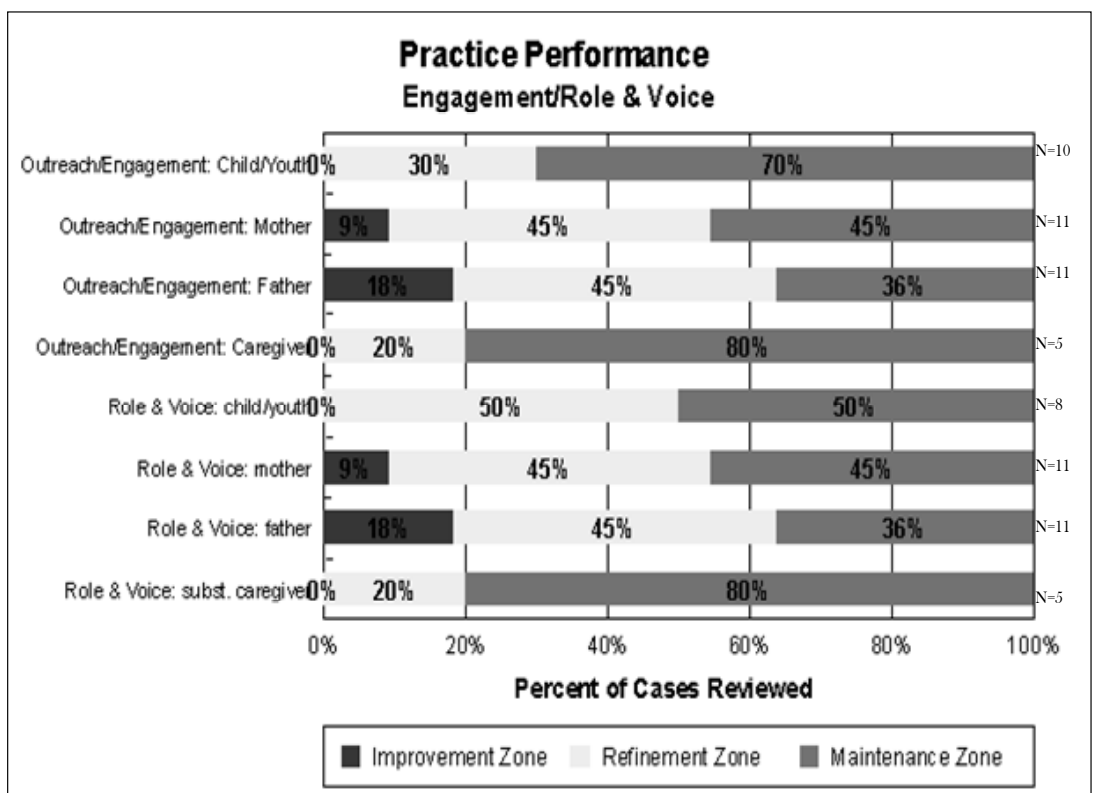
Comments: Two cases reviewed in the Eau Claire County sample had a primary or concurrent goal of progress to independence (older youth); one scored in the maintenance zone and the other in the improvement zone. This indicator measures the extent to which independent living skills and other preparations for adulthood have been provided. The following quote illustrates the lack of progress for the child: “[The focus child] is an older child and will be living independently in a couple of years and not much work has been done to prepare her for that lifestyle change. She has a lack of good future plans and it sounds like she is just going to see where life takes her when she graduates from high school.”

VI. THE ELEMENTS OF CASE PRACTICE (THE MICRO VIEW)

The Quality Service Review (QSR) case practice model contains evidence based elements of best practice. The elements are found in the QSR protocol and were applied in rating the twelve cases that were reviewed. There is an ample body of research that documents the efficacy and contribution in helping families develop, pursue, and complete successful strategies of change. The scores on practice performance are presented to point out strengths in case practice that should be maintained, as well as opportunities where the agency can focus efforts in improving outcomes for children and families served.

QSR Interpretative Guide for Practice Indicator Ratings

Maintenance Zone: 5-6 Performance is effective. Efforts should be made to maintain and build upon a positive practice situation.	6 = OPTIMAL PERFORMANCE. <u>Excellent, consistent, effective practice</u> for this person in this function area. This level of performance is indicative of <u>exemplary practice and results</u> for the person. [6 month sustained pattern]	Acceptable Range: 4-6
5 = GOOD PERFORMANCE. At this level, the system function is <u>working dependably</u> for this person, under changing conditions and over time. Effectiveness level is <u>consistent with meeting long-term needs and goals</u> for the person. [3 month sustained pattern]		
Refinement Zone: 3-4 Performance is minimal or marginal and maybe changing. Further efforts are necessary to refine the practice situation.	4 = FAIR PERFORMANCE. This level of performance is <u>minimally or temporarily sufficient to meet short-term need or objectives</u> . Performance may be time-limited, somewhat variable, or require adjustment soon due to changing circumstances. [1 month continuing pattern. Some refinement is indicated]	
3 = MARGINAL PERFORMANCE. Practice at this level may be <u>under-powered, inconsistent or not well-matched to need</u> . Performance is <u>insufficient for the person to meet short-term needs or objectives</u> . [With refinement, this could become acceptable in the near future.]		
Improvement Zone: 1-2 Performance is inadequate. Quick action should be taken to improve practice now.	2 = POOR PERFORMANCE. Practice at this level is <u>fragmented, inconsistent, lacking necessary intensity or off-target</u> . Elements of practice may be noted, but it is <u>incomplete/not operative on a consistent basis</u> .	Unacceptable Range: 1-3
1 = ADVERSE PERFORMANCE. Practice may be <u>absent or not operative</u> . Performance may be <u>missing (not done)</u> . - OR - Practice strategies, if occurring in this area, may be <u>contra-indicated or may be performed inappropriately or harmfully</u> .		



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ENGAGEMENT OF CHILD & FAMILY: To what degree are those interveners involved with the family using engagement strategies, including special accommodations with any difficult-to-reach family members, to increase family engagement and participation in the service process? Are interveners building a trust-based working relationship with the child, family, and/or others to support ongoing assessment, understanding, and service decisions? Are interveners relying on a mutually beneficial partnership with the child, family, and/or others that is sustaining their interest in and commitment to the change process?

Comments: *Engagement* is a critical component of the QSR practice model and serves as the foundation for working with children and families. This indicator evaluates the interveners' abilities to engage the child and family in a trust-based working relationship that fosters behavioral change. It considers not only the caseworker's engagement skills, but the skills of other professionals who are involved with the family. The focus child, mother, father and substitute caregiver are all rated for this indicator. Engagement scores for children and substitute caregivers were 100 percent acceptable according to federal (CFSR) guidelines; however, mothers and fathers could benefit from further engagement efforts.

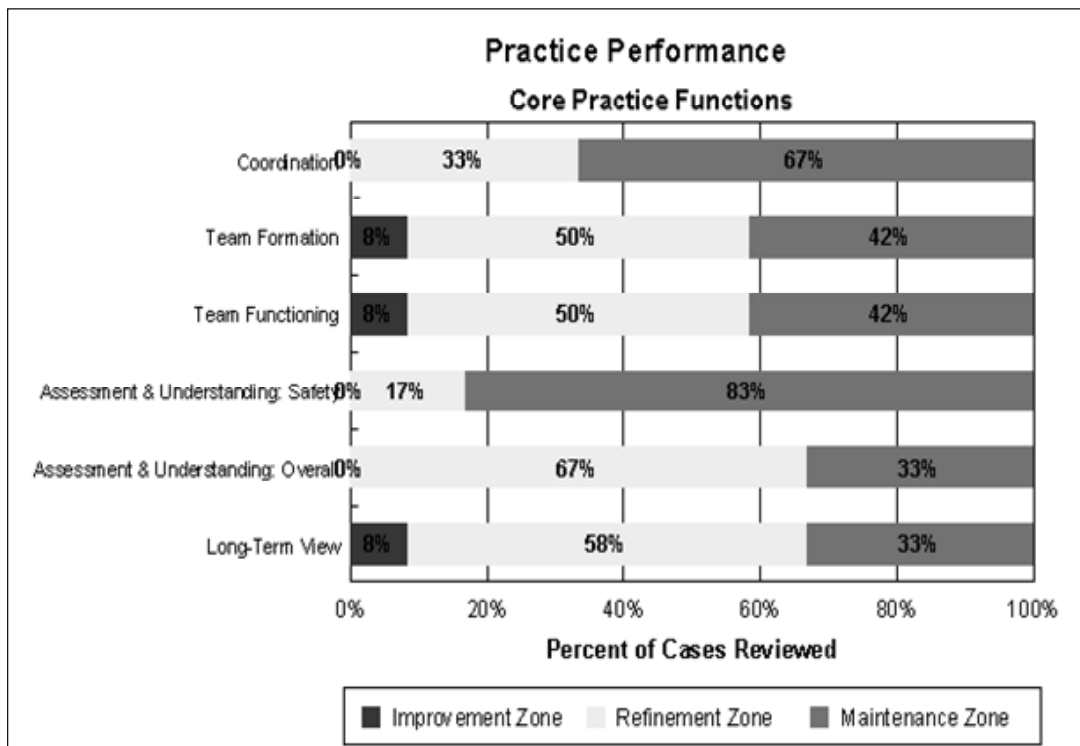
In the following case, where engagement fell in the refinement zone, the team was slowly making headway with a mother who had a history of system involvement and minimal trust in providers: "Although the team has made efforts to engage mom in the process, her extensive distrust of the system prevents her from forming a trust based relationship with team members which affects her ability to have a strong voice. The team has come a long way from where they started. Mom has indicated that she did not feel respected or trusted in the past [with different providers] and felt that efforts to improve her ability to parent were demeaning and unproductive." The next example illustrates excellent engagement efforts: "The family really felt on board with what the social worker was doing, and trusted her as their leader. This was a major accomplishment because the mother does not share her trust easily. The worker is able to confront the mother with tact. The mother spoke about how she appreciates this because the mother is not able to manipulate things like she used to, and sees this as positive. The boyfriend and our focus child also commented that the social worker never gave up on their family. . ."

ROLE & VOICE IN DECISIONS: To what degree are the child's parents significant, ongoing participants (e.g. having a significant role, voice, influence) in decisions made about child/family change strategies, services, supports, and results? (Role and voice in recent meetings).

Comments: The QSR model teaches us that families are much more motivated to support and participate in plans or decisions that they have had a "role and voice" in creating. In the Eau Claire County sample, according to federal [CFSR] guidelines, children scored 88 percent acceptable and substitute caregivers scored 100 percent acceptable. Mothers scored 82 percent acceptable and the breakdown of scores using the QSR system was five (45%) in the maintenance zone; five (45%) in the refinement zone;

and one (9%) in the improvement zone. Fathers were at 55 percent acceptable—four (36%) were in the maintenance zone; five (45%) were in the refinement zone and two (18%) were in the improvement zone.

In one case where role and voice scored in the maintenance zone, “Both the focus child and mother view the case manager as someone who listens to them. . . [They] view themselves as active participants in the family team meetings and as having a voice in planning and decision making.” In another case: “[The parents] are really engaged in the process and feel that they have a definite role and voice in the path that is taken with case planning. They stated that the social worker appreciates what they bring to the table. . . Not only are the parents active participants in the change process, but the social worker also invited Nathan’s older siblings to participate in decisions.”



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COORDINATION: To what degree are there: A single point of coordination and leadership necessary for convening and facilitating effective family change planning and service decision processes for this child and family? Effective coordination, integration, and continuity in the assessment, planning, organization, and provision of services to this child and family?

Comments: In the Eau Claire County sample, *Coordination* scored 100 percent acceptable according to federal [CFSR] guidelines—three of the twelve cases fell into the high refinement zone the rest were in the maintenance zone. In one case reviewed, “The

worker has been an effective single point of coordination and leadership for the case. Everyone has a shared understanding of information relative to the case.” In one case, coordination scored in the refinement zone and the following was noted: “While the family identified the social worker as ‘the quarterback’ in the case, there were some service providers that did not even know her name. There are some that see the worker as the leader, and others that see the treatment foster home staff as the leaders.”

TEAM FORMATION: To what degree: (1) Have the people who provide support and services for this child and family formed a working team that meets, talks, and plans together? (2) Does the team have the skills, family knowledge, and abilities necessary to organize effective services for a child and family of this complexity and cultural background?

TEAM FUNCTIONING: To what degree: (1) Do members of the family team collectively function as a unified team in planning services and evaluating results? (2) Do actions of the family team reflect a coherent pattern of effective teamwork and collaborative problem solving that benefits the child and family?

Comments: Teaming is a core practice value of the QSR and viewed as essential to successful case practice and outcomes. Many areas of practice are enhanced by good team formation and functioning, including engagement, role and voice, tracking and adjustment, and coordination. In the Eau Claire County sample scores for team formation and functioning were identical: 42 percent in the maintenance zone and 58 percent in the refinement zone. This would indicate an area of opportunity to strengthen case practice.

The following example demonstrates how teaming could enhance areas of planning: “In the short-term there is a need to plan for how the children will be cared for if father is incarcerated for his most recent probation violation. Everyone seems to recognize the children’s need for permanency and stability though people are not talking with each other about it or about creating strategies to plan for their permanency.” In one case effective teaming also increased the mother’s “role and voice:” “As for team meetings, the mother views them as her meetings and she decides who is there and what they work on. This experience has been quite empowering for her. The team meetings are very goal oriented; they problem solve and make plans together as things come up.” Effective teaming really enhanced the communication and situational awareness in this next case: “The Coordinated Services Team has been successful in coordinating services and providing team members with the same information in a timely manner so that all team members are on the same page. The team members have a comprehensive understanding of this very complex case. They provide mom with an opportunity to voice her opinions and drive the change process.”

ASSESSMENT & UNDERSTANDING - SAFETY: To what degree: Is there a shared big picture understanding of the child and family’s strengths, needs, and diminished parent/caregiver protective capacities that must change to assure child safety? Are these understandings reflected in the process used for helping the family achieve a safe home (via protective provisions in the home, demonstrated parent/caregiver protective capacities, and sustainable family supports)?

Comments: This indicator evaluates how well safety is assessed and understood by providers and in turn how this is communicated to caregivers so that they are able to recognize and respond to safety threats. *Safety Assessment & Understanding* is considered an ongoing process throughout the life of the case. Scores in this area were very good. Eighty-three percent of the cases in the Eau Claire County sample scored in the maintenance zone; one case (17%) scored in the (high) refinement zone.

The following example from one of the case stories demonstrates good practice in this area: “Assessment and understanding of safety issues has been very good in this case. The agency has planned for safety each time risks have been identified. Relatives have been consistently utilized when the children required alternative living arrangements for safety reasons. Father’s drinking while caring for [the focus child] and his sister has been acted upon and conditions for the purpose of ensuring the father’s sobriety have been established, such as UAs and breathalyzer testing.”

ASSESSMENT & UNDERSTANDING - OVERALL: To what degree: Is there a shared big picture understanding of the child and family's strengths, needs, risks, and underlying issues that must change for the child and family of origin or adoptive family to live independent of agency supervision? Are these understandings reflected in the family change process used for helping the family achieve permanency and well-being (via demonstrated parental behavior changes, sustainable family supports, and concurrent alternatives pursued for achieving permanency with another family, if necessary)?

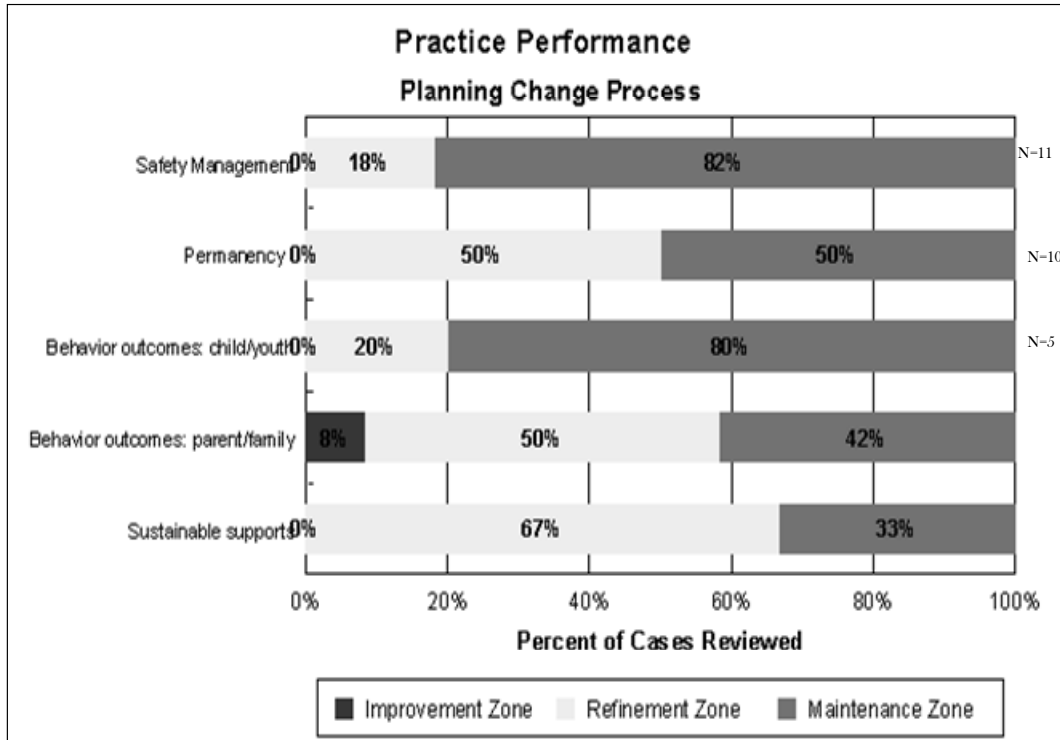
Comments: This indicator expands even further and considers the assessment techniques used to understand the strengths, needs, risks, underlying issues, interests and future goals of the child and family. Without a good overall assessment, the root cause of behaviors is often not well understood and not adequately addressed; ultimately, progress and change suffers. This is an area that could use some further refinement. Thirty-three percent of the cases in the Eau Claire County sample scored in the maintenance zone; while 67 percent scored in the refinement zone.

The following example illustrates why further refinement was needed in the area of overall assessment and understanding: “More exploration into the family dynamics may also be needed to reach this goal. The parents recently divorced, the father came out as homosexual, and their biological children seem to have some of their own chemical dependency and/or mental health issues – all things that could greatly impact [the focus child’s] success. Also, further understanding of [the focus child’s] potential would help

guide the planning in this case.” When a good overall assessment is completed and the team members have a solid understanding of the family, the planning process becomes easier as illustrated in the following example: “The department has done excellent work in assessing and understanding the unique needs and strengths of the focus child. When the focus child was placed in her mother’s home she presented significant behavioral and emotional needs in her home, school and the community. The department recognized the seriousness of her needs and to obtain sufficient and reliable information about her mental health needs secured a thirty day residential care center assessment. Based on the evaluation and recommendations it was determined that a longer residential care center placement was needed.”

LONG-TERM VIEW FOR SAFE CASE CLOSURE: To what degree are there defined, understood, and agreed-upon conditions for Safe Case Closure that specify what: Protective provisions must be present in the home to keep children and parents safe? Permanency issues must be resolved and outcomes attained? Behavioral patterns must be demonstrated and sustained in the home by the parent? Sustainable conditions and supports must be present in the home and family situation to preserve the family, reunify the family, support the adoptive family or youth transitioning to independent living so that external supervision may be safely concluded with the family or youth being independent of the system?

Comments: This indicator asks, “Where do we want to go?” “How will we know when we are done?” There is a visual element involved, as one is encouraged to imagine or visualize an end result when initiating the change process. Thirty-three percent of cases in the Eau Claire County sample scored in the maintenance zone; 58 percent scored in the refinement zone; 8 percent scored in the improvement zone. This is an area that presents an opportunity for improvement in practice. In one case, “This father, this family, needs a vision for the future, one that is not overwhelming. Team members need to know what is needed to make this happen. Related to this is the need to fully understand the barriers to seeing this family’s future.” In another case, “A team meeting with all parties involved could go far in helping to clear up the confusion, make any needed adjustments and give all participants a clear understanding of what’s needed and expected to reach safe case closure, thus creating a *long term view*.”



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PLANNING A PROCESS FOR SAFETY MANAGEMENT: To what degree is a well-reasoned, ongoing process being used for controlling and managing impending danger threats to child safety while strategies and actions are developed and implemented for the family change process via enhancing parent/caregiver capacities that lead to attainment of protective conditions for safety in the home, acquisition/demonstration of required parent behavior changes, and securing sustainable family supports?

Comments: *Planning a Process for Safety Management* considers how the key players thought about and created strategies to keep children safe while staying or visiting at home. This is a practice strength in Eau Claire County; all eleven cases that were rated scored 100 percent acceptable according to federal (CFSR) guidelines, with nine cases in the maintenance zone and two in the (high) refinement zone. The following example illustrates good practice in this area: “The children’s living arrangement was carefully monitored before placement and when safety was compromised, a Change of Placement petition was filed with the court. After placement, on-going safety assessment has been used to determine visitation arrangements.”

PLANNING A CHANGE PROCESS FOR PERMANENCY [For a child removed from his or her home]: To what degree is a well-reasoned planning process used to drive strategies and actions for the family change process that provides, as needed, for: Reunifying the child and parent, replacing the entering parent with another, or achieving independence for a youth? Searching for, finding, eliminating, and approving a relative or another replacement to be the permanent caregiver? Resolving any legal barriers to permanency? Supporting and evaluating the stability and success of the child and family in a potentially permanent home to ensure family sustainability as a condition for Safe Case Closure?

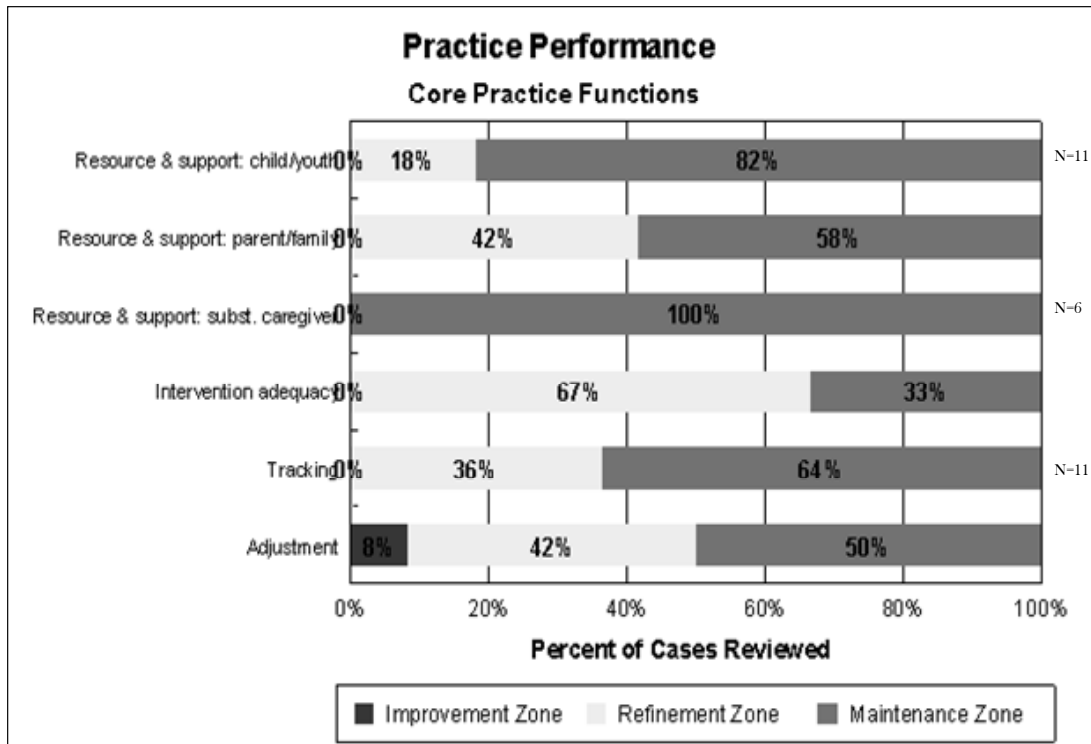
Comments: Ten cases were rated for *Planning a Change Process for Permanency*; five (50%) were in the maintenance zone and five (50%) were in the refinement zone. The following is an example of good practice in this area: “Planning for permanency has been outstanding. From collaborating with the Permanency Consultant to obtaining a legal-risk home before placement, to developing a timely concurrent plan and discussing this issue on an on-going basis at team meetings, it would be difficult to see how this crucial issue could have been handled any better.”

PLANNING A CHANGE PROCESS FOR BEHAVIOR OUTCOMES: To what degree is a well-reasoned, ongoing planning process being used to drive strategies and actions for a behavior change process that provides, as needed, for: Acquisition and demonstration of knowledge and skills necessary for parenting? Reduction of behaviors and/or symptoms that interfere with protective and caregiving capacities? Demonstration that behavior changes are effective in parenting, protecting children, and maintaining stability of the home and family situation? Demonstration that behavior changes are sustainable over time and likely to continue following return and Safe Case Closure?

Comments: Parents and children are considered separately for this indicator. On the one hand we have children scoring 100 percent acceptable according to federal (CFSR) guidelines—one case scored in the high refinement zone and the other four were in the maintenance zone. But on the other hand, parent/family behavior outcomes were only 50 percent acceptable according to Federal guidelines with five cases (42%) scoring in the maintenance zone; six cases (50%) in the refinement zone; and one case (8%) in the improvement zone. Effective planning around behavior outcomes is often contingent on a good overall assessment and understanding of the family, as this next example illustrates. “Planning a Change Process for Behavior Outcomes Services are [sic] generally appropriate because they have been based on thorough psychological and parenting skills assessments. These assessments were scheduled in a timely manner right after placement so services could be implemented as quickly as possible.” The next example demonstrates how planning was lacking for the mother in the area of behavioral outcomes: “While the department has invested considerable resources to address the focus child’s mental health little is know about the mother’s mental health history or needs. . . An assessment and possible services could support the mother’s ability to parent her daughter.”

PLANNING A CHANGE PROCESS FOR SUSTAINABLE SUPPORTS: To what degree is a well-reasoned, ongoing planning process being used to drive strategies and actions for sustainable supports for the family that provides, as needed, for: Meeting basic necessities of life? Ongoing supports necessary for recovery and relapse prevention? Informal social supports necessary to sustain the family following Safe Case Closure?

Comments: This is an important area of planning, as it strives to ensure that families will have the necessary supports to maintain their independence from the child welfare system once the family's case has been closed. Three of the cases in the Eau Claire County sample scored in the maintenance zone; nine (67%) scored in the refinement zone. Eighty-three percent were acceptable according to federal guidelines. The following example illustrates some needs in this area: "One of the opportunities for improvement in this family's case is identifying informal supports in addition to the paternal grandmother and paternal uncle and aunt, to take some of the pressure off of them and to help father with his needs. The development of a plan to increase father's sustainable supports is critical in order to make and sustain any real change for this family."



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RESOURCE & SUPPORT USE: To what degree is/are the family and/or out-of-home caregiver actively being provided the training, in-home support, supervision, resources, support-development assistance, and relief necessary to provide a safe and stable living arrangement for the child that meets the child’s daily care, development, and parenting needs? If the child presents special needs with more extensive care requirements, to what degree is the family/out-of-home caregiver provided specialized support commensurate with that required to meet the child’s needs while maintaining stability of the home and family commitment to the child?

Comments: Again, in *Resource and Support Use*, children fared better than their parents or families. Of the eleven children rated for this indicator, nine (82%) fell in the maintenance zone, while two (18%) were in the refinement zone. Parents scored as follows: six (58%) were in the maintenance zone; while five (42%) scored in the refinement zone. The next two examples illustrate good practice in the area of Resource and Support Use for parents and families: “Our focus child’s mother said she feels like the services and supports have been ‘great’ and helpful when offered. She said the worker was very helpful in arranging transportation, housing, and therapy for her and that she found this extremely helpful.” In another case, “Resources and supports for the focus child and his foster family have been excellent and effective. For example, the therapist for the child and family is seen as the ‘rock’ of support to this family.”

INTERVENTION ADEQUACY FOR CHANGE: To what degree are the change-related interventions, actions, and resources provided to the child and family of sufficient power (precision, intensity, duration, fidelity, and consistency) to produce desired results and make timely progress necessary to meet Safe Case Closure requirements and to sustain family independence from the service system following closure?

Comments: Whereas the previous indicator considers the efforts of the team to assist the family in acquiring the necessary resources and supports to address the family's individual needs, *Intervention Adequacy for Change* addresses the power of the intervention and its sufficiency to obtain the desired outcomes necessary to achieve permanency and safe case closure. This area appears to be an asset in Eau Claire County. Four cases (33%) scored in the maintenance zone and eight cases (67%) scored in the refinement zone; 92 percent of the cases were acceptable according to federal (CFSR) guidelines.

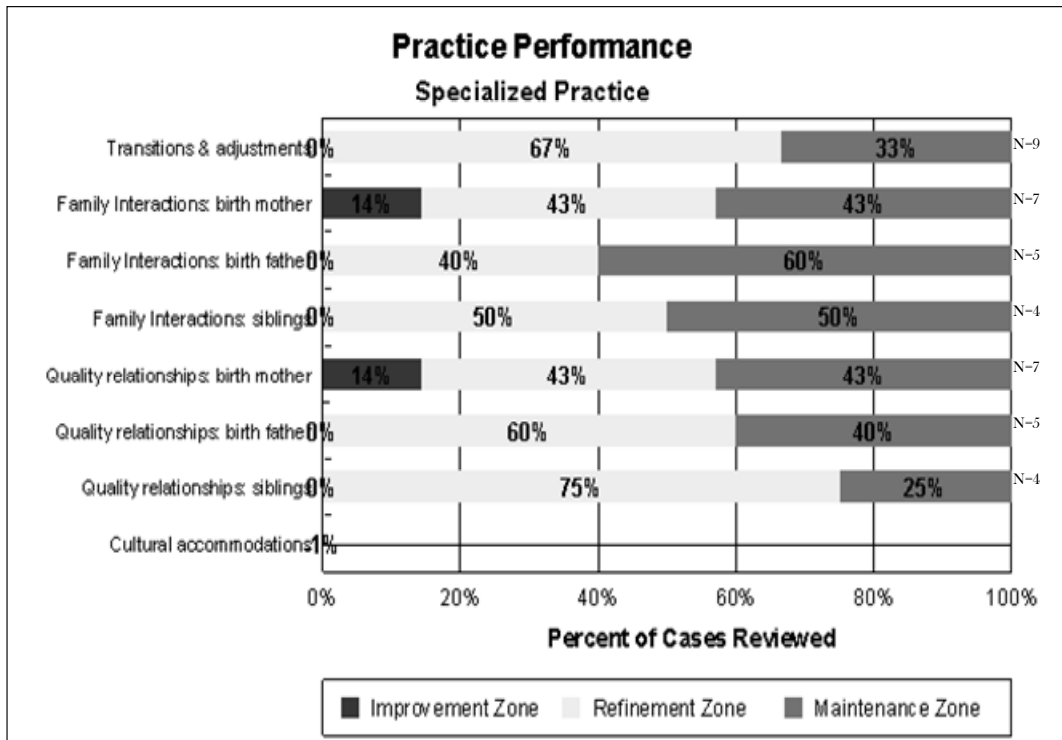
The following example demonstrates effective intervention, not only in terms of matching services to needs, but also in terms of the intensity and duration of services: "The appropriate services were put in place at the level required. The family was matched with the correct services and not overloaded. The family preservation program recently ended their involvement because they felt that the mother had met the expectations that were set out for her." In one case where Intervention Adequacy scored in the low refinement zone: "The birth family has been offered a variety of formal supports that have not been totally effective—partly due to the parent's attitude and partly due to the appropriateness of fit. Due to the low functioning ability of the birth family, the array of services may be too intense for them. It seems that some service providers don't fully comprehend the extent of the birth parents disabilities and have had too high of expectations of them."

TRACKING AND ADJUSTMENT: Are the child and family status, intervention process, and change results routinely followed along and evaluated? Are strategies and services modified to respond to the changing needs and to apply knowledge gained about strategies and results to create a self-correcting service process for finding what works for the child and family?

Comments: This indicator measures whether intervention strategies are modified when outcomes are met, when outcomes are not being met or when new needs arise and circumstances change. *Tracking and Adjustment* is necessary in any change process and requires situational awareness, flexibility and adaptability. Generally, tracking scores in the counties across Wisconsin are slightly higher than adjusting scores and this was also observed in Eau Claire County. For tracking, 64 percent of the cases scored in the maintenance zone and 36 percent in the refinement zone. All of the cases were acceptable

according to federal guidelines. For adjusting, 50 percent were in the maintenance zone, 42% in the refinement zone and one case was in the improvement zone—83 percent of adjusting scores were acceptable according the federal CFSR guidelines.

Here, good tracking didn't necessarily lead to good adjustment: "While good tracking has helped case participants maintain good situational awareness, the participants have not adjusted their plans or approach to new information." The following is an example of tracking and adjusting working in conjuncture: "Tracking and adjustment also scored in the maintenance zone in this case. Across the board, no time has been wasted in responding to concerns that arise. For example, the worker initially formed the family team when she recognized that former communication strategies were ineffective."



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TRANSITIONS & LIFE ADJUSTMENTS: To what degree: Is the current or next life change transition for the child being planned, staged, and implemented to assure a timely, smooth, and successful adjustment for the child and family after the change occurs? Are transitional staging plans/arrangements being made to assure a successful transition and life adjustment in daily settings? If the child is returning home and to school following a temporary placement in foster care, treatment, or detention, is the transition and life adjustment sequence working? Is there follow-along support for the adjustment period?

Comments: Nine of the cases in the sample had an identified transition and thus were evaluated for this indicator. Thirty-three percent scored in the maintenance zone and 67

percent scored in the refinement zone. It is important to adequately prepare families for any upcoming transitions and ensure that they have the necessary skills and supports to carry them through the transition successfully. In one case this was an area needing refinement: “The last area of concern is surrounding the transitions identified. All knew that step father would get out of jail the week of the review and all know about the eminent birth of mother’s fourth child. Nonetheless, there seems to be a ‘wait and see’ approach used for planning. A proactive approach through teaming might be more beneficial.”

FAMILY INTERACTIONS: When children and family members are living temporarily away from one another, how well are specifically planned strategies and supports working to build and sustain family connections with meaningful interactions via frequent visitation and other means, unless compelling reasons exist for keeping them apart? To what degree are strategies and efforts being implemented to support the following between the child and his/her family members for: (1) Supporting frequent interactions via visitation and other means? and (2) Using varied and creative opportunities for family members to nurture one another?

QUALITY FAMILY RELATIONSHIPS: When children and family members are living temporarily away from one another, how well are specifically planned strategies and supports working to build and sustain good quality family relationships through various appropriate means, unless compelling reasons exist for keeping them apart? To what degree are current strategies and efforts enabling family members to improve and maintain the strengths and positive qualities of their relationships with one another?

Comments: These indicators consider not only the frequency of contact between family members who do not live together, but also the quality of relationships. *Family Interactions* and *Quality Family Relationships* with regards to mothers and fathers could benefit from some attention. Five fathers were rated for *Family Interactions* and *Quality Family Relationships* and both indicators scored 80% acceptable according to federal (CFSR) standards. One case from each indicator scored in the low refinement zone. For mothers, three cases (43%) scored in the maintenance zone; three cases (43%) scored in the refinement zone and one case (14%) scored in the improvement zone for both *Frequency of Interactions* and *Quality Family Relationships*. In looking at siblings, four cases were scored: one was in the maintenance zone and the remaining were in the high refinement zone for both indicators.

In the following case example, sibling interactions, both in terms of frequency of contacts and quality of relationships, fell into the refinement zone: “The contact is sporadic and communication occurs through texting and phone calls. Although his sisters are facing their own issues, the frequency and duration of contact could be improved.” In another

case the mother was struggling to trust providers and was generally unengaged in many aspects of the case. “She has been offered the opportunity for interaction with her child that she has not taken advantage of on a consistent basis.” Finally, in this example the quality and quantity of visits was seen as good: “Visitations between the mother, focus child and half sibling have progressed to unsupervised visits in the community near the residential care center and in the mother’s home.”

SPECIALIZED CULTURAL ACCOMMODATIONS: How well have any major cultural issues of the child and family been identified and addressed in practice? If indicated, are specialized supports and services provided being made culturally appropriate via special accommodations in the family engagement, assessment, planning, and service delivery processes being used with this child and family?

Comments: There were no cases in the sample that presented with major cultural issues; therefore none were rated and scored for this indicator.

VII. NEXT STEPS AND ACTION PLANNING

County staff, supervisors, and the director were encouraged to use the results of the review to formulate and implement an action plan to address enhancement of case practice and systems issues, which will ultimately result in improved outcomes for children and families in Eau Claire County. Agency staff identified the following as areas of potential focus for system and practice improvement:

- Training and case practice efforts that are more reflective of the philosophies of the skill set required for family teaming model (CST)
- Efforts to develop training for community members regarding the role of DHS, its limitations and responsibilities
- Setting goals and determining strategies to address identified challenges (from the QSR and ongoing)
- Strive for a healthy acknowledgement of the roles, responsibilities, origins and practice methodologies of DHS and the courts
- Need to identify strategies to publicize strengths of DHS to community
- Establishment and documentation of appropriate social worker workload (identifying goals that coincide with DHS philosophy).
- Developing strategies to determine long-term view earlier with families with the incorporation of behaviorally specific outcomes for families

The final “next steps” meeting was used to discuss the post-QSR facilitation process that will use data from the review to develop an action plan around improving case practice.

Follow-up and action planning will be facilitated by Bill Orth, Director of Sauk County Department of Health and Human Services.

VIII. SUMMARY

The results of Eau Claire County's first review offer information about the strengths and opportunities of agency and system-wide practice and that can be used to enhance outcomes for children and families. The scores from the first qualitative review serve as a baseline from which the agency will measure progress in future reviews. The best practice model underpinning the QSR raises the bar for evaluating case practice. More specifically, the best practice model represents a set of values and standards that promote provision of strategic, dynamic, and high quality services to keep children and families safe. Overall practice performance scores in Eau Claire County showed 33 percent in the maintenance zone, 67 percent in the refinement zone and no cases in the improvement zone. These practice scores are similar to the overall practice scores derived from the QSR data collected in the first 30 counties reviewed in Wisconsin. The combined data shows 24 percent of these cases were in the maintenance zone, 72 percent were in the refinement zone and four percent fell into the improvement zone.