

***Juan F.* v. Malloy Exit Plan
Status Report
October 1, 2016 – March 31, 2017
Civil Action No. 2:89 CV 859 (SRU)**

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***Juan F. v. Malloy* Exit Plan Status Report
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Highlights

- The Court Monitor’s findings regarding the 2006 Revised Exit Plan Outcome Measures indicate that the Department maintained compliance with 13 of the 22 measures during the Fourth Quarter 2016 and 15 of 22 measures for the First Quarter 2017. The summary chart on page 11 provides the overall performances and percentages. Of the measures that did not meet the established standards in the two quarters, the most concerning involve the Department’s investigation practice, case planning process, meeting children and families service needs, appropriate visitation with household and family members of the agency’s in-home cases, and excessive caseloads for Social Work staff.

- As previously reported, meetings between the *Juan F.* parties resulted in an agreement on a 2016 Revised Exit Plan.
 - The parties submitted a proposed 2016 Revised Exit Plan for the Court’s consideration on September 2016.
 - The Court reviewed the proposed 2016 Revised Exit Plan on September 28, 2016 and expressed support.
 - The State requested the Court’s formal approval be delayed until the Plan could be submitted for approval by the Connecticut General Assembly pursuant to Connecticut General State Section 3-125a.
 - The agreement was rejected by the General Assembly on February 1, 2017
 - On February 1, 2017 acting under the 2005 Revised Monitoring Order the Plaintiffs provided notice of actual or likely non-compliance with the *Juan F.* 2006 Revised Exit Plan.
 - Under the terms of that Order, the parties are to confer for 30 days and see if they can resolve the issues of noncompliance.
 - On February 10, 2017, a Status Conference was held. The parties indicated to the Court that they would attempt to mediate the issues of noncompliance with the assistance of the Court Monitor.
 - The parties agreed to extend the 30 day timeframe for mediation.
 - On March 23, 2017, the parties determined that they could not reach an agreement on the issues related to the alleged noncompliance and that the Court Monitor should and could issue his own findings, conclusions and recommendations to the Court for proposed modification of the 2006 Revised Exit Plan. The parties expressly consented to and waived any objections to the Court Monitor serving in this capacity and further agreed that his doing so would not be raised as an objection to any role he is presently performing or may in the future perform with respect to the litigation. In furtherance of this undertaking, the parties agreed that the Court Monitor should and could conduct joint and/or ex parte discussions with the parties as the Court Monitor deems necessary in formulating such recommendations to the Court as he deems appropriate. The parties expressly consented to and waived any objections to the Court Monitor serving in this

capacity and further agreed that his doing so would not be raised as an objection to any role he is presently performing or may in the future perform with respect to the litigation.

- The Court Monitor submitted his findings, conclusions and recommendation to the Court on May 1, 2017.
 - Both parties submitted written briefs to the Court.
 - On May 30, 2017, Judge Underhill referred the case to Magistrate Judge Holly B. Fitzsimmons for Settlement.
- The Department performance on the key measures Case Planning (OM 3) and Children's Needs Met (OM 15) weakened over the two quarters comprising this review.

The results for the 53 case blind-sample of Outcome Measure 3 (Case Planning) and Outcome Measure 15 (Needs Met) for the Fourth Quarter 2016 and First Quarter 2017 are detailed below:

Statewide, the result for Outcome Measure 3 (OM3) - Case Plans, is 49.1% for the Fourth Quarter 2016, and 39.6% for the First Quarter 2017. The 2006 Revised Exit Plan Outcome Measure 3 requirement is that; "In at least 90% of the cases, except probate, interstate and subsidy only cases, appropriate case plans shall be developed as set forth in the DCF Court Monitor's 2006 Protocol for Outcome Measure 3 and 15...." Table 4: Summary of Domains for Outcome Measure 3 for 10/1/2016-3/31/2017 can be found on page 29.

In the Fourth Quarter 2016, 45 of the 53 case plans and case planning efforts were clearly accommodating of the family's primary language. In eight of the cases the reviewer was unable to determine if language accommodations were being made from the information available in the record, as the case plan was not approved or initiated at the time of review. During the Fourth Quarter 2016, there were issues with timing for nine (9) case plans at the point of review. Two cases had no plan initiated at the point of review, six (6) were not approved by the Social Work Supervisors or not approved timely per the required policy (one additional plan that was not timely was granted an override based on discussions with the area office related to the circumstances regarding the delay, and engagement with the family). This continues to raise questions as to whether case plans are being developed and shared with families as the documents they are intended to be. None of the domains were above the ninety percentile range to achieve compliance with the 2006 Revised Exit Plan standards at the statewide level.

Danbury, Torrington, and Willimantic Area Offices each surpassed the benchmark standard of 90% or higher in with 100% of reviewed cases meeting the standards set forth in the methodology for the Fourth Quarter. This was not a regionally achieved benchmark in Fourth Quarter 2016.

In the First Quarter 2017, a total of 44 of the 53 case plans had case planning efforts clearly accommodating of the family's primary language. In nine (9) of the cases the reviewer was unable to determine if language accommodations were being made from the

information available in the record as the case plan was not approved or initiated at the time of review. During the First Quarter 2017, there were issues with timing for seven (7) case plans at the point of review. One case had no plan initiated at the point of review, six (6) case plans were not approved by the Social Work Supervisors or not approved timely per the required policy (as with the prior quarter, one plan that was not timely was granted an override based on discussions with the area office related to the circumstances regarding the delay and documented engagement with the family).

The data regarding Outcome Measure 3 (Case Plans), indicates that the Department's assessment work continues to be an area that still needs improvement along with a continued emphasis on better engagement of all family members and stakeholders and improving documentation in the case record. The Department's utilization of the formal Structured Decision Making (SDM) process is inconsistent and the quality of this work will remain a point of emphasis in ongoing reviews. As indicated later in the report when discussing the quality of investigative work, the Department has committed to updating the Connecticut SDM model and providing training. Similar to the Fourth Quarter findings, none of the domains were above the 90 percent range to achieve compliance with the 2006 Revised Exit Plan standards at the statewide level during the First Quarter 2017.

Outcome Measure 15 requires that all needs be met within the case for 80% of the children and families served. The Statewide Fourth Quarter 2016 and First Quarter 2017 samples (each n=53) continues to reflect marginal progress in attaining Outcome Measure 15 with statewide levels of 50.9% and 60.4% respectively. Table 8: Summary of Domains Outcome Measure 15 for 10/1/2016-3/31/2017 can be found on page 44.

Inconsistency best describes the practice in both quarters. Several area offices were able to meet Outcome Measure 15 in one quarter. However, only Willimantic and Torrington achieved the measure in both quarters.

Regions I and III each, as a whole, achieved Outcome Measure 15 in one quarter, but were unable to maintain that level of performance for both quarters. Other regions continued to struggle with attaining the benchmark performance of 80% in either quarter.

The individual unmet needs identified in the cases sampled included the following total service needs: 188 for the Fourth Quarter 2016 and 152 for the First Quarter 2017 for a combined number of 340 Unmet Identified Service Needs for the 106 cases during the six months of case management and service reviewed.

In the Fourth Quarter 2016, a need was identified in 14 of 36 cases (38.9 %) in which Structured Decision Making (SDM) was conducted that was identical to that which was identified on the prior case plan assessment. (This would indicate an unmet need for greater than 6 months for a family or individual.) In 45.3% of the 53 Fourth Quarter 2016 case plans reviewed, it was the opinion of the Court Monitor's staff that there was at least one priority need that was evident from the review of the documentation that was not incorporated into the newly developed case plan document. In the First Quarter 2017,

there were 11 of 29 cases (37.9%) in which SDM was conducted that a need was identified in the current SDM identical to that which was identified on the prior case plan assessment. (This would indicate an unmet need for greater than 6 months for a family or individual.) In 54.7% of the 53 First Quarter 2017 case plans reviewed, it was the opinion of the Court Monitor's staff that there was at least one priority need that was evident from the review of the documentation that was not incorporated into the newly developed case plan document. In both quarters, for many of these cases where an ACR was held, the ACR Social Work Supervisor also identified these areas as Areas Needing Improvement.

Service needs noted through this methodology on Table 9: Unmet Needs during the Fourth Quarter 2016 (n=53) and First Quarter 2017 (n=53), beginning on page 45, and Table 11: Needs Not Incorporated into the Case Plan Developed for Upcoming Six Month Period, beginning on page 52, as well as other review activities and discussions with staff and state stakeholders indicate that services that are not readily available in areas of the state include: in-home services (including the most intensive services), domestic violence services, mentoring, substance abuse services, supportive housing vouchers, foster and adoptive care resources, and outpatient mental health services.

As with prior reports, the reported barrier to appropriate service provision was the result of wait-lists and internal provider issues, client refusal, or the lack of/delayed referrals. As previously reported, interviews and e-mail exchanges with Social Workers and Social Work Supervisors continues to indicate that some percentage of the categories of “lack of referral” or “delayed referral” are due to staff having knowledge that certain services are not readily available. Thus, the number of cases with unmet needs due to waitlists and provider issues is understated.

- Although the automated reporting indicates that the Department has achieved compliance with the timing component of Outcome Measure 1 and 2 (Commencement of Investigation and Completion of Investigation) sampling over the last quarter again confirmed that issues exist regarding the quality of the investigative work. These areas include; timely assessment utilizing the Structured Decision Making model (SDM), family and collateral contacts, supervision, and documentation. The Department is continuing an ongoing statewide review utilizing their own QA process in each office and are finalizing plans to update Connecticut’s SDM model and address inconsistencies in its utilization.
- Outcome Measure 18 (Caseload Standards) has not been met in the last seven (7) quarters. Sufficient staffing and community resources must be utilized in conjunction with the implementation of significant practice improvements that are also required. Improving the Department’s efforts in areas like formal assessments, purposeful visitation, effective supervision, service provision, care coordination, and case planning require adherence to best practice standards and protocols as well as sufficient staffing and services. As of the writing of this report, there are:
 - 151 Social Workers over the 100% caseload limit. Last month there were 109 Social Workers over 100%.
 - 66 Social Workers over the 100% limit for 25 or more days.

- 668 Social Workers with caseloads of more than 80% of the maximum limit.
- Approximately 63% of the Intake Workers are carrying 12 or more cases at this time.
- Approximately 60% of the Ongoing Social Workers are over 80% of the maximum caseload limit.
- The current utilization rate which is defined as the average caseload of all caseload carrying Social Workers is 84.97%. This includes 73 relatively new hires with low utilizations at this time who will eventually move to full caseloads.

The recent Time Study conducted by the Court Monitor indicated that as caseloads exceed 75% of the caseload standard workload severely impacts the quality and quantity of service provision. The Department needs 1210 Social Workers to achieve a 75% average utilization. There are currently 1097 Social Workers that have caseload assignments. Taking into account vacancies waiting to be filled and staff already hired, an additional 98 Social Worker positions would need to be established to reach 75% average utilization.

- The positive impact of hiring of Social Workers and Social Work Supervisors during the review period has been offset by rising caseloads/workload, continuing issues within the Department's assessment, visitation supervision and documentation efforts and ongoing challenges with the availability of community resources. The agency has not been able to fulfill positions for critical staff such as: foster care, case aide, clinical, clerical or fiscal positions.
- Outcome Measure 10 (Sibling Placement) did not meet the measure for either quarter under the definitions set forth in the 2006 Revised Exit Plan. However, with the expansion of the exception group to include sibling groups of three (3) or more siblings that was detailed in previous reports; the findings of the review of this cohort indicate that the Department would have met the measure for both the Fourth Quarter 2016 and First Quarter 2017.
- The Division of Foster Care's report for January-March 2017 indicates that there are 2063 licensed DCF foster homes. This is a decrease of 33 homes when compared with the previous status report. The number of approved private provider foster care homes is 803 which is a decrease of 29 homes from the previous status report. The number of private provider foster homes currently available for placement is 91.
- The number of children with the goal of Other Planned Permanent Living Arrangement (OPPLA) continued to decrease over the last two quarters. In May 2016, there were 185 children with an OPPLA goal and as of May 2017 there are now 114 children with this goal. While this goal is appropriate for some youth, it is not a preferred goal due to its lack of formal permanent and stable relationships with an identified adult support, be it relative or kin. This has been on ongoing point of focus by the Department.
- As of May 2017, there were 86 *Juan F.* children placed in residential facilities. This is an increase of 5 children compared with November 2016. The number of children residing

in residential care for greater than 12 months was 24 which is 5 more children than reported in November 2016.

- The Department continues to focus on the number of *Juan F.* children residing and receiving treatment in out-of-state residential facilities. As of June 12, 2017, there are 2 children in DCF custody residing in out-of-state residential facilities.
- The number of children age 12 years old or younger in congregate care as of May 2017 was 14 children which is 2 less than November 2016. Of the current total, 9 are placed in residential care, 4 children are placed in group homes, and 1 is placed in a SFIT.
- As of May 2017, there was one child aged 1 to 5 years of age residing in a Congregate Care placement.
- The number of children utilizing Short-term Family Integrated Treatment (SFIT) has increased as the Department has broadened access for referrals from Emergency Mobile Psychiatric Service and others. SFIT is a residential crisis-stabilization program for children ages 12-17 with a goal of stabilizing a youth and their family, guardian or fictive kin to coordinate a reintegration back into the homes. The intended length of stay is 15 days or less. For First Quarter 2017, 37 youth had stays of 0-15 day, 14 youth had stays of 16-30 days and 14 youth had stays of over 31 days. The data for October 2016-March 2017 is found below.

| Client Status | Q4 SFY 2016 | Q1 SFY 2017 |
|--|-----------------------|-------------------------|
| | Oct - Dec 2016 | Jan - March 2017 |
| In-Care at Period Start | 35 | 42 |
| Admitted in Period | 77 | 64 |
| Discharged in Period | 70 | 57 |
| Remaining in Care at Period End | 42 | 49 |
| Episodes Served in Period | 112 | 106 |
| Distinct Clients Served in Period | 103 | 101 |

- Data source: PIE
- *PIE tracks length of stay data by months (not days)

Note: During the timeframes noted above there were youth remaining from the Safe Home programs and that skewed length of stay. Since that time the length of stay has decreased to an average of 17 days. There are also instances in which episodes are not being closed in PIE by a provider when a child leaves SFIT.

- There were 29 youth in STAR/Shelter programs as of May 2017. This is 5 more than the 24 reported in November 2016. Twelve (41.3% of these youth in STAR programs were in overstay status (>60 days) as of May 2017. There were two children with lengths of stay longer than six months as of May 2017. In the past, the lack of sufficient and appropriate treatment/placement services, especially family-based settings for older youth, hampered efforts to reduce the utilization of STAR services. Shelter use has been reduced but the question that remains unanswered is whether the children diverted from this service are receiving appropriate and timely community-based services.

- The Monitor’s quarterly review of the Department for the period of October 1, 2016 through March 31, 2017 indicates that as of the end of the First Quarter (March 2017) the Department did not achieve compliance with seven (7) measures:
 - Commencement of Investigation (95.5%)¹
 - Completion of Investigation (85.8%)²
 - Case Planning (39.6%)
 - Placement Within Licensed Capacity (93.8%)
 - Children's Needs Met (60.4%)
 - Worker-Child Visitation In-Home (N/A)³
 - Caseload Standards (93.9%)

- The Monitor’s quarterly review of the Department for the period of October 1, 2016 through March 31, 2017 indicates the Department has achieved compliance with the following 15 Outcome Measures:
 - Search for Relatives (89.3%)
 - Repeat Maltreatment (6.5%)
 - Maltreatment of Children in Out-of-Home Cases (0.5%)
 - Reunification (69.0%)
 - Adoption (35.5%)
 - Transfer of Guardianship (71.2%)
 - Sibling Placement (87.3%)
 - Re-Entry into DCF Custody (6.7%)
 - Multiple Placements (95.6%)
 - Foster Parent Training (100.0%)
 - Worker-Child Visitation Out-of-Home Cases (96.7% Monthly/99.5% Quarterly)
 - Residential Reduction (2.1%)
 - Discharge of Adolescents (88.6%)
 - Discharge to Adult Services (100.0%)
 - Multi-disciplinary Exams (91.7%)

¹ Based on sampling of Differential Response cases over two quarters it has been determined that the quality of the investigative work (OM 1 and 2) is not in compliance with the provisions of the Exit Plan.

² Based on sampling of Differential Response cases over two quarters it has been determined that the quality of the investigative work (OM 1 and 2) is not in compliance with the provisions of the Exit Plan.

³ Outcome Measure 17 Worker-Child Visitation In-Home - Current automated reporting indicates the measure as statistically achieved, however this does not accurately reflect performance findings. The Outcome Measure 17 Pre-Certification Review indicated that compliance is not achieved. While DCF reports are numerically accurate based upon the algorithms utilized, user error in selection of narrative entry types, and a failure to demonstrate that workers are meeting the specific steps called for with the definition of 'visit' calls into question the automated report findings. As such, the Monitor will not indicate achievement of the measure based solely on the current reporting.

- The Department has maintained compliance for at least two (2) consecutive quarters⁴ with 11 of the Outcome Measures reported as achieved this quarter:
 - Search for Relatives
 - Repeat Maltreatment of In-Home Children
 - Maltreatment of Children in Out-of-Home Care
 - Reunification
 - Re-entry into DCF Custody
 - Multiple Placements
 - Foster Parent Training
 - Visitation Out-of-Home
 - Residential Reduction
 - Discharge of Youth (graduated, GED, working, or military)
 - Multi-disciplinary Exams

A full copy of the Department's Fourth Quarter 2016 and First Quarter 2017 submission including the Commissioner's Highlights may be found on page 67.

⁴ The Defendants must be in compliance with all of the outcome measures, and in sustained compliance with all of the outcome measures for at least two consecutive quarters (six-months) prior to asserting compliance and shall maintain compliance through any decision to terminate jurisdiction.

| Statewide Juan F. Exit Plan Report Outcome Measure Overview | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|----------|-----------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|--------|
| Measure | Measure | Base-line | Q1 2017 | Q4 2016 | Q3 2016 | Q2 2016 | Q1 2016 | Q4 2015 | Q3 2015 | Q2 2015 | Q1 2015 | Q4 2014 | Q3 2014 | Q2 2014 | Q1 2014 | Q4 2013 | Q3 2013 | Q2 2013 | Q1 2013 | Q4 2012 | Q3 2012 | Q2 2012 | Q1 2012 | Q4 2011 | Q3 2011 | Q2 2011 | Q1 2011 | Q4 2010 | Q3 2010 | Q2 2010 | Q1 2010 | |
| 1. Commencement of Investigation | >=90% | X | 95.5% | 94.7% | 94.8% | 94.6% | 95.2% | 95.8% | 95.7% | 95.2% | 95.1% | 94.5% | 93.8% | 93.2% | 93.6% | 94.7% | 96.0% | 96.2% | 95.5% | 94.9% | 95.7% | 96.1% | 96.6% | 97.1% | 97.3% | 97.2% | 97.2% | 96.8% | 97.4% | 97.6% | 97.4% | |
| 2. Completion of the Investigation | >=85% | 73.7% | 85.8% | 86.7% | 86.4% | 82.7% | 85.8% | 88.9% | 86.0% | 88.9% | 85.6% | 81.9% | 78.6% | 77.3% | 77.6% | 83.7% | 92.5% | 92.2% | 89.1% | 90.2% | 92.5% | 92.4% | 91.9% | 93.3% | 94.0% | 94.4% | 92.7% | 90.0% | 91.5% | 92.9% | 93.7% | |
| 3. Treatment Plans | >=90% | X | 39.6% | 49.1% | 52.7% | 64.2% | 66.7% | 48.1% | 53.7% | 37.0% | 47.2% | 41.5% | 46.3% | 46.3% | 51.9% | N/A | 65.5% | 63.0% | 56.4% | 53.7% | 47.8% | 63.0% | 39.6% | 44.4% | 50.9% | N/A | 81.1% | 67.9% | 66.0% | 75.5% | 86.5% | |
| 4. Search for Relatives | >=85% | 58% | 89.3% | 94.8% | 93.1% | 96.0% | 98.9% | 98.3% | 92.9% | 92.9% | 93.4% | 89.3% | 86.9% | 85.1% | 86.6% | 88.3% | 90.2% | 85.3% | 92.2% | 87.3% | 87.5% | 89.5% | 89.3% | 92.8% | 94.5% | 94.5% | 90.1% | 88.8% | 90.9% | 91.2% | 92.0% | |
| 5. Repeat Maltreatment of In-Home Children | <=7% | 9.3% | 6.5% | 6.2% | 6.8% | 6.6% | 6.6% | 6.1% | 5.4% | 5.0% | 5.7% | 6.7% | 6.5% | 5.8% | 6.3% | 4.5% | 4.9% | 5.7% | 4.4% | 4.9% | 4.3% | 4.1% | 4.3% | 6.0% | 6.1% | 5.4% | 5.7% | 6.2% | 6.5% | 6.5% | 5.8% | |
| 6. Maltreatment of Children in Out-of-Home Care | <=2% | 1.2% | 0.5% | 0.3% | 0.2% | 0.2% | 0.2% | 0.2% | 0.2% | 0.2% | 0.2% | 0.2% | 0.3% | 0.1% | 0.2% | 0.2% | 0.2% | 0.2% | 0.2% | 0.2% | 0.2% | 0.2% | 0.1% | 0.1% | 0.2% | 0.1% | 0.1% | 0.4% | 0.2% | 0.1% | 0.2% | |
| 7. Reunification | >=60% | 57.8% | 69.0% | 70.6% | 62.1% | 66.7% | 65.6% | 57.4% | 52.7% | 64.2% | 59.8% | 65.2% | 71.3% | 73.9% | 60.2% | 62.5% | 62.4% | 62.8% | 56.3% | 57.6% | 52.0% | 61.1% | 58.9% | 65.8% | 65.3% | 73.1% | 61.7% | 64.9% | 68.3% | 67.1% | 61.2% | |
| 8. Adoption | >=32% | 12.5% | 35.5% | 30.2% | 29.5% | 40.4% | 38.5% | 31.1% | 35.5% | 31.0% | 32.9% | 31.7% | 30.2% | 34.2% | 44.0% | 33.9% | 32.8% | 31.6% | 29.5% | 25.9% | 39.0% | 34.3% | 23.7% | 33.6% | 40.0% | 32.7% | 35.6% | 38.5% | 25.8% | 36.0% | 34.7% | |
| 9. Transfer of Guardianship | >=70% | 60.5% | 71.2% | 69.5% | 76.5% | 72.5% | 67.2% | 69.6% | 75.7% | 66.7% | 77.8% | 72.5% | 73.2% | 65.2% | 67.6% | 63.8% | 77.3% | 65.6% | 77.6% | 76.5% | 84.0% | 76.7% | 81.4% | 83.1% | 83.6% | 78.4% | 86.2% | 87.3% | 78.6% | 74.6% | 82.3% | |
| 10. Sibling Placement | >=95% | 57% | 87.3% | 88.8% | 90.1% | 89.8% | 91.7% | 92.1% | 92.0% | 91.4% | 90.9% | 90.6% | 88.7% | 89.3% | 90.6% | 89.9% | 92.5% | 88.0% | 89.5% | 87.5% | 87.5% | 89.2% | 88.5% | 91.8% | 89.3% | 85.8% | 86.7% | 83.3% | 81.9% | 84.8% | 85.6% | |
| 11. Re-Entry into DCF Custody | <=7% | 6.9% | 6.7% | 5.1% | 6.4% | 5.8% | 3.8% | 3.7% | 4.1% | 5.8% | 5.0% | 3.8% | 7.7% | 8.0% | 4.8% | 4.9% | 5.5% | 8.6% | 7.4% | 7.0% | 9.1% | 6.8% | 5.8% | 6.4% | 7.2% | 4.4% | 7.7% | 6.3% | 7.3% | 6.7% | 8.4% | |
| 12. Multiple Placements | >=85% | X | 95.6% | 96.3% | 96.2% | 96.5% | 96.7% | 96.7% | 96.5% | 96.8% | 96.7% | 96.4% | 96.5% | 96.7% | 96.8% | 97.1% | 96.6% | 96.7% | 96.4% | 96.5% | 96.4% | 96.6% | 96.6% | 96.4% | 96.4% | 96.1% | 96.1% | 96.1% | 95.7% | 95.8% | 95.9% | |
| 13. Foster Parent Training | 100% | X | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | |
| 14. Placement Within Licensed Capacity | >=96% | 94.9% | 93.8% | 94.3% | 92.9% | 92.9% | 93.5% | 94.3% | 95.5% | 94.9% | 95.4% | 96.3% | 95.3% | 95.4% | 96.0% | 95.7% | 96.2% | 96.4% | 97.1% | 96.7% | 95.8% | 95.3% | 97.7% | 96.1% | 95.2% | 95.6% | 96.8% | 96.8% | 95.4% | 95.1% | 96.9% | |
| 15. Children's Needs Met | >=80% | X | 60.4% | 50.9% | 52.7% | 69.8% | 70.4% | 63.0% | 57.4% | 44.4% | 47.2% | 52.8% | 64.8% | 59.3% | 57.4% | N/A | 67.3% | 74.1% | 61.8% | 53.7% | 53.6% | 61.1% | 60.4% | 55.6% | 60.4% | N/A | 58.5% | 56.6% | 58.5% | 52.8% | 67.3% | |
| 16. Worker-Child Visitation (Out-of-Home) | >=85%(M) | X | 96.7% | 95.4% | 96.3% | 95.6% | 96.7% | 96.1% | 94.9% | 96.5% | 94.9% | 92.6% | 93.4% | 94.3% | 94.9% | 95.4% | 94.6% | 95.8% | 95.9% | 94.2% | 93.6% | 92.7% | 95.1% | 92.3% | 95.0% | 95.1% | 95.8% | 95.3% | 95.3% | 95.7% | 96.2% | |
| | =100%(Q) | X | 99.5% | 98.9% | 99.5% | 99.1% | 99.3% | 99.4% | 99.0% | 99.6% | 99.0% | 98.4% | 98.4% | 98.9% | 98.8% | 99.0% | 98.8% | 99.0% | 99.2% | 99.1% | 98.7% | 98.7% | 99.2% | 98.6% | 99.0% | 99.2% | 99.2% | 98.9% | 98.9% | 99.3% | 99.6% | |
| 17. Worker-Child Visitation (In-Home) | >=85% | X | 89.5% | 86.0% | 86.9% | 86.1% | 88.2% | 88.7% | 87.5% | 89.2% | 86.1% | 83.3% | 83.3% | 83.9% | 83.0% | 85.3% | 86.1% | 88.6% | 88.1% | 84.1% | 87.0% | 85.8% | 84.8% | 85.9% | 86.3% | 89.7% | 88.5% | 89.7% | 89.4% | 89.7% | 89.6% | |
| 18. Caseload Standards | 100% | 69.2% | 93.9% | 97.3% | 95.6% | 94.2% | 98.1% | 99.7% | 99.8% | 100.0% | 90.6% | 87.3% | 84.5% | 83.6% | 94.5% | 97.6% | 99.9% | 99.9% | 99.8% | 99.9% | 100.0% | 99.7% | 99.8% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 99.9% | 100.0% | 100.0% |
| 19. Reduction in the number of Children Placed in Residential Care | <=11% | 13.5% | 2.1% | 2.1% | 2.3% | 2.2% | 2.5% | 2.6% | 2.8% | 2.7% | 2.8% | 2.7% | 2.7% | 3.4% | 4.0% | 4.2% | 4.3% | 4.9% | 5.1% | 5.8% | 6.3% | 6.9% | 7.5% | 8.5% | 8.8% | 9.8% | 10.0% | 9.9% | 9.4% | 10.1% | 10.0% | |
| 20. Discharge Measures | >=85% | 61% | 88.6% | 87.8% | 96.5% | 95.9% | 86.9% | 88.9% | 95.5% | 90.9% | 83.7% | 94.6% | 93.8% | 97.1% | 90.9% | 94.5% | 85.7% | 86.3% | 86.5% | 95.9% | 89.2% | 85.7% | 86.9% | 76.5% | 88.0% | 79.4% | 82.9% | 87.2% | 88.5% | 87.9% | 86.0% | |
| 21. Discharge of Mentally Ill or Mentally Retarded Children | 100% | X | 100.0% | 97.7% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 95.7% | 92.0% | 97.0% | 96.1% | 97.3% | 98.1% | 100.0% |
| 22. Multi-disciplinary Exams (MDE) | >=85% | 5.6% | 91.7% | 89.6% | 92.7% | 93.0% | 95.7% | 97.5% | 90.6% | 96.4% | 91.2% | 93.3% | 96.0% | 91.8% | 85.4% | 85.1% | 94.1% | 93.6% | 95.0% | 89.7% | 95.5% | 93.8% | 90.0% | 93.4% | 93.3% | 96.3% | 91.9% | 97.5% | 96.1% | 96.4% | 95.7% | |

*Automated reporting for Outcome Measures 1 (Commencement of Investigation), 2 (Completion of Investigation), and 17 (Worker-Child Visitation In-Home) are subject to Court Monitor review for precertification. Preliminary reviews identified issues with data entry and accuracy in reporting for these measures as well as the quantity and quality of the Department's performance.

Juan F. Pre-Certification Review-Status Update (October 1, 2016 – March 31, 2017)

The Department continues to operate under the Revised Exit Plan (¶5), in which the Court Monitor is required to conduct what the parties and the Court Monitor refer to as a “Certification” reviews as follows:

The Defendants must be in compliance with all of the outcome measures, and in sustained compliance with all of the outcome measures for at least two quarters (six months) prior to asserting compliance and shall maintain compliance through any decision to terminate jurisdiction. The Court Monitor shall then conduct a review of a statistically significant valid sample of case files at a 96% confidence level, and such other measurements as are necessary, to determine whether Defendants are in compliance. The Court Monitor shall then present findings and recommendations to the District Court. The parties shall have a meaningful opportunity to be heard by the Court Monitor before rendering his findings and recommendations.

In recognition of the progress made and sustained by the Department with respect to a number of Outcome Measures, and the fact that the well-being of the *Juan F.* class members will be promoted by the earliest possible identification and resolution of the any quantitative or qualitative problems affecting class members that may be identified by the review required by Revised Exit Plan (¶5), the parties and the Court Monitor agree that it is in the best-interests of the *Juan F.* class members to create a “Pre-Certification” review process. It is expected that this “pre-certification” process may, in certain instances, obviate the need to implement the full certification review for certain outcome measures after sustained compliance is achieved for all Outcome Measures.

The “Pre-Certification” process that parties and the Court Monitor have created, and to which they have agreed, is as follows:

If DCF has sustained compliance as required by the Revised Exit Plan for at least two consecutive quarters (6 months) for any Outcome Measure (“OM”), the Court Monitor may, in his discretion, conduct a “pre-certification review” of that OM (“Pre-Certification Review”). The purpose of the Pre-Certification Review is to recognize DCF’s sustained improved performance, to identify and provide a prompt and timely opportunity to remedy any problem areas that are affecting the well-being of *Juan F.* class members, and to increase the efficiency of DCF’s eventual complete compliance and exit from the Consent Decree.

Other than conducting the Pre-Certification Review earlier than the review mandated by Revised Exit Plan (¶5), the Pre-Certification Review will be conducted in accordance with the provision for review as described in the Revised Exit Plan (¶5) unless otherwise agreed upon by the parties and the Court Monitor.

If the Pre-Certification Review does not identify any material issues requiring remediation, and no assertions of noncompliance with the specific Outcome Measures(s) at issue are pending at the time Defendants assert sustained

compliance with all Outcome Measures, the Parties agree that the full review as per paragraph 5 of the Revised Exit Plan will not be required after the Defendants assert sustained compliance with all Outcome Measures. Upon Defendants' assertion of sustained compliance with all Outcome Measures, the parties, with the involvement and consent of the Court Monitor, agree to present for the Court's review, any agreement to conduct less than the full review process required by Revised Exit Plan (§5) for any specific Outcome Measures, as a proposed modification of the Revised Exit Plan.

Sixteen (16) Outcome Measures have gone through the process of a pre-certification review. Fifteen achieved pre-certified status at the time they were reviewed. During this period of review, no additional measures have been pre-certified. However, additional collaborative review work has been undertaken with the Department regarding the two investigation measures OM 1 and OM 2. As can be seen through a review of the Exit Plan Outcome Measure Chart on page 11, some of the measures pre-certified early in the process are showing signs of regression that are or have the potential to be concerning if they continue. This information was incorporated into Recommendations to the Court filed on May 1, 2017 and includes Outcome Measures 5, 6, 11, 14 and 16.

| <i>Juan F.</i> Pre-Certification Review | | |
|--|--|-------------------------------|
| Outcome Measure | Statement of Outcome | Status |
| OM 4: Search for Relatives | If a child(ren) must be removed from his or her home, DCF shall conduct and document a search for maternal and paternal relatives, extended formal or informal networks, friends of the child or family, former foster parents, or other persons known to the child. The search period shall extend through the first six (6) months following removal from home. The search shall be conducted and documented in at least 85.0% of the cases. | Pre-Certified October 2013 |
| OM 5: Repeat Maltreatment of Children | No more than 7% of the children who are victims of substantiated maltreatment during any six-month period shall be the substantiated victims of additional maltreatment during any subsequent six-month period. This outcome shall begin to be measured within the six-month period beginning January 1, 2004. | Pre-Certified* July 2014 |
| OM6: Maltreatment of Children in Out-of-Home Care | No more than 2% of the children in out of home care on or after January 1, 2004 shall be the victims of substantiated maltreatment by substitute caregivers while in out of home care. | Pre-Certified October 2014 |
| OM 7: Reunification | At least 60% of the children, who are reunified with their parents or guardians, shall be reunified within 12 months of their most recent removal from home. | Pre-Certified April 2015 |
| OM 8: Adoption | At least 32% of the children who are adopted shall have their adoptions finalized within 24 months of the child's most recent removal from his/her home. | Pre-Certified January 2013 |

* Pre-Certification granted subject to verification of correction to ROM system reporting - release delayed to June 2014.

| | | |
|--|---|-----------------------------------|
| OM 9: Transfer of Guardianship | At least 70% of all children whose custody is legally transferred shall have their guardianship transferred within 24 months of the child's most recent removal from his/her home. | Pre-Certified January 2013 |
| OM 10: Sibling Placement | At least 95% of siblings currently in or entering out-of-home placement shall be placed together unless there are documented clinical reasons for separate placements. Excludes Voluntary cases and children for whom TPR has been granted. | Pre-Certified April 2015 |
| OM 11: Re-Entry into DCF Care | Of the children who enter DCF custody, seven (7) percent or fewer shall have re-entered care within 12 months of the prior out-of-home placement. | Pre-Certified January 2016 |
| OM 12: Multiple Placements | Beginning on January 1, 2004, at least 85% of the children in DCF custody shall experience no more than three (3) placements during any twelve month period. | Pre-Certified April 2012 |
| OM 14: Placement within Licensed Capacity | At least 96% of all children placed in foster homes shall be in foster homes operating within their licensed capacity, except when necessary to accommodate sibling groups. | Pre-Certified April 2012 |
| OM 16: Worker/ Child Visitation (Child in Placement) | DCF shall visit at least 85% of all out-of-home children at least once a month, except for probate, interstate, or voluntary cases. All children must be seen by their DCF Social Worker at least quarterly. | Pre-Certified April 2012 |
| OM 17: Worker-Child Visitation (In-Home) | DCF shall visit at least 85% of all in-home family cases at least twice a month, except for probate, interstate or voluntary cases. Definitions and Clarifications: 1. Twice monthly visitation must be documented with each active child participant in the case. Visitation occurring in the home, school or other community setting will be considered for Outcome Measure 17. | Not Pre-Certified January 2012 |
| OM 19: Reduction in the Number of Children Placed in Residential Care | The number of children placed in privately operated residential treatment care shall not exceed 11% of the total number of children in DCF out-of-home care. The circumstances of all children in-state and out-of-state residential facilities shall be assessed after the Court's approval of this Exit Plan on a child specific basis to determine if their needs can be met in a less restrictive setting. | Pre-Certified December 2014 |
| OM 20: Discharge Measures | At least 85.0% of all children age 18 or older shall have achieved one or more of the following prior to discharge from DCF custody: (a) Graduation from High School; (b) Acquisition of GED; (c) Enrollment in or completion of college or other post-secondary training program full-time; (d) Enrollment in college or other post-secondary training program part-time with part-time employment; (e) Full-time employment; (f) Enlistment full-time member of the military. | Pre-Certified September 2011 |
| OM 21: Discharge of Mentally Ill or Developmentally Disabled Youth | DCF shall submit a written discharge plan to either/or DMHAS or DDS for all children who are mentally ill or developmentally delayed and require adult services. | Pre-Certified September 2011 |
| OM22: Multi-Disciplinary Exams | At least 85% of the children entering the custody of DCF for the first time shall have an MDE conducted within 30 days of placement. | Pre-Certified January 2013 |

**Review of the 2006 Revised Exit Plan: Outcome Measure 3 and Outcome Measure 15
for the Fourth Quarter 2016 and First Quarter 2017**

Statewide, the result for Outcome Measure 3 (OM3) - Case Plans, is 49.1% for the Fourth Quarter 2016, and 39.6% for the First Quarter 2017. The 2006 Revised Exit Plan Outcome Measure 3 requirement is that; “ In at least 90% of the cases, except probate, interstate and subsidy only cases, appropriate case plans shall be developed as set forth in the “ DCF Court Monitor’s 2006 Protocol for Outcome Measure 3 and 15....”

Crosstabulation 1: What is the social worker's area office assignment? * Overall Score for OM3 * DCF Region

| Crosstabulation 1: What is the social worker's area office assignment? * Overall Score for OM3 | | | | |
|---|--------------------|--|--|--|
| Area Office | | “Case Plan Appropriate” 4th Quarter 2016 (n=53) | “Case Plan Appropriate” 1st Quarter 2017 (n=53) | “Case Plan Appropriate” Combined 6- Month Results (n=106) |
| Region I | Bridgeport | 33.3% | 66.7% | 50.0% |
| | Norwalk | 50.0% | 66.7% | 60.0% |
| Region I | | 40.0% | 66.7% | 54.5% |
| Region II | Milford | 50.0% | 25.0% | 37.5% |
| | New Haven | 40.0% | 50.0% | 44.4% |
| Region II | | 44.4% | 37.5% | 41.2% |
| Region III | Middletown | 0.0% | 50.0% | 25.0% |
| | Norwich | 40.0% | 20.0% | 30.0% |
| | Willimantic | 100.0% | 33.3% | 66.7% |
| Region III | | 50.0% | 30.0% | 40.0% |
| Region IV | Hartford | 28.6% | 28.6% | 28.6% |
| | Manchester | 50.0% | 100.0% | 75.0% |
| Region IV | | 36.4% | 54.5% | 45.5% |
| Region V | Danbury | 100.0% | 50.0% | 75.0% |
| | Torrington | 100.0% | 0.0% | 50.0% |
| | Waterbury | 28.6% | 42.9% | 35.7% |
| Region V | | 54.5% | 36.4% | 45.5% |
| Region VI | Meriden | 50.0% | 50.0% | 50.0% |
| | New Britain | 80.0% | 0.0% | 40.0% |
| Region VI | | 71.4% | 14.3% | 42.9% |
| Statewide | | 49.1% | 39.6% | 44.3% |

The results of this period’s review show a continuing downward trend from our prior reported Second and Third Quarters of 2016 results: 64.2% and 52.7%.

| Table 1: Outcome Measure OM3 Regional Quarterly Performance Comparison | | | | | | | |
|---|-----------------|------------------|-------------------|------------------|-----------------|------------------|------------------|
| 2006 Exit Plan Standard: 90% | | | | | | | |
| | Region I | Region II | Region III | Region IV | Region V | Region VI | Statewide |
| 1st Quarter 2017 | 66.7% | 37.5% | 30.0% | 54.5% | 36.4% | 14.3% | 39.6% |
| 4th Quarter 2016 | 40.0% | 44.4% | 50.0% | 36.4% | 54.5% | 71.4% | 49.1% |
| 3rd Quarter 2016 | 14.3% | 50.0% | 60.0% | 41.7% | 63.6% | 100.0% | 52.7% |
| 2nd Quarter 2016 | 50.0% | 75.0% | 70.0% | 75.0% | 30.0% | 85.7% | 64.2% |
| 1st Quarter 2016 | 83.3% | 66.7% | 70.0% | 50.0% | 60.0% | 85.7% | 66.7% |
| 4th Quarter 2015 | 33.3% | 50.0% | 45.5% | 50.0% | 60.0% | 42.9% | 48.1% |
| 3rd Quarter 2015 | 66.7% | 66.7% | 50.0% | 50.0% | 40.0% | 57.1% | 53.7% |
| 2nd Quarter 2015 | 16.7% | 44.4% | 66.7% | 41.7% | 40.0% | 28.6% | 37.0% |
| 1st Quarter 2015 | 50.0% | 50.0% | 90.0% | 41.7% | 20.0% | 28.6% | 47.2% |
| 4th Quarter 2014 | 33.3% | 11.1% | 70.0% | 41.7% | 11.1% | 71.4% | 41.5% |
| 3rd Quarter 2014 | 28.6% | 55.6% | 40.0% | 41.7% | 44.4% | 71.4% | 46.3% |
| 2nd Quarter 2014 | 71.4% | 33.3% | 80.0% | 25.0% | 33.3% | 42.9% | 46.3% |
| 1st Quarter 2014 | 28.6% | 66.7% | 80.0% | 41.7% | 22.2% | 71.4% | 51.9% |
| 4th Quarter 2013 | 28.6% | 50.0% | 50.0% | 50.0% | 33.3% | 75.0% | 48.1% |
| 3rd Quarter 2013 | 57.1% | 77.8% | 90.0% | 46.2% | 67.7% | 57.1% | 65.5% |
| 2nd Quarter 2013 | 42.9% | 88.9% | 60.0% | 50.0% | 66.7% | 71.4% | 63.0% |
| 1st Quarter 2013 | 37.5% | 77.8% | 70.0% | 41.7% | 55.6% | 71.4% | 58.2% |
| 4th Quarter 2012 | 71.4% | 55.6% | 60.0% | 46.2% | 50.0% | 57.1% | 55.6% |
| 3rd Quarter 2012 | 55.6% | 54.5% | 33.3% | 64.3% | 36.4% | 55.6% | 49.3% |
| 2nd Quarter 2012 | 57.1% | 66.7% | 80.0% | 45.5% | 77.8% | 50.0% | 63.0% |

In The Fourth Quarter 2016, 45 of the 53 case plans and case planning efforts were clearly accommodating of the family's primary language. In eight of the cases the reviewer was unable determine if language accommodations were being made from the information available in the record, as the case plan was not approved or initiated at the time of review. During the Fourth Quarter 2016, there were issues with timing for nine (9) case plans at the point of review. Two cases had no plan initiated at the point of review, six were not approved by the Social Work Supervisors or not approved timely per the required policy (one additional plan that was not timely was granted an override based on discussions with the area office related to the circumstances regarding the delay, and engagement with the family). This continues to raise questions as to whether case plans are being developed and shared with families as the documents they are intended to be.

Statewide scores are reflected at the end of the table for ease of reference. This quarter, individual regions and individual offices fluctuated in areas of strength within various elements of case planning. No areas were above the ninety percentile range to achieve compliance with the 2006 Exit Plan standards at the statewide level. The overall level for “Case Plan Appropriate” fell well below the Exit Plan goal at 49.1%.

Table 2: Case Summaries for Outcome Measure 3- Fourth Quarter 2016

| | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OM3 | |
|----------|--------------------------|--------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|----------------------------|--|-------------------------|---------------------------|---------------------------|
| Region I | Bridgeport | CPS In-Home | no | UTD | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Case Plan Not Appropriate | |
| | Bridgeport | CPS In-Home | yes | yes | Optimal | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate | |
| | Bridgeport | CPS In-Home | no | UTD | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Case Plan Not Appropriate | |
| | Bridgeport Area Office % | | | 33.3% | 33.3% | 33.3% | 33.3% | 33.3% | 33.3% | 33.3% | 33.3% | 33.3% | 33.3% | 33.3% |
| | Norwalk | CPS In-Home | yes | yes | Very Good | Very Good | Very Good | Marginal | Marginal | Too early to note progress | Marginal | Very Good | Very Good | Case Plan Not Appropriate |
| | Norwalk | CPS CIP Case | yes | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Marginal | Very Good | Case Plan Appropriate |
| | Norwalk Area Office % | | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 50.0% | 100.0% | 0.0% | 100.0% | 50.0% |
| | Region I % | | | 60.0% | 60.0% | 60.0% | 60.0% | 60.0% | 40.0% | 40.0% | 40.0% | 60.0% | 60.0% | 40.0% |

| Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OMI |
|--------------------------------|--------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|----------------------------|--|-------------------------|---------------------------|
| Milford | CPS CIP Case | no | UTD | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Case Plan Not Appropriate |
| Milford | CPS In-Home | yes | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Very Good | Optimal | Case Plan Appropriate |
| Milford | CPS In-Home | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate |
| Milford | CPS In-Home | yes | UTD | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Marginal | Very Good | Case Plan Not Appropriate |
| Milford Area Office % | | 75.0% | 50.0% | 75.0% | 75.0% | 75.0% | 50.0% | 75.0% | 75.0% | 50.0% | 75.0% | 50.0% |
| New Haven | CPS In-Home | yes | yes | Very Good | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate |
| New Haven | CPS CIP Case | yes | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Marginal | Marginal | Case Plan Not Appropriate |
| New Haven | CPS CIP Case | yes | yes | Optimal | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Case Plan Not Appropriate |
| New Haven | CPS In-Home | yes | yes | Optimal | Marginal | Very Good | Marginal | Very Good | Too early to note progress | Very Good | Optimal | Case Plan Appropriate |
| New Haven | CPS In-Home | yes | yes | Very Good | Very Good | Marginal | Poor | Marginal | Poor | Marginal | Very Good | Case Plan Not Appropriate |
| New Haven Area Office % | | 100.0% | 100.0% | 100.0% | 80.0% | 60.0% | 40.0% | 60.0% | 75.0% | 60.0% | 80.0% | 40.0% |
| Region II % | | 88.9% | 77.8% | 88.9% | 77.8% | 66.7% | 44.4% | 66.7% | 75.0% | 55.6% | 77.8% | 44.4% |

| | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OMI | |
|------------|------------------|---------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|-----------|--|-------------------------|---------------------------|--------|
| Region III | Middletown | VSR - CIP | yes | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Very Good | Marginal | Case Plan Not Appropriate | |
| | Middletown | CPS In-Home | yes | yes | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Optimal | Case Plan Not Appropriate | |
| | Middletown AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 0.0% | 50.0% | 100.0% | 100.0% | 50.0% | 0.00% |
| | Norwich | CPS In-Home | yes | UTD | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Marginal | Very Good | Case Plan Appropriate | |
| | Norwich | CPS In-Home | yes | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Very Good | Very Good | Case Plan Not Appropriate | |
| | Norwich | CPS CIP Case | yes | yes | Optimal | Very Good | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Case Plan Appropriate | |
| | Norwich | CPS CIP Case | yes | yes | Very Good | Optimal | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Not Appropriate | |
| | Norwich | VSR – In Home | yes | yes | Optimal | Very Good | Marginal | Marginal | Very Good | Marginal | Very Good | Very Good | Case Plan Not Appropriate | |
| | Norwich AO % | | | 100.0% | 80.0% | 100.0% | 100.0% | 40.0% | 60.0% | 80.0% | 80.0% | 80.0% | 100.0% | 40.0% |
| | Willimantic | CPS CIP Case | yes | yes | Optimal | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Case Plan Appropriate | |
| | Willimantic | CPS In-Home | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Case Plan Appropriate | |
| | Willimantic | CPS CIP Case | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate | |
| | Willimantic AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 66.7% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Region III % | | | 100.0% | 90.0% | 100.0% | 100.0% | 60.0% | 60.0% | 70.0% | 90.0% | 90.0% | 90.0% | 50.0% |

| | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OMI3 | |
|-----------|-----------------|--------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|----------------------------|--|-------------------------|---------------------------|-----------------------|
| Region IV | Hartford | CPS In-Home | yes | yes | Very Good | Very Good | Marginal | Very Good | Marginal | Too early to note progress | Marginal | Very Good | Case Plan Not Appropriate | |
| | Hartford | CPS In-Home | yes | yes | Optimal | Very Good | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Case Plan Not Appropriate | |
| | Hartford | CPS CIP Case | yes | yes | Very Good | Optimal | Marginal | Very Good | Marginal | Very Good | Very Good | Marginal | Case Plan Not Appropriate | |
| | Hartford | CPS CIP Case | yes | yes | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate | |
| | Hartford | CPS In-Home | yes | yes | Very Good | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Very Good | Case Plan Not Appropriate | |
| | Hartford | SPM CIP | yes | yes | Very Good | Very Good | Very Good | Very Good | Optimal | Optimal | Very Good | Optimal | Case Plan Appropriate | |
| | Hartford | CPS In-Home | yes | yes | Very Good | Very Good | Marginal | Very Good | Marginal | Very Good | Marginal | Very Good | Case Plan Not Appropriate | |
| | Hartford AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 28.6% | 71.4% | 42.9% | 100.0% | 71.4% | 85.7% | 28.6% |
| | Manchester | CPS In-Home | yes | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate |
| | Manchester | CPS CIP Case | yes | yes | Very Good | Optimal | Very Good | Marginal | Very Good | Very Good | Marginal | Very Good | Case Plan Not Appropriate | |
| | Manchester | CPS In-Home | yes | UTD | Marginal | Very Good | Marginal | Marginal | Very Good | Very Good | Marginal | Very Good | Case Plan Not Appropriate | |
| | Manchester | CPS CIP Case | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Case Plan Appropriate | |
| | Manchester AO % | | | 100.0% | 75.0% | 75.0% | 100.0% | 75.0% | 100.0% | 100.0% | 100.0% | 50.0% | 100.0% | 50.0% |
| | Region IV % | | | 100.0% | 90.9% | 90.9% | 100.0% | 45.5% | 63.6% | 63.6% | 100.0% | 63.6% | 90.9% | 36.4% |

| | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OMI3 | |
|-------------------|------------------------|--------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|----------------|--|-------------------------|---------------------------|---------------------------|
| Region V | Danbury | CPS CIP Case | yes | yes | Optimal | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate | |
| | Danbury | CPS In-Home | yes | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate | |
| | Danbury AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 50.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Torrington | CPS CIP Case | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Optimal | Very Good | Very Good | Case Plan Appropriate | |
| | Torrington | CPS In-Home | yes | yes | Very Good | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Case Plan Appropriate | |
| | Torrington AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Waterbury | CPS In-Home | yes | yes | Very Good | Very Good | Poor | Marginal | Very Good | Very Good | Marginal | Very Good | Case Plan Not Appropriate | |
| | Waterbury | CPS CIP Case | yes | yes | Very Good | Very Good | Marginal | Poor | Marginal | Poor | Poor | Marginal | Case Plan Not Appropriate | |
| | Waterbury | CPS In-Home | yes | yes | Very Good | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Very Good | Case Plan Not Appropriate | |
| | Waterbury | CPS CIP Case | yes | yes | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate | |
| | Waterbury | CPS In-Home | yes | yes | Marginal | Very Good | Marginal | Poor | Marginal | Poor | Poor | Very Good | Case Plan Not Appropriate | |
| | Waterbury | CPS In-Home | yes | yes | Optimal | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate | |
| | Waterbury | CPS CIP Case | no | UTD | Absent/Adverse | Absent/Adverse | Absent/Adverse | Absent/Adverse | Absent/Adverse | Absent/Adverse | Absent/Adverse | Absent/Adverse | Absent/Adverse | Case Plan Not Appropriate |
| | Waterbury AO % | | 85.7% | 85.7% | 71.4% | 85.7% | 28.6% | 28.6% | 42.9% | 42.9% | 42.9% | 42.9% | 71.4% | 28.6% |
| Region V % | | 90.9% | 90.9% | 81.8% | 90.9% | 45.5% | 45.5% | 63.6% | 63.6% | 63.6% | 63.6% | 81.8% | 54.5% | |

| | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OM3 | |
|---|-------------------------|--------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|-----------------|--|-------------------------|---------------------------|---------------------------|
| Region VI | Meriden | CPS CIP Case | yes | yes | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Optimal | Very Good | Case Plan Appropriate | |
| | Meriden | CPS In-Home | yes | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Marginal | Very Good | Very Good | Case Plan Not Appropriate | |
| | Meriden AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 50.0% | 50.0% | 50.0% | 100.0% | 100.0% | 50.0% | |
| | New Britain | CPS CIP Case | yes | yes | Optimal | Optimal | Optimal | Very Good | Very Good | Very Good | Optimal | Optimal | Case Plan Appropriate | |
| | New Britain | CPS CIP Case | yes | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Case Plan Appropriate | |
| | New Britain | CPS In-Home | yes | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate | |
| | New Britain | CPS In-Home | no | UTD | Absent/ Adverse | Absent/ Adverse | Marginal | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Absent/ Adverse | Case Plan Not Appropriate |
| | New Britain | CPS In-Home | yes | yes | Optimal | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Case Plan Appropriate |
| | New Britain AO % | | 80.0% | 80.0% | 80.0% | 80.0% | 80.0% | 80.0% | 80.0% | 80.0% | 80.0% | 80.0% | 80.0% | 80.0% |
| | Region VI % | | 85.7% | 85.7% | 85.7% | 85.7% | 71.4% | 71.4% | 71.4% | 71.4% | 71.4% | 85.7% | 85.7% | 71.4% |
| STATEWIDE 4th Quarter % | | 90.6% | 84.9% | 86.8% | 88.7% | 56.6% | 52.8% | 64.2% | 78.0% | 66.0% | 83.0% | 49.1% | | |

Italics indicates the presence of a Court Monitor's Override to allow for overall appropriate score due to information presented in the case documentation or in conversation with the area office related to case planning that may be marginal within the identified area of the case plan document, but can be demonstrated to have been achieved via other avenues.

Danbury, Torrington, and Willimantic Area Offices each surpassed the benchmark standard of 90% or higher in with 100% of reviewed cases meeting the standards set forth in the methodology for the Fourth Quarter. This was not a regionally achieved benchmark in Fourth Quarter 2016.

There were eight (8) Court Monitor overrides to Outcome Measure 3 cases for the Fourth Quarter 2016.

In the First Quarter 2017, a total of 44 of the 53 case plans had case planning efforts clearly accommodating of the family's primary language. In nine (9) of the cases the reviewer was unable determine if language accommodations were being made from the information available in the record as the case plan was not approved or initiated at the time of review. During the First Quarter 2017, there were issues with timing for seven (7) case plans at the point of review. One case had no plan initiated at the point of review, six (6) case plans were not approved by the Social Work Supervisors or not approved timely per the required policy (as with the prior quarter, one plan that was not timely was granted an override based on discussions with the area office related to the circumstances regarding the delay, and documented engagement with the family)

Table 3: Case Summaries for Outcome Measure 3- First Quarter 2017

| Region | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OM3 | |
|-------------------|------------------------|--------------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|---------------|--|-------------------------|------------------------------|--------------|
| Region I | Bridgeport | CPS In-Home Family | no | UTD | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Not an Appropriate Case Plan | |
| | Bridgeport | CPS In-Home Family | yes | yes | Optimal | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | |
| | Bridgeport | VSR In-Home Family | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Appropriate Case Plan | |
| | Bridgeport AO % | | | 66.7% | 66.7% | 66.7% | 66.7% | 66.7% | 33.3% | 66.7% | 66.7% | 66.7% | 66.7% | 66.7% |
| | Norwalk | CPS In-Home Family | yes | yes | Optimal | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Appropriate Case Plan | |
| | Norwalk | CPS In-Home Family | yes | yes | Optimal | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | |
| | Norwalk | CPS CIP | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Norwalk AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 66.7% | 100.0% | 66.7% | 100.0% | 100.0% | 100.0% | 66.7% |
| Region I % | | | 83.3% | 83.3% | 83.3% | 83.3% | 66.7% | 66.7% | 66.7% | 83.3% | 83.3% | 83.3% | 66.7% | |

| Region | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OMS |
|--------------------|-----------------------|--------------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|--------------|--|-------------------------|------------------------------|
| Region II | Milford | CPS In-Home Family | yes | yes | Very Good | Very Good | Very Good | Marginal | Marginal | Very Good | Marginal | Very Good | Not an Appropriate Case Plan |
| | Milford | CPS CIP | yes | yes | Very Good | Very Good | Marginal | Marginal | Very Good | Marginal | Marginal | Optimal | Not an Appropriate Case Plan |
| | Milford | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Very Good | Marginal | Very Good | Very Good | Optimal | Not an Appropriate Case Plan |
| | Milford | CPS In-Home Family | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan |
| | Milford AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 50.0% | 50.0% | 75.0% | 50.0% | 100.0% | 25.0% |
| | New Haven | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Very Good | Marginal | Marginal | Very Good | Very Good | Not an Appropriate Case Plan |
| | New Haven | CPS CIP | yes | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan |
| | New Haven | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Very Good | Very Good | Marginal | Very Good | Marginal | Not an Appropriate Case Plan |
| | New Haven | CPS In-Home Family | yes | yes | Optimal | Optimal | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan |
| | New Haven AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 75.0% | 75.0% | 50.0% | 100.0% | 75.0% | 50.0% |
| Region II % | | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 62.5% | 62.5% | 62.5% | 75.0% | 87.5% | 37.5% | |

| Region | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OME | |
|------------|-------------------------|--------------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|----------------------------|--|-------------------------|------------------------------|--------------|
| Region III | Middletown | CPS CIP | yes | yes | Very Good | Very Good | Very Good | Marginal | Very Good | Marginal | Marginal | Very Good | Appropriate Case Plan | |
| | Middletown | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Optimal | Not an Appropriate Case Plan | |
| | Middletown AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 0.0% | 100.0% | 50.0% | 50.0% | 100.0% | 50.0% |
| | Norwich | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Too early to note progress | Marginal | Very Good | Not an Appropriate Case Plan | |
| | Norwich | CPS CIP | yes | yes | Optimal | Optimal | Marginal | Very Good | Very Good | Very Good | Very Good | Optimal | Appropriate Case Plan | |
| | Norwich | CPS In-Home Family | yes | yes | Optimal | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Norwich | CPS CIP | yes | yes | Very Good | Very Good | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Norwich | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Very Good | Marginal | Not an Appropriate Case Plan | |
| | Norwich AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 40.0% | 20.0% | 40.0% | 100.0% | 80.0% | 80.0% | 20.0% |
| | Willimantic | CPS In-Home Family | yes | yes | Optimal | Optimal | Very Good | Very Good | Optimal | Very Good | Optimal | Optimal | Appropriate Case Plan | |
| | Willimantic | CPS CIP | no | UTD | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Not an Appropriate Case Plan | |
| | Willimantic | CPS CIP | yes | yes | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Willimantic AO % | | | 66.7% | 66.7% | 66.7% | 66.7% | 66.7% | 33.3% | 66.7% | 66.7% | 66.7% | 66.7% | 33.3% |
| | Region III % | | | 90.0% | 90.0% | 90.0% | 90.0% | 50.0% | 20.0% | 60.0% | 77.8% | 70.0% | 80.0% | 30.0% |

| Region | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OMI3 | |
|-----------|------------------------|--------------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|---------------|--|-------------------------|------------------------------|------------------------------|
| Region IV | Hartford | CPS In-Home Family | yes | yes | Marginal | Very Good | Marginal | Poor | Poor | Marginal | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Hartford | CPS In-Home Family | yes | yes | Poor | Very Good | Marginal | Marginal | Marginal | Marginal | Marginal | Marginal | Not an Appropriate Case Plan | |
| | Hartford | CPS In-Home Family | yes | yes | Optimal | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Optimal | Appropriate Case Plan | |
| | Hartford | CPS In-Home Family | yes | yes | Very Good | Optimal | Marginal | Very Good | Optimal | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Hartford | CPS CIP | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | |
| | Hartford | CPS CIP | no | UTD | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Not an Appropriate Case Plan |
| | Hartford | CPS CIP | no | UTD | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Not an Appropriate Case Plan |
| | Hartford AO % | | | 71.4% | 71.4% | 42.9% | 71.4% | 14.3% | 28.6% | 42.9% | 42.9% | 57.1% | 57.1% | 28.6% |
| | Manchester | CPS CIP | yes | yes | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan |
| | Manchester | CPS In-Home Family | yes | yes | Optimal | Optimal | Very Good | Very Good | Optimal | Optimal | Optimal | Optimal | Optimal | Appropriate Case Plan |
| | Manchester | CPS CIP | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Optimal | Very Good | Optimal | Appropriate Case Plan | |
| | Manchester | CPS In-Home Family | yes | yes | Optimal | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan |
| | Manchester AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Region IV % | | | 81.8% | 81.8% | 63.6% | 81.8% | 27.3% | 54.5% | 63.6% | 63.6% | 72.7% | 72.7% | 54.5% |

| Region | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OM3 | |
|----------|------------------------|--------------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|---------------|--|-------------------------|------------------------------|------------------------------|
| Region V | Danbury | CPS In-Home Family | no | UTD | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan | |
| | Danbury | CPS CIP | yes | yes | Very Good | Very Good | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Danbury AO % | | | 50.0% | 50.0% | 100.0% | 100.0% | 100.0% | 50.0% | 50.0% | 100.0% | 100.0% | 100.0% | 50.0% |
| | Torrington | CPS CIP | no | UTD | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Not an Appropriate Case Plan | |
| | Torrington | CPS In-Home Family | yes | yes | Marginal | Marginal | Optimal | Marginal | Very Good | Marginal | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Torrington AO % | | | 50.0% | 50.0% | 0.0% | 0.0% | 50.0% | 0.0% | 50.0% | 0.0% | 50.0% | 50.0% | 0.0% |
| | Waterbury | CPS CIP | yes | yes | Optimal | Very Good | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Optimal | Appropriate Case Plan |
| | Waterbury | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Marginal | Marginal | Very Good | Not an Appropriate Case Plan | |
| | Waterbury | CPS In-Home Family | yes | yes | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan |
| | Waterbury | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Waterbury | CPS CIP | yes | yes | Very Good | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Marginal | Marginal | Not an Appropriate Case Plan |
| | Waterbury | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Marginal | Very Good | Very Good | Very Good | Very Good | Not an Appropriate Case Plan | |
| | Waterbury | SPM CIP | yes | yes | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Appropriate Case Plan |
| | Waterbury AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 57.1% | 57.1% | 71.4% | 85.7% | 71.4% | 85.7% | 42.9% |
| | Region V % | | | 81.8% | 81.8% | 81.8% | 81.8% | 63.6% | 45.5% | 63.6% | 72.7% | 72.7% | 81.8% | 36.4% |

| Region | Area Office | Case Type | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OM3 |
|--|-------------------------|--------------------|---|--|----------------------------|-------------------------|---|--|----------------------------------|---------------|--|-------------------------|------------------------------|
| Region VI | Meriden | CPS In-Home Family | yes | yes | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Very Good | Very Good | Not an Appropriate Case Plan |
| | Meriden | SPM CIP | yes | yes | Optimal | Optimal | Optimal | Optimal | Very Good | Optimal | Optimal | Very Good | Appropriate Case Plan |
| | Meriden AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 50.0% | 50.0% | 100.0% | 100.0% | 100.0% | 50.0% |
| | New Britain | CPS CIP | yes | UTD | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Not an Appropriate Case Plan |
| | New Britain | CPS In-Home Family | yes | yes | Very Good | Optimal | Marginal | Marginal | Marginal | Very Good | Very Good | Optimal | Not an Appropriate Case Plan |
| | New Britain | CPS In-Home Family | UTD – no plan | UTD | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Absent/Averse | Not an Appropriate Case Plan |
| | New Britain | CPS CIP | yes | yes | Marginal | Very Good | Marginal | Marginal | Very Good | Very Good | Marginal | Very Good | Not an Appropriate Case Plan |
| | New Britain | CPS In-Home Family | yes | UTD | Very Good | Very Good | Marginal | Marginal | Marginal | Very Good | Marginal | Very Good | Not an Appropriate Case Plan |
| | New Britain AO % | | 66.7% | 40.0% | 40.0% | 60.0% | 0.0% | 0.0% | 20.0% | 60.0% | 20.0% | 60.0% | 0.0% |
| | Region VI % | | 85.7% | 57.1% | 57.1% | 71.4% | 14.3% | 14.3% | 28.6% | 71.4% | 42.9% | 71.4% | 14.3% |
| Statewide 1st Quarter 2017 % | | 86.8% | 83.0% | 79.2% | 84.9% | 45.3% | 43.4% | 58.5% | 71.2% | 69.8% | 79.2% | 39.6% | |

Italics indicates the presence of a Court Monitor's Override to allow for overall appropriate score due to information presented in the case documentation or in conversation with the area office related to case planning that may be marginal within the identified area of the case plan document, but can be demonstrated to have been achieved via other avenues.

Manchester was the only Area Office to achieve or surpass the benchmark standard of 90% or higher with 100% of reviewed cases designated as “Appropriate Case Plan” per the methodology for the Fourth Quarter. As with the Fourth Quarter 2016, no regions achieved this benchmark.

There were ten (10) Court Monitor overrides granted for Outcome Measure 3 for the First Quarter 2017.

For ease of reference the domain categories are pulled out by quarter and a semi-annual combined status is also provided below:

Table 4: Quarterly and Six-Month Summary of Domains for Outcome Measure 3

| Quarter | Has the Case Plan been approved by the SWS? | Was the family or child's language needs accommodated? | Reason for DCF Involvement | Identifying Information | Engagement of Child and Family (formerly Strengths, Needs and Other Issues) | Present Situation and Assessment to Date of Review | Determining the Goals/Objectives | Progress | Action Steps to Achieving Goals Identified for the Upcoming Six Month Period | Planning for Permanency | Overall Score for OMI3 |
|--|---|--|----------------------------|-------------------------|---|--|----------------------------------|----------|--|-------------------------|------------------------|
| Statewide 4 th Quarter 2017 | 90.6% | 84.9% | 86.8% | 88.7% | 56.6% | 52.8% | 64.2% | 78.0% | 66.0% | 83.0% | 49.1% |
| Statewide 1st Quarter 2017 | 86.8% | 83.0% | 79.2% | 84.9% | 45.3% | 43.4% | 58.5% | 71.2% | 69.8% | 79.2% | 39.6% |
| Statewide Six-Month Combined | 88.7% | 84.0% | 83.0% | 86.8% | 50.9% | 48.1% | 61.3% | 73.5% | 67.9% | 81.1% | 44.3% |

Outcome Measure 15

The Statewide Fourth Quarter 2016 and First Quarter 2017 samples (each n=53) continues to reflect marginal progress in attaining Outcome Measure 15 with statewide levels of 50.9% and 60.4% respectively. Outcome Measure 15 states:

"At least 80.0% of all families and children shall have their medical, dental, mental health and other service needs provided as specified in the most recent case plan."⁵

As with Outcome Measure 3, the results show a continued marginal performance that is less positive than the prior semi-annual report in which the statewide results were 69.8% in the Second Quarter 2016 and 52.7% in the Third Quarter 2016.

Crosstabulation 2: Fourth Quarter 2016 and First Quarter 2017 Outcome Measure 15 (2006 Revised Exit Plan)

| What is the social worker's area office assignment? * Overall Score for OM15 | | | | |
|--|-------------|---|---|--|
| Area Office | | "Needs Met" 4th Quarter 2016 (n=53) | "Needs Met" 1 st Quarter 2017 (n=53) | "Needs Met" Combined 6- Month Results (n=106) |
| Region I | Bridgeport | 33.3% | 100.0% | 58.7% |
| | Norwalk | 0.0% | 100.0% | 63.0% |
| <i>Region I</i> | | 20.0% | 100.0% | 58.2% |
| Region II | Milford | 50.0% | 100.0% | 59.1% |
| | New Haven | 60.0% | 25.0% | 60.9% |
| <i>Region II</i> | | 55.6% | 62.5% | 60.1% |
| Region III | Middletown | 100.0% | 50.0% | 68.0% |
| | Norwich | 80.0% | 20.0% | 64.8% |
| | Willimantic | 100.0% | 100.0% | 78.7% |
| <i>Region III</i> | | 90.0% | 50.0% | 69.6% |
| Region IV | Hartford | 28.6% | 42.9% | 39.8% |
| | Manchester | 50.0% | 75.0% | 65.3% |
| <i>Region IV</i> | | 36.4% | 54.5% | 48.8% |
| Region V | Danbury | 0.0% | 100.0% | 58.0% |
| | Torrington | 100.0% | 100.0% | 55.8% |
| | Waterbury | 14.3% | 42.9% | 52.8% |
| <i>Region V</i> | | 27.3% | 72.7% | 54.7% |
| Region VI | Meriden | 50.0% | 50.0% | 64.2% |
| | New Britain | 80.0% | 20.0% | 64.8% |
| <i>Region VI</i> | | 71.4% | 28.5% | 64.6% |
| <i>Statewide</i> | | 50.9% | 60.4% | 58.8% |

⁵ Measure excludes Probate, Interstate and Subsidy only cases.

Inconsistency describes the practice in both quarters. Several area offices were able to meet the measure in one quarter. However, only Willimantic and Torrington achieved the measure in both quarters.

Regions I and III each, as a whole, achieved the measure in one quarter, but were unable to maintain that level of performance for both quarters. Other regions continued to struggle with attaining the benchmark performance of 80% in either quarter.

| Table 5: Outcome Measure 15 Regional Quarterly Performance Comparison | | | | | | | |
|--|-----------------|------------------|-------------------|------------------|-----------------|------------------|------------------|
| <i>Standard: 80%</i> | | | | | | | |
| | Region I | Region II | Region III | Region IV | Region V | Region VI | Statewide |
| 1st Quarter 2017 | 100.0% | 62.5% | 50.0% | 54.5% | 72.7% | 28.5% | 60.4% |
| 4th Quarter 2016 | 20.0% | 55.6% | 90.0% | 36.4% | 27.3% | 71.4% | 50.9% |
| 3rd Quarter 2016 | 42.9% | 50.0% | 40.0% | 50.0% | 54.6% | 85.7% | 52.7% |
| 2nd Quarter 2016 | 66.7% | 75.0% | 70.0% | 58.3% | 70.0% | 85.7% | 69.8% |
| 1st Quarter 2016 | 50.0% | 66.7% | 70.0% | 58.3% | 90.0% | 85.7% | 70.4% |
| 4th Quarter 2015 | 50.0% | 75.0% | 63.6% | 50.0% | 70.0% | 71.4% | 63.0% |
| 3rd Quarter 2015 | 83.3% | 66.7% | 60.0% | 41.7% | 40.0% | 37.1% | 57.4% |
| 2nd Quarter 2015 | 66.7% | 50.0% | 60.0% | 41.7% | 40.0% | 14.3% | 44.4% |
| 1st Quarter 2015 | 50.0% | 37.5% | 80.0% | 50.0% | 10.0% | 42.9% | 47.2% |
| 4th Quarter 2014 | 50.0% | 33.3% | 70.0% | 33.3% | 55.6% | 85.7% | 52.8% |
| 3rd Quarter 2014 | 85.7% | 66.7% | 60.0% | 50.0% | 55.6% | 85.7% | 64.8% |
| 2nd Quarter 2014 | 85.7% | 77.8% | 80.0% | 16.7% | 44.4% | 71.4% | 59.3% |
| 1st Quarter 2014 | 71.4% | 55.6% | 80.0% | 25.0% | 55.6% | 71.4% | 57.4% |
| 4th Quarter 2013 | 28.6% | 62.5% | 60.0% | 75.0% | 33.3% | 75.0% | 57.4% |
| 3rd Quarter 2013 | 57.1% | 77.8% | 90.0% | 53.8% | 66.7% | 57.1% | 67.3% |
| 2nd Quarter 2013 | 85.7% | 77.8% | 80.0% | 50.0% | 100.0% | 57.1% | 74.1% |
| 1st Quarter 2013 | 62.5% | 77.8% | 70.0% | 41.7% | 66.7% | 71.4% | 63.6% |
| 4th Quarter 2012 | 71.4% | 77.8% | 50.0% | 38.5% | 50.0% | 57.1% | 55.6% |
| 3rd Quarter 2012 | 33.3% | 36.4% | 60.0% | 78.6% | 27.3% | 77.8% | 53.6% |
| 2nd Quarter 2012 | 71.4% | 66.7% | 70.0% | 54.5% | 77.8% | 25.0% | 61.1% |

Table 6: Fourth Quarter 2016 Outcome Measure 15 (2006 Revise Exit Plan) Case Summaries

| Region | What is the social worker's area office assignment? | What is the type of case assignment noted in LINK? | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 |
|-------------------|---|--|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|
| Region I | Bridgeport | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Marginal | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met |
| | Bridgeport | CPS In-Home | N/A to Case | Very Good | Optimal | Very Good | Very Good | Marginal | Marginal | Optimal | Very Good | Marginal | N/A to Case | Needs Not Met |
| | Bridgeport | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Very Good | Very Good | Marginal | N/A to Case | Marginal | Needs Not Met |
| | Bridgeport AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 0.0% | 66.7% | 100.0% | 66.7% | 0.0% | 50.0% | 33.3% |
| | Norwalk | CPS CIP | N/A to Case | Very Good | Very Good | Optimal | Very Good | Very Good | Marginal | Optimal | Very Good | Very Good | Marginal | Needs Not Met |
| | Norwalk | CPS In-Home | Very Good | N/A to Case | N/A to Case | Marginal | N/A to Case | Marginal | Marginal | Marginal | Marginal | N/A to Case | Very Good | Needs Not Met |
| | Norwalk AO % | | 100.0% | 100.0% | 100.0% | 50.0% | 100.0% | 50.0% | 0.0% | 50.0% | 50.0% | 100.0% | 50.0% | 0.0% |
| Region I % | | | 100.0% | 100.0% | 100.0% | 80.0% | 100.0% | 20.0% | 40.0% | 80.0% | 60.0% | 50.0% | 50.0% | 20.0% |

| Region | What is the social worker's area office assignment? | What is the type of case assignment noted in LINK? | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 |
|-------------|---|--|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|
| Region II | Milford | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Optimal | Optimal | Very Good | N/A to Case | Very Good | Needs Met |
| | Milford | CPS CIP | N/A to Case | Optimal | Very Good | Optimal | Very Good | Marginal | Very Good | Very Good | Marginal | Marginal | Optimal | Needs Not Met |
| | Milford | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Optimal | Very Good | Optimal | N/A to Case | N/A to Case | Needs Met |
| | Milford | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Marginal | Marginal | Very Good | N/A to Case | Very Good | Needs Not Met |
| | Milford AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 75.0% | 75.0% | 75.0% | 0.0% | 100.0% | 50.0% |
| | New Haven | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Optimal | Needs Met |
| | New Haven | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Needs Not Met |
| | New Haven | CPS CIP | N/A to Case | Very Good | Very Good | Optimal | Very Good | Very Good | Optimal | Optimal | Very Good | Optimal | Very Good | Needs Met |
| | New Haven | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Very Good | Optimal | Very Good | N/A to Case | Optimal | Needs Met |
| | New Haven | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Marginal | Marginal | Very Good | N/A to Case | Marginal | Needs Not Met |
| | New Haven AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 60.0% | 80.0% | 80.0% | 100.0% | 100.0% | 80.0% | 60.0% |
| Region II % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 55.6% | 77.8% | 77.8% | 88.9% | 66.7% | 87.5% | 55.6% | |

| Region | What is the social worker's area office assignment? | What is the type of case assignment noted in LINK? | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 | |
|------------|---|--|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|---------------|
| Region III | Middletown | VSR CIP | N/A to Case | Very Good | Very Good | Optimal | Very Good | Marginal | Optimal | Very Good | Very Good | Very Good | Very Good | Needs Met | |
| | Middletown | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Optimal | Optimal | Very Good | N/A to Case | Very Good | Needs Met | |
| | Middletown AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Norwich | CPS In-Home Family | Optimal | Optimal | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Optimal | Very Good | N/A to Case | Optimal | Needs Met | |
| | Norwich | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | Norwich | CPS CIP | N/A to Case | Optimal | Optimal | Optimal | Optimal | Very Good | Optimal | Optimal | Optimal | Optimal | Very Good | Needs Met | |
| | Norwich | CPS CIP | N/A to Case | Very Good | Very Good | Optimal | Optimal | Marginal | Very Good | Very Good | Marginal | Optimal | Very Good | Needs Not Met | |
| | Norwich | VSR In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | Norwich AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 80.0% | 100.0% | 100.0% | 100.0% | 80.0% | 100.0% | 100.0% | 80.0% |
| | Willimantic | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Optimal | Very Good | Marginal | Optimal | Optimal | Very Good | Optimal | Needs Met | |
| | Willimantic | CPS In-Home Family | Optimal | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Optimal | Optimal | Optimal | N/A to Case | Optimal | Needs Met | |
| | Willimantic | CPS CIP | Very Good | N/A to Case | Very Good | Very Good | Very Good | Very Good | Optimal | Optimal | Optimal | Very Good | Optimal | Needs Met | |
| | Willimantic AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 66.7% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Region III % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 80.0% | 90.0% | 100.0% | 90.0% | 100.0% | 100.0% | 90.0% | 90.0% |

| Region | What is the social worker's area office assignment? | What is the type of case assignment noted in LINK? | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 | |
|-----------|---|--|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|--------------|
| Region IV | Hartford | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Marginal | Marginal | Very Good | N/A to Case | Marginal | Needs Not Met | |
| | Hartford | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Optimal | Very Good | N/A to Case | N/A to Case | Needs Met | |
| | Hartford | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Needs Not Met | |
| | Hartford | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Very Good | Very Good | Marginal | N/A to Case | Optimal | Needs Not Met | |
| | Hartford | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Marginal | Optimal | Very Good | Marginal | Very Good | Very Good | Needs Not Met | |
| | Hartford | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Marginal | N/A to Case | Very Good | Optimal | Optimal | Very Good | N/A to Case | Very Good | Needs Not Met | |
| | Hartford | SPM CIP | N/A to Case | Optimal | Optimal | Optimal | Optimal | Very Good | Optimal | Optimal | Optimal | Optimal | Very Good | Needs Met | |
| | Hartford AO% | | | 100.0% | 100.0% | 100.0% | 85.7% | 100.0% | 71.4% | 71.4% | 85.7% | 71.4% | 100.0% | 83.3% | 28.6% |
| | Manchester | CPS CIP | N/A to Case | Optimal | Optimal | Optimal | Optimal | Very Good | Optimal | Optimal | Very Good | Optimal | Optimal | Needs Met | |
| | Manchester | CPS CIP | N/A to Case | Very Good | Marginal | Very Good | Very Good | Very Good | Marginal | Optimal | Very Good | Very Good | Very Good | Needs Met | |
| | Manchester | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Marginal | N/A to Case | Very Good | Optimal | Optimal | Very Good | N/A to Case | Optimal | Needs Not Met | |
| | Manchester | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Marginal | Very Good | Optimal | Marginal | N/A to Case | Very Good | Needs Not Met | |
| | Manchester AO% | | | 100.0% | 100.0% | 50.0% | 75.0% | 100.0% | 75.0% | 75.0% | 100.0% | 75.0% | 100.0% | 100.0% | 50.0% |
| | Region IV % | | | 100.0% | 100.0% | 80.0% | 81.8% | 100.0% | 72.7% | 72.7% | 90.9% | 72.7% | 100.0% | 90.0% | 36.4% |

| Region | What is the social worker's area office assignment? | What is the type of case assignment noted in LINK? | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 |
|----------|---|--|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|
| Region V | Danbury | CPS CIP | N/A to Case | Very Good | Optimal | Marginal | Optimal | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Needs Not Met |
| | Danbury | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Marginal | Very Good | Marginal | N/A to Case | Optimal | Needs Not Met |
| | Danbury AO % | | 100.0% | 100.0% | 100.0% | 50.0% | 100.0% | 50.0% | 50.0% | 100.0% | 50.0% | 100.0% | 100.0% | 0.0% |
| | Torrington | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Optimal | Very Good | Optimal | Optimal | Very Good | Very Good | Optimal | Needs Met |
| | Torrington | CPS In-Home Family | Very Good | Optimal | N/A to Case | Optimal | N/A to Case | Very Good | Optimal | Optimal | Very Good | N/A to Case | Optimal | Needs Met |
| | Torrington AO% | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Waterbury | CPS In-Home Family | Poor | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Very Good | Very Good | Marginal | N/A to Case | Marginal | Needs Not Met |
| | Waterbury | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Optimal | Very Good | Marginal | N/A to Case | Very Good | Needs Not Met |
| | Waterbury | CPS CIP | N/A to Case | Very Good | Very Good | Marginal | Optimal | Marginal | Optimal | Optimal | Very Good | Optimal | Optimal | Needs Not Met |
| | Waterbury | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Optimal | Marginal | Poor | N/A to Case | Very Good | Needs Not Met |
| | Waterbury | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Marginal | Very Good | Very Good | Marginal | Marginal | Very Good | Needs Not Met |
| | Waterbury | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Very Good | Marginal | N/A to Case | Very Good | Needs Met |
| | Waterbury | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Marginal | Marginal | Optimal | Marginal | Very Good | Very Good | Needs Not Met |
| | Waterbury AO% | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 14.3% | 85.7% | 85.7% | 14.3% | 66.7% | 85.7% | 14.3% |
| | Region V % | | 100.0% | 100.0% | 100.0% | 81.8% | 100.0% | 36.4% | 81.8% | 90.9% | 36.4% | 80.0% | 90.9% | 27.3% |

| Region | What is the social worker's area office assignment? | What is the type of case assignment noted in LINK? | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 |
|-------------------------------------|---|--|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|
| Region VI | Meriden | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Optimal | Very Good | Optimal | Optimal | Very Good | Very Good | Very Good | Needs Met |
| | Meriden | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Very Good | Very Good | Marginal | N/A to Case | Very Good | Needs Not Met |
| | Meriden AO% | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 100.0% | 100.0% | 50.0% | 100.0% | 100.0% | 50.0% |
| | New Britain | CPS In-Home Family | Very Good | Optimal | N/A to Case | Optimal | N/A to Case | Very Good | Optimal | Optimal | Very Good | N/A to Case | Optimal | Needs Met |
| | New Britain | CPS CIP | N/A to Case | Optimal | Optimal | Optimal | Optimal | Optimal | Optimal | Optimal | Very Good | Optimal | Optimal | Needs Met |
| | New Britain | CPS CIP | N/A to Case | Very Good | Optimal | Very Good | Optimal | Very Good | Optimal | Optimal | Very Good | Optimal | Very Good | Needs Met |
| | New Britain | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Optimal | Optimal | Very Good | N/A to Case | Very Good | Needs Not Met |
| | New Britain | CPS In-Home Family | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Very Good | Optimal | Very Good | N/A to Case | Very Good | Needs Met |
| | New Britain AO% | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 80.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 80.0% |
| | Region VI % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 71.4% | 100.0% | 100.0% | 85.7% | 100.0% | 100.0% | 71.4% |
| 4 th Quarter Statewide % | | 96.8% | 100.0% | 95.7% | 90.6% | 100.0% | 58.5% | 79.2% | 90.6% | 71.7% | 86.9% | 90.0% | 50.9% | |

There were five (5) Court Monitor overrides for Outcome Measure 15 during the Fourth Quarter 2016.

Table 7: First Quarter 2017 Outcome Measure 15 (2006 Revise Exit Plan) Case Summaries

| Region | Area Office | Case Type | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 |
|----------|------------------------|-------------|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|
| Region I | Bridgeport | CPS In-Home | N/A to Case | Very Good | Very Good | Optimal | Optimal | Very Good | Optimal | Optimal | Very Good | Optimal | N/A to Case | Needs Met |
| | Bridgeport | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Optimal | Optimal | Very Good | N/A to Case | N/A to Case | Needs Met |
| | Bridgeport | VSR In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Optimal | Optimal | Marginal | N/A to Case | Very Good | <i>Needs Met</i> |
| | Bridgeport AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 66.7% | 100.0% | 100.0% | 100.0% |
| | Norwalk | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met |
| | Norwalk | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met |
| | Norwalk | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Very Good | Needs Met |
| | Norwalk AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Region I % | | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 83.3% | 100.0% | 100.0% |

| Region | Area Office | Case Type | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 | |
|--------------------|-----------------------|---------------|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|---------------|
| Region II | Milford | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Optimal | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | Milford | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | Milford | CPS CIP | N/A to Case | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good * | Very Good | Needs Met | |
| | Milford | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Marginal | Very Good | N/A to Case | Optimal | <i>Needs Met</i> | |
| | Milford AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 75.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | New Haven | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Marginal | Marginal | Marginal | N/A to Case | Very Good | Needs Not Met | |
| | New Haven | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Marginal | Very Good | Very Good | Needs Not Met | |
| | New Haven | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Very Good | Very Good | Marginal | N/A to Case | Very Good | Needs Not Met | |
| | New Haven | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Very Good | Optimal | Very Good | N/A to Case | Very Good | <i>Needs Met</i> | |
| | New Haven AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 25.0% | 75.0% | 75.0% | 25.0% | 100.0% | 100.0% | 25.0% | |
| Region II % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 62.5% | 87.5% | 75.0% | 62.5% | 100.0% | 100.0% | 62.5% | | |

*Presented as Very Good, however technically N/A as youth was returned home on trial home visit for end of PUR.

| Region | Area Office | Case Type | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 | |
|------------|-------------------------|-------------|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|---------------|
| Region III | Middletown | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Optimal | Optimal | Very Good | Very Good | Needs Met | |
| | Middletown | CPS In-Home | Optimal | N/A to Case | Very Good | N/A to Case | Very Good | Very Good | Very Good | Very Good | Marginal | N/A to Case | Very Good | Needs Not Met | |
| | Middletown AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 100.0% | 100.0% | 50.0% | |
| | Norwich | CPS In-Home | Marginal | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Not Met | |
| | Norwich | CPS CIP | N/A to Case | Very Good | Optimal | Optimal | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Needs Met | |
| | Norwich | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Optimal | Marginal | Marginal | N/A to Case | Very Good | Needs Not Met | |
| | Norwich | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Optimal | Optimal | Marginal | N/A to Case | Very Good | Needs Not Met | |
| | Norwich | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Optimal | Very Good | Optimal | Optimal | Very Good | Very Good | Marginal | Needs Not Met | |
| | Norwich AO % | | | 66.7% | 100.0% | 100.0% | 100.0% | 100.0% | 40.0% | 100.0% | 80.0% | 60.0% | 100.0% | 80.0% | 20.0% |
| | Willimantic | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Needs Met | |
| | Willimantic | CPS In-Home | Optimal | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Optimal | Needs Met | |
| | Willimantic | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Very Good | Needs Met | |
| | Willimantic AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Region III % | | | 80.0% | 100.0% | 100.0% | 100.0% | 100.0% | 70.0% | 100.0% | 90.0% | 70.0% | 100.0% | 80.0% | 50.0% |

| Region | Area Office | Case Type | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 | |
|-----------|------------------------|-------------|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|--------------|
| Region IV | Hartford | CPS In-Home | Poor | N/A to Case | N/A to Case | Poor | N/A to Case | Poor | Poor | Poor | Poor | N/A to Case | Poor | Needs Not Met | |
| | Hartford | CPS In-Home | Very Good | Very Good | N/A to Case | Very Good | N/A to Case | Very Good | Optimal | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | Hartford | CPS In-Home | Marginal | N/A to Case | N/A to Case | Poor | N/A to Case | Poor | Marginal | Marginal | Marginal | N/A to Case | Marginal | Needs Not Met | |
| | Hartford | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Marginal | Optimal | Optimal | Very Good | N/A to Case | Very Good | Needs Not Met | |
| | Hartford | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Optimal | Optimal | Optimal | Needs Met | |
| | Hartford | CPS CIP | N/A to Case | Optimal | Optimal | Very Good | Optimal | Very Good | Marginal | Very Good | Very Good | Optimal | Optimal | Needs Met | |
| | Hartford | CPS CIP | N/A to Case | Very Good | Optimal | Very Good | Optimal | Marginal | Optimal | Optimal | Very Good | Optimal | N/A to Case | Needs Not Met | |
| | Hartford AO % | | | 50.0% | 100.0% | 100.0% | 71.4% | 100.0% | 42.9% | 57.1% | 71.4% | 71.4% | 100.0% | 50.0% | 42.9% |
| | Manchester | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Very Good | Very Good | Very Good | Very Good | Very Good | Needs Met |
| | Manchester | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Marginal | Optimal | Optimal | Very Good | N/A to Case | Very Good | Needs Met | |
| | Manchester | CPS CIP | N/A to Case | Very Good | Optimal | Optimal | Optimal | Marginal | Optimal | Optimal | Very Good | Very Good | N/A to Case | Needs Met | |
| | Manchester | CPS In-Home | Very Good | N/A to Case | N/A to Case | Marginal | N/A to Case | Very Good | Very Good | Marginal | Marginal | N/A to Case | Very Good | Needs Not Met | |
| | Manchester AO % | | | 100.0% | 100.0% | 100.0% | 75.0% | 100.0% | 50.0% | 100.0% | 75.0% | 75.0% | 100.0% | 100.0% | 75.0% |
| | Region IV % | | | 66.7% | 100.0% | 100.0% | 72.7% | 100.0% | 45.5% | 72.7% | 72.7% | 72.7% | 100.0% | 77.8% | 54.5% |

| Region | Area Office | Case Type | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 | |
|----------|------------------------|-------------|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|---------------|
| Region V | Danbury | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | Danbury | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Optimal | Needs Met | |
| | Danbury AO % | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Torrington | CPS CIP | N/A to Case | Very Good | Very Good | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Optimal | Needs Met | |
| | Torrington | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Optimal | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | Torrington AO % | | 100.0% | 100.0% | 100.0% | 50.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |
| | Waterbury | CPS CIP | N/A to Case | Very Good | Optimal | Very Good | Optimal | Very Good | Optimal | Very Good | Very Good | Optimal | Very Good | Needs Met | |
| | Waterbury | CPS In-Home | Marginal | N/A to Case | N/A to Case | Optimal | N/A to Case | Marginal | Very Good | Optimal | Very Good | N/A to Case | Very Good | Needs Not Met | |
| | Waterbury | CPS In-Home | Marginal | N/A to Case | N/A to Case | Optimal | N/A to Case | Marginal | Very Good | Optimal | Very Good | N/A to Case | N/A to Case | Needs Not Met | |
| | Waterbury | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | Waterbury | CPS CIP | N/A to Case | Very Good | Very Good | Very Good | Very Good | Very Good | Very Good | Poor | Very Good | Very Good | Very Good | Needs Not Met | |
| | Waterbury | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Very Good | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | Waterbury | SPM CIP | N/A to Case | Very Good | Very Good | Optimal | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Optimal | Needs Met | |
| | Waterbury AO % | | 50.0% | 100.0% | 100.0% | 100.0% | 100.0% | 71.4% | 100.0% | 85.7% | 100.0% | 100.0% | 100.0% | 100.0% | 42.9% |
| | Region V % | | 66.7% | 100.0% | 100.0% | 90.9% | 100.0% | 81.8% | 100.0% | 90.9% | 100.0% | 100.0% | 100.0% | 100.0% | 72.7% |

| Region | Area Office | Case Type | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 | |
|---|-------------------------|-------------|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|--------------|
| Region VI | Meriden | SPM CIP | N/A to Case | Very Good | Very Good | Optimal | Optimal | Very Good | Very Good | Optimal | Optimal | Optimal | Very Good | Needs Met | |
| | Meriden | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Marginal | Marginal | Marginal | Marginal | N/A to Case | Very Good | Needs Not Met | |
| | Meriden AO % | | | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 50.0% | 50.0% | 50.0% | 50.0% | 100.0% | 100.0% | 50.0% |
| | New Britain | CPS CIP | N/A to Case | Optimal | Very Good | Very Good | Optimal | Marginal | Very Good | Very Good | Very Good | Very Good | Very Good | Needs Not Met | |
| | New Britain | CPS In-Home | Very Good | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Very Good | Optimal | Marginal | N/A to Case | Very Good | Needs Not Met | |
| | New Britain | CPS In-Home | Very Good | N/A to Case | N/A to Case | Optimal | N/A to Case | Very Good | Optimal | Very Good | Very Good | N/A to Case | Very Good | Needs Met | |
| | New Britain | CPS CIP | N/A to Case | Very Good | Very Good | Marginal | Optimal | Marginal | Very Good | Very Good | Very Good | Very Good | Optimal | Needs Not Met | |
| | New Britain | CPS In-Home | Marginal | N/A to Case | N/A to Case | Very Good | N/A to Case | Marginal | Marginal | Marginal | Marginal | N/A to Case | Marginal | Needs Not Met | |
| | New Britain AO % | | | 66.7% | 100.0% | 100.0% | 80.0% | 100.0% | 20.0% | 80.0% | 80.0% | 60.0% | 100.0% | 80.0% | 20.0% |
| | Region VI % | | | 75.0% | 100.0% | 100.0% | 85.7% | 100.0% | 28.6% | 71.4% | 71.4% | 57.1% | 100.0% | 85.7% | 28.5% |
| Statewide 1st Quarter 2017 OM 15% | | | 80.6% | 100.0% | 100.0% | 90.4% | 100.0% | 64.2% | 88.7% | 83.0% | 75.5% | 100.0% | 91.7% | 60.4% | |

There were seven (7) overrides to Outcome Measure 15 in First Quarter 2017.

Table 8: Quarterly and Six-Month Summary of Domains for Outcome Measure 15

| Quarter | Risk: In-Home | Risk: Child In Placement | Permanency: Securing the Permanent Placement - Action Plan for the Next Six Months | Permanency: DCF Case Mgmt. - Legal Action to Achieve the Permanency Goal During the Prior Six Months | Permanency: DCF Case Mgmt. - Recruitment for Placement Providers to Achieve the Permanency Goal during the Prior Six Months | Permanency: DCF Case Mgmt. - Contracting or Providing Services to Achieve the Permanency Goal during the Prior Six Months | Well-Being: Medical Needs | Well-Being: Dental Needs | Well-Being: Mental Health, Behavioral and Substance Abuse Services | Well-Being: Child's Current Placement | Well-Being: Education | Overall Score for Outcome Measure 15 |
|--|---------------|--------------------------|--|--|---|---|---------------------------|--------------------------|--|---------------------------------------|-----------------------|--------------------------------------|
| Statewide 4th Quarter 2016 | 96.8% | 100.0% | 95.7% | 90.6% | 100.0% | 58.5% | 79.2% | 90.6% | 71.7% | 86.9% | 90.0% | 50.9% |
| Statewide 1st Quarter 2017 | 80.6% | 100.0% | 100.0% | 90.4% | 100.0% | 64.2% | 88.7% | 83.0% | 75.5% | 100.0% | 91.7% | 60.4% |
| Statewide Six-Month Combined | 88.7% | 100.0% | 97.8% | 90.5% | 100.0% | 61.3% | 84.0% | 86.8% | 73.6% | 59.2% | 90.8% | 55.7% |

The individual unmet needs identified in the cases sampled included the following total service needs: 188 for the Fourth Quarter 2006 and 152 for the First Quarter 2017 for a combined number of 340 Unmet Identified Services needs for the 106 cases during the six months of case management and service reviewed.

Table 9: Unmet Needs

| Unmet Need | Barrier | Frequency 4 th Quarter 2016 | Frequency 1 st Quarter 2017 | Semi- Annual Total |
|--|---|--|--|--------------------------|
| Adoption Supports (PPSP) | No Service Identified to Meet this Need | 1 | 0 | 1 |
| Adoption Supports (PPSP) | No Referral Made by DCF during the PUR | 0 | 1 | 1 |
| Adoption Supports (PPSP) | Placed on Wait List | 0 | 1 | 1 |
| ARG Consultation | Delay in Referral | 4 | 1 | 5 |
| ARG Consultation | No Referral Made by DCF during the PUR | 2 | 3 | 5 |
| ARG Consultation | DCF failed to properly assess child related to this need during the period under review | 3 | 2 | 5 |
| Basic Foster Care | Other: Lack of DCF Resource Home | 1 | 0 | 1 |
| Behavior Management | Placed on Wait List | 1 | 0 | 1 |
| Behavior Management | Client Refused Services | 0 | 1 | 1 |
| Care Coordination | Placed on Wait List | 0 | 1 | 1 |
| Day Treatment/Partial Hospitalization Program – Child | Client Refused Service | 0 | 1 | 1 |
| Dental or Orthodontic Services | No Referral Made by DCF during the PUR | 0 | 1 | 1 |
| Dental or Orthodontic Services | UTD from treatment plan or narrative | 0 | 1 | 1 |
| Dental or Orthodontic Services | No Service Identified to Meet this Identified Need | 1 | 0 | 1 |
| Dental or Orthodontic Services | Client Refused Services | 1 | 0 | 1 |
| Dental or Orthodontic Services | Delay in Referral | 2 | 0 | 2 |
| Dental Screening or Evaluation | Client Refused Services | 2 | 4 | 6 |
| Dental Screening or Evaluation | No Service Identified to Meet this Identified Need | 1 | 0 | 1 |
| Dental Screening or Evaluation | UTD from treatment plan or narrative | 0 | 1 | 1 |
| Dental Screening or Evaluation | Delay in Referral | 1 | 0 | 1 |
| Dental Screening or Evaluation | Service Delayed Pending Completion of Another | 1 | 0 | 1 |
| Dental Screening or Evaluation | DCF failed to properly assess child related to this need during the period under review | 1 | 2 | 3 |
| Dental Screening or Evaluation | Other: Parent refused ROI for provider – could not confirm services | 1 | 0 | 1 |
| Developmental Screening or Evaluation | Client Refused Services | 0 | 1 | 1 |
| Developmental Screening or Evaluation | No Referral Made by DCF during the PUR | 0 | 1 | 1 |
| Developmental Screening or Evaluation | Delay in Referral | 1 | 0 | 1 |
| Developmental Screening or Evaluation | Provider Issues – Staffing, Lack of Follow through, etc. | 1 | 1 | 2 |

| Unmet Need | Barrier | Frequency 4th Quarter 2016 | Frequency 1st Quarter 2017 | Semi-Annual Total |
|--|--|--|--|------------------------------|
| Domestic Violence Services - Perpetrators | Client Refused Services | 3 | 2 | 5 |
| Domestic Violence Services - Perpetrators | DCF failed to properly assess client related to this need during the period under review | 0 | 1 | 1 |
| Domestic Violence Services - Victims | Client Refused Services | 1 | 3 | 4 |
| Domestic Violence Services - Victims | Placed on Wait List | 0 | 1 | 1 |
| Domestic Violence Services - Victims | DCF failed to properly assess client related to this need during the period under review | 0 | 1 | 1 |
| Domestic Violence Services - Victims | Service Deferred Pending Completion of Another | 1 | 0 | 1 |
| Education: IEP Programming | Client/Family Refused Service | 1 | 0 | 1 |
| Education: IEP Programming | Lack of Communication between DCF and Provider | 1 | 1 | 2 |
| Educational Screening or Evaluation | Client Refused Service | 2 | 1 | 3 |
| Educational Screening or Evaluation | Provider Issues – Staffing, Lack of Follow through, etc. | 1 | 0 | 1 |
| Educational Screening or Evaluation | Other: Child had multiple hospitalizations delaying referral | 1 | 0 | 1 |
| Educational Screening or Evaluation | Delay in Referral | 0 | 1 | 1 |
| Educational Screening or Evaluation | No Referral Made for Identified Service during the Period | 0 | 1 | 1 |
| Educational Screening or Evaluation | DCF failed to properly assess child related to this need during the period under review | 1 | 0 | 1 |
| Extended Day Treatment | Client Refused Service | 0 | 1 | 1 |
| Extended Day Treatment | Delay in Referral | 1 | 0 | 1 |
| Family or Marital Counseling | Client Refused Service | 3 | 1 | 4 |
| Family or Marital Counseling | No Referral Made for Identified Service during the Period | 1 | 0 | 1 |
| Family or Marital Counseling | Service Deferred Pending Completion of Another | 1 | 0 | 1 |
| Family or Marital Counseling | No Service Identified to Meet this Need | 1 | 0 | 1 |
| Family Preservation Services | Placed on Wait List | 1 | 1 | 2 |
| Family Preservation Services | Delay in Referral | 0 | 1 | 1 |
| Group Counseling - Parents | Client Refused Services | 1 | 0 | 1 |
| Health/Medical Screening or Evaluation | Client Refused Services | 1 | 2 | 3 |
| Health/Medical Screening or Evaluation | DCF failed to properly assess child related to this need during the period under review | 1 | 0 | 1 |
| Health/Medical Screening or Evaluation | UTD from case plan or narrative | 1 | 2 | 3 |
| Health/Medical Screening or Evaluation | Delay in Referral | 4 | 1 | 5 |
| Housing Assistance (Section 8) | Service Deferred Pending Completion of Another | 1 | 0 | 1 |
| Housing Assistance (Section 8) | Delay in Referral | 0 | 1 | 1 |
| Housing Assistance (Section 8) | DCF failed to properly assess client related to this need during the period under review | 0 | 1 | 1 |
| Housing Assistance (Section 8) | Placed on Wait List | 3 | 1 | 4 |

| Unmet Need | Barrier | Frequency 4th Quarter 2016 | Frequency 1st Quarter 2017 | Semi-Annual Total |
|---|--|--|--|------------------------------|
| Individual Counseling - Child | Client Refused Services | 5 | 4 | 9 |
| Individual Counseling - Child | Delay in Referral | 1 | 1 | 2 |
| Individual Counseling - Child | No Referral Made for Identified Service during the Period | 2 | 1 | 3 |
| Individual Counseling - Child | Other: alternative service identified to provide support | 1 | 0 | 1 |
| Individual Counseling - Child | Service Deferred Pending Completion of Another | 0 | 1 | 1 |
| Individual Counseling - Child | Provider Issues – Staffing, Lack of Follow through, etc. | 0 | 1 | 1 |
| Individual Counseling - Parent | Client Refused Services | 12 | 9 | 21 |
| Individual Counseling - Parent | Insurance Issues | 0 | 1 | 1 |
| Individual Counseling - Parent | Delay in Referral | 0 | 1 | 1 |
| Individual Counseling - Parent | Hours of Operation (Alternate Hours Needed) | 1 | 0 | 1 |
| Individual Counseling - Parent | Placed on Wait List | 1 | 0 | 1 |
| In-Home Parent Education and Support | Delay in Referral | 1 | 0 | 1 |
| In-Home Parent Education and Support | Placed on Wait List | 0 | 2 | 2 |
| In-Home Parent Education and Support | Client Refused Service | 1 | 1 | 2 |
| In-Home Parent Education and Support | DCF failed to properly assess client related to this need during the period under review | 0 | 1 | 1 |
| In-Home Parent Education and Support | Service Deferred Pending Completion of Another | 0 | 1 | 1 |
| In-Home Treatment | Client Refused Service | 1 | 3 | 4 |
| In-Home Treatment | Delay in Referral | 2 | 1 | 3 |
| In-Home Treatment | Hours of Operation (Alternate Hours Needed) | 1 | 0 | 1 |
| Matching/Placement Processing | Provider Issue - untimely provision of services or gaps in service related to staffing, lack of follow through, etc. | 1 | 0 | 1 |
| Matching/Placement Processing (Includes ICO) | Delay in Referral | 1 | 0 | 1 |
| Medication Management – Child | Delay in Referral | 1 | 0 | 1 |
| Medication Management – Child | Client Refused Services | 2 | 0 | 2 |
| Medication Management - Parent | Client Refused Services | 3 | 1 | 4 |
| Mental Health Screening or Evaluation - Child | Client Refused Services | 1 | 0 | 1 |
| Mental Health Screening or Evaluation - Parent | Client Refused Services | 4 | 2 | 6 |
| Mental Health Screening or Evaluation - Parent | DCF failed to properly assess client related to this need during the period under review | 0 | 1 | 1 |

| Unmet Need | Barrier | Frequency 4th Quarter 2016 | Frequency 1st Quarter 2017 | Semi-Annual Total |
|--|--|--|--|------------------------------|
| Mentoring | No Referral Made during the PUR | 1 | 1 | 2 |
| Mentoring | Placed on Wait List | 1 | 0 | 1 |
| Mentoring | Provider Issues - untimely provision of services related to staffing, lack of follow through, etc. | 1 | 1 | 2 |
| Mentoring | Client Refused Services | 1 | 1 | 2 |
| Mentoring | Delay in Referral | 0 | 1 | 1 |
| Mentoring | UTD from Case Plan or Narrative | 0 | 1 | 1 |
| Mentoring | DCF failed to properly assess child related to this need during the period under review | 0 | 1 | 1 |
| Occupational Therapy | Insurance Issues | 1 | 0 | 1 |
| Other Medical Intervention: Surgery | Delay in Referral | 1 | 0 | 1 |
| Other Medical Intervention: Helmet | Placed on Wait List | 1 | 0 | 1 |
| Other Medical Intervention: Specialized Equipment | Provider Issue - untimely provision of services or gaps in service related to staffing, lack of follow through, etc. | 1 | 0 | 1 |
| Other Medical Intervention: Vision | Client Refused | 1 | 1 | 2 |
| Other Medical Intervention: Vision | Other: Cancelled due to Child's hospitalization and not yet rescheduled | 1 | 0 | 1 |
| Other Mental Health Need: Neuropsychological Evaluation | Placed on Wait List | 0 | 1 | 1 |
| Other Mental/Behavioral Health Need: Autism Services | Delay in Referral | 0 | 1 | 1 |
| Other Mental Health Need: TSS Mentor | Provider Issue - untimely provision of services or gaps in service related to staffing, lack of follow through, etc. | 1 | 0 | 1 |
| Other Mental Health Need - Parent: Intensive Outpatient | Client Refused Service | 1 | 0 | 1 |
| Other In-Home Service – Legal | Failure to File Neglect Petitions Timely | 1 | 1 | 2 |
| Other Out of Home Service – Legal | Provider Issue - untimely provision of services or gaps in service related to staffing, lack of follow through, etc. | 1 | 0 | 1 |
| Other Out of Home Service – Legal | DCF failed to properly assess child related to this need during the period under review | 0 | 1 | 1 |
| Other Out of Home Service –Sibling Visitation | No Referral Made by DCF During the PUR | 0 | 1 | 1 |
| Other State Agency | No Referral Made by DCF During the PUR | 1 | 0 | 1 |
| Other State Agency | Delay in Referral | 1 | 0 | 1 |
| Parenting Classes | Client Refused Services | 2 | 0 | 2 |
| Parenting Classes | Placed on Wait List | 1 | 0 | 1 |
| Parenting Classes | No Referral Made by DCF During the PUR | 0 | 1 | 1 |
| Parenting Groups | DCF failed to properly assess client related to this need during the period under review | 0 | 1 | 1 |
| Physical Therapy | Insurance Issues | 1 | 0 | 1 |
| Problem Sexual Behavior Therapy | No Referral Made by DCF during the PUR | 1 | 0 | 1 |
| Psychiatric Evaluation – Child | No Referral Made by DCF during the PUR | 0 | 1 | 1 |

| Unmet Need | Barrier | Frequency 4th Quarter 2016 | Frequency 1st Quarter 2017 | Semi-Annual Total |
|--|--|--|--|------------------------------|
| Psychiatric Evaluation – Parent | Provider Issue - untimely provision of services or gaps in service related to staffing, lack of follow through, etc. | 0 | 1 | 1 |
| Psychiatric Hospitalization – Parent | Client Refused Services | 1 | 0 | 1 |
| Psychological Psychosocial Evaluation – Child | Provider Issue - untimely provision of services or gaps in service related to staffing, lack of follow through, etc. | 0 | 1 | 1 |
| Residential Facility Treatment | Placed on Wait List | 0 | 1 | 1 |
| Respite Services | Placed on Wait List | 1 | 0 | 1 |
| Sexual Abuse Therapy - Victim | Client Refused Services | 1 | 1 | 2 |
| Social Recreational Program | No Referral Made during the PUR | 1 | 0 | 1 |
| Substance Abuse Treatment – Detoxification (Parent) | Referred Service is Unwilling to Engage Client | 1 | 0 | 1 |
| Substance Abuse Drug/Alcohol Education - Parent | Client Refused Services | 2 | 0 | 2 |
| Substance Abuse Drug/Alcohol Education – Parent | No Referral Made by DCF during the PUR | 1 | 0 | 1 |
| Substance Abuse Treatment – Drug/Alcohol Testing Parent | Client Refused Services | 0 | 2 | 2 |
| Substance Abuse Inpatient Treatment - Parent | Client Refused Services | 0 | 1 | 1 |
| Substance Abuse Outpatient Treatment – Child | Client Refused Services | 0 | 1 | 1 |
| Substance Abuse Outpatient Treatment - Parent | Client Refused Services | 8 | 5 | 13 |
| Substance Abuse Outpatient Treatment - Parent | Delay in Referral | 1 | 1 | 2 |
| Substance Abuse Relapse Prevention Program - Parent | Client Refused Services | 3 | 1 | 4 |
| Substance Abuse Relapse Prevention Program - Parent | Placed on Wait List | 1 | 0 | 1 |
| Substance Abuse Screening - Child | Client Refused Services | 1 | 0 | 1 |
| Substance Abuse Screening - Child | No Referral Made by DCF during the PUR | 0 | 1 | 1 |
| Substance Abuse Screening - Parent | Client Refused Services | 3 | 6 | 9 |
| Substance Abuse Screening - Parent | Delay in Referral | 0 | 4 | 4 |

| Unmet Need | Barrier | Frequency 4th Quarter 2016 | Frequency 1st Quarter 2017 | Semi-Annual Total |
|------------------------------------|--|--|--|------------------------------|
| SW/Child Visitation | Delays by SW such that mandated visitation standard was not met during review period | 1 | 2 | 3 |
| SW/Child Visitation | Documentation does not reflect proper assessment of child/family during this PUR | 1 | 2 | 3 |
| SW/Child Visitation | Client Refused Visitation | 1 | 1 | 2 |
| SW/Parent Visitation | Delays by SW such that mandated visitation standard was not met during review period | 5 | 1 | 6 |
| SW/Parent Visitation | Documentation does not reflect proper assessment of child/family during this PUR | 7 | 7 | 14 |
| SW/Parent Visitation | Client Refused Visitation | 2 | 1 | 3 |
| SW/Parent Visitation | UTD Reason for Failure to Meet Visitation Benchmarks from Case Plan or Narratives | 3 | 0 | 3 |
| SW/Provider Contacts | Case Management/Supervision: Contacts below Benchmark/Policy | 18 | 12 | 30 |
| SW/Provider Contacts | Client Refusing ROI | 1 | 1 | 2 |
| SW/Provider Contacts | Other: SW Emergency LOA | 1 | 0 | 1 |
| SW/Provider Contacts | Provider Issue - untimely provision of services or gaps in service related to staffing, lack of follow through, etc. | 0 | 1 | 1 |
| SW/Provider Contacts | DCF Failed to Properly Assess the Child/Family related to Service Needs During the PUR | 2 | 2 | 4 |
| Therapeutic Foster Care | No Slots Available | 0 | 1 | 1 |
| Therapeutic Foster Care | Service Deferred Pending Completion of Another | 0 | 1 | 1 |
| Transitional Living Program | Placed on Wait List | 1 | 0 | 1 |
| | | 188 | 152 | 340 |

During the fourth quarter, there was a slight decrease in the general engagement of families in case planning as narrated within the ACR, case planning and visitation documentation. A total 56.6% of the cases showed very good or optimal engagement of families in the case planning process through documented discussions with the families and the Social Worker *throughout* the period under review. This percentage declined further to a rate of 45.3 % for the First Quarter 2017.

Our reviewers reading of the Administrative Case Review (ACR) documentation, narratives and case plan feedback reflect that during the six month semi-annual reporting period, 66.0 % of the cases did document a discussion (or in the case of in-home family cases the family meeting or formal case conference) of some (32.1%) or all (34.0%) of the needs that were identified as unmet in the six-month planning cycle. The reviewers identified 13 cases where the planning process did not address any of the needs that were unmet from the last planning cycle. In twelve cases, the reviewers indicated that all needs identified at the prior ACR were "fully achieved" or "no longer needed" and no longer needed to be planned for. In eleven cases, the plan reviewed was the initial case plan.

Table 10: Were all needs and services unmet during the prior six month discussed at the ACR and, as appropriate, incorporated as action steps on the current case plan?

| Needs Unmet Incorporated into Current Case Plan | Frequency 4 th Quarter 2016 | Frequency 1 st Quarter 2017 | Semi-Annual Frequency |
|---|--|--|-----------------------|
| Yes - All | 43.4% | 24.5% | 34.0% |
| Yes - Partially | 26.4% | 37.7% | 32.1% |
| No - None | 9.4% | 15.1% | 12.3% |
| N/A - There are no Unmet Needs | 11.3% | 11.3% | 11.3% |
| N/A - this is the initial plan | 9.4% | 11.3% | 10.4% |
| Total | 100.0% | 100.0% | 100.0% |

In the Fourth Quarter 2016, a need was identified in fourteen of 36 cases (38.9 %) in which Structured Decision Making (SDM) was conducted that was identical to that which was identified on the prior case plan assessment. (This would indicate an unmet need for greater than 6 months for a family or individual.) In 45.3% of the 53 Fourth Quarter 2016 case plans reviewed, it was the opinion of the Court Monitor's staff that there was at least one priority need that was evident from the review of the documentation that was not incorporated into the newly developed case plan document. In the First Quarter 2017 there were 11 of 29 cases (37.9%) in which SDM was conducted that a need was identified in the current SDM identical to that which was identified on the prior case plan assessment. (This would indicate an unmet need for greater than 6 months for a family or individual.) In 54.7% of the 53 First Quarter 2017 case plans reviewed, it was the opinion of the Court Monitor's staff that there was at least one priority need that was evident from the review of the documentation that was not incorporated into the newly developed case plan document. In both quarters, for many of these cases where an ACR was held, the ACR Social Work Supervisor also identified these areas as Areas Needing Improvement.

Many needs were appropriately planned for via the objectives and action steps developed within the 53 case plans our reviewers scored utilizing the court ordered methodology each quarter. To gain a sense of those areas that continue to be under assessed or overlooked the reviewers collect the data reflecting the unmet needs that were not carried forward. These 126 priority needs and the barriers related to each unmet need were:

Table 11: Unmet Needs Not Incorporated in Upcoming Six-Month Case Planning

| Unmet Need | Barrier | Frequency Fourth Quarter 2016 | Frequency First Quarter 2017 | Semi-Annual Total Frequency |
|---|---|-------------------------------|------------------------------|-----------------------------|
| Adoption Supports (PPSP) | No Service Identified to Meet this Need | 2 | 1 | 3 |
| Adoption Supports (PPSP) | UTD - No Approved Case Plan | 0 | 1 | 1 |
| ARG Consultation | No Service Identified to Meet this Need | 1 | 1 | 2 |
| Dental or Orthodontic Services | No Service Identified to Meet this Need | 1 | 2 | 3 |
| Dental Screening or Evaluation | UTD - No Approved Case Plan | 1 | 0 | 1 |
| Dental Screening or Evaluation | No Service Identified to Meet this Need | 4 | 5 | 9 |
| Domestic Violence Services - Perpetrators | Client Refused Service | 1 | 0 | 1 |
| Domestic Violence Services - Perpetrators | No Service Identified to Meet this Need | 0 | 1 | 1 |
| Domestic Violence Services - Perpetrators | DCF failed to properly assess the client related to this need | 0 | 1 | 1 |
| Domestic Violence Services - Perpetrators | Other: DOC Policy/Issues | 0 | 1 | 1 |
| Domestic Violence Services - Victims | Client refused service | 1 | 0 | 1 |
| Domestic Violence Services - Victims | DCF failed to properly assess the client related to this need | 0 | 1 | 1 |
| Domestic Violence Shelter | No Service Identified to Meet this Need | 0 | 1 | 1 |
| Educational Screening or Evaluation | No Service Identified to Meet this Need | 2 | 0 | 2 |
| Education: IEP Programming | UTD – No Approved Case Plan | 1 | 0 | 1 |
| Education: IEP Programming | No Service Identified to Meet this Need | 0 | 1 | 1 |
| Emergency Adult/Family Shelter | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Family or Marital Counseling | Service Deferred Pending Completion of Another | 1 | 0 | 1 |
| Family or Marital Counseling | No Service Identified to Meet this Need | 2 | 1 | 3 |
| Family or Marital Counseling | UTD – No Approved Case Plan | 1 | 1 | 2 |
| Family Preservation Services | No Service Identified to Meet this Need | 1 | 0 | 1 |
| Family Preservation Services | Provider Issues – Staffing, Lack of Follow Through, etc. | 1 | 0 | 1 |
| Family Reunification Services | UTD - No Approved Case Plan | 0 | 2 | 2 |
| Group Counseling (Parent) | No Service Identified to Meet this Need | 1 | | |
| Health/Medical Screening or Evaluation | No Service Identified to Meet this Need | 2 | 3 | 5 |
| Health/Medical Screening or Evaluation | UTD – No Approved Case Plan | 1 | 2 | 3 |
| Housing Assistance (Section 8) | UTD – No Approved Case Plan | 1 | 0 | 1 |
| Housing Assistance (Section 8) | No Service Identified to Meet this Need | 0 | 1 | 1 |
| Individual Counseling - Child | No Service Identified to Meet this Need | 3 | 5 | 8 |
| Individual Counseling - Child | UTD – No Approved Case Plan | 0 | 2 | 2 |
| Individual Counseling - Parent | No Service Identified to Meet this Need | 2 | 2 | 4 |
| Individual Counseling - Parent | UTD – No Approved Case Plan | 2 | 2 | 4 |
| In-Home Parent Education and Support | No Service Identified to Meet this Need | 1 | 2 | 3 |
| In-Home Parent Education and Support | UTD – No Approved Case Plan | 0 | 1 | 1 |
| In-Home Treatment | No Service Identified to Meet this Need | 1 | 2 | 3 |
| In-Home Treatment | UTD – No Approved Case Plan | 1 | 0 | 1 |

| Unmet Need | Barrier | Frequency Fourth Quarter 2016 | Frequency First Quarter 2017 | Semi-Annual Total Frequency |
|---|---|--------------------------------------|-------------------------------------|------------------------------------|
| Maintaining Family Ties | DCF failed to properly assess the client related to this need | 0 | 1 | 1 |
| Medically Fragile Supports/Services | No Service Identified to Meet this Need | 1 | 0 | 1 |
| Medication Management – Child | UTD – No Approved Case Plan | 1 | 0 | 1 |
| Mental Health Screening or Evaluation - Child | No Service Identified to Meet this Need | 1 | 1 | 2 |
| Mental Health Screening or Evaluation – Parent | Client Refused Services | 1 | 0 | 1 |
| Mental Health Screening or Evaluation - Parent | No Service Identified to Meet this Need | 2 | 1 | 3 |
| Mentoring | UTD – No Approved Case Plan | 1 | 1 | 2 |
| Mentoring | No Service Identified to Meet this Need | 1 | 3 | 4 |
| Occupational Therapy | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Other Medical Intervention (Child) – Exercise Program to Address Obesity | No Service Identified to Meet this Need | 1 | 0 | 1 |
| Other Medical Intervention (Child) – Vision | No Service Identified to Meet this Need | 2 | 0 | 2 |
| Other Medical Intervention (Child) – Factor V Leiden Testing | No Service Identified to Meet this Need | 0 | 1 | 1 |
| Other Medical Intervention (Child) – Neurological/Hematology/Oncology | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Other Mental Health Need: Trauma Focused Therapy – Child | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Other Out of Home Service: Legal | Untimely filings | 0 | 2 | 2 |
| Other Out of Home Service: Sibling Visitation | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Other State Agency Program (DMR, DMHAS, MSS, etc.) | No Service Identified to Meet this Need | 1 | 0 | 1 |
| Prenatal Services | UTD – No Approved Case Plan | 1 | 0 | 1 |
| Parenting Classes | UTD – No Approved Case Plan | 1 | 0 | 1 |
| Parenting Classes | Other: DOC Policy/Issues | 0 | 1 | 1 |
| Parenting Group | No Service Identified to Meet this Need | 0 | 1 | 1 |
| Physical Therapy | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Psychological or Psychosocial Evaluation - Child | No Service Identified to Meet this Need | 1 | 0 | 1 |
| Psychiatric Evaluation – Parent | No Service Identified to Meet this Need | 0 | 1 | 1 |
| Services for the Disabled (TDD/TTY) | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Social Recreational Programming | No Service Identified to Meet this Need | 1 | 0 | 1 |
| Substance Abuse Screening - Parent | No Service Identified to Meet this Need | 1 | 1 | 2 |
| Substance Abuse Screening - Parent | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Substance Abuse Treatment: Drug & Alcohol Testing – Parent | No Service Identified to Meet this Need | 1 | 0 | 1 |
| Substance Abuse Treatment: Drug & Alcohol Testing – Parent | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Substance Abuse: Inpatient Substance Abuse Treatment – Parent | UTD – No Approved Case Plan | 1 | 0 | 1 |
| Substance Abuse: Outpatient Substance Abuse Treatment - Parent | Client Refused Services | 1 | 0 | 1 |
| Substance Abuse: Outpatient Substance Abuse Treatment - Parent | UTD – No Approved Case Plan | 0 | 2 | 2 |
| Substance Abuse: Outpatient Substance Abuse Treatment - Parent | No Service Identified to Meet this Need | 0 | 1 | 1 |

| Unmet Need | Barrier | Frequency Fourth Quarter 2016 | Frequency First Quarter 2017 | Semi-Annual Total Frequency |
|--|---|--|---|--|
| Substance Abuse: Relapse Prevention | No Service Identified to Meet This Need | 1 | 0 | 1 |
| Supervised Visitation | UTD – No Approved Case Plan | 0 | 1 | 1 |
| Therapeutic Foster Care | Provider Issues – Staffing, Lack of Follow Through, etc. | 1 | 0 | 1 |
| | | 57 | 69 | 126 |

The lack of identification of a service need accounts for the majority of the unmet needs in the forward planning, however given the growing number of untimely and unapproved case plans in the last two quarters, the drafts or missing documents presented voids in this area as well. This lack of current assessment and planning with clients within the context of engaged case planning will continue to negatively impact performance for both OM3 and OM15 outcomes for children and families involved with DCF. Many of the deficits found within the domains of the case plans, when addressed, will improve the provision of services and rate of success in meeting the needs of children and families.

JUAN F. ACTION PLAN MONITORING REPORT

May 2017

This report includes data relevant to the permanency and placement issues and action steps embodied within the Action Plan. Data provided comes from the monthly point-in-time information from LINK and the Chapin Hall database.

A. PERMANENCY ISSUES

Progress Towards Permanency:

The following table developed using the Chapin Hall database provides a longitudinal view of permanency for annual admission cohorts from 2004 through 2016.

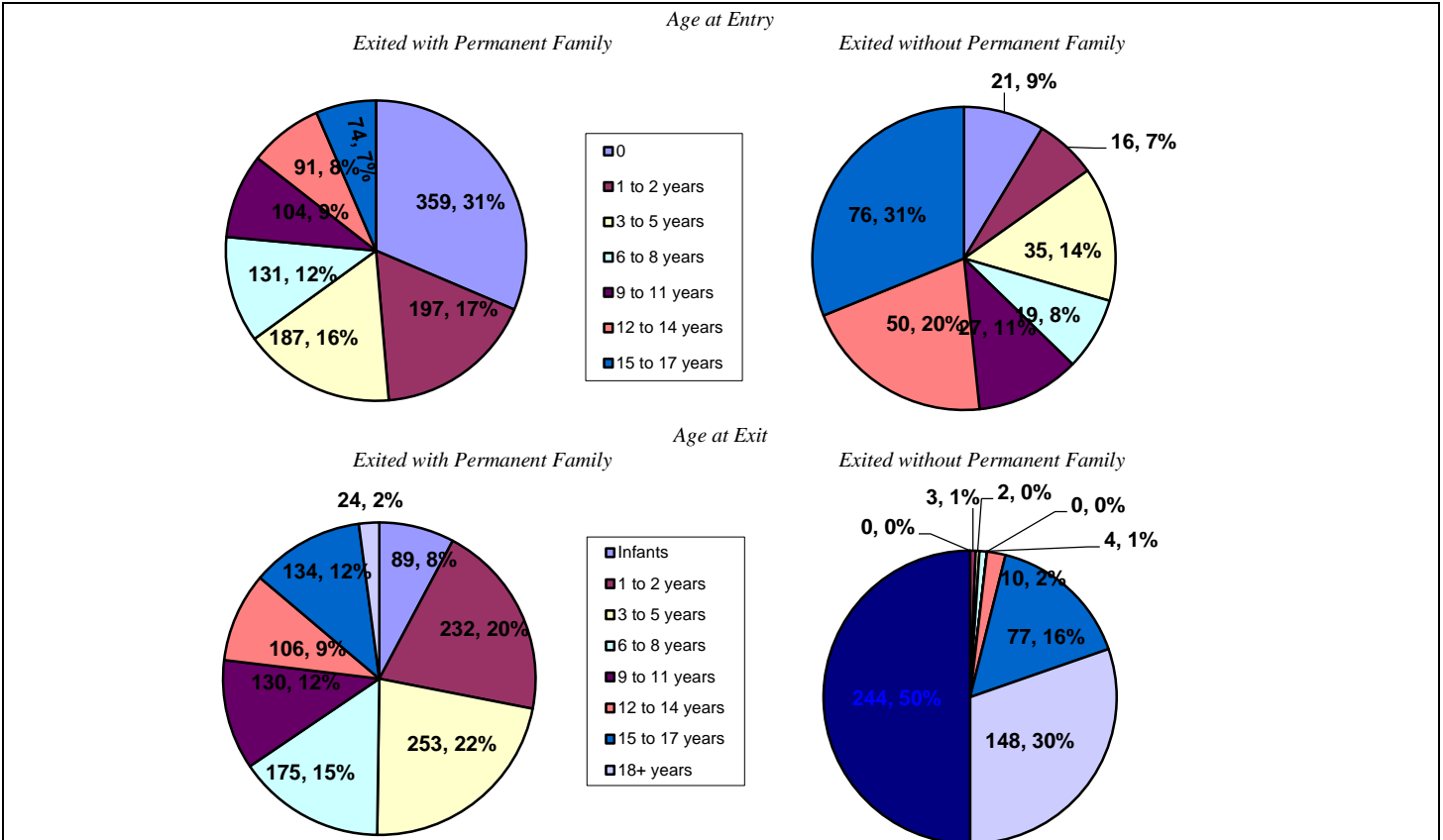
Figure 1: Children Exiting With Permanency, Exiting Without Permanency, Unknown Exits and Remaining In Care (Entry Cohorts)

| | Period of Entry to Care | | | | | | | | | | | | | |
|----------------------------|-------------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|--------------|--------------|------------|
| | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| Total Entries | 3203 | 3091 | 3407 | 2854 | 2829 | 2628 | 2694 | 2297 | 1857 | 2005 | 1931 | 1985 | 2259 | 549 |
| Permanent Exits | | | | | | | | | | | | | | |
| In 1 yr | 1228 38.3% | 1129 36.5% | 1263 37.1% | 1096 38.4% | 1098 38.8% | 1093 41.6% | 1025 38.0% | 707 30.8% | 560 30.2% | 535 26.7% | 498 25.8% | 423 21.3% | | |
| In 2 yrs | 1805 56.4% | 1740 56.3% | 1972 57.9% | 1676 58.7% | 1676 59.2% | 1582 60.2% | 1378 51.2% | 1052 45.8% | 856 46.1% | 841 41.9% | 788 40.8% | | | |
| In 3 yrs | 2092 65.3% | 2012 65.1% | 2324 68.2% | 1975 69.2% | 1943 68.7% | 1792 68.2% | 1676 62.2% | 1245 54.2% | 1034 55.7% | 1072 53.5% | | | | |
| In 4 yrs | 2262 70.6% | 2157 69.8% | 2499 73.3% | 2091 73.3% | 2033 71.9% | 1895 72.1% | 1780 66.1% | 1357 59.1% | 1118 60.2% | | | | | |
| To Date | 2371 74.0% | 2257 73.0% | 2620 76.9% | 2170 76.0% | 2121 75.0% | 1948 74.1% | 1840 68.3% | 1420 61.8% | 1134 61.1% | 1137 56.7% | 951 49.2% | 619 31.2% | 444 19.7% | 47 8.6% |
| Non-Permanent Exits | | | | | | | | | | | | | | |
| In 1 yr | 231 7.2% | 289 9.3% | 259 7.6% | 263 9.2% | 250 8.8% | 208 7.9% | 196 7.3% | 138 6.0% | 95 5.1% | 125 6.2% | 111 5.7% | 95 4.8% | | |
| In 2 yrs | 301 9.4% | 371 12.0% | 345 10.1% | 318 11.1% | 320 11.3% | 267 10.2% | 243 9.0% | 188 8.2% | 146 7.9% | 182 9.1% | 140 7.3% | | | |
| In 3 yrs | 366 11.4% | 431 13.9% | 401 11.8% | 354 12.4% | 363 12.8% | 300 11.4% | 275 10.2% | 220 9.6% | 190 10.2% | 217 10.8% | | | | |
| In 4 yrs | 403 12.6% | 461 14.9% | 449 13.2% | 392 13.7% | 394 13.9% | 328 12.5% | 309 11.5% | 257 11.2% | 218 11.7% | | | | | |
| To Date | 523 16.3% | 580 18.8% | 548 16.1% | 461 16.2% | 468 16.5% | 396 15.1% | 368 13.7% | 287 12.5% | 227 12.2% | 233 11.6% | 154 8.0% | 119 6.0% | 61 2.7% | 2 0.4% |

| | Period of Entry to Care | | | | | | | | | | | | | |
|-----------------------|-------------------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|--------------|
| | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| Unknown Exits | | | | | | | | | | | | | | |
| In 1 yr | 129 4.0% | 83 2.7% | 76 2.2% | 61 2.1% | 60 2.1% | 75 2.9% | 127 4.7% | 205 8.9% | 134 7.2% | 103 5.1% | 119 6.2% | 226 11.4% | | |
| In 2 yrs | 171 5.3% | 124 4.0% | 117 3.4% | 97 3.4% | 91 3.2% | 139 5.3% | 303 11.2% | 399 17.4% | 255 13.7% | 318 15.9% | 364 18.9% | | | |
| In 3 yrs | 208 6.5% | 164 5.3% | 140 4.1% | 123 4.3% | 125 4.4% | 192 7.3% | 381 14.1% | 475 20.7% | 337 18.1% | 405 20.2% | | | | |
| In 4 yrs | 234 7.3% | 182 5.9% | 167 4.9% | 155 5.4% | 167 5.9% | 217 8.3% | 400 14.8% | 499 21.7% | 377 20.3% | | | | | |
| To Date | 303 9.5% | 238 7.7% | 222 6.5% | 201 7.0% | 208 7.4% | 251 9.6% | 429 15.9% | 520 22.6% | 392 21.1% | 442 22.0% | 433 22.4% | 381 19.2% | 173 7.7% | 3 0.5% |
| Remain In Care | | | | | | | | | | | | | | |
| In 1 yr | 1615 50.4% | 1590 51.4% | 1809 53.1% | 1434 50.2% | 1421 50.2% | 1252 47.6% | 1346 50.0% | 1247 54.3% | 1068 57.5% | 1242 61.9% | 1203 62.3% | 1241 62.5% | | |
| In 2 yrs | 926 28.9% | 856 27.7% | 973 28.6% | 763 26.7% | 742 26.2% | 640 24.4% | 770 28.6% | 658 28.6% | 600 32.3% | 664 33.1% | 639 33.1% | | | |
| In 3 yrs | 537 16.8% | 484 15.7% | 542 15.9% | 402 14.1% | 398 14.1% | 344 13.1% | 362 13.4% | 357 15.5% | 296 15.9% | 311 15.5% | | | | |
| In 4 yrs | 304 9.5% | 291 9.4% | 292 8.6% | 216 7.6% | 235 8.3% | 188 7.2% | 205 7.6% | 184 8.0% | 144 7.8% | | | | | |
| To Date | 6 0.2% | 16 0.5% | 17 0.5% | 22 0.8% | 32 1.1% | 33 1.3% | 57 2.1% | 70 3.0% | 104 5.6% | 193 9.6% | 393 20.4% | 866 43.6% | 1581 70.0% | 497 90.5% |

The following graphs show how the ages of children upon their entry to care, as well as at the time of exit, differ depending on the overall type of exit (permanent or non-permanent).

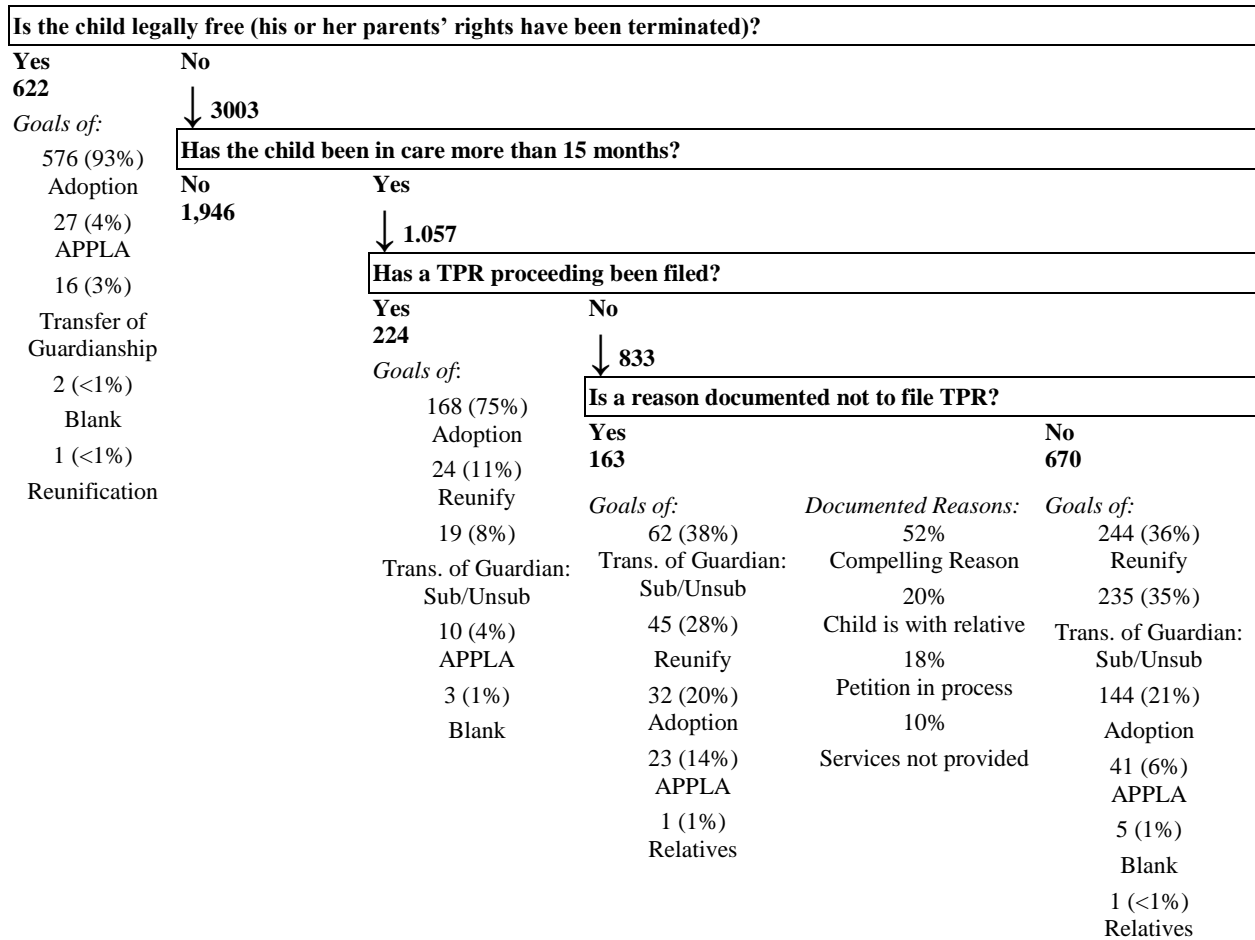
FIGURE 2: CHARACTERISTICS OF CHILDREN EXITING WITH AND WITHOUT PERMANENCY (2016 EXIT COHORT)



Permanency Goals:

The following chart illustrates and summarizes the number of children (which excludes youth ages 18 and older) at various stages of placement episodes, and provides the distribution of Permanency Goals selected for them.

FIGURE 3: DISTRIBUTION OF PERMANENCY GOALS ON THE PATH TO PERMANENCY (CHILDREN IN CARE ON MAY 1, 2017⁶)



Preferred Permanency Goals:

| Reunification | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Total number of children with Reunification goal, pre-TPR and post-TPR | 1449 | 1491 | 1577 | 1521 | 1618 | 1619 |
| Number of children with Reunification goal pre-TPR | 1448 | 1491 | 1577 | 1521 | 1613 | 1618 |
| • Number of children with Reunification goal, pre-TPR, >= 15 months in care | 271 | 292 | 272 | 281 | 314 | 313 |
| • Number of children with Reunification goal, pre-TPR, >= 36 months in care | 42 | 36 | 39 | 35 | 41 | 37 |
| Number of children with Reunification goal, post-TPR | 1 | 0 | 0 | 0 | 2 | 1 |

⁶ Children over age 18 are not included in these figures.

| Transfer of Guardianship (Subsidized and Non-Subsidized) | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Total number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR and post TPR | 410 | 433 | 428 | 469 | 478 | 505 |
| Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR | 399 | 425 | 420 | 460 | 462 | 489 |
| <ul style="list-style-type: none"> Number of children with Transfer of Guardianship goal (subsidized and non-subsidized , pre-TPR, >= 22 months) | 144 | 153 | 153 | 166 | 155 | 169 |
| <ul style="list-style-type: none"> Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), pre-TPR , >= 36 months) | 52 | 46 | 50 | 69 | 58 | 69 |
| Number of children with Transfer of Guardianship goal (subsidized and non-subsidized), post-TPR | 11 | 8 | 8 | 9 | 16 | 16 |

| Adoption | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Total number of children with Adoption goal, pre-TPR and post-TPR | 1058 | 1118 | 1105 | 1104 | 1096 | 1138 |
| Number of children with Adoption goal, pre-TPR | 557 | 567 | 561 | 578 | 556 | 562 |
| Number of children with Adoption goal, TPR not filed, >= 15 months in care | 172 | 161 | 167 | 199 | 192 | 176 |
| <ul style="list-style-type: none"> Reason TPR not filed, Compelling Reason | 14 | 9 | 8 | 6 | 7 | 6 |
| <ul style="list-style-type: none"> Reason TPR not filed, petitions in progress | 28 | 38 | 30 | 22 | 18 | 20 |
| <ul style="list-style-type: none"> Reason TPR not filed , child is in placement with relative | 5 | 5 | 6 | 6 | 2 | 1 |
| <ul style="list-style-type: none"> Reason TPR not filed, services needed not provided | 0 | 0 | 0 | 5 | 5 | 5 |
| <ul style="list-style-type: none"> Reason TPR not filed, blank | 125 | 109 | 123 | 160 | 160 | 144 |
| Number of cases with Adoption goal post-TPR | 501 | 551 | 544 | 526 | 540 | 576 |
| <ul style="list-style-type: none"> Number of children with Adoption goal, post-TPR, in care >= 15 months | 466 | 513 | 507 | 489 | 513 | 550 |
| <ul style="list-style-type: none"> Number of children with Adoption goal, post-TPR, in care >= 22 months | 392 | 423 | 423 | 420 | 426 | 454 |
| Number of children with Adoption goal, post-TPR, no barrier, > 3 months since TPR | 10 | 17 | 17 | 9 | 13 | 17 |
| Number of children with Adoption goal, post-TPR, with barrier, > 3 months since TPR | 59 | 50 | 54 | 54 | 48 | 57 |
| Number of children with Adoption goal, post-TPR, with blank barrier, > 3 months since TPR | 215 | 254 | 254 | 233 | 224 | 276 |

| Progress Towards Permanency: | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Total number of children, pre-TPR, TPR not filed, >=15 months in care, no compelling reason | 610 | 544 | 560 | 624 | 664 | 670 |

Non-Preferred Permanency Goals:

| Long Term Foster Care Relative: | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Total number of children with Long Term Foster Care Relative goal | 23 | 24 | 15 | 7 | 5 | 5 |
| Number of children with Long Term Foster Care Relative goal, pre-TPR | 22 | 24 | 15 | 7 | 5 | 5 |
| <ul style="list-style-type: none"> Number of children with Long Term Foster Care Relative goal, 12 years old and under, pre-TPR | 1 | 1 | 1 | 1 | 0 | 0 |
| Long Term Foster Care Rel. goal, post-TPR | 1 | 0 | 0 | 0 | 0 | 0 |
| <ul style="list-style-type: none"> Number of children with Long Term Foster Care Relative goal, 12 years old and under, post-TPR | 0 | 0 | 0 | 0 | 0 | 0 |

| APPLA* | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|--|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Total number of children with APPLA goal | 204 | 185 | 163 | 136 | 121 | 114 |
| Number of children with APPLA goal, pre-TPR | 165 | 155 | 142 | 109 | 93 | 87 |
| <ul style="list-style-type: none"> Number of children with APPLA goal, 12 years old and under, pre-TPR | 0 | 0 | 0 | 0 | 0 | 0 |
| Number of children with APPLA goal, post-TPR | 39 | 30 | 21 | 27 | 28 | 27 |
| <ul style="list-style-type: none"> Number of children with APPLA goal, 12 years old and under, post-TPR | 1 | 1 | 0 | 0 | 0 | 0 |

* Columns prior to Aug 07 had previously been reported separately as APPLA: Foster Care Non-Relative and APPLA: Other. The values from each separate table were added to provide these figures. Currently there is only one APPLA goal.

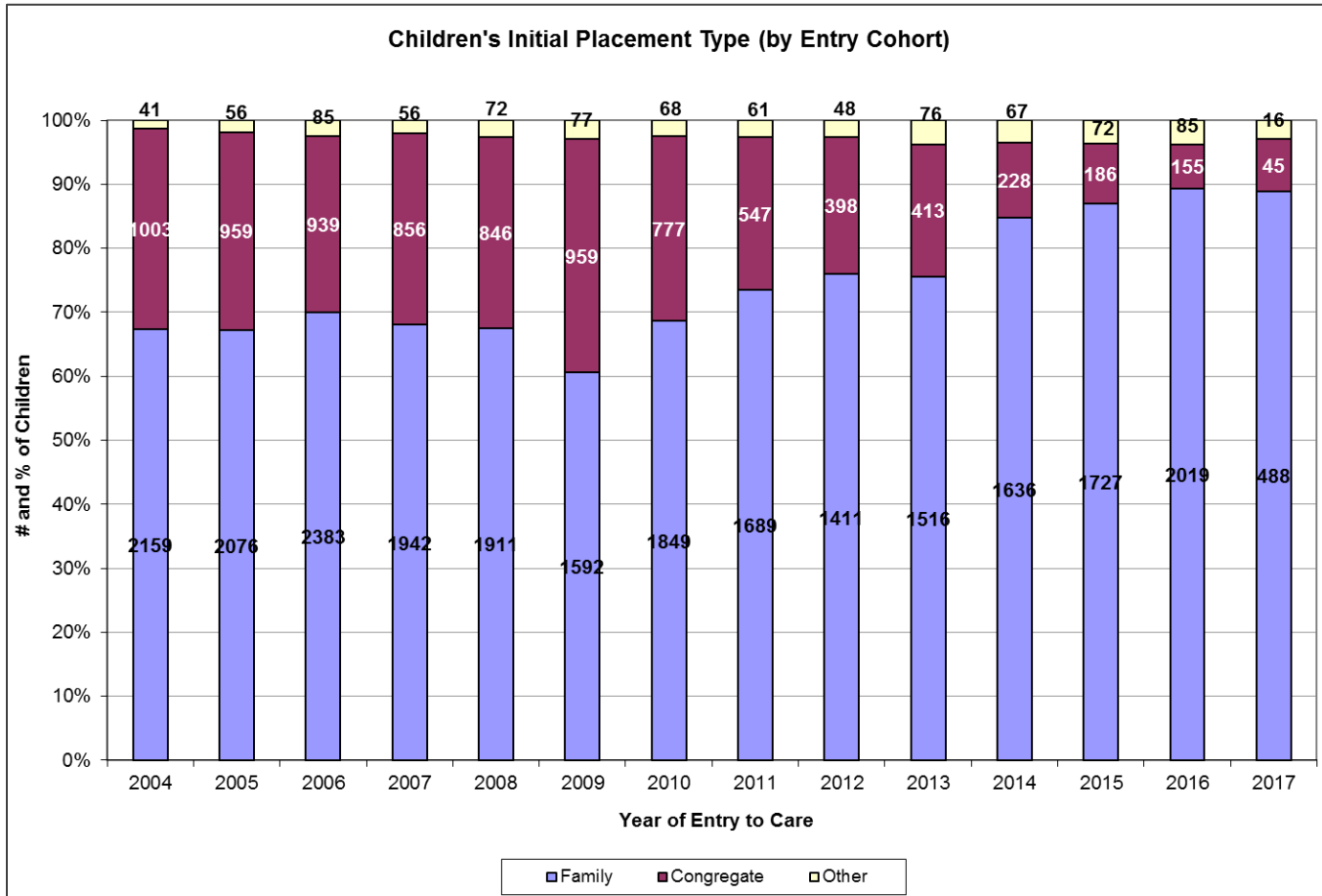
Missing Permanency Goals:

| | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Number of children, with no Permanency goal, pre-TPR, >= 2 months in care | 22 | 28 | 29 | 28 | 26 | 29 |
| Number of children, with no Permanency goal, pre-TPR, >= 6 months in care | 12 | 10 | 16 | 11 | 11 | 14 |
| Number of children, with no Permanency goal, pre-TPR, >= 15 months in care | 6 | 5 | 4 | 6 | 6 | 8 |
| Number of children, with no Permanency goal, pre-TPR, TPR not filed, >= 15 months in care, no compelling reason | 5 | 3 | 3 | 6 | 6 | 5 |

B. PLACEMENT ISSUES

Placement Experiences of Children

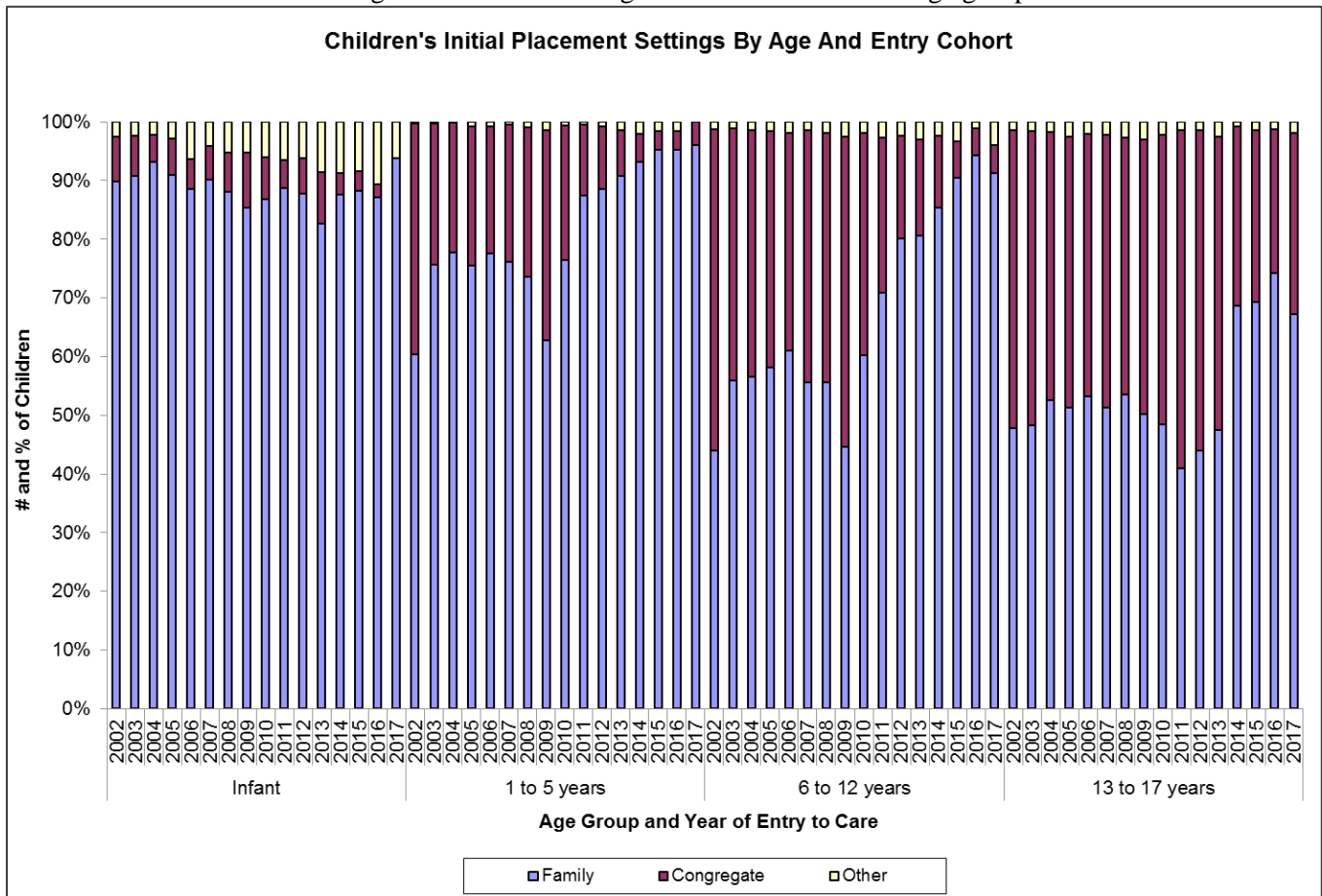
The following chart shows the change in use of family and congregate care for admission cohorts between 2004 and 2017.



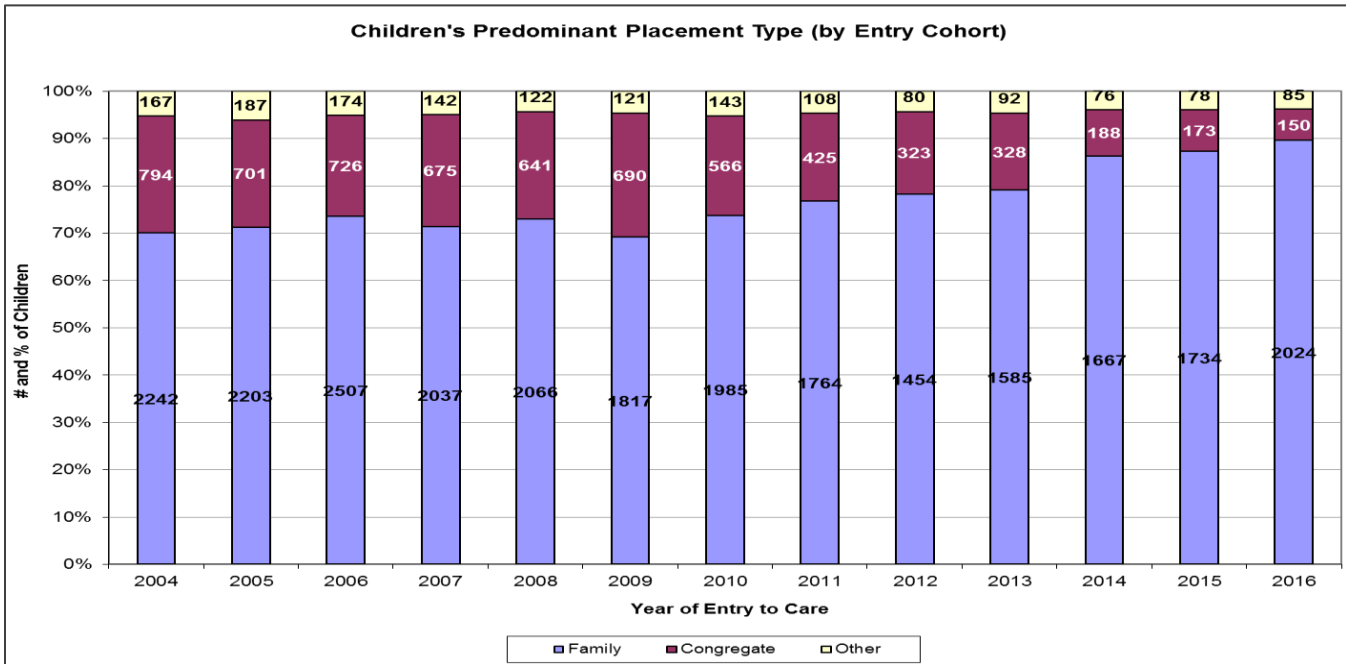
The next table shows specific care types used month-by-month for entries between April 2016 and March 2017.

| | | Case Summaries | | | | | | | | | | | |
|----------------------|---|----------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|
| First placement type | | enterApr16 | enterMay16 | enterJun16 | enterJul16 | enterAug16 | enterSep16 | enterOct16 | enterNov16 | enterDec16 | enterJan17 | enterFeb17 | enterMar17 |
| Residential | N | 1 | 4 | 2 | 5 | 5 | 3 | 3 | 2 | 3 | 3 | 2 | 2 |
| | % | 0.5% | 1.9% | 1.2% | 3.0% | 2.6% | 1.7% | 1.5% | 1.3% | 1.6% | 1.5% | 1.4% | 1.0% |
| DCF Facilities | N | 2 | 1 | 3 | | 3 | 1 | 2 | 2 | | 4 | 3 | 6 |
| | % | 1.0% | 0.5% | 1.8% | | 1.5% | 0.6% | 1.0% | 1.3% | | 2.0% | 2.2% | 2.9% |
| Foster Care | N | 111 | 106 | 73 | 80 | 90 | 92 | 124 | 73 | 100 | 94 | 86 | 120 |
| | % | 54.1% | 50.7% | 44.8% | 48.2% | 46.2% | 51.4% | 62.6% | 46.2% | 54.1% | 46.5% | 61.9% | 57.7% |
| Group Home | N | 1 | 2 | 1 | 5 | 1 | 3 | 1 | | 1 | 3 | 2 | |
| | % | 0.5% | 1.0% | 0.6% | 3.0% | 0.5% | 1.7% | 0.5% | | 0.5% | 1.5% | 1.4% | |
| Relative Care | N | 64 | 70 | 59 | 47 | 64 | 62 | 48 | 54 | 62 | 70 | 37 | 56 |
| | % | 31.2% | 33.5% | 36.2% | 28.3% | 32.8% | 34.6% | 24.2% | 34.2% | 33.5% | 34.7% | 26.6% | 26.9% |
| Medical | N | 6 | 7 | 5 | 6 | 6 | 7 | 7 | 10 | 5 | 8 | 4 | 4 |
| | % | 2.9% | 3.3% | 3.1% | 3.6% | 3.1% | 3.9% | 3.5% | 6.3% | 2.7% | 4.0% | 2.9% | 1.9% |
| Safe Home | N | 3 | 1 | 1 | 3 | 2 | 4 | 1 | 4 | 2 | 6 | 2 | 2 |
| | % | 1.5% | 0.5% | 0.6% | 1.8% | 1.0% | 2.2% | 0.5% | 2.5% | 1.1% | 3.0% | 1.4% | 1.0% |
| Shelter | N | 4 | 3 | 6 | 3 | 4 | 5 | 4 | 3 | 6 | 3 | 2 | 5 |
| | % | 2.0% | 1.4% | 3.7% | 1.8% | 2.1% | 2.8% | 2.0% | 1.9% | 3.2% | 1.5% | 1.4% | 2.4% |
| Special Study | N | 13 | 15 | 13 | 17 | 20 | 2 | 8 | 10 | 6 | 11 | 1 | 13 |
| | % | 6.3% | 7.2% | 8.0% | 10.2% | 10.3% | 1.1% | 4.0% | 6.3% | 3.2% | 5.4% | 0.7% | 6.3% |
| Total | N | 205 | 209 | 163 | 166 | 195 | 179 | 198 | 158 | 185 | 202 | 139 | 208 |
| | % | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |

The chart below shows the change in level of care usage over time for different age groups.



It is also useful to look at where children spend most of their time in DCF care. The chart below shows this for admission the 2004 through 2017 admission cohorts.



The following chart shows monthly statistics of children who exited from DCF placements between April 2016 and March 2017, and the portion of those exits within each placement type from which they exited.

| | | Case Summaries | | | | | | | | | | | |
|--|----------|----------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|
| Last placement type in spell (as of censor date) | | exitApr16 | exitMay16 | exitJun16 | exitJul16 | exitAug16 | exitSep16 | exitOct16 | exitNov16 | exitDec16 | exitJan17 | exitFeb17 | exitMar17 |
| Residential | N | 3 | 1 | 7 | 4 | 7 | 7 | 3 | 3 | 2 | 4 | 1 | 3 |
| | % | 1.6% | 0.7% | 3.0% | 1.9% | 2.8% | 4.1% | 1.9% | 1.4% | 1.8% | 3.4% | 0.9% | 2.4% |
| DCF | N | 1 | 1 | 2 | 4 | 2 | | | 2 | 4 | 1 | | |
| | % | 0.5% | 0.7% | 0.9% | 1.9% | 0.8% | | | 0.9% | 3.5% | 0.8% | | |
| Foster Care | N | 90 | 61 | 114 | 84 | 123 | 83 | 70 | 119 | 56 | 42 | 48 | 50 |
| | % | 49.2% | 40.9% | 48.7% | 39.4% | 49.4% | 49.1% | 44.0% | 55.1% | 49.6% | 35.3% | 44.9% | 40.7% |
| Group Home | N | 11 | 9 | 20 | 11 | 9 | 12 | 10 | 6 | 2 | 3 | 5 | 4 |
| | % | 6.0% | 6.0% | 8.5% | 5.2% | 3.6% | 7.1% | 6.3% | 2.8% | 1.8% | 2.5% | 4.7% | 3.3% |
| Independent | N | 2 | 3 | 3 | 4 | 3 | 1 | | 1 | 1 | 4 | 2 | 1 |
| | % | 1.1% | 2.0% | 1.3% | 1.9% | 1.2% | 0.6% | | 0.5% | 0.9% | 3.4% | 1.9% | 0.8% |
| Relative Care | N | 59 | 58 | 62 | 72 | 76 | 43 | 60 | 66 | 38 | 55 | 43 | 48 |
| | % | 32.2% | 38.9% | 26.5% | 33.8% | 30.5% | 25.4% | 37.7% | 30.6% | 33.6% | 46.2% | 40.2% | 39.0% |
| Medical | N | 2 | 2 | 4 | 7 | 2 | 5 | 1 | 1 | 1 | 3 | | |
| | % | 1.1% | 1.3% | 1.7% | 3.3% | 0.8% | 3.0% | 0.6% | 0.5% | 0.9% | 2.5% | | |
| Safe Home | N | | 1 | 3 | 1 | 2 | | 1 | 2 | | | 1 | 2 |
| | % | | 0.7% | 1.3% | 0.5% | 0.8% | | 0.6% | 0.9% | | | 0.9% | 1.6% |
| Shelter | N | 4 | 2 | 3 | 5 | 5 | 2 | 4 | 2 | 1 | 3 | | 3 |
| | % | 2.2% | 1.3% | 1.3% | 2.3% | 2.0% | 1.2% | 2.5% | 0.9% | 0.9% | 2.5% | | 2.4% |
| Special Study | N | 10 | 11 | 15 | 21 | 18 | 15 | 9 | 11 | 7 | 4 | 6 | 9 |
| | % | 5.5% | 7.4% | 6.4% | 9.9% | 7.2% | 8.9% | 5.7% | 5.1% | 6.2% | 3.4% | 5.6% | 7.3% |
| Unknown | N | 1 | | 1 | | 2 | 1 | 1 | 3 | 1 | | 1 | 3 |
| | % | 0.5% | | 0.4% | | 0.8% | 0.6% | 0.6% | 1.4% | 0.9% | | 0.9% | 2.4% |
| Total | N | 183 | 149 | 234 | 213 | 249 | 169 | 159 | 216 | 113 | 119 | 107 | 123 |
| | % | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |

The next chart shows the primary placement type for children who were in care on April 1, 2017 organized by length of time in care.

| Primary type of spell (>50%) * Duration Category Crosstabulation | | | | | | | | | | |
|--|--------------------|-------|-------------------|------------------|-------------------|--------------------|--------------------|---------------------|--------|----------------|
| | | | Duration Category | | | | | | Total | |
| | | | 1 <= durat < 30 | 30 <= durat < 90 | 90 <= durat < 180 | 180 <= durat < 365 | 365 <= durat < 545 | 545 <= durat < 1095 | | more than 1095 |
| Primary type of spell (>50%) | Residential | Count | 2 | 5 | 7 | 19 | 12 | 17 | 22 | 84 |
| | | % Row | 2.4% | 6.0% | 8.3% | 22.6% | 14.3% | 20.2% | 26.2% | 100.0% |
| | | % Col | 1.1% | 1.6% | 1.5% | 2.5% | 2.0% | 1.8% | 3.4% | 2.1% |
| DCF Facilities | DCF Facilities | Count | 5 | 5 | 3 | 5 | 5 | 2 | 0 | 25 |
| | | % Row | 20.0% | 20.0% | 12.0% | 20.0% | 20.0% | 8.0% | 0.0% | 100.0% |
| | | % Col | 2.8% | 1.6% | 0.7% | 0.7% | 0.8% | 0.2% | 0.0% | 0.6% |
| Foster Care | Foster Care | Count | 85 | 137 | 208 | 303 | 256 | 416 | 410 | 1815 |
| | | % Row | 4.7% | 7.5% | 11.5% | 16.7% | 14.1% | 22.9% | 22.6% | 100.0% |
| | | % Col | 47.2% | 43.2% | 45.6% | 39.7% | 41.8% | 44.6% | 62.5% | 46.3% |
| Group Home | Group Home | Count | 0 | 6 | 3 | 10 | 6 | 18 | 54 | 97 |
| | | % Row | 0.0% | 6.2% | 3.1% | 10.3% | 6.2% | 18.6% | 55.7% | 100.0% |
| | | % Col | 0.0% | 1.9% | 0.7% | 1.3% | 1.0% | 1.9% | 8.2% | 2.5% |
| Independent Living | Independent Living | Count | 0 | 0 | 1 | 0 | 0 | 0 | 2 | 3 |
| | | % Row | 0.0% | 0.0% | 33.3% | 0.0% | 0.0% | 0.0% | 66.7% | 100.0% |
| | | % Col | 0.0% | 0.0% | 0.2% | 0.0% | 0.0% | 0.0% | 0.3% | 0.1% |
| Relative Care | Relative Care | Count | 65 | 126 | 170 | 310 | 254 | 337 | 65 | 1327 |
| | | % Row | 4.9% | 9.5% | 12.8% | 23.4% | 19.1% | 25.4% | 4.9% | 100.0% |
| | | % Col | 36.1% | 39.7% | 37.3% | 40.6% | 41.4% | 36.1% | 9.9% | 33.9% |
| Medical | Medical | Count | 2 | 3 | 4 | 5 | 3 | 3 | 2 | 22 |
| | | % Row | 9.1% | 13.6% | 18.2% | 22.7% | 13.6% | 13.6% | 9.1% | 100.0% |
| | | % Col | 1.1% | 0.9% | 0.9% | 0.7% | 0.5% | 0.3% | 0.3% | 0.6% |
| Mixed (none >50%) | Mixed (none >50%) | Count | 1 | 4 | 2 | 8 | 8 | 37 | 70 | 130 |
| | | % Row | 0.8% | 3.1% | 1.5% | 6.2% | 6.2% | 28.5% | 53.8% | 100.0% |
| | | % Col | 0.6% | 1.3% | 0.4% | 1.0% | 1.3% | 4.0% | 10.7% | 3.3% |
| Safe Home | Safe Home | Count | 1 | 5 | 5 | 3 | 0 | 0 | 3 | 17 |
| | | % Row | 5.9% | 29.4% | 29.4% | 17.6% | 0.0% | 0.0% | 17.6% | 100.0% |
| | | % Col | 0.6% | 1.6% | 1.1% | 0.4% | 0.0% | 0.0% | 0.5% | 0.4% |
| Shelter | Shelter | Count | 4 | 5 | 13 | 10 | 3 | 1 | 1 | 37 |
| | | % Row | 10.8% | 13.5% | 35.1% | 27.0% | 8.1% | 2.7% | 2.7% | 100.0% |
| | | % Col | 2.2% | 1.6% | 2.9% | 1.3% | 0.5% | 0.1% | 0.2% | 0.9% |
| Special Study | Special Study | Count | 14 | 12 | 27 | 80 | 59 | 91 | 25 | 308 |
| | | % Row | 4.5% | 3.9% | 8.8% | 26.0% | 19.2% | 29.5% | 8.1% | 100.0% |
| | | % Col | 7.8% | 3.8% | 5.9% | 10.5% | 9.6% | 9.8% | 3.8% | 7.9% |
| Unknown | Unknown | Count | 1 | 9 | 13 | 11 | 7 | 11 | 2 | 54 |
| | | % Row | 1.9% | 16.7% | 24.1% | 20.4% | 13.0% | 20.4% | 3.7% | 100.0% |
| | | % Col | 0.6% | 2.8% | 2.9% | 1.4% | 1.1% | 1.2% | 0.3% | 1.4% |
| Total | Total | Count | 180 | 317 | 456 | 764 | 613 | 933 | 656 | 3919 |
| | | % Row | 4.6% | 8.1% | 11.6% | 19.5% | 15.6% | 23.8% | 16.7% | 100.0% |
| | | % Col | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% | 100.0% |

Congregate Care Settings

| Placement Issues | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|---|----------|----------|----------|----------|----------|----------|
| Total number of children 12 years old and under, in Congregate Care | 22 | 12 | 12 | 16 | 16 | 14 |
| • Number of children 12 years old and under, in DCF Facilities | 1 | 1 | 2 | 2 | 0 | 0 |
| • Number of children 12 years old and under, in Group Homes | 8 | 3 | 2 | 2 | 4 | 4 |
| • Number of children 12 years old and under, in Residential | 10 | 7 | 8 | 8 | 8 | 9 |
| • Number of children 12 years old and under, in Safe Home or SFIT | 1 | 0 | 0 | 2 | 2 | 1 |
| • Number of children 12 years old and under in Shelter | 2 | 1 | 0 | 2 | 2 | 0 |
| Total number of children ages 13-17 in Congregate Placements | 286 | 260 | 238 | 231 | 229 | 245 |

Use of SAFE Homes, Shelters and PDCs

The analysis below provides longitudinal data for children (which may include youth ages 18 and older) who entered care in Safe Homes, Permanency Diagnostic Centers and Shelters.

| | Period of Entry to Care | | | | | | | | | | | | | |
|-------------------------|-------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| Total Entries | 3203 | 3091 | 3407 | 2854 | 2829 | 2628 | 2694 | 2297 | 1857 | 2005 | 1931 | 1985 | 2259 | 549 |
| SAFE Homes/ SFIT | 453 | 394 | 395 | 382 | 335 | 471 | 331 | 145 | 68 | 56 | 30 | 9 | 23 | 10 |
| | 14% | 13% | 12% | 13% | 12% | 18% | 12% | 6% | 4% | 3% | 2% | 0% | 1% | 2% |
| Shelter | 147 | 178 | 114 | 136 | 144 | 186 | 175 | 194 | 169 | 175 | 91 | 58 | 53 | 10 |
| | 5% | 6% | 3% | 5% | 5% | 7% | 6% | 8% | 9% | 9% | 5% | 3% | 2% | 2% |
| Total | 600 | 572 | 509 | 518 | 479 | 657 | 506 | 339 | 237 | 231 | 121 | 67 | 76 | 20 |
| | 19% | 19% | 15% | 18% | 17% | 25% | 19% | 15% | 13% | 12% | 6% | 3% | 3% | 4% |

| | Period of Entry to Care | | | | | | | | | | | | | |
|------------------------------|-------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| Total Initial Plcmnts | 249 | 241 | 186 | 162 | 150 | 229 | 135 | 103 | 60 | 63 | 37 | 28 | 28 | 14 |
| <= 30 days | 41.5% | 42.1% | 36.5% | 31.3% | 31.3% | 34.9% | 26.7% | 30.4% | 25.3% | 27.3% | 30.6% | 41.8% | 36.8% | 70.0% |
| | 102 | 114 | 73 | 73 | 102 | 110 | 106 | 56 | 44 | 41 | 27 | 9 | 13 | 6 |
| 31 - 60 | 17.0% | 19.9% | 14.3% | 14.1% | 21.3% | 16.7% | 20.9% | 16.5% | 18.6% | 17.7% | 22.3% | 13.4% | 17.1% | 30.0% |
| | 81 | 76 | 87 | 79 | 85 | 157 | 91 | 54 | 39 | 38 | 18 | 8 | 8 | 0 |
| 61 - 91 | 13.5% | 13.3% | 17.1% | 15.3% | 17.7% | 23.9% | 18.0% | 15.9% | 16.5% | 16.5% | 14.9% | 11.9% | 10.5% | 0.0% |
| | 124 | 100 | 118 | 131 | 110 | 124 | 136 | 84 | 56 | 57 | 24 | 15 | 17 | 0 |
| 92 - 183 | 20.7% | 17.5% | 23.2% | 25.3% | 23.0% | 18.9% | 26.9% | 24.8% | 23.6% | 24.7% | 19.8% | 22.4% | 22.4% | 0.0% |
| | 44 | 41 | 45 | 73 | 32 | 37 | 38 | 42 | 38 | 32 | 15 | 7 | 10 | 0 |
| 184+ | 7.3% | 7.2% | 8.8% | 14.1% | 6.7% | 5.6% | 7.5% | 12.4% | 16.0% | 13.9% | 12.4% | 10.4% | 13.2% | 0.0% |
| | 600 | 572 | 509 | 518 | 479 | 657 | 506 | 339 | 237 | 231 | 121 | 67 | 76 | 20 |

The following is the point-in-time data taken from the monthly LINK data, and may include those youth ages 18 and older.

| Placement Issues | Nov 2015 | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Total number of children in SAFE Home/SFIT | 4 | 5 | 7 | 9 | 8 | 8 | 8 |
| • Number of children in SAFE Home/SFIT, > 60 days | 4 | 5 | 1 | 4 | 4 | 4 | 3 |
| • Number of children in SAFE Home/SFIT, >= 6 months | 2 | 2 | 0 | 1 | 1 | 0 | 0 |
| Total number of children in STAR/Shelter Placement | 39 | 34 | 29 | 32 | 24 | 29 | 29 |
| • Number of children in STAR/Shelter Placement, > 60 days | 22 | 18 | 19 | 19 | 13 | 16 | 12 |
| • Number of children in STAR/Shelter Placement, >= 6 months | 6 | 3 | 5 | 4 | 5 | 5 | 2 |
| Total number of children in MH Shelter | 2 | 1 | 0 | 0 | 0 | 0 | 0 |
| • Total number of children in MH Shelter, > 60 days | 1 | 1 | 0 | 0 | 0 | 0 | 0 |
| • Total number of children in MH Shelter, >= 6 months | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Time in Residential Care

| Placement Issues | Nov 2015 | Feb 2016 | May 2016 | Aug 2016 | Nov 2016 | Feb 2017 | May 2017 |
|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Total number of children in Residential care | 103 | 105 | 99 | 91 | 81 | 89 | 86 |
| • Number of children in Residential care, >= 12 months in Residential placement | 21 | 25 | 32 | 27 | 19 | 22 | 24 |
| • Number of children in Residential care, >= 60 months in Residential placement | 1 | 2 | 2 | 2 | 0 | 1 | 0 |

Appendix A

**Commissioner's Highlights from: The Department of Children and
Families Exit Plan Outcome Measures-Status Report
(October 1, 2016 – March 31, 2017)**

Commissioner Statement

June 26, 2017

Now in my seventh year as Commissioner of the Department of Children and Families, I have learned a great deal. One of the most important is that public child welfare agencies can control some things, but are unable to control others. One thing that we cannot control is how many times the phones at the Careline rings – most typically because a mandated reporter feels obligated to report suspicion of abuse or neglect. In 2017, Careline calls are projected to reach nearly 114,000. In 2014, calls had yet to cross the threshold of 100,000. This surge is not unique to Connecticut. Headlines from across the country reflect the widely-held view that substance use – specifically opioids – is fueling this trend. No public child welfare agency in the country can stem this tide by itself, and neither can we in Connecticut.

In addition, in Connecticut we face a daunting fiscal situation that continues to elude a quick or simple solution. Up until this point, we at the Department have been able to improve how we serve children and families – even as we spend considerably less than under the previous Administration. We reduced the number of children in care who are served in congregate settings by two-thirds since 2011, and we did it because we are convinced that children are better off when living in families instead of institutions. This huge shift in the shape of our foster care system, however, also allowed the Department to reduce spending by substantial amounts. We are literally doing better work with less resources. To illustrate, our expenditures in State Fiscal Year 2009 exceeded \$850 million and in SFY2017, it projects at less than \$795 million.

Of course, there comes a point at which doing more with less becomes unattainable. The Court Monitor's recent time study shows that meeting all the responsibilities of a social worker is not possible – even with considerable overtime hours. This is especially true as our remaining cases become more and more complex and as less complicated cases are handed off to community providers via our Differential Response System. We are approaching the point where restricted resources are limiting our work with children and families.

One of the ways we are putting off that inevitability is through creative resource development. The expansion of substance use treatment seeded through a public private partnership in our “Pay For Success” project serves as one example. Five hundred additional families will benefit from the Family Based Recovery program as a result. In addition to this expanded service, earlier in June, Governor Malloy announced a \$3.1 million federal grant obtained by the Department of Children and Families to fund new long-term substance use recovery services for teenagers and youth in transition. This will help provide long-lasting support services that are necessary because relapses are so common on the road to recovery. We know that one-time, short-term services are insufficient to achieve lasting success.

Our staff and management will continue to find and implement innovative social work and administrative solutions to improve services. We are determined to meet the daunting challenges we face in this social and fiscal environment and are hopeful of receiving the necessary support from our many partners – including the families and children we serve.