Gunnison

Quarterly Results for Administrative Reviews

Administrative Review Division

7/1/2010 - 12/31/2010

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: 1/26/2011

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Safety Outcome 2

Item 4: Risk of Harm

Safety

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd 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		1	0	4	100.0%	0	0	4	
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		1	0	4	100.0%	0	0	4	

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Permanency Outcome 1

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd 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		5	0	0	100.0%	4	0	0	100.0%
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		1	2	2	33.3% ⚠	0	0	4	
	Yes, in line with case goal and planned			0				0				1				0	
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)																
	Provider request			0				0				1				0	
	Youth's behavior			0				0				2				0	
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		5	0	0	100.0%	4	0	0	100.0%
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	5		0	0	4	

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Permanency Outcome 1

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
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		5	0	0	100.0%	4	0	0	100.0%
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	5		0	0	4	
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	5		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		2	3	0	40.0%	4	0	0	100.0%
	No adoptive home			0				0				1				0	
	No, other			0				0				3				0	
	No, subsidy issues			0				0				1				0	
Item 10: Other Planned Living Arrangement																	
Case Planning/Services																	
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	5		0	0	4	
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	5		0	0	4	

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Permanency Outcome 1

Item 10: Other Planned Living Arrangement

Case Planning/Services

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
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	5		0	0	4	
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	5		0	0	4	

Item 10: Other Planned Living Arrangement

Permanency

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	5		0	0	4	

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Permanency Outcome 2

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd 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		4	1	0	80.0%	4	0	0	100.0%
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	5		0	0	4	
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	5		0	0	4	
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	5		0	0	4	
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		2	0	3	100.0%	4	0	0	100.0%
Item 14: Preserving Connections																	
Court																	
1705	Were these ICWA requirements met? (Check all that apply)	0	0	0		0	0	0		0	0	5		0	0	4	
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		5	0	0	100.0%	4	0	0	100.0%

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Permanency Outcome 2

Item 16: Relationship of Child in Care with Parents

Permanency

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
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	5		0	0	4	

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Well Being Outcome 1

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

Case Planning/Services

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd 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		3	2	0	60.0%	4	0	0	100.0%
	No			0			0				2				0		
1722	Were all required parties addressed in the treatment plan? (Check all No responses that apply)	0	0	0		0	0	0		5	0	0	100.0%	4	0	0	100.0%
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		1	4	0	20.0%	4	0	0	100.0%
	No, measurable			0			0				1				0		
	No, specific			0			0				4				0		
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		3	2	0	60.0%	4	0	0	100.0%
	No, child/youth's safety			0			0				2				0		
	No, permanency goal			0			0				2				0		
	No, permanency goal date			0			0				2				0		

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)

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Well Being Outcome 1

Health

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
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	5		0	0	4	
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)																
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	5		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		5	0	0	100.0%	4	0	0	100.0%
1715	Was the child/youth engaged in case planning, during the review period?	0	0	0		0	0	0		5	0	0	100.0%	4	0	0	100.0%
1717	Was the mother/guardian/kin engaged in case planning, during the review period?	0	0	0		0	0	0		0	0	5		0	0	4	
1719	Was the father/guardian/kin engaged in case planning during the review period?	0	0	0		0	0	0		0	0	5		0	0	4	

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Well Being Outcome 1

Item 19: Worker Visits with Child

Permanency

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd 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)																
	5			0			0				1				0		
	6			0			0				3				4		
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)																
	3			0			0				1				0		
	6			0			0				3				4		
	Of all the months requiring contact, in what percent did agency personnel have contact with the child?				0.0%				0.0%				91.3%				%100.0
	In what percent of cases did agency personnel have contact with the child every month?													4	0		100.0%
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)																
	6			0			0				1				0		
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)																
	6			0			0				1				0		
	Of all the months requiring contact, in what percent did agency personnel have contact with the child?																%0.0
	In what percent of cases did agency personnel have contact with the child every month?													0	0		.0%
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		4	1	0	80.0%	4	0	0	100.0%

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Well Being Outcome 1

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd Quarter SFY 2011			
		Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%	Yes	No	NA	%
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		2	3	0	40.0%	4	0	0	100.0%
	No assessment of safety			0			0				3				0		
	No, outside presence of provider			0			0				1				0		
Item 20: Worker Visits with Parents																	
Permanency																	
1769	Did the frequency of contact with the mother/guardian/kin occur according to Volume 7?	0	0	0		0	0	0		0	0	5		0	0	4	
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	5		0	0	4	
1771	Did the frequency of contact with the father/guardian/kin occur according to Volume 7?	0	0	0		0	0	0		0	0	5		0	0	4	
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	5		0	0	4	

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Well Being Outcome 2

Item 21: Educational Needs of Child

Education

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd 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		3	1	1	75.0%	2	0	2	100.0%
	No current grade reports			0			0				1				0		
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	5		2	0	2	100.0%
	Yes, enrolled			0			0				0				2		
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	5		0	0	4	
1740	Was educational stability provided for the child during the review period? (Check all No responses that apply)	0	0	0		0	0	0		3	1	1	75.0%	2	0	2	100.0%
	No, changed schools during review period			0			0				1				0		
1741	Were the child/youth's educational needs assessed?	0	0	0		0	0	0		2	0	3	100.0%	4	0	0	100.0%

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Well Being Outcome 3

Item 22: Physical Health of Child

Health

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd 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		5	0	0	100.0%	4	0	0	100.0%
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	5		0	0	4	
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	5		0	0	4	
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		3	2	0	60.0% ⚠	4	0	0	100.0%
	No statement from medical examiner			0				0				2				0	
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		3	1	1	75.0% ⚠	4	0	0	100.0%
	No, lack of timely referral or follow through			0				0				1				0	

Item 23: Mental Health of Child

Health

1747	Were the child/youth's mental health needs assessed?	0	0	0		0	0	0		4	0	1	100.0%	4	0	0	100.0%
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		3	1	1	75.0% ⚠	4	0	0	100.0%
	No, child refused services			0				0				1				0	

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Systemic Factors

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd 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		5	0	0	100.0%	4	0	0	100.0%
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		5	0	0	100.0%	4	0	0	100.0%
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		3	2	0	60.0% ⚠	0	4	0	0.0% ⚠
	No, GAL			0				0				0				4	
	No, OOH Provider			0				0				0				4	
	No, caseworker			0				0				1				4	
	No, child over 12			0				0				0				1	
	No, not timely			0				0				1				0	

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Miscellaneous

		3rd Quarter SFY 2010				4th Quarter SFY 2010				1st Quarter SFY 2011				2nd 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	5	0	0.0%	0	4	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	5		0	0	4	
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		5	0	0	100.0%	4	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	5		0	0	4	
1707	Has a timely IV-E redetermination been completed during the review period? (Re-Review Only)	0	0	0		0	0	0		1	0	4	100.0%	4	0	0	100.0%
Permanency																	
1778	Were the previous compliance issues addressed? (Re-Review Only)	0	0	0		0	0	0		5	0	0	100.0%	0	0	4	