Adams

Quarterly Results for Administrative Reviews

Administrative Review Division

7/1/2010 - 9/30/2010

This report presents data collected by the Administrative Review Division (ARD) through the Out-of-Home Review process. The results are grouped by CFSR Outcome and Item.

There are several key components to fully understanding the report. First, any item which is Compliance related will have the question number displayed in **BOLD** font, while those that are Data oriented (i.e., collected in order to gather more systemic information) will be displayed in normal font.

Also, as the compliance level for achieving Substantial Conformity during the CFSR is now set at 95%, any item falling below this level will be highlighted by the following symbol:

After the end of each quarter, a new report containing the most recent quarter's data will be made available for all stakeholders on the Colorado Department of Human Services Portal.

First Quarter = July - September
Second Quarter = October - December
Third Quarter = January - March
Fourth Quarter = April - June

Report created on: 11/1/2010

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Safety Outcome 2

Item 4: Risk of Harm

Safety

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
1709	If there were new allegations of abuse or neglect identified during the review period, were they entered as a referral into Trails?	0	0	0		0	0	0		0	0	0		57	0	137	100.0%
1712	If a new safety concern was identified regarding this child/youth, were the safety needs of the child/youth adequately addressed during the review period? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		41	1	152	97.6%
	No assessment/investigation			0				0				0				1	
	No referral to law enforcement			0				0				0				1	

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Permanency Outcome 1

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
Item 6: Stability of Foster Care Placements																	
Case Planning/Services																	
1729	At the time of the review, is the child/youth placed in the most appropriate setting to meet his/her individual needs? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		182	10	2	94.8%
	No, other			0			0				0				1		
	No, relatives not considered			0			0				0				1		
	No, sibling placement issues			0			0				0				8		
Permanency																	
1753	If the child/youth experienced one or more moves during the review period, were all of the placement changes planned by the agency in an effort to achieve the child/youth's case goals or to meet the needs of the child/youth? (Check "Yes, in line with case goal + planned" if both Yes answers are appropriate)	0	0	0		0	0	0		0	0	0		33	28	133	54.1%
	Yes, in line with case goal and planned			0			0				0				30		
	Yes, to meet youth's specific needs and planned			0			0				0				3		
1754	If the child/youth experienced one or more moves during the review period that were not planned, what was/were the reason(s) for the move(s)? (Check all that apply)																
	More than one move			0			0				0				6		
	Other			0			0				0				1		
	Provider abuse or neglect allegations			0			0				0				4		
	Provider quit or closed			0			0				0				4		
	Provider request			0			0				0				14		
	Runaway			0			0				0				5		
	Temporary setting			0			0				0				6		
	Youth's behavior			0			0				0				6		
Item 7: Permanency Goal for Child																	
Permanency																	
1760	In the reviewer's opinion, is the primary court ordered permanency goal, at the time of the review, appropriate for this child/youth?	0	0	0		0	0	0		0	0	0		179	14	1	92.7%
1762	If a petition/motion to terminate parental rights has not been filed, and a compelling reason has been identified, in the reviewer's opinion, is the compelling reason appropriate?	0	0	0		0	0	0		0	0	0		1	0	193	100.0%

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		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
Permanency Outcome 1																	
Permanency																	
1755	At the time of the review, are reasonable efforts being made to achieve permanency? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		189	5	0	97.4%
	No reasonable efforts to return home			0			0				0				1		
	No, other			0			0				0				4		
1756	For a child/youth with a goal of return home, is progress being made toward achieving the goal? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		27	41	126	39.7%
	No housing			0			0				0				7		
	No, ICPC			0			0				0				3		
	No, child lack of progress			0			0				0				3		
	No, other			0			0				0				4		
	No, parent incarc. or long term treatment program			0			0				0				6		
	No, parent lack of progress			0			0				0				29		
1758	For a child/youth with a permanency goal of permanent placement with a relative/non-relative through legal guardianship/permanent custody, is progress being made toward the goal? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		1	4	189	20.0%
	No, court delays			0			0				0				4		
Item 9: Adoption																	
Permanency																	
1757	For a child/youth with a goal of adoption, is progress being made toward finalizing the adoption? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		25	44	125	36.2%
	No CARR listing			0			0				0				5		
	No adoptive home			0			0				0				25		
	No, appeal of termination			0			0				0				15		
	No, court delays			0			0				0				5		
	No, lack of recruitment			0			0				0				2		
	No, other			0			0				0				1		

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Permanency Outcome 1

Item 10: Other Planned Living Arrangement

Case Planning/Services

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
1731	For all youth over age 16 years and 60 days, is there a comprehensive ILP that addresses all needs identified from a state-approved assessment? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		17	24	153	41.5%
	No description or plan of services			0			0				0				2		
	No plan			0			0				0				3		
	No self-sufficiency budget			0			0				0				13		
	No state approved assessment used			0			0				0				5		
	No, all identified needs not addressed			0			0				0				1		
	No, not timely			0			0				0				1		
	Not all ILP tabs completed			0			0				0				13		
	Not developed with youth			0			0				0				2		
1733	For all youth over age 16 years and 60 days, is the youth receiving services to address all the needs identified in the comprehensive assessment and the FSP 4D? (Check all that apply)	0	0	0		0	0	0		0	0	0		33	7	154	82.5%
	No referral for Chafee services			0			0				0				1		
	No, youth refused services			0			0				0				2		
1735	Is there a comprehensive, youth-driven Emancipation Transition Plan (ETP) developed 90 business days before the youth's projected permanency date? (Check all No responses that apply) (Check only "No plan" if there is not ETP plan)	0	0	0		0	0	0		0	0	0		4	1	189	80.0%
	No plan			0			0				0				1		
1736	Per Volume 7, have all vital documents been obtained for youth with an OPPLA goal 90 business days before their projected permanency date? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		4	1	189	80.0%
	No Health Passport/medical records			0			0				0				1		
	No educational records			0			0				0				1		

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Permanency Outcome 1

Item 10: Other Planned Living Arrangement

Permanency

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
1759	For a child/youth a permanency goal of Other Planned Permanent Living Arrangement, is it documented that all other more permanent goals have been considered and appropriately ruled out? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		48	4	142	92.3%
	No documentation			0				0				0				1	
	No, documented reasons not appropriate			0				0				0				1	
	No, not reviewed annually			0				0				0				2	

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Permanency Outcome 2

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
Item 11: Proximity of Placement																	
Case Planning/Services																	
1726	Is the child/youth placed within close proximity to his/her parents or other potential permanent caregiver's home?	0	0	0		0	0	0		0	0	0		91	11	92	89.2%
1727	If a child/youth is not placed in close proximity to his/her parents or other potential permanent caregiver's home, were reasonable efforts made to support or facilitate face-to-face contact with the parents or potential permanent caregivers?	0	0	0		0	0	0		0	0	0		12	0	182	100.0%
Item 13: Visiting with Parents and Siblings in Foster Care																	
Permanency																	
1773	Does the frequency of visitation with the mother/guardian/kin adequately address the needs of the child/youth to maintain or promote continuity of the relationship? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		74	11	109	87.1%
	No, child/youth			0			0				0				1		
	No, county			0			0				0				1		
	No, court			0			0				0				1		
	No, mother/guardian/kin			0			0				0				11		
1774	Does the frequency of visitation with the father/guardian/kin adequately address the needs of the child/youth to maintain or promote continuity of the relationship? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		41	9	144	82.0%
	No, child/youth			0			0				0				1		
	No, county			0			0				0				1		
	No, court			0			0				0				1		
	No, father/guardian/kin			0			0				0				8		
1775	Does the frequency of visitation with the sibling(s) adequately address the needs of the child/youth to maintain or promote continuity of the relationship(s)? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		73	8	113	90.1%
	No, GAL			0			0				0				1		
	No, OOH Provider			0			0				0				4		
	No, county			0			0				0				1		
	No, other			0			0				0				2		
	No, parent/guardian/kin			0			0				0				1		
	No, sibling			0			0				0				1		

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	2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
Permanency Outcome 2																
Item 14: Preserving Connections																
Court																
1705 Were these ICWA requirements met? (Check all that apply)	0	0	0		0	0	0		0	0	0		30	20	144	60.0%
No court order determ. if ICWA does NOT apply			0			0				0				1		
No docum. of inquiry of Native American heritage			0			0				0				17		
No notification sent to all identified tribes/BIA			0			0				0				1		
No response from tribe/BIA			0			0				0				3		
Case Planning/Services																
1728 Is the department making concerted efforts to maintain the child/youth's connections during the review period?	0	0	0		0	0	0		0	0	0		189	0	5	100.0%
Item 16: Relationship of Child in Care with Parents																
Permanency																
1777 Did the agency promote and support a positive and nurturing relationship between the child/youth and his/her parents? (Check all that apply)	0	0	0		0	0	0		0	0	0		70	3	121	95.9%
Yes, encouraged attend. at doctors' appointments			0			0				0				6		
Yes, encouraged foster parents to become mentors			0			0				0				7		
Yes, facil. contact w/parents not in close proxim.			0			0				0				9		
Yes, facilitated contact w/incarcerated parents			0			0				0				7		
Yes, other			0			0				0				1		
Yes, provid. therap. situations to strengthen rel.			0			0				0				42		
Yes, provided transportation/funds			0			0				0				15		

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Well Being Outcome 1

Item 17: Needs/Services of Child, Parents, and Foster Parents

Case Planning/Services

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
1721	Does the Family Services Plan treatment plan document services that are directed at the areas of need identified through assessment?	0	0	0		0	0	0		0	0	0		184	10	0	94.8%
	No			0			0				0				9		
	No, all task time frames expired			0			0				0				1		
1722	Were all required parties addressed in the treatment plan? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		156	38	0	80.4%
	No, all task time frames expired			0			0				0				1		
	No, child/youth			0			0				0				8		
	No, county			0			0				0				7		
	No, father/guardian			0			0				0				9		
	No, mother/guardian			0			0				0				1		
	No, out of home provider			0			0				0				27		
	No, some task time frames expired			0			0				0				2		
1723	Does the Family Services Plan treatment plan include objectives and action steps that document clear expectations in order to achieve the permanency goal? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		100	94	0	51.5%
	No treatment plan developed			0			0				0				2		
	No, all task time frames expired			0			0				0				1		
	No, measurable			0			0				0				87		
	No, specific			0			0				0				29		

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Well Being Outcome 1

Item 17: Needs/Services of Child, Parents, and Foster Parents

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
Case Planning/Services																	
1724	Does the most recent 90-day review/Court report in Trails meet Volume 7 requirements? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		98	95	1	50.8%
	No approval			0				0				0				36	
	No current 90-day review			0				0				0				6	
	No diligent search			0				0				0				37	
	No, barriers to progress			0				0				0				2	
	No, caregiver/kin provider services and progress			0				0				0				13	
	No, child/youth services and progress			0				0				0				15	
	No, child/youth's safety			0				0				0				1	
	No, parent services and progress			0				0				0				3	
	No, parent(s)/guardian(s) services appropriateness			0				0				0				1	
	No, permanency goal			0				0				0				4	
	No, permanency goal date			0				0				0				3	
	No, task time frames			0				0				0				3	
Health																	
1749	If the goal is/was return home during the review period and substance abuse issues have been identified for the parent(s)/guardian(s), what are the substances of use? (Check all that apply)																
	Alcohol			0				0				0				24	
	CNS Depressants			0				0				0				3	
	Cocaine/Crack			0				0				0				14	
	Heroin			0				0				0				8	
	Marijuana			0				0				0				23	
	Methamphetamine			0				0				0				20	
	Other			0				0				0				2	

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		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
Well Being Outcome 1																	
Health																	
1750	If the goal is/was return home during the review period and substance abuse issues have been identified for the parent(s)/guardian(s), were substance abuse treatment services provided to the parent(s)/guardian(s)? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		27	19	148	58.7%
	No, parent/guardian refused services			0			0				0				17		
	Unable to determine - outside services			0			0				0				2		
1751	If substance abuse issues have been identified during the review period for the child/youth, what are the substances of use? (Check all that apply)																
	Alcohol			0			0				0				2		
	Marijuana			0			0				0				5		
	Methamphetamine			0			0				0				2		
1752	If substances abuse issues have been identified during the review period for the child/youth, were substance abuse treatment services provided to the child/youth? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		4	5	185	44.4%
	No referral by county			0			0				0				2		
	No, child/youth refused services			0			0				0				1		
	No, delays of 2 + weeks			0			0				0				4		
Item 18: Child/Family Involvement in Case Planning																	
Case Planning/Services																	
1713	Was the out-of-home provider engaged in case planning, during the review period? (Check all responses that apply)	0	0	0		0	0	0		0	0	0		179	13	2	93.2%
	No			0			0				0				13		
1715	Was the child/youth engaged in case planning, during the review period?	0	0	0		0	0	0		0	0	0		87	5	102	94.6%
	No			0			0				0				5		
1717	Was the mother/guardian/kin engaged in case planning, during the review period?	0	0	0		0	0	0		0	0	0		59	22	113	72.8%
	No			0			0				0				17		
	No, efforts made but refused			0			0				0				5		
1719	Was the father/guardian/kin engaged in case planning during the review period?	0	0	0		0	0	0		0	0	0		40	22	132	64.5%
	No			0			0				0				17		
	No, efforts made but refused			0			0				0				5		

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Well Being Outcome 1

Item 19: Worker Visits with Child

Permanency

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
1763	How many months should the assigned worker have made face-to-face contact with the child/youth during the review period? (Answer for in-state cases only)																
	2			0				0				0				1	
	3			0				0				0				2	
	4			0				0				0				5	
	5			0				0				0				22	
	6			0				0				0				156	
	7			0				0				0				1	
1764	How many months did the assigned worker make face-to-face contact with the child/youth during the review period? (Within the state of Colorado, not an ICPC case)																
	2			0				0				0				6	
	3			0				0				0				4	
	4			0				0				0				9	
	5			0				0				0				34	
	6			0				0				0				134	
	Of all the months requiring contact, in what percent did agency personnel have contact with the child?				0.0%				0.0%				0.0%				%95.7
	In what percent of cases did agency personnel have contact with the child every month?													158	29		84.5%

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Well Being Outcome 1

Item 19: Worker Visits with Child

Permanency

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
1765	How many months should the worker of either the sending or receiving state make face-to-face contact with the child/youth, placed outside the state, during the review period? (Answer for ICPC cases only)																
	2			0			0				0				5		
	4			0			0				0				3		
	6			0			0				0				4		
1766	How many months did the worker of either the sending or receiving state make face-to-face contact with the child/youth during the review period, for a child/youth placed outside the state? (Answer for ICPC cases only)																
	0			0			0				0				1		
	1			0			0				0				1		
	2			0			0				0				5		
	3			0			0				0				4		
	4			0			0				0				1		
	Of all the months requiring contact, in what percent did agency personnel have contact with the child?																%58.7
	In what percent of cases did agency personnel have contact with the child every month?													5	7		41.7%
1767	Did the frequency of contact with the child/youth in his/her place of residence occur according to Volume 7?	0	0	0		0	0	0		0	0	0		172	21	1	89.1%

Item 19: Worker Visits with Child

Permanency

1768	Was the quality of contacts with the child/youth sufficient to address issues pertaining to the safety, permanency, and well-being of the child/youth and to promote achievement of case goals? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		77	116	1	39.9%
	No assessment of safety			0			0				0				99		
	No, outside presence of provider			0			0				0				68		

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Well Being Outcome 1

Item 20: Worker Visits with Parents

Permanency

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
1769	Did the frequency of contact with the mother/guardian/kin occur according to Volume 7?	0	0	0		0	0	0		0	0	0		41	27	126	60.3%
1770	Was the quality of contacts with the mother/guardian/kin sufficient to address issues pertaining to the safety, permanency, and well-being of the child/youth and to promote achievement of case goals?	0	0	0		0	0	0		0	0	0		41	26	127	61.2%
1771	Did the frequency of contact with the father/guardian/kin occur according to Volume 7?	0	0	0		0	0	0		0	0	0		22	19	153	53.7%
1772	Was the quality of contacts with the father/guardian/kin sufficient to address issues pertaining to the safety, permanency, and well-being of the child/youth and to promote achievement of case goals?	0	0	0		0	0	0		0	0	0		25	14	155	64.1%

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Well Being Outcome 2

Item 21: Educational Needs of Child

Education

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
1737	Is the child/youth's education/school record in the case file? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		92	46	56	66.7%
	No address of current school			0			0				0				15		
	No credit count			0			0				0				5		
	No current IEP			0			0				0				13		
	No current grade reports			0			0				0				32		
	No name of current school			0			0				0				8		
1738	For children aged 3 - 5: Is the child enrolled in Head Start or another early childhood education program?	0	0	0		0	0	0		0	0	0		14	8	172	63.6%
	Yes, assessed only			0			0				0				3		
	Yes, enrolled			0			0				0				11		
1739	For youth aged 16 or older: Is the youth on track to graduate and/or complete high school?	0	0	0		0	0	0		0	0	0		29	8	157	78.4%
	GED earned			0			0				0				3		
	Information not available			0			0				0				2		
	No GED			0			0				0				1		
	No, graduate			0			0				0				5		
1740	Was educational stability provided for the child during the review period? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		75	53	66	58.6%
	No, changed schools during review period			0			0				0				41		
	No, initial placement required change in school			0			0				0				18		
1741	Were the child/youth's educational needs assessed?	0	0	0		0	0	0		0	0	0		158	0	36	100.0%

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Well Being Outcome 3

Item 22: Physical Health of Child

Health

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
1742	Is health information in the case file, including name and address of current health care provider(s), known medical problems and current medications? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		184	9	1	95.3%
	No provider address/phone number			0			0				0				9		
	No provider name			0			0				0				5		
	No, medical problems not documented			0			0				0				1		
	No, medications not documented			0			0				0				1		
1743	Did the child/youth receive a medical exam, medical screening, or was a medical exam scheduled within two weeks of initial placement? (Check all No responses that apply) (Initial Review Only)	0	0	0		0	0	0		0	0	0		48	16	130	75.0%
	No, late			0			0				0				10		
	No, never occurred			0			0				0				2		
	No, other			0			0				0				4		
	Yes, appointment			0			0				0				4		
	Yes, exam			0			0				0				44		
1744	Did the child/youth receive a full dental examination or was a dental exam scheduled within eight weeks of initial placement? (Check all No responses that apply) (Initial Review Only)	0	0	0		0	0	0		0	0	0		41	7	146	85.4%
	No, late			0			0				0				1		
	No, never occurred			0			0				0				3		
	No, other			0			0				0				3		
	Yes, appointment			0			0				0				1		
	Yes, exam			0			0				0				40		

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Well Being Outcome 3

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
Item 22: Physical Health of Child																	
Health																	
1745	Has the child/youth received regular health care, including immunizations, and/or treatment for identified health needs? (Services delivered) (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		113	78	3	59.2%
	No statement from medical examiner			0			0				0				57		
	No, immunizations			0			0				0				16		
	No, lack of timely referral or follow through			0			0				0				13		
	No, other			0			0				0				6		
1746	Has the child/youth received regular dental care and treatment for identified dental needs? (Services delivered) (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		121	36	37	77.1%
	No treatment for identified needs			0			0				0				1		
	No, lack of timely referral or follow through			0			0				0				35		
Item 23: Mental Health of Child																	
Health																	
1747	Were the child/youth's mental health needs assessed?	0	0	0		0	0	0		0	0	0		158	3	33	98.1%
1748	Were mental health services provided to meet the child/youth's needs during the review period? (Check all No responses that apply)	0	0	0		0	0	0		0	0	0		95	50	49	65.5%
	No referral by county			0			0				0				2		
	No, OOH provider issue			0			0				0				2		
	No, changed MH provider			0			0				0				32		
	No, child refused services			0			0				0				1		
	No, delays of 2 + weeks			0			0				0				24		
	No, other			0			0				0				7		

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Systemic Factors

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
Item 25: Process to Ensure Each Child Has a Written Case Plan Developed Jointly with Parents																	
Case Planning/Services																	
1730	Does the FSP 4 B/C contain a comprehensive description of the type and appropriateness of the homes or facilities in which the child/youth was placed during the review period?	0	0	0		0	0	0		0	0	0		147	46	1	76.2%
Item 27: Permanency Hearing Every Twelve Months																	
Court																	
1703	If a child has been in care for 12 months or longer, is there a court order in the case file that was signed and dated within the last 12 months that contains reasonable efforts to achieve permanency language, and does not contain "nunc pro tunc" language? (Re-Review Only)	0	0	0		0	0	0		0	0	0		123	5	66	96.1%
	No reasonable efforts			0				0				0				1	
	No signed court order			0				0				0				5	
Item 29: Process for Foster Parents, Pre-adoptive Parents, and Relative Caregivers to be Notified of, and an Opportunity to be Heard, in Any Review or Hearing Held with Respect to the Child																	
Due Process																	
1708	Were all required parties invited to the review and given at least two weeks notice? (Check all that apply)	0	0	0		0	0	0		0	0	0		163	31	0	84.0%
	No, GAL			0				0				0				4	
	No, OOH Provider			0				0				0				18	
	No, Tribe/BIA (if ICWA applies)			0				0				0				1	
	No, child over 12			0				0				0				1	
	No, father/guardian			0				0				0				7	
	No, mother/guardian			0				0				0				1	

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Miscellaneous

		2nd Quarter SFY 2010				3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
Miscellaneous																	
Court																	
1701	Is this a court ordered review?	0	0	0		0	0	0		0	0	0		0	194	0	0.0%
1702	Is there a signed removal order that contains best interest or welfare of the child language, and determines if reasonable efforts were made or an emergency justified lack of reasonable efforts, and does not contain "nunc pro tunc" language? (Check all that apply) (Initial Review Only)	0	0	0		0	0	0		0	0	0		63	1	130	98.4%
	No signed removal order			0				0				0				1	
1704	Has the county had authority for placement within the review period? (A Fiscal Sanction may result if the answer is "No.")	0	0	0		0	0	0		0	0	0		194	0	0	100.0%
IV-E																	
1706	Has IV-E eligibility been determined within 45 days of removal? (A Fiscal Sanction may result if the answer is "No.") (Initial Review Only)	0	0	0		0	0	0		0	0	0		63	1	130	98.4%
1707	Has a timely IV-E redetermination been completed during the review period? (Re-Review Only)	0	0	0		0	0	0		0	0	0		35	9	150	79.5%
Permanency																	
1778	Were the previous compliance issues addressed? (Re-Review Only)	0	0	0		0	0	0		0	0	0		39	47	108	45.3%