Foster Care Case Review

of the

Oklahoma Department of Human Services

Center for the Support of Families (CSF), Inc.
Silver Spring, Maryland
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**EXECUTIVE SUMMARY**

This report provides the findings of a review of a statistically representative sample of cases of children in the custody of the Oklahoma Department of Human Services (OKDHS). The time frame covered by the review of each child’s case is from the time of the child’s most recent entry into OKDHS custody until June 1, 2010.

The Center for the Support of Families, Inc. (CSF) conducted the review under the direction of Dr. Jerry Milner, Vice President for Child and Family Services. Dr. Milner was previously the manager of the Federal Child and Family Services Reviews (CFSR) with the Children’s Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Prior to that, he was the State child welfare director for the Alabama Department of Human Resources.

The data analysis for the findings reported herein was conducted by Dr. Jacqueline Smollar, an independent consultant who has analyzed data from the National Child Abuse and Neglect Data System (NCANDS) and the Federal Adoption and Foster Care Analysis and Reporting System (AFCARS), prepared state-specific and national data tables pertaining to 27 national child welfare measures, and wrote the Annual Report to Congress required under the Adoption and Safe Families Act (ASFA). She was responsible for analyzing the data from each State’s CFSR, writing the individual State reports, analyzing cross-State data pertaining to CFSR findings, and preparing a report summarizing the findings.

This report documents serious concerns about the care of children in custody of OKDHS, as follows:

**Maltreatment of Children in Foster Care**

When children are committed by the courts to the custody of the State child welfare agency, e.g., OKDHS, the agency assumes responsibility for ensuring that the children are protected from harm. The shortcomings we found on the part of OKDHS in this area are among our primary and most substantial concerns from the review.

The key findings with regard to the maltreatment of children while they are in OKDHS custody are the following:

- 21.4 percent of children in the sample were the subject of a maltreatment allegation while in OKDHS custody that was substantiated or where there was sufficient concern to recommend services even though the allegation was not substantiated; 12 percent of children in the sample were the subject of a maltreatment allegation while in OKDHS custody that was substantiated.

- 78 percent of the alleged perpetrators of maltreatment of children in OKDHS custody were foster parents.
In 27 (24.8%) of the 109 cases involving maltreatment reports that were investigated, reviewers reported that no actions were identified in the case file as taking place either during the investigation or after the investigation other than to investigate the report.

Adequate safety assessments were conducted prior to a trial reunification in only 45 (45.5%) of the 99 cases in which the child was in a trial reunification placement at some time during the child’s most recent entry into OKDHS custody.

The following are the key findings with regard to the child and family histories of maltreatment:

- The families in 344 cases (92% of the families) in the sample had at least one prior maltreatment report before the report that resulted in the child’s most recent entry into OKDHS custody. One-fourth (25.1%) of the families of all children in the sample had 10 or more such prior reports.

- 65 percent of the children in the sample were identified in at least one prior maltreatment report with a disposition of services or court involvement recommended; 23.8 percent of the children were identified in four or more such prior reports.

Placement Stability for Children in OKDHS Custody

Apart from the incidence of child maltreatment reports of children in the custody of OKDHS, the bouncing of children in OKDHS custody from one placement setting to another, sometimes over the course of years, and the use of congregate shelter care facilities as placements for infants is one of the most disconcerting findings of this review. This report documents the string of placements that are often short-term in duration and apparently made without regard to the needs of the individual child that many children in OKDHS custody experience.

Key findings with regard to the number of placements experienced by the children in our sample by June 1, 2010 are provided below:

- Only 30 (8.0%) of the 374 children in the sample had been in a single, stable placement during their most recent entry into OKDHS custody.

- 205 (54.8%) of the children in the sample experienced four or more placement settings during their most recent entry into OKDHS custody; 52 (13.9%) children experienced 10 or more placement settings.

- The most frequent reason given by OKDHS for moving children from the first to second placement was because they needed a less restrictive placement, raising concerns about the appropriateness of the children’s initial placements.
OKDHS did not offer any services to foster caretakers to prevent placement changes in 76 percent of the cases or to children in 72 percent of the cases in which it would have been appropriate to try to prevent the placement change.

The following are our key findings with regard to the relationship between the child’s age at entry into custody and on June 1, 2010 and the number of placements:

- 49.2 percent of the 264 children with three or more placement settings were younger than 5 years old when they entered OKDHS custody.
- 15 (19.2%) of the 78 children who entered OKDHS custody when they were younger than 12 months old experienced six or more placements by June 1, 2010.
- 18 (51.4%) of the 35 children in the sample who entered OKDHS custody when they were age 13 or older experienced six or more placements by June 1, 2010.
- 38 (49.4%) of the 77 children who were younger than age three on June 1, 2010 had already been in three or more placements, and 10.4 percent of those children had already been in six or more placements.

Our findings regarding the relationship between time in custody and number of placements include the following:

- 43.4 percent of children in custody for less than 12 months had three or more placement settings.

Key findings pertaining to the placement of children in shelters are the following:

- 59.4 percent of the children in the sample were placed in temporary shelter care upon entering custody.
- 52.4 percent of the 141 children who entered OKDHS custody between January 1, 2009 and December 31, 2009 were placed in a shelter as their initial placement.
- 28 (35.9%) of the 78 children in the sample who were infants (i.e., younger than age one) at the time of their entry into OKDHS custody were initially placed in a shelter.
- 42.9 percent of the infants and 18.7 percent of children aged 5-10 who entered shelter care upon entry into custody remained there longer than permitted under OKDHS policy.
- The use of shelter care as an initial placement for children in the sample did not increase the likelihood of future placement stability for those children. Of the 222 children whose initial placement was in a shelter care facility, 84.2 percent (187 children) had at least two additional placements after the shelter placement, i.e., they experienced three or more placements while in OKDHS custody.
The following key findings emerged in our analysis of the duration of placements:

- Many children moved from one short-term placement to another. Of children with at least two placements, almost three-quarters spent less than one month in the first placement. Of children with at least three placements, almost one-half spent less than one month in the second placement.

Our major finding with regard to placing children with relatives is as follows:

- Among the first four placement settings for children in the sample, there were 243 placements with relatives. Of these placements, 131 (53.9%) disrupted and the children were moved to another placement.

Findings with regard to incidences of child behavior problems while in a placement under OKDHS custody are the following:

- When compared to children in custody for less than six months, children in custody for more than six months had substantially higher identified incidences of school-related behavioral problems, aggressiveness, sexual acting out, hyperactivity, and unusual or abnormal behaviors.

- Only 4.2 percent of the actions taken by OKDHS in response to child behavior problems involved providing services to the caretaker.

Achieving Permanency for Children in OKDHS Custody

It is not enough for a child welfare agency to remove children from harmful environments. Upon taking custody of children, the agency is also responsible for moving children in its custody to safe and permanent living situations, either through adoption, reunification with the family, permanent placement with relatives, or another acceptable permanency plan.

Our reviews in this area yielded the following key findings:

- As of June 1, 2010, 49 percent of the children in the sample had been in OKDHS custody for two years or longer and 30.7 percent had been in custody for three years or longer.

- The older the child was on June 1, 2010, the more likely the child was to have been in OKDHS custody for a longer period of time, suggesting that many of the older children in the sample aged while in OKDHS custody, rather than entering custody at older ages.

- Children in the case review sample experienced multiple permanency goal changes, with 35.2 percent having three or more different consecutive permanency goals by June 1, 2010. The longer the child was in foster care, the more likely he or she was to have multiple permanency goal changes.
We examined the provision of services to children in OKDHS custody and their caretakers that may impact children’s safety, permanency, and well-being.

The following are the key findings reported in this area:

- The appropriateness of the child’s permanency plan and steps taken to achieve the goal for the child were documented in less than two-thirds (62.3%) of the case plans, despite Federal and OKDHS requirements to include them in the case plans of all children in foster care.

- Almost one-half of the cases (45.2%) did not identify the services to be provided to the child in the case planning documents, despite OKDHS policy requiring this information to be included in the official case plan.

- Of the 242 children in the sample who were age five at the start of the September 2009 school year, 48 (19.8%) did not have information regarding school performance in their case file, despite Federal requirements to include educational information in the case plans.

- The child’s health record was not included in 70.9 percent of children’s case plans, despite Federal requirements to include it in all case plans for children in foster care.

- In 31 percent of the cases, the child’s caseworker or supervisor did not visit the child at least monthly while the child was in custody during the review period from June 2009-May 2010, despite OKDHS policy requiring monthly visits. For 41 percent of the months during which a caseworker or supervisor did not visit the child, there was no indication in the case file that an attempt to arrange a visit was made.

- Only 10 (25%) of the 40 youth in the case review sample who were eligible for Independent Living (IL) services as of March 1, 2010 had an IL plan in their file. Of these 10 youth, only six ever received the IL services that were specified in their plan.

When children are removed from their parents, sometimes the only family connections they have left are their relationships with brothers and sisters. Both the State of Oklahoma and the Federal government recognize this through policy that foremost encourages the placement of brothers and sisters together when they cannot remain with their parents and calls for frequent visitation when separation in foster care is unavoidable.

CSF reviewed the cases to determine whether or not brothers and sisters who were in custody of OKDHS were placed together while in foster care, and if they were not, to identify the documented reasons for not placing them together. For brothers and sisters who were separated...
in different foster care placements, we also identified the frequency of their visits with each other during the 12-month period ending on May 31, 2010.

The following are the key findings with respect to sibling placements and visitation:

- Of the 285 children with siblings in OKDHS custody, 13 percent (37) were not placed together with all of their siblings and either no justification was provided or the only justification provided was that the agency could not find a home that would take the sibling.

- One out of every five eligible children had no visits with their siblings in separate foster care placements during the 12 months prior to June 1, 2010.

### Caseworker Turnover

The turnover of caseworkers assigned to a child’s case is a critical issue because one of the key concerns for children in foster care is establishing connections with caring adults. This report establishes that the extreme lack of placement stability and the frequency of very short-term placements make it highly unlikely that many children in OKDHS custody will be able to establish caring and stable relationships with their foster caretakers. The findings regarding the extensive amount of caseworker turnover also make it highly unlikely that children will be able to develop stable relationships with their caseworkers or achieve appropriate and timely permanency outcomes. Also, as noted in the literature reviews, the research links caseworker turnover to delays in achieving permanency for children in foster care.

Among the key findings of the case review in this area are the following:

- 36 children (9.6%) had 10 or more secondary caseworkers assigned while in OKDHS custody, and 29.1 percent of children had five or more primary caseworkers.

- There was a significant relationship between the number of primary caseworkers and the number of consecutive permanency goals established for the child. Over one-half of the children who had four or more permanency goals while in OKDHS custody also had five or more primary caseworkers assigned to them.

- There was a significant relationship between the number of caseworkers and the length of time before a child became free for adoption. Of the 30 children who were in foster care for three years or longer before becoming free for adoption, 19 (63.3%) had five or more caseworkers.
In addition to the statistical findings regarding different areas of practice, reviewers also noted many issues with the quality of documentation in and the organization of the case files. The following were identified as primary areas of concern related to the quality of the case files:

- lack of documentation;
- non-related case information in the file;
- multiple copies of the same document;
- documents in random order;
- incomplete, missing or disorganized contact notes;
- missing court hearing reports;
- minimal health (physical and dental) information;
- insufficient school records;
- inadequate documentation of foster parent contacts;
- unsigned service plans and progress reports; and
- lack of detail regarding placement changes.

Although many of the findings of this review are cause for great concern about the care that OKDHS provides to children in its custody, the greatest concerns are those associated with the maltreatment of children while in custody and the movement of children from placement to placement while in custody because of their impact on the overall safety and well-being of children, which public child welfare agencies are charged to protect.
INTRODUCTION

The Center for the Support of Families (CSF) conducted the following review of a statistically valid sample of cases of children served by the Oklahoma Department of Human Services (OKDHS). The 374 children included in the case review had been in the custody of OKDHS for at least 60 days as of March 1, 2010. CSF was retained by Children’s Rights, Inc., to conduct the case review and to provide expert witness services pursuant to the D.G. et al v. Henry et al class action lawsuit.

CSF collaborates with government and private entities to improve services and outcomes for children and families. A privately-held woman-owned business incorporated in Maryland in 1991, CSF has an extensive history of working with child welfare services in general, as well as with the many related programs that provide services to those in need. CSF staff has vast experience working across agencies and with related human service programs to provide evaluations and needs assessments, research and analysis, recommendations and reports, as well as curriculum development and delivery to implement and augment their processes. CSF provides technical assistance to child welfare programs and child support programs, and also in the areas of Temporary Assistance to Needy Families (TANF), mental health, and public health.

Since its inception, CSF has worked on 44 Federal and 91 State human service contracts. Additionally, we have worked on 11 county and 10 city contracts, as well as for 22 private/non-profit organizations. CSF has been responsible for the development of more than 52 sets of training curricula, 37 training programs, and provided training to over 26,000 child welfare and health and human services staff.

CSF’s most recent work has focused on:

- Developing and implementing State child welfare practice models;
- Facilitating state development of Program Improvement Plans (PIP) and understanding the Child and Family Service Reviews (CFSR);
- Designing major child welfare reform efforts and program improvement strategies;
- Collaborating with private providers, the courts, and the community stakeholders;
- Coordinating and utilizing the federally funded Resource and Implementation Center resources;
- Developing community-based services and systems of care;
- Designing and installing child welfare quality assurance and Continuous Quality Improvement (CQI) systems;
- Planning for resource family recruitment and retention;
• Training for State Automated Child Welfare Information Systems (SACWIS);
• Developing and providing technical assistance and training for child welfare practice; and
• Evaluating child welfare performance through program assessments (including case reviews), analyzing data, and developing reports to facilitate understanding and opportunities for policy development and program and practice improvements.

The Project Director of this case review, who provided oversight for all of the project activities, was Jerry Milner, DSW. Dr. Milner has worked in child welfare for almost 37 years, serving as a child welfare caseworker, supervisor, and adoption manager, and retiring from the Alabama Department of Human Resources as the State child welfare director. He later helped to develop and managed the Federal Child and Family Services Review (CFSR) for the Children’s Bureau, Administration for Children and Families, U.S. Department of Health and Human Services, and oversaw the Federal review of every State’s child welfare program and the resulting Program Improvement Plans. He has been the Vice President for Child and Family Services for CSF since January 2008, and provides technical assistance to States seeking to make improvements in their child welfare services to children and families. His resume is attached in Appendix A of this report.

The data presented in this report were analyzed by Jacqueline Smollar, Ph.D. Dr. Smollar is an independent consultant with extensive experience conducting research and program evaluation in the areas of services to children, youth, and families and child and adolescent development, and providing program and evaluation-related technical assistance to State agencies and non-profit service organizations. Over the past two decades, she has conducted program evaluations, developed outcome assessments and performance standards, and provided evaluation and programmatic technical assistance in child welfare and other child and family serving programs. She was the lead writer on two evaluation guides for program managers, one written under a contract with the Administration for Children, Youth and Families (A Program Manager’s Guide to Evaluation), and the other for the Office of the Assistant Secretary for Policy and Evaluation (Evaluating Privatization Initiatives in Child Welfare: A Guide for Program Managers). Her resume is attached in Appendix B of this report.

CSF used several documents to help us understand the issues subject to review and the OKDHS policies and procedures to ensure that our review instrument and procedures would capture the necessary information. A list of the documents reviewed is provided in Appendix C. We also relied on reports of research studies on issues addressed in the case review in order to document the effects of certain child welfare practices. Those reports are identified in the References section of this report.

This report provides our case review methodology followed by key findings of the case review.
METHODOLOGY

Case Review Instrument

The instrument that we used for the case review included a total of 1,134 items organized into six practice areas: Demographic Information and Current Status; Case Planning and Case Management; Family Visits; Services; Placement and Adoption Services; and Placement Safety. We included items in the instrument that we understood to pertain to the issues before the Court in the *D.G. et al v. Henry et al* case, in addition to other items pertaining to children in custody of State child welfare agencies. The instrument can be found in Appendix D. We pilot tested the instrument on four cases prior to using it in the review and made any needed modifications based on the pilot reviews.

Sampling Process

CSF reviewed a sample of 374 cases randomly selected from the list provided by OKDHS of 6,701 children who had been in OKDHS foster care custody for a minimum of 60 days as of March 1, 2010 (the sample date for the review). Using a standard sample size calculator,1 CSF determined that a review of 363 children from the population was required to meet the statistically valid requirement for a sample with a 95 percent confidence level and at least a 5 percent confidence interval. CSF rounded up the sample size to 375 and ultimately reviewed 374 cases because one case was deleted from the sample because it did not meet the sampling criteria. With a total review of 374 cases, the confidence interval was tightened to 4.92.2

CSF selected a simple random sample where every case in the population had an equal chance of being selected for review and analysis with the exception of children in congregate care placements (residential facilities, shelters, and group homes). Due to the nature of the issues raised in the legal documents in the case, we determined that stratifying the sample along various characteristics of the children was unnecessary with the exception of children in congregate care. Because of the relatively small percentage of children identified with a congregate care placement type (6.55%), we thought it was necessary to stratify the sample for this variable to ensure a representative sample of children with these placement types.

From the list of 6,701 children in foster care provided by OKDHS, we extracted the 439 children identified with congregate care placement types.3 Utilizing an electronic random number sequence generator,4 we selected the first 24 cases (6.4% of the case review sample and roughly proportional to the total population percentage with these placement types) to represent

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1 The Survey System, accessed at http://www.surveysystem.com/sscalc.htm#one
2 We did not replace the one case that we rejected because the confidence interval of 4.92 was the same for a sample of 375 or 374 cases.
3 While we understood that the placement category designated as “other placements” on the list provided by OKDHS may have also included some congregate care placements in addition to other non-congregate care placements, CSF could not guarantee that a random selection of cases from that placement type would identify children in congregate care placements and, therefore, excluded that placement type from the stratification of children in congregate care.
4 Accessed at www.random.org
the congregate care population. We re-sorted the remaining 6,262 cases by case number order (as OKDHS had provided the cases to us) and utilizing the same generator, selected the first 401 cases. The first 351 cases were used in the sample population, and the additional 50 were chosen as a precautionary oversample in the event that we needed to reject cases from the original sample because they did not meet the sampling criteria. Using the oversample of cases was ultimately unnecessary for the case review.

Proportionally, the sample population is generally representative of the total population of children in OKDHS custody based on the child’s most recent case plan goal and placement type. Information describing the representativeness of the sample is located in Appendix E.

**Case Reviews**

The Project Director oversaw all aspects of the project. He was supported by a Project Manager, a Project Coordinator, and a Data Analyst. There were 20 case reviewers comprised of 10 CSF staff and 10 consultants, most of whom had significant case review experience with the Federal Child and Family Services Review (CFSR).

Three training sessions were held during June and July of 2010 for the case reviewers. The training provided information on the following areas: reason for the case review including background of the *D.G. et al v. Henry et al.* case; performance expectations; confidentiality; case review process and flow; logistics; quality assurance process; inter-rater reliability process; and a review of the instrument.

The case review was conducted over a period of six months from June to December 2010. During this period, the Project Director and Project Manager provided ongoing supervision, support, and guidance to all case reviewers. In addition, the Project Coordinator assigned cases for review, selected cases for inter-rater reliability reviews, assigned cases for quality assurance reviews, and provided assistance regarding logistics and coordination.

Reviewers considered all information in the file from the date of the child’s most recent entry into OKDHS custody through June 1, 2010, although some questions pertained to a 12-month period of time for all children in the sample.

**Inter-Rater Reliability Reviews**

In order to determine the level of agreement between multiple reviewers CSF conducted an inter-rater reliability (IR) review of 9.1 percent (n=34) of the cases selected in the sample. Every case reviewer participated in at least one IR review. We conducted the IR reviews at the beginning of the reviewer’s tenure on the project in order to identify and respond to any training needs early in the review process. The overall rate of agreement was 94.0 percent for all cases with a range of 88.7% – 97.0%.
Quality Assurance Reviews

CSF also conducted a quality assurance (QA) review of each of the 374 cases reviewed. QA reviewers used a set of guidelines (see Appendix F) to review each completed instrument to ensure it was complete, the responses were consistent across correlated sections of the instrument, and the source information was accurate. The QA reviewer documented any identified issues on the QA form. The original reviewer then revised and finalized the instrument as needed based on the QA review. Cases that were selected for an inter-rater reliability review had the IR review completed prior to the QA review. The order of the case record review process was as follows:

Security and File Management

OKDHS provided electronic case files in PDF format for each child in the sample to Children’s Rights (CR), and the files were transferred from Children’s Rights to CSF. All files produced by OKDHS were stored by CR and CSF on secure File Transfer Protocol (FTP) sites with restricted access. CR and CSF set up separate FTP sites. All case reviewers set up access to the secure FTP site managed by CSF on their individual computers in compliance with technical guidelines provided by CSF. They downloaded files for review from the CSF FTP site and uploaded the completed data entry form to the site.

OKDHS generated 17 productions of files. Each production contained multiple cases, with multiple files for each case. There were several additional productions of files that supplemented case file information already provided. For each production, OKDHS provided an Index of Documents that included an OKDHS Case ID number and a unique child number generated by OKDHS for each child whose file was produced. CSF developed an encrypted case tracking log in Excel that was based on a CSF Case Review ID number created from the first three digits of the unique child number.

Once the Project Coordinator determined that an instrument was finalized after the QA review, the case reviewer was notified that all documents were to be deleted from the case reviewer’s computer. The Project Coordinator transferred the data from the 374 completed instruments to a PASW 18 database. The Data Analyst used PASW 18 to conduct the analysis for this project.
Quality, Documentation, and Organization of Case Files

CSF case reviewers reviewed electronic files provided by OKDHS using Adobe Acrobat 9 Standard software. For each case there was a minimum of one KIDS\(^5\) file and one OPPC\(^6\) file, and cases frequently had three or more files. The KIDS file is a set of documents generated from the OKDHS KIDS system, a state automated child welfare information system. Documentation contained in the KIDS files included contact forms, individual service plans, individual service plan progress reports, court reports, demographic data, and other automated forms. The OPPC file is a set of documents maintained by the child’s worker in the physical case record. It included scanned versions of the hard copy of some of the documents listed above as well as court orders, petitions, referral forms and other hard copy forms. Both of these files ranged in size with some cases containing several hundred pages of documents, and others containing over 10,000 pages. In addition to the variable range in the size of the files, there was a significant variation in the types of documentation that were included in both the OPPC and KIDS files across all of the cases selected in the sample. As an example, while some files for children who were in care for similar periods of time included multiple court orders, others included none. Overall, the case reviewers reported that finding information in the files was challenging. The following were identified as the primary areas of concern.

- **Lack of documentation:** Information was frequently missing, making it difficult to discern a chronological history of services provided to the child, the family, and the foster families. There were gaps in historical information, medical and dental documentation, and education information, just to name a few. Documentation of parent-child and sibling visitation was sporadic and frequently generalized, or completely missing, especially when the visits were supervised by foster parents. The following table provides information on some of the documentation issues that we encountered.

### Table 1
Documents not Present in the Files

<table>
<thead>
<tr>
<th>Document not Present</th>
<th>Number of Applicable Cases</th>
<th>Number of Documents not Present</th>
<th>Percent of Documents not Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Individual Service Plan (Form 04KI005E)</td>
<td>374</td>
<td>248</td>
<td>66.3</td>
</tr>
<tr>
<td>Parent Individual Service Plan</td>
<td>374</td>
<td>76</td>
<td>20.3</td>
</tr>
<tr>
<td>Placement provider information</td>
<td>374</td>
<td>307</td>
<td>82.1</td>
</tr>
<tr>
<td>Parent-child visitation plan</td>
<td>374</td>
<td>185</td>
<td>49.5</td>
</tr>
<tr>
<td>Parent-child visitation history</td>
<td>374</td>
<td>93</td>
<td>24.8</td>
</tr>
<tr>
<td>Court reports from permanency hearings(^7)</td>
<td>291*</td>
<td>70</td>
<td>24.1</td>
</tr>
</tbody>
</table>

\(^*\)Applicable cases are those where the child was in foster care for six months or longer.

---

\(^5\) KIDS is the OKDHS Statewide Automated Child Welfare Information System.

\(^6\) Open Permanency Planning Case (OPPC)

\(^7\) According to OAC 340:75-6-40.5, a permanency hearing is held no later than six months after placing the child in out-of-home placement and every six months thereafter.


- **Non-related case information:** Extraneous information that was not related to the child and family that were the subject of the case was found in numerous case records. Some examples include clinical reports and court documents for other non-related children. In one case, the reviewer found a recipe for cake.

- **Multiple copies:** It is understandable that some documents would appear in both the KIDS file and the OPPC file, as the OPPC file contains hard-copy reports and forms that are generated electronically via the KIDS system. However, there were multiple copies of various documents in the same file type as well as across file types (KIDS vs. OPPC). This was consistent throughout the sample. The most commonly duplicated documents were individual service plans (ISP), individual service plan progress reports, and contact forms. One reviewer found 10 copies of the same family/child strengths and needs assessment in the same file.

- **Documents in random order:** While many reviewers did find section dividers in the KIDS and OPPC files that listed the documents that should be in that section, these were often out of order and the documents identified as being in that section were scattered throughout the scanned file. For example, in one case, the section heading “Legals” indicated that Affidavit(s), Temporary custody order(s), Summons, and Petition(s) would be included in this section, but these documents were actually found in the section identified as “Education” or “Medical”. In many cases, the “Report to District Attorney” and “Associated Referral Information” were scattered throughout the files. In one case, ISPs were followed by education records, interspersed with clothing authorization requests. These documents were followed by a Law Enforcement Admission form, drug screening receipt, copies of emails, hand-written notes, Cardholder-Transaction Reports, and then an occasional Permanency Review Order and other court records.

- **Contact notes:** Reviewers noted several areas of concern regarding contact notes, which were found in two sections of the case record, labeled as either “case contacts” or “contacts.” The contacts documented in the “case contacts” section were usually more comprehensive. Sometimes information regarding the same contact was in both sections, and sometimes a contact was only found in one section. There did not appear to be a justification for this. The contact notes were often not in chronological order. For example, in some cases one could find all of the June notes for several years grouped together, then all the July notes for several years, etc., while in other cases the contact notes were randomly scattered throughout the file. Also, the quality of case notes varied tremendously from worker to worker. Some workers were very thorough and others were not. For example, in the contact note section labeled “medical/dental/immunizations/medications” a worker would write that the child was “current on immunizations” over the course of several months, while others would document each medical/dental appointment that occurred since the last home visit.

- **Court-related documents:** There were two major categories of court-related documents in the files: court reports prepared by OKDHS and court hearing documents generated by the court. Reviewers frequently found court reports in the files, but many of the court hearings referenced in the KIDS file “case hearing detail” section were not supported by
corresponding court hearing documents in the OPPC file. In addition, the narrative in the case hearing detail section was often cut off mid-sentence by what appeared to be some sort of character limitation in the KIDS system, making it difficult to discern what occurred at the hearing. There was significant variation in the format of court hearing documents, which made it difficult to discern the findings of the hearing. It was also difficult to determine what permanency goal was approved since there were inconsistencies between the court reports, court hearing documents, and ISPs.

- **Health (Physical, Dental):** Comprehensive health information was rarely included in the files. The medical/health-related information provided was rather limited and could sometimes be pieced together with case notes. Documentation of medical concerns was limited, even when there was clear documentation that a child had specific medical needs. In many cases, there was documentation that the foster parent or placement provider only took children to a doctor if the child was sick, that is, case notes indicated that child “is not sick so they have not been to the doctor.” Reviewers often found documentation that the foster parents reported that the child had a physical, but there was no further documentation from the healthcare provider to support the information provided by the foster parent.

- **Education:** It was challenging to track school changes and educational issues. While reviewers were able to identify that the children changed schools, it was difficult to determine the dates of enrollment, the reason for the school change, and the name of the school that the child was changing to. It was also difficult to find information on grades and performance. Some cases contained report cards and performance reports; many did not.

- **Foster parent contacts and services:** While many contact notes referenced a visit with the child at the “placement provider”, i.e. the foster home, there was no indication that the worker met with the foster parent. The foster parent was frequently not listed as a client/collateral participant for that home visit. In addition, while the reason for a placement change from a foster home was frequently because the foster parent “requested the change due to the child’s behavior,” many reviewers reported that they saw little evidence of any work specifically with foster parents to help them meet the needs of the child and enable the child to remain in the home.

- **Individual Service Plan (ISP) and Individual Service Plan Progress Report:** Reviewers reported rarely finding signed and dated copies of ISP and ISP Progress Reports in both the KIDS and OPPC files. While many of the ISPs contained a date that a court hearing was scheduled for, it was difficult to determine the date an ISP was written. It did not appear that the sections designated to identify the “creation date” and “modification date” were consistently completed. To make it more difficult, the “number of months in placement” section of the ISPs in the KIDS file appeared to be automatically generated based on the date the report was produced or printed from the KIDS system, not based on the date the ISP was written.
• **Placement history:** For many cases, it was very difficult to determine the child’s placement history. The reviewers looked at the “placement history” section in the KIDS file, but often needed to scan the entire record to determine the exact reason for a placement change, determine the location of a child when there was a date gap, and/or determine the specific foster home providers when the placement location was listed as therapeutic foster care agency since, if the child was placed through a child-placing agency other than OKDHS, the specific location of the child was often unclear. In some cases, the “placement history” in the KIDS file was inaccurate with some placement changes not identified on the placement history.
PART 1: CHILD CHARACTERISTICS

This section provides an overview of the characteristics of the 374 children in the sample, including gender, race/ethnicity, age, reasons for entering OKDHS custody, and placement type. The children’s ages and placement types at the time of the child’s most recent entry into OKDHS custody (time of entry) and as of June 1, 2010 were both analyzed.

Some of the tables presenting information on child characteristics include data on all children in OKDHS custody as of September 30, 2009 from the Child Welfare Outcomes 2006 – 2009 Report to Congress (RTC). The purpose of this is to demonstrate that our sample is representative of the population of children in OKDHS custody with regard to key child characteristics. As shown in the tables, the percentages reported for the case review sample on race/ethnicity, age at time of entry, and age on June 1, 2010, are very similar to the percentages reported for all children in OKDHS custody as of September 30, 2009. These findings validate our sampling process with regard to generating a representative sample for key child characteristics.

Key Findings

- The most commonly identified reasons for children entering OKDHS custody were the caretaker’s disregard for the child’s safety (58.8%) and substance abuse by the caretaker (58%).

- Over one-half (59.4%) of the children entering OKDHS custody were placed in shelter care facilities as their initial placement.

- Over one-half (52.4%) of the children entering care were younger than age five at the time of entry.

- While only 8.8 percent of the children were adolescents (i.e., 13 or older) at the time of their entry into OKDHS custody, 21.7 percent were adolescents as of June 1, 2010, indicating that older children in OKDHS custody at any point in time are more likely to have aged during their time in custody rather than entering custody at older ages.

Child’s Gender

The children in the sample were almost equally divided between male (50.8%) and female (49.2%).

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**Child’s Race/Ethnicity**

Table 2 provides information pertaining to the race/ethnicity of the children in the sample.

<table>
<thead>
<tr>
<th>Child’s Race/Ethnicity</th>
<th>Number of Cases in Sample</th>
<th>Percent of Cases in Sample</th>
<th>Percent Reported in the 2009 RTC*</th>
</tr>
</thead>
<tbody>
<tr>
<td>White Non-Hispanic</td>
<td>158</td>
<td>42.2</td>
<td>36.1</td>
</tr>
<tr>
<td>African American Non-Hispanic</td>
<td>80</td>
<td>21.4</td>
<td>17.6</td>
</tr>
<tr>
<td>Hispanic (all races)</td>
<td>37</td>
<td>9.9</td>
<td>15.1</td>
</tr>
<tr>
<td>Native American</td>
<td>80</td>
<td>21.4</td>
<td>8.7</td>
</tr>
<tr>
<td>Two or more races – Non-Hispanic</td>
<td>19</td>
<td>5.1</td>
<td>22.4</td>
</tr>
<tr>
<td>Total</td>
<td>374</td>
<td>100</td>
<td>99.9**</td>
</tr>
</tbody>
</table>


**1% of the children in OKDHS custody in the RTC were Hawaiian, Other Pacific Islander or Asian

The percentages of White, African American, and Hispanic children in our case review sample are within approximately six percentage points of the percentages reported for 2009 in the RTC. There is a larger discrepancy between the data sets for the Native American group (12.7 percentage point difference between the case review sample and the 2009 RTC data) and the Two or More Races – Non-Hispanic group (17.3 percentage point difference between the case review sample and the 2009 RTC data). These discrepancies may be due to reviewers recording children as Native American if at least one parent was Native American and it was determined that the Federal Indian Child Welfare Act⁹ applied to the case. Consequently, many of the children in the sample group classified as Native American may be more appropriately classified as two or more races.

**Reason for Child’s Entry into OKDHS Custody**

**The most commonly identified reasons for children entering OKDHS custody were the caretaker’s disregard for the child’s safety resulting in harm or threat of harm to the child (58.8%) and substance abuse by the caretaker (58%).**

Table 3 provides information pertaining to the reason for the child’s most recent entry into OKDHS custody. Although up to 24 reasons could be identified for each child, the table below combines some of the reasons into general categories.

---

Table 3  
Reason for Child’s Entry into OKDHS Custody

<table>
<thead>
<tr>
<th>Reason for Entry into Custody*</th>
<th>Number of Cases in which Reason was Provided</th>
<th>Percent of Cases in which Reason was Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Severe physical abuse</td>
<td>32</td>
<td>8.6</td>
</tr>
<tr>
<td>Physical abuse/excessive physical discipline resulting in bruising or burns</td>
<td>56</td>
<td>15.0</td>
</tr>
<tr>
<td>Inappropriate parenting of child three years of age or younger due to lack of attachment</td>
<td>33</td>
<td>8.8</td>
</tr>
<tr>
<td>Disregard for child’s safety (e.g. failure to protect, reckless endangerment, threat of harm)</td>
<td>220</td>
<td>58.8</td>
</tr>
<tr>
<td>Environmental neglect (e.g., inadequate or danger shelter, homelessness)</td>
<td>118</td>
<td>31.6</td>
</tr>
<tr>
<td>Medical neglect</td>
<td>42</td>
<td>11.2</td>
</tr>
<tr>
<td>Educational neglect</td>
<td>23</td>
<td>6.1</td>
</tr>
<tr>
<td>Sexual abuse of child with continued access by perpetrator</td>
<td>36</td>
<td>9.6</td>
</tr>
<tr>
<td>Person Responsible for the Child (PRFC) – substance abuse or drug involvement (including substance exposed infant)</td>
<td>217</td>
<td>58.0</td>
</tr>
<tr>
<td>Person Responsible for the Child (PRFC) – mental illness or mental retardation resulting in inadequate parenting</td>
<td>48</td>
<td>12.8</td>
</tr>
<tr>
<td>Child abandoned</td>
<td>48</td>
<td>12.8</td>
</tr>
<tr>
<td>Domestic violence in the home putting child at risk</td>
<td>108</td>
<td>28.9</td>
</tr>
<tr>
<td>Prior or current open case on sibling resulting in removals or termination of parental rights</td>
<td>39</td>
<td>10.4</td>
</tr>
<tr>
<td>Person Responsible for the Child (PRFC) – incarceration or hospitalization</td>
<td>62</td>
<td>10.6</td>
</tr>
</tbody>
</table>

*These categories generally follow OKDHS reasons for removal, although we have combined and generalized some of the reasons.

The most frequently occurring reasons for the removal of child and placement in OKDHS custody were disregard for child’s safety/threat of harm (58.8%), substance abuse by the person responsible for the child (58.0%), environmental neglect (31.6%), and domestic violence in the home (28.9%).
**Child’s Age at Entry and Age as of June 1, 2010**

**Over one-half (51.3%) of the children entering care were younger than age five at the time of entry.**

Table 4 provides information pertaining to the ages of children at the time of their most recent entry into OKDHS custody and Table 5 provides information pertaining to the ages of children as of June 1, 2010.

### Table 4

**Child’s Age at Entry into OKDHS Custody**

<table>
<thead>
<tr>
<th>Child’s Age at Entry into OKDHS Custody (in months)</th>
<th>Number of Children in the Sample</th>
<th>Percent of Children in the Sample</th>
<th>2009 RTC Percent Regarding the Ages of Children at Entry into Foster Care*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 12 months</td>
<td>78</td>
<td>20.9</td>
<td>20.1</td>
</tr>
<tr>
<td>At least 12 (1 year) but less than 36 months (3 years)</td>
<td>66</td>
<td>17.6</td>
<td>17.6</td>
</tr>
<tr>
<td>At least 36 (3 years) but less than 60 months (5 years)</td>
<td>48</td>
<td>12.8</td>
<td>13.1</td>
</tr>
<tr>
<td>At least 60 (5 years) but less than 120 months (10 years)</td>
<td>110</td>
<td>29.4</td>
<td>24.1</td>
</tr>
<tr>
<td>At least 120 (10 years) but less than 156 months (13 years)</td>
<td>37</td>
<td>9.9</td>
<td>10.6</td>
</tr>
<tr>
<td>At least 156 (13 years) but less than 192 months (16 years)**</td>
<td>33</td>
<td>8.8</td>
<td>9.4***</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>372</strong></td>
<td><strong>99.4</strong></td>
<td><strong>94.9</strong></td>
</tr>
</tbody>
</table>


**Only two children in the sample were age 16 at the time of entry into OKDHS custody

***In the 2009 RTC, 5.1 percent of the children entered foster care at 16 or older.

The data in Table 4 indicate the following:

- 192 children (51.3%) were younger than age five (60 months) at the time of their most recent entry into OKDHS custody.

- Only 33 children (8.8%) were adolescents (i.e., 13 to 16) at the time of their most recent entry into OKDHS custody. Two children were 16 when they entered custody.

- The differences in percentages of children in specific age groups between the case review sample and the data from the RTC are quite small, indicating a representative sample with regard to age distribution at time of entry into OKDHS custody.
Table 5  
Child’s Age as of June 1, 2010

<table>
<thead>
<tr>
<th>Child’s Age as of June 1, 2010 (in months)</th>
<th>Number of Children in the Sample</th>
<th>Percent of Children in the Sample</th>
<th>2009 RTC Percent Regarding the Ages of Children in Foster Care as of September 30, 2009*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 12 months</td>
<td>13</td>
<td>3.5</td>
<td>6.9</td>
</tr>
<tr>
<td>At least 12 (1 year) but less than 36 months (3 years)</td>
<td>64</td>
<td>17.1</td>
<td>19.1</td>
</tr>
<tr>
<td>At least 36 (3 years) but less than 60 months (5 years)</td>
<td>45</td>
<td>12.0</td>
<td>14.6</td>
</tr>
<tr>
<td>At least 60 (5 years) but less than 120 months (10 years)</td>
<td>120</td>
<td>32.1</td>
<td>27.7</td>
</tr>
<tr>
<td>At least 120 (10 years) but less than 156 months (13 years)</td>
<td>51</td>
<td>13.6</td>
<td>12.1</td>
</tr>
<tr>
<td>At least 156 (13 years) but less than 192 months (16 years)</td>
<td>41</td>
<td>11.0</td>
<td>11.0</td>
</tr>
<tr>
<td>At least 192 (16 years) but less than 216 months (18 years)</td>
<td>40</td>
<td>10.7</td>
<td>8.6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>374</strong></td>
<td><strong>100</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>


A key finding of the age analysis is that by June 1, 2010, 81 (21.7%) children were adolescents (i.e., age 13 or older) compared to 35 (9.4%) children being adolescents at the time of entry. This suggests that children are aging in foster care rather than entering foster care at older ages.

The differences in percentages of children in specific age groups between the case review sample and the data from the RTC are quite small, indicating a representative sample with regard to age distribution of children in OKDHS custody at a given point in time.

**Placement Type**

**Over one-half (59.4%) of the children entering OKDHS custody were placed in shelter care facilities as their initial placement.**

The following two tables provide information regarding the placement type for children at the time of their entry into OKDHS custody and their placement type as of June 1, 2010.
Table 6
Child’s Initial Placement Setting

<table>
<thead>
<tr>
<th>Child’s Initial Placement Setting</th>
<th>Number of Children</th>
<th>Percent of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shelter facility</td>
<td>222</td>
<td>59.4</td>
</tr>
<tr>
<td>Non-therapeutic, non-relative family</td>
<td>84</td>
<td>22.4</td>
</tr>
<tr>
<td>Non-therapeutic, relative family*</td>
<td>30</td>
<td>8.0</td>
</tr>
<tr>
<td>Other**</td>
<td>38</td>
<td>10.2</td>
</tr>
<tr>
<td>**Total</td>
<td>374</td>
<td>100</td>
</tr>
</tbody>
</table>

*Includes kinship caregivers who may not be blood relatives of the child.
**Other includes a small number of children in the following placements: therapeutic relative family, non-therapeutic relative emergency foster family, non-therapeutic and non-relative emergency foster family, maintained in the child’s own home, trial placement with a non-relative preadoptive family, congregate care treatment facility, and hospital (with OKDHS taking custody at birth).

Over one-half the children in the sample entering OKDHS custody went initially into temporary shelter care placements; 52.4 percent of the 141 children who entered OKDHS custody between January 1, 2009 and December 31, 2009 were placed in a shelter as their initial placement.

Table 7
Child’s Placement Setting as of June 1, 2010 or at Time of Discharge

<table>
<thead>
<tr>
<th>Placement Setting as of June 1, 2010 or at Time of Discharge</th>
<th>Number of Children</th>
<th>Percent of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-therapeutic, non-relative family</td>
<td>74</td>
<td>19.8</td>
</tr>
<tr>
<td>Therapeutic, non-relative family</td>
<td>38</td>
<td>10.2</td>
</tr>
<tr>
<td>Non-therapeutic, relative family</td>
<td>117</td>
<td>31.3</td>
</tr>
<tr>
<td>Therapeutic, relative family</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td>In home on a trial reunification</td>
<td>50</td>
<td>13.4</td>
</tr>
<tr>
<td>In home on a trial reunification with non-custodial parent</td>
<td>8</td>
<td>2.1</td>
</tr>
<tr>
<td>Trial adoptive placement with a non-relative family</td>
<td>31</td>
<td>8.3</td>
</tr>
<tr>
<td>Trial adoptive placement with a relative family</td>
<td>16</td>
<td>4.3</td>
</tr>
<tr>
<td>Congregate care – shelter</td>
<td>4</td>
<td>1.1</td>
</tr>
<tr>
<td>Congregate care – treatment facility</td>
<td>21</td>
<td>5.6</td>
</tr>
<tr>
<td>Congregate care – group home</td>
<td>6</td>
<td>1.6</td>
</tr>
<tr>
<td>Juvenile justice center</td>
<td>2</td>
<td>0.5</td>
</tr>
<tr>
<td>Child on runaway status</td>
<td>6</td>
<td>1.6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>374</td>
<td>100</td>
</tr>
</tbody>
</table>

As of June 1, 2010, 335 children (89.6%) in the case review sample were in some type of family setting with non-relatives (38.2%), relatives (35.9%), or biological parents during a trial reunification (15.5%). Changes in the child’s placement setting will be addressed later in the report.
PART 2: CHILD MALTREATMENT

This section presents our findings with regard to maltreatment of children while in OKDHS custody and the history of maltreatment reports on the families and the children in the review sample prior to the child’s most recent entry into OKDHS custody. The key findings with regard to the maltreatment of children while they are in OKDHS custody are the following:

- 21.4 percent of children in the sample were the subject of a maltreatment allegation while in OKDHS custody that was substantiated or where there was sufficient concern to recommend services even though the allegation was not substantiated; 12 percent of children in the sample were the subject of a maltreatment allegation while in OKDHS custody that was substantiated.

- 78 percent of the alleged perpetrators of maltreatment of children in OKDHS custody were foster parents.

- In 27 (24.8%) of the 109 cases involving maltreatment reports that were investigated, reviewers reported that no actions were identified in the case file as taking place either during the investigation or after the investigation other than to investigate the report.

- Adequate safety assessments were conducted prior to a trial reunification in only 45 (45.5%) of the 99 cases in which the child was in a trial reunification placement at some time during the child’s most recent entry into OKDHS custody.

The following are the key findings with regard to the child and family histories of maltreatment:

- The families in 344 cases (92% of the families) in the sample had at least one prior maltreatment report before the report that resulted in the child’s most recent entry into OKDHS custody. One-fourth (25.1%) of the families of all children in the sample had 10 or more such prior reports.

- 65 percent of the children in the sample were identified in at least one prior maltreatment report with a disposition of services or court involvement recommended; 23.8 percent of the children were identified in four or more such prior reports.

Maltreatment Reports for Children in OKDHS Custody

For 132 (35.3%) of the 374 children in the sample, there was at least one formal report in which the child was alleged to be a victim of maltreatment while in OKDHS custody; 80 children were the subject of only one report, 33 children were the subject of two reports, and 19 children were the subject of three reports, for a total of 203 reports. The data presented in this section apply only to the initial 132 reports identifying the target child as the subject of maltreatment. This was done to focus the analysis on the child as potential victim, rather than on the reports, and to ensure that there were a sufficient number of investigated reports to conduct a meaningful analysis.
Children in approximately one-fifth of the 374 cases were the subject of a maltreatment allegation while in OKDHS custody where services were recommended as an outcome of a formal investigation. Twelve percent of children in the sample were the subject of a maltreatment allegation while in OKDHS custody where the allegations of the report were substantiated with either services or court intervention recommended.

Reviewers also identified 12 children where there was information in the case file indicating that possible abuse or neglect occurred while the child was in OKDHS custody, but it was not formally reported. For 11 of these children, reviewers noted that there was evidence of physical abuse, including corporal punishment; for five of these children, there was evidence of inadequate supervision by the foster parent resulting in harm or risk of harm to the child; and for three of these children, there was evidence of mental injury or emotional abuse, including derogatory remarks to the child and constant threats of removal. Additional allegations identified by reviewers for one child were sexual abuse, withholding meals or locking the child out of the home, environmental neglect, lack of health care, and drug abuse by the foster parent.

The case example below shows the history of maltreatment reports and concerns while placed in OKDHS custody for one child in the sample.

This child is a 10 year-old male who entered OKDHS custody in 2006 when he was five years old due to confirmed allegations of physical abuse, lack of supervision by his aunt, and allegations of abandonment.

Several concerns have been documented regarding his treatment by caregivers and facility staff, including the following: no action taken when foster mother A allegedly degraded the child in public; there was an allegation of inadequate supervision by facility staff when another resident touched the child in an inappropriate sexual way, resulting in a staff member talking to the other child about sexualized behavior; and it was reported that foster mother B’s daughter dragged the child.

There were a total of five formal allegations of maltreatment by foster caregivers regarding this child. At one point, a report of physical abuse by foster mother A was ruled out and referred internally as a compliance issue. Later, a report of physical abuse by foster mother C was unsubstantiated with services recommended and no identified actions taken. Still later, a report of physical abuse by foster mother C resulted in the child’s removal from the home because the report was substantiated. A report of inadequate supervision by foster mother B was screened out and later there was a report of threat of harm and lack of supervision with services recommended for foster mother D. In 2008, a report of failure to protect against foster mother D was ruled out.
**Type of Maltreatment**

Table 8 presents information pertaining to the types of maltreatment alleged in the formal reports for the 132 cases in which there was at least one formal report alleging maltreatment of the target child while in OKDHS custody. Reviewers could identify up to three allegations as identified in the maltreatment report.

<table>
<thead>
<tr>
<th>Type of Alleged Maltreatment*</th>
<th>Number of reports in which the allegation was noted</th>
<th>Percent of the 132 reports in which the allegation was noted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neglect – lack of supervision</td>
<td>51</td>
<td>38.6</td>
</tr>
<tr>
<td>Physical abuse</td>
<td>47</td>
<td>35.6</td>
</tr>
<tr>
<td>Neglect – environmental, medical, and educational</td>
<td>22</td>
<td>16.7</td>
</tr>
<tr>
<td>Emotional abuse/mental injury</td>
<td>16</td>
<td>12.1</td>
</tr>
<tr>
<td>Sexual abuse/exploitation</td>
<td>16</td>
<td>12.1</td>
</tr>
<tr>
<td>Person responsible for child not competent to parent (due to substance abuse or mental illness)</td>
<td>14</td>
<td>10.6</td>
</tr>
<tr>
<td>Failure to protect/exposure to domestic violence</td>
<td>7</td>
<td>5.3</td>
</tr>
<tr>
<td>Child endangerment</td>
<td>2</td>
<td>1.5</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>2.3</td>
</tr>
</tbody>
</table>

*Up to three types of maltreatment were possible for the incident reported.

As shown in Table 8, the most frequently identified types of maltreatment were neglect/lack of supervision, identified in 38.6 percent of the cases, and physical abuse, identified in 35.6 percent of the cases.

**Response to Reports**

Of the 132 initial reports, 110 (83.3%) were formally investigated, while 22 (16.7%) were not investigated. For the 22 cases that were not formally investigated, 11 (50%) were screened out because the report did not meet the State’s eligibility criteria for maltreatment and 11 (50%) were referred to the child’s caseworker for action rather than conducting a formal investigation.\(^\text{10}\)

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\(^{10}\) OAC 340:75-3-8.1, Instructions to Staff, requires that an investigation is conducted on all reported allegations that meet the definition of abuse or neglect, including all non-accidental physical or mental injuries to children of any age, neglect, sexual abuse, and any practices by the foster or trial adoptive parent that involve hitting or striking a child three years of age or younger, even when there is no report or observation of injury.
Table 9 provides information pertaining to the findings of the formal investigations conducted in response to the 109 initial reports that were subject to formal investigations. One case was excluded because of insufficient information regarding the investigation.

### Table 9
Findings of Formal Investigations

<table>
<thead>
<tr>
<th>Investigation Finding</th>
<th>Number of Investigations</th>
<th>Percent of Investigations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ruled out/No maltreatment occurred</td>
<td>29</td>
<td>26.6</td>
</tr>
<tr>
<td>Unsubstantiated, services recommended</td>
<td>35</td>
<td>32.1</td>
</tr>
<tr>
<td>Substantiated, services recommended</td>
<td>41</td>
<td>37.6</td>
</tr>
<tr>
<td>Substantiated, court intervention recommended</td>
<td>4</td>
<td>3.7</td>
</tr>
<tr>
<td>Total</td>
<td>109</td>
<td>100</td>
</tr>
</tbody>
</table>

*There are only 109 cases included in the findings because of missing data for one case.*

As shown in the table, only 29 (26.6%) reports had a finding of “ruled out,” indicating that, upon investigation, the agency determined that the child had not been a victim of maltreatment. For 35 reports (32.1%), the investigation determined that although the allegations could not be substantiated, there was cause for concern about the child’s well-being and services were recommended. The child was determined to be a victim of maltreatment in 45 (41.3%) of the reports. For children in custody of OKDHS, we considered reports of maltreatment while in foster care that resulted in a disposition of “services recommended” to indicate that there were concerns about the child’s safety or well-being in the current placement.

**In 27 (24.8%) of the 109 cases involving maltreatment reports that were investigated, reviewers reported that no actions were identified in the case file as taking place either during the investigation or after the investigation other than to investigate the report.**

The case example below illustrates several issues found regarding the maltreatment of children while in OKDHS custody, including lack of follow-up to a substantiated report by OKDHS.

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11 We considered a disposition of “services recommended” to correspond to a disposition of “indicated” in the Federal Child and Family Services Review (CFSR) which refers to an investigation of child maltreatment that resulted in a reason to suspect maltreatment, but had insufficient evidence to substantiate the report under State law or policy. Also included in CFSR items that address reports of maltreatment are maltreatment reports involving any child in the family that was referred for an assessment and the decision was made to open the case for services to address concerns relevant to the safety of at least one of the children in the family. Taken from the instructions for the Onsite Review Instrument of the CFSR, accessed at: http://www.acf.hhs.gov/programs/cb/cwmonitoring/tools_guide/onsitefinal.htm
This child is a 17 year-old male who entered OKDHS custody in 2003 when he was 10 years old due to confirmed allegations of substance abuse, inadequate housing, and abandonment by the biological mother. Two years after entering custody, while he was placed in a foster home, a female foster child tried to kiss and touch him on his private parts on several occasions. About the same time, he was made to stand in corner for one hour for punishment and reported being hungry at night and not given any snacks or food. Later, the foster mother made derogatory remarks to the child, and he was hit and thrown on the ground by another foster child in home. At one point, allegations of physical abuse and verbal abuse by the foster mother were substantiated and services were recommended, however, no action was taken by OKDHS. A few months later, allegations of threat of harm and inadequate physical care were substantiated and the child was removed from the foster home. There were nine referrals on this foster home.

Table 10 presents information pertaining to the actions taken by OKDHS during the investigation and/or after the investigation was completed for the 109 reports that were investigated. Reviewers could identify up to two actions taken during the investigation or assessment and up to two actions taken after the investigation was completed.

Table 10
Types of OKDHS Actions Taken During and After Investigations

<table>
<thead>
<tr>
<th>Actions</th>
<th>During Investigation</th>
<th>After Investigation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child removed from foster home, but other children remained</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>All children removed from foster home</td>
<td>24</td>
<td>8</td>
</tr>
<tr>
<td>Trial reunification terminated and child returned to out-of-home placement</td>
<td>11</td>
<td>4</td>
</tr>
<tr>
<td>Foster home closed permanently</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Foster home closed temporarily</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Care facility closed temporarily</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Police called to investigate perpetrator</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>All visits or unsupervised visits were stopped</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Other (i.e., safety plans were developed)</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td><strong>Total number of actions reported</strong></td>
<td><strong>54</strong></td>
<td><strong>31</strong></td>
</tr>
</tbody>
</table>

As shown in Table 10 above, the total number of actions taken by OKDHS during and after the investigation is quite small. This is due to the large percentage of cases in which OKDHS did not take action or at least no action was reported in the case file. The following are the findings regarding lack of OKDHS action in response to reports alleging maltreatment of children while in OKDHS custody:

- In 42 (38.5%) of the 109 cases involving maltreatment reports that were investigated, no actions were identified in the case file as taking place during the investigation.
In 49 (45.0%) of the 109 cases involving maltreatment reports that were investigated, no actions were identified in the case file as taking place after the investigation.

In 27 (24.8%) of the 109 cases involving maltreatment reports that were investigated, reviewers reported that no actions were identified in the case file as taking place either during the investigation or after the investigation. That is, in 27 of the 109 cases with at least one maltreatment report that was investigated, there was no evidence in the case file that OKDHS had taken any action in response to the initial maltreatment report other than to investigate it.

In seven of the 27 cases in which no action was taken either during or after the investigation, the investigation resulted in a finding of substantiated/services recommended. In 13 of the 27 cases, the investigation resulted in a finding of unsubstantiated/services recommended, and in the remaining seven cases, the finding of the investigation was that maltreatment was ruled out.

**Alleged Perpetrators**

Over three-quarters (78%) of the alleged perpetrators of maltreatment of children in care were the child’s foster parent(s).

The case example below illustrates some of the many issues associated with maltreatment in care identified in the review, including abuse by a foster parent.

This child is a 10 year-old male who entered OKDHS custody in 2005 when he was five years old due to confirmed allegations of abandonment, lack of supervision, inadequate/dangerous shelter, and inadequate nutrition. Two years later, the child’s adoption profile noted that he was well behaved and had good manners, did not demonstrate any significant behavioral problems, was developmentally appropriate, did not have difficulty with attachments, and knew right from wrong. Three years later, however, he was diagnosed with Post-Traumatic Stress Disorder, child antisocial behaviors, inappropriate sexual behaviors, sexual abuse of a child, and provisional Attention Deficit Hyperactivity Disorder after having experienced significant sexual abuse in two foster homes. He lived in one of those foster homes for two and one-half years during which there were two substantiated reports regarding his care in the home, both involving the foster father as perpetrator. The allegations included neglect (inadequate supervision), child-on-child sexual abuse, slapping, and inappropriate discipline. All children were removed, the foster home was closed, and police were notified. He later lived in a different foster home where there was also a substantiated report with findings of neglect (inadequate supervision) and child-on-child sexual abuse. The foster mother was identified as the alleged perpetrator, all children were removed from the home, and the foster home was closed temporarily. The child was admitted to a psychiatric residential treatment facility subsequent to these confirmed reports. His placement history while in custody of OKDHS has been as follows: Shelter, foster home, relative/unable to determine, shelter, shelter, emergency foster home, foster home, unable to determine, foster home, shelter, foster home, psychiatric residential treatment facility, residential treatment, shelter.
Table 11 provides information regarding the alleged perpetrators identified in the 132 cases in which there was at least one report alleging maltreatment of the target child while in OKDHS custody. Reviewers could identify up to two alleged perpetrators mentioned in the maltreatment report.

### Table 11
**Type of Alleged Perpetrator**

<table>
<thead>
<tr>
<th>Alleged Perpetrator</th>
<th>Number of reports</th>
<th>Percent of reports</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foster parent(s)</td>
<td>103</td>
<td>78.0</td>
</tr>
<tr>
<td>Biological parent(s)/guardian(s) – while on trial reunification or during an unsupervised visit</td>
<td>16</td>
<td>12.1</td>
</tr>
<tr>
<td>Other foster child or sibling in the home</td>
<td>9</td>
<td>6.8</td>
</tr>
<tr>
<td>Other*</td>
<td>4</td>
<td>3.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>132</strong></td>
<td><strong>99.9</strong></td>
</tr>
</tbody>
</table>

* Other includes: 1 – facility staff member, 2 – other person living in home, and 1 – visitor to home

As shown in the table, the child’s foster parent(s) were the alleged perpetrators in 103 (78%) of the 132 cases with at least one maltreatment allegation while the child was in OKDHS custody, with biological parents noted as perpetrators in 16 cases (12.1%).

Further analysis revealed the following findings:

- In 35 (34.0%) of the 103 cases in which at least one foster parent was identified as the alleged perpetrator, at least one maltreatment allegation was substantiated and either services were recommended (34 cases) or court involvement was recommended (one case).

- In 31 (30.1%) of the 103 cases in which at least one foster parent was identified as the alleged perpetrator, the maltreatment allegations were not substantiated but services were recommended, indicating that concerns were evident.

- In the remaining 37 (36.0%) of the 103 cases, the allegations were either ruled out or the report was not investigated.

In addition, in 16 (45.7%) of the 35 cases in which the allegation against the foster parent was substantiated, the foster parent was a relative or kinship care provider, and in 16 (51.6%) of the 31 cases that were not substantiated but services were recommended, the foster parent was a relative or kinship care provider. These findings suggest that maltreatment allegations that were investigated and had a finding of at least services recommended were no more likely to involve relative/kinship foster parents than they were to involve non-relative/non-kinship foster parents.

For six of the 16 cases in which the biological parent was identified as the perpetrator, the maltreatment report was not investigated and was either screened out (three cases) or referred to the child’s caseworker for follow up action (three cases). In seven cases, the report was found to
be substantiated with services recommended (six cases) or court involvement recommended (one case). In the remaining cases, the allegation was either ruled out or found to be unsubstantiated, with services recommended.

The incidence of maltreatment of children in OKDHS custody by at least one biological parent suggests that OKDHS may not be conducting sufficient safety assessments prior to a trial reunification. In 99 (26.5%) of the 374 cases reviewed, the child was in a trial reunification placement at some time during the most recent entry into OKDHS custody. A key finding of the case review is that adequate safety assessments were conducted prior to a trial reunification in only 45 (45.5%) of the 99 cases. An adequate safety assessment is defined as one that evaluates the parent’s progress in addressing the problems that resulted in the child’s removal from the home in the first place.

A key finding of the case review is that adequate safety assessments were conducted prior to a trial reunification in only 45 (45.5%) of the 99 cases in which the child was in a trial reunification placement at some time during the child’s most recent entry into OKDHS custody.

Child and Family Maltreatment History

This section of the report examines the maltreatment history of the child’s family prior to the maltreatment report that resulted in the child’s most recent entry into OKDHS custody. It also provides information about the child’s prior history of being identified as the victim of maltreatment and the child’s history of foster care episodes.

The families in 344 cases (92% of the families) in the sample had at least one prior maltreatment report before the report that resulted in the child’s most recent entry into OKDHS custody. One-fourth (25.1%) of the families of all children in the sample had 10 or more such prior reports.

Maltreatment History of the Child’s Family

The following are the key findings pertaining to maltreatment history for the families in the case review sample of 374 cases:

- The families in 344 (92.0%) of the 374 cases had at least one maltreatment report prior to the one that resulted in the child’s most recent entry into OKDHS custody.

- The families in 94 (25.1%) of the cases had 10 or more such prior reports.

- The families in 312 cases (83.4%) had at least one such prior report that resulted in a finding of services recommended (although not all of these may have been substantiated) or court involvement recommended.
The families in 148 cases (39.6%) had four or more such prior reports that resulted in a finding of services recommended (although not all of these may have been substantiated) or court involvement recommended.

The families in 35 cases (9.4%) had 10 or more such prior reports that resulted in a finding of services recommended (although not all of these may have been substantiated) or court involvement recommended.

**Child’s Maltreatment History**

The key findings with regard to the child’s maltreatment history are the following:

- 243 (65.0%) of the 374 children in the sample had been identified as the victim of maltreatment in at least one prior report in which the finding of the investigation was services recommended (although not all of these may have been substantiated) or court involvement recommended.

- 89 (23.8%) of the 374 children had been identified as the victim of maltreatment in four or more prior reports in which the finding of the investigation was services recommended (although not all of these may have been substantiated) or court involvement recommended.

65 percent of the children in the sample were identified in prior maltreatment reports with a disposition of services or court involvement recommended; 23.8 percent were identified in four or more such prior reports.

These findings suggest that by the time they enter OKDHS custody, most children and/or their families have a history with OKDHS, with some children and families having an extensive history. This raises concerns about the protection of children prior to their entry into foster care.

**Child’s History in Foster Care**

The key findings with regard to the child’s history in foster care are the following:

- 91 children (24.3%) in the sample of 374 children had been in OKDHS custody at least once prior to the most recent entry into OKDHS custody.

- 31 children (8.3%) in the sample had been OKDHS custody at least twice prior to the most recent entry into OKDHS custody.

- 6 children (1.6%) had been in OKDHS custody three times prior to the most recent entry into OKDHS custody.
PART 3: PLACEMENT STABILITY

Our analysis of the data for placement stability, i.e., the lack of movement of children from placement to placement after entering OKDHS custody, resulted in numerous findings as we explored placement changes, the duration of placements, and the incidences of children’s behavior problems while in OKDHS custody. Key findings with regard to the number of placements experienced by the children in our sample by June 1, 2010 are provided below:

- Only 30 (8.0%) of the 374 children in the sample had been in a single, stable placement during their most recent entry into OKDHS custody.
- 205 (54.8%) of the children in the sample experienced four or more placement settings during their most recent entry into OKDHS custody; 52 (13.9%) children experienced 10 or more placement settings.
- The most frequent reason given by OKDHS for moving children from the first to second placement was because they needed a less restrictive placement, raising concerns about the appropriateness of the children’s initial placements.
- OKDHS did not offer any services to foster caretakers to prevent placement changes in 76 percent of the cases or to children in 72 percent of the cases in which it would have been appropriate to prevent the placement change.

The following are our key findings with regard to the relationship between the child’s age at entry into custody and on June 1, 2010 and the number of placements:

- 49.2 percent of the 264 children with three or more placement settings were younger than five years old when they entered OKDHS custody.
- 15 (19.2%) of the 78 children who entered OKDHS custody when they were younger than 12 months old experienced six or more placements by June 1, 2010.
- 18 (51.4%) of the 35 children in the sample who entered OKDHS custody when they were age 13 or older experienced six or more placements by June 1, 2010.
- 38 (49.4%) of the 77 children who were younger than age three on June 1, 2010 had already been in three or more placements, and 10.4 percent of those children had already been in six or more placements.

Our findings regarding the relationship between time in custody and number of placements include the following:

- 43.4 percent of children in custody for less than 12 months had already experienced three or more placement settings.
Key findings pertaining to the placement of children in shelters are the following:

- 59.4 percent of the children in the sample were placed in temporary shelter care upon entering custody.

- 52.4 percent of the 141 children who entered OKDHS custody between January 1, 2009 and December 31, 2009 were placed in a shelter as their initial placement.

- 28 (35.9%) of the 78 children in the sample who were infants (i.e., younger than age 1) at the time of their entry into OKDHS custody were initially placed in a shelter.

- 42.9 percent of the infants and 18.7 percent of children aged 5-10 who entered shelter care upon entry into custody remained there longer than permitted under OKDHS policy.

- The use of shelter care as an initial placement for children in the sample did not increase the likelihood of future placement stability for those children. Of the 222 children whose initial placement was in a shelter care facility, 84.2 percent (187 children) had at least two additional placements after the shelter placement, i.e., they experienced three or more placements while in OKDHS custody.

The following key finding emerged in our analysis of the duration of placements:

- Many children moved from one short-term placement to another. Of children with at least two placements, almost three-quarters spent less than one month in the first placement. Of children with at least three placements, almost one-half spent less than one month in the second placement.

Findings with regard to incidences of child behavior problems while in a placement under OKDHS custody are the following:

- When compared to children in custody for less than six months, children in custody for more than six months had substantially higher identified incidences of school-related behavioral problems, aggressiveness, sexual acting out, hyperactivity, and unusual or abnormal behaviors.

- Only 4.2 percent of the actions taken by OKDHS in response to child behavior problems involved providing services to the caretaker.

Our major finding with regard to placing children with relatives is as follows:

- Among the first four placement settings for children in the sample, there were 243 placements with relatives. Of these placements, 131 (53.9%) disrupted and the children were moved to another placement.
Why is movement in foster care important?

We reviewed eight studies of the effects of placement moves and placement disruptions on children in foster care. The majority of the studies found that frequent placement changes result in negative consequences for children, including increased mental health service utilization, increased presentation of disturbed behaviors, and increased chance of additional placement moves. With regard to increased mental health service usage, one study of youth in foster care found that those who experienced more than three foster home moves were almost twice as likely as other children in the sample that did not have three moves to account for the top 10 percent of mental health costs in the research sample.12 Another study found that outpatient mental health visits increased by eight percent with each additional placement change.13 Still another study found that children who had a higher number of out-of-home placements in the sample presented with a higher rate of psychiatric symptoms, and that the number of out-of-home placements was the most significant predictor of impairment and change in psychiatric status over time.14

The research also identified links between placement instability and poor developmental outcomes, aggression, coping difficulties, poor home adjustment, low self concept,15 an increased sense of rejection, and a decreased ability to form emotional ties with caregivers with each change in placement.16 Psychological studies have found that attachment disturbances, i.e., being removed from the home of the biological parents, early in life have a profound effect on social development. For children in foster care, each subsequent change of caregiver is a further disruption to the child’s individual development and attachment process.17

The research noted that placement changes occurring early in a child’s placement history put the child on a trajectory of increasing instability while in care.18 In a longitudinal study of children in foster care in California, the researcher found that children who had two placement changes during their first year in foster care were 62% more likely to move three or more subsequent times during their stay in foster care; children with three placement changes in the first year of foster care were 65% more likely, and children with four placement changes were more than two times more likely to experience the same outcome.19

We believe that the issue of frequent placement changes is important to consider because, based on the research that we reviewed, children who experience frequent placement changes seem to get caught in a cyclical pattern that increases their need for and use of mental health services, decreases their chances of achieving permanency, increases their risk for behavioral-related placement disruptions, and increases their chances of experiencing ongoing placement instability while in state custody.

13 James, Landsverk, Slymen, Leslie (2004)
14 Hussey and Guo (2005)
15 Harden (2004)
16 Kadushin (1980)
17 Cook-Fong (2000)
18 James, Landsverk, Slymen, Leslie (2004), and Webster, Barth, Needell (2000)
19 Webster, Barth, Needell (2000)
The following examples of individual children whose cases we reviewed illustrate the particular concerns we have about placement stability demonstrated in the numbers that follow.

This child is a 13 year-old female who entered OKDHS custody in 2005 when she was seven years old, due to confirmed allegations of child neglect (unfit living conditions) and the mother’s arrest. She has experienced 14 placements while in custody, including five shelter placements. OKDHS initially placed her in two different shelters for almost two months total. She was then placed in six different foster homes, ranging anywhere from one month to twelve months, with an average of six months per foster home. She was removed from one foster home after five months due to a substantiated report of neglect (inadequate supervision) by the foster parent. The child had concurrent goals of adoption and return home for one year (April 2007 – May 2008); then in May 2008 the goal was changed solely to adoption. The parental rights of both her parents were terminated in September 2009.

This child is a 16 year-old female who entered OKDHS custody in 2004 when she was 10 years old, due to the confirmed allegation that the child’s mother had taken drugs and fallen asleep, at which point the child wandered away from the home. The child has Down’s syndrome and Attention Deficit Hyperactivity Disorder and requires 24-hour one-on-one supervision. During the first year she was in custody she experienced 12 placement changes.

- Her three initial placements were in shelter facilities which were unable to meet her needs.
- After the third shelter placement failed, the OKDHS sent her home on an extended (28 day) visit with her mother from whom she had been removed 10 days earlier. The visit was disrupted when it was discovered that the mother was homeless.
- She was then placed in another shelter for four days, which could not meet her needs.
- Her four subsequent placements were in a shelter, foster home, Developmental Disabilities Service Division (DDSD) foster home, and shelter respectively, with each placement ranging from two to four days, and no placement able to meet her needs.
- She was taken to a DDSD evaluation center to determine her eligibility for DDSD services and found to be eligible for DDSD services, however, she was not admitted to the evaluation center because the facility was closing and moving and there was a wait list for placement.
- Because no other placements were available, she was placed with her grandmother, who kept her for one day because she was unable to meet the child’s behavioral needs.
- She was then placed in a therapeutic foster home for six days until she was moved because the caregiver couldn’t meet her behavioral needs.
- She was then placed in another therapeutic foster home. At this point, the child had been in foster care for two months and had already experienced 10 placement changes, none of which lasted even a week, with the exception of the extended home visit.
- When DHS was notified that she was to be discharged from therapeutic foster care because she was no longer eligible due to the determination that she was eligible for DDSD services, she was admitted to the DDSD evaluation center for almost three months. This is the same evaluation center where she was evaluated, but not placed, approximately six months earlier. Upon discharge from the DDSD evaluation center, she returned to a previous provider who had taken classes to become a DDSD foster home so they could maintain the child in their home.
Number of Placements

We reviewed the case files to determine the number of placement settings that each of the 374 children experienced during their most recent episode in OKDHS custody. A placement, for purposes of this analysis, refers to the living situation in which the child is placed by OKDHS while in OKDHS custody. We excluded placements such as short-term hospital stays related to health concerns, but included placements such as trial reunifications where the child was placed with the parent on a trial basis and remained in OKDHS custody.

As of June 1, 2010, only 30 of 374 children (8%) in the sample were in a single, stable placement during their most recent entry into OKDHS custody. Over one-half of the children in the sample (54.8%) experienced four or more placement settings during their most recent entry into OKDHS custody.

As noted in Table 12 below, only 30 (8.0%) children in the sample experienced one placement setting by June 1, 2010. In contrast, 205 children (54.8%) had at least four placement settings by June 1, 2010, and almost 14 percent of the children had 10 or more placements. Four children had 30 or more placements. Because most of the children in our sample were still in OKDHS custody as of June 1, 2010, it may be assumed that the number of placements each child experiences could be even higher by the time they are finally discharged from OKDHS custody.

Table 12
Number of Placements during the Most Recent Custody Episode

<table>
<thead>
<tr>
<th>Number of Placements</th>
<th>Number of Children</th>
<th>Percent of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>One placement</td>
<td>30</td>
<td>8.0</td>
</tr>
<tr>
<td>Two placements</td>
<td>80</td>
<td>21.4</td>
</tr>
<tr>
<td>Three placements</td>
<td>59</td>
<td>15.8</td>
</tr>
<tr>
<td>Four placements</td>
<td>43</td>
<td>11.5</td>
</tr>
<tr>
<td>Five placements</td>
<td>34</td>
<td>9.1</td>
</tr>
<tr>
<td>Six placements</td>
<td>30</td>
<td>8.0</td>
</tr>
<tr>
<td>Seven placements</td>
<td>18</td>
<td>4.8</td>
</tr>
<tr>
<td>Eight placements</td>
<td>16</td>
<td>4.3</td>
</tr>
<tr>
<td>Nine placements</td>
<td>12</td>
<td>3.2</td>
</tr>
<tr>
<td>Ten or more placements</td>
<td>52</td>
<td>13.9</td>
</tr>
<tr>
<td>Total</td>
<td>374</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Of the 30 children with a stable placement, 14 were in a placement with a non-therapeutic, non-relative foster family and 13 were in a placement with a non-therapeutic relative foster family. One child was with a non-relative pre-adoptive family, and one child was in a congregate care facility. Placement type information is missing for one of these 30 cases.
Age of Child by Number of Placements

In addition to looking at the overall number of placements experienced by children in OKDHS custody, we examined the relationship between the number of placements and the child’s age at entry into custody and as of June 1, 2010.

Of the 264 children with three or more placement settings, 49.2 percent were younger than five years old when they entered custody; 19 percent of the children who entered OKDHS custody when they were younger than 12 months old experienced six or more placements by June 1, 2010.

Table 13 presents information pertaining to the number of placements experienced as of June 1, 2010 by children in various age groups at the time of their entry into OKDHS custody. There was a significant relationship between age at entry and number of placements (Chi Square (10) = 22.052; p < .015).

Table 13
Number of Placements by Age at Entry

<table>
<thead>
<tr>
<th>Age at Entry Into OKDHS Custody</th>
<th>One to Two Placements</th>
<th>Three to Five Placements</th>
<th>Six or More Placements</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 12 months (1 year)</td>
<td>32</td>
<td>31</td>
<td>15</td>
<td>78</td>
</tr>
<tr>
<td>At least 12 months (1 year) but less than 36 months (3 years)</td>
<td>18</td>
<td>27</td>
<td>21</td>
<td>66</td>
</tr>
<tr>
<td>At least 36 months (3 years) but less than 60 months (5 years)</td>
<td>12</td>
<td>21</td>
<td>15</td>
<td>48</td>
</tr>
<tr>
<td>At least 60 months (5 years) but less than 120 months (10 years)</td>
<td>27</td>
<td>43</td>
<td>40</td>
<td>110</td>
</tr>
<tr>
<td>At least 120 months (10 years) but less than 156 months (13 years)</td>
<td>11</td>
<td>8</td>
<td>18</td>
<td>37</td>
</tr>
<tr>
<td>At least 156 months (13 years) but less than 216 months (18 years)</td>
<td>10</td>
<td>7</td>
<td>18</td>
<td>35</td>
</tr>
<tr>
<td>Total</td>
<td>110</td>
<td>137</td>
<td>127</td>
<td>374</td>
</tr>
</tbody>
</table>

A key finding of this analysis is that although children entering OKDHS custody at younger than 12 months of age were more likely than children entering OKDHS custody at older ages to have only one to two placements by June 1, 2010, 19 percent of the children who entered OKDHS custody when they were younger than 12 months old had six or more placements by June 1, 2010.

The data in the table also indicate that 50 percent of the children in the sample who entered OKDHS custody when they were age 13 or older experienced six or more placements by June 1, 2010. Since children generally age out of foster care at age 18 in Oklahoma, this would mean
that a child entering custody at age 13 could experience at least one or more placement changes for each year in OKDHS custody.

50 percent of the children in the sample who entered OKDHS custody when they were age 13 or older experienced six or more placements by June 1, 2010.

Table 14 below provides information on the number of placements for children in various age groups as of June 1, 2010. There was a significant relationship between the child’s age as of June 1, 2010 and the number of placements experienced (Chi Square (12) = 68.271; p < .000).

Table 14
Number of Placements by Child’s Age as of June 1, 2010

<table>
<thead>
<tr>
<th>Child’s Age as of June 1, 2010</th>
<th>One to Two Placements</th>
<th>Three to Five Placements</th>
<th>Six or More Placements</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 12 months (1 year)</td>
<td>10</td>
<td>3</td>
<td>0</td>
<td>13</td>
</tr>
<tr>
<td>At least 12 (1 year) but less than 36 months (3 years)</td>
<td>29</td>
<td>27</td>
<td>8</td>
<td>64</td>
</tr>
<tr>
<td>At least 36 (3 years ) but less than 60 months (5 years)</td>
<td>11</td>
<td>24</td>
<td>10</td>
<td>45</td>
</tr>
<tr>
<td>At least 60 (5 years) but less than 120 months (10 years)</td>
<td>32</td>
<td>51</td>
<td>37</td>
<td>120</td>
</tr>
<tr>
<td>At least 120 (10 years) but less than 156 months (13 years)</td>
<td>13</td>
<td>16</td>
<td>22</td>
<td>51</td>
</tr>
<tr>
<td>At least 156 (13 years) but less than 192 months (16 years)</td>
<td>9</td>
<td>9</td>
<td>23</td>
<td>41</td>
</tr>
<tr>
<td>At least 192 (16 years) but less than 216 months (18 years)</td>
<td>6</td>
<td>7</td>
<td>27</td>
<td>40</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>110</strong></td>
<td><strong>137</strong></td>
<td><strong>127</strong></td>
<td><strong>374</strong></td>
</tr>
</tbody>
</table>

As shown in the table, 38 (49.4%) of the 77 children who were younger than age three on June 1, 2010 had already been in three or more placements and 10.4 percent of the 77 children had already been in six or more placements. 59 percent of the 122 children younger than age five (i.e., birth to less than 60 months) on June 1, 2010 had already been in three or more placements, and 14.7 percent of these children had already been in six or more placements.
Although children in custody for longer periods of time experienced more placement moves than other children, over 40 percent of children in custody for less than 12 months by June 1, 2010 had three or more placements.

The case example below illustrates the issues related to multiple placements over a short period of time, including an extended shelter stay.

This child is a 14 year-old male who entered OKDHS custody in 2007 when he was 11 years old due to abandonment by his mother, failure to provide adequate nutrition, and inadequate physical care. After being initially placed in a shelter for almost two months, he has experienced approximately 19 placements in the less than three years he has spent in OKDHS custody, including 10 placements during a four-month period, six of which were shelters. The most frequent reasons listed in his file for placement changes were placement was “temporarily unable to care for child” or “caregiver requested that the child be moved due to the child’s behavior.” His parents’ parental rights were terminated almost two years ago.

Table 15 provides information about the number of placements experienced by children who were in OKDHS custody for various time periods as of June 1, 2010. There was a significant relationship between time in OKDHS custody and the number of placements experienced (Chi Square (12) = 103.749; p < .000).

<table>
<thead>
<tr>
<th>Time in OKDHS Custody as of June 1, 2010</th>
<th>One to Two Placements</th>
<th>Three to Five Placements</th>
<th>Six or More Placements</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 12 months (1 year)</td>
<td>47</td>
<td>26</td>
<td>10</td>
<td>83</td>
</tr>
<tr>
<td>At least 12 months (1 year) but less than 18 months (1.5 years)</td>
<td>28</td>
<td>26</td>
<td>13</td>
<td>67</td>
</tr>
<tr>
<td>At least 18 months (1.5 years ) but less than 24 months (2 years)</td>
<td>11</td>
<td>23</td>
<td>7</td>
<td>41</td>
</tr>
<tr>
<td>At least 24 months (2 years) but less than 36 months (3 years)</td>
<td>13</td>
<td>31</td>
<td>24</td>
<td>68</td>
</tr>
<tr>
<td>At least 36 months (3 years) but less than 48 months (4 years)</td>
<td>6</td>
<td>13</td>
<td>22</td>
<td>41</td>
</tr>
<tr>
<td>At least 48 months (4 years)</td>
<td>5</td>
<td>18</td>
<td>51</td>
<td>74</td>
</tr>
<tr>
<td>Total</td>
<td>110</td>
<td>137</td>
<td>127</td>
<td>374</td>
</tr>
</tbody>
</table>
Although, in general, the number of placements increased as the length of stay in custody increased, a large percentage of children (43.4%) in OKDHS custody for less than 12 months as of June 1, 2010 had three or more placements. In addition, slightly more than one out of ten children (12%) in OKDHS custody for less than 12 months already had six or more placements.

It is important to note that the Federal standard for placement stability used in the Annual Report to Congress on Child Welfare Outcomes is two or fewer placements. That is, the ideal goal to ensure children’s stability and well-being is that children in foster care should not experience more than one placement change while they are in custody. The national median among States for this measure as reported in the Child Welfare Outcomes 2004-2007: Report to Congress is 85.2 percent of children have two or fewer placements within a 12-month period. However, only 56.6 percent of the children in the Oklahoma case review sample who had been in foster care for less than 12 months had two or fewer placements.

**Time in Placement as an Indicator of Placement Stability**

Very short term stays in foster care placements raise concerns that children are moving from one placement to another without the opportunity to form attachments with any caregivers.

While reviewing the data on placement stability, we observed that many of the placements experienced by children were of very short duration, often less than one week or one month in duration. We decided to examine this in more detail because it suggested that OKDHS was not carefully matching children with placement resources that were able to meet their needs, but instead placing children wherever a bed could be found.

Many children moved from one short-term placement to another. Of children with at least two placements, almost three-quarters spent less than a month in the first placement. Of children with at least three placements, almost one-half spent less than a month in the second placement.

As noted earlier in this section, there were 344 children in the sample who experienced more than one placement setting (92% of the sample) from the date they entered OKDHS custody to June 1, 2010. The following are the key findings for the time-in-placement analyses for these children:

- Over one-third (38.7 percent) of these children were in their first placement for less than one week.
- Another third (34.3%) were in the first placement for at least one week but less than one month.
- In total, 73 percent (251) were in their first placement for less than one month.

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We understand that in some situations, child welfare agencies make brief initial placements for children entering foster care, and may even use those placements to assess the child’s needs and find an appropriate placement match so that future placement settings for the child are stable. However, this does not appear to be the case with the children in the sample, as they did not experience greater placement stability over time. The findings with regard to this issue are the following:

- Of the children with at least three placements, 46 percent had a second placement that was less than one month and 64.4 percent had a second placement that was less than three months. For one-fifth of these children (21.8%), the second placement was less than one week.

- Of the children with at least four placements, 36.2 percent had a third placement that was less than one month, and over one-half of them (56.5%) had a third placement that was less than three months.

- Of the children who had at least five placements, 36.5 percent had a fourth placement that was less than one month and over one-half of them (56.9 percent) had a fourth placement that was less than three months.

- Of the children with at least six placements, 35.4 percent had a fifth placement that was less than one month and almost two-thirds of them (65.4%) had a fifth placement that was less than three months.

- By the ninth placement, over one-third (38.5%) of the 49 children who had at least 10 placements had a ninth placement that was less than one month, and almost two-thirds (61.2%) had a ninth placement that was less than three months.

As the data above indicate, we observed patterns of many children moving from one short-term placement to another. When the time spent in initial placement was excluded, one-third of the 344 children (117 or 34.0%) who had two or more placements were still in at least one placement that was less than one week in duration.

We also analyzed the duration of placements for the 167 children who had four or more placements from their most recent entry into OKDHS custody until June 1, 2010. For each of these children, the short-term duration of each placement indicates movement from one short-term placement to another. The following are the findings of this analysis:

- 67 (40.1%) of the children who had four or more placements had at least three consecutive placements lasting less than three months each.

- Of these 67 children:
  - 20 children had three consecutive placements, each less than one month in duration.
  - 21 children had three consecutive placements, each less than three months in duration.
Eight children had four or more consecutive placements, each less than one month in duration (two children in this group had six or more consecutive placements that were less than one month each).

18 children had four or more consecutive placements, each less than three months in duration (four children in this group had seven or more consecutive placements that were less than three months each).

**Use of Temporary Shelter Care as a Placement**

The use of shelter care facilities as placement settings for children presents a particular set of concerns. Shelter care is generally regarded as a temporary placement, typically designed for emergencies, particularly at entry into foster care, or very short-term stays when other more appropriate placement options, such as placements in foster family homes, are not available.

As shown in the discussion below, our findings with regard to duration of placements in shelter care confirm the perception of OKDHS that the goal of a 24-hour placement protocol is not always attainable. Our findings also indicate that use of shelter as an initial placement is not restricted to the metropolitan counties.

**59.4 percent of the children in the sample were placed in temporary shelter care upon entering custody.**

This case example illustrates the instability brought on by using shelter care for young children in foster care.

This child is a three year-old female who entered OKDHS custody in 2009 when she was two years old due to confirmed allegations of physical abuse of a sibling and a history of domestic violence in the home. While in OKDHS custody, she has experienced eight different placements in less than one year, including a foster home placement where she was twice placed short-term in a shelter on respite. Her placement history is as follows:

- First placement – one day – shelter
- Second placement – one month – emergency foster home A
- Third placement – 12 days – foster home B
- Fourth placement – three days – shelter (respite)
- Fifth placement – one month – foster home B
- Sixth placement – 10 days – shelter (respite)
- Seventh placement – one week – foster home B
- Eighth placement – six months – foster home C

The first episode of respite was because the child’s biological mother refused to sign consent to allow the child to travel with the foster mom. There is no documentation regarding the reason for the second respite placement in a shelter.
Table 16 provides information regarding the use of shelter care as an initial placement and as subsequent placements. The data in the table depict the number of times that shelter care was used as a child’s initial, second, third and subsequent placement settings.

### Table 16
**Use of Shelter Care Placements as Initial and Subsequent Placements**

<table>
<thead>
<tr>
<th>Placement</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Placement</td>
<td>222</td>
</tr>
<tr>
<td>Second Placement</td>
<td>30</td>
</tr>
<tr>
<td>Third Placement</td>
<td>35</td>
</tr>
<tr>
<td>Fourth Placement</td>
<td>34</td>
</tr>
<tr>
<td>Fifth Placement</td>
<td>23</td>
</tr>
<tr>
<td>Sixth Placement</td>
<td>18</td>
</tr>
<tr>
<td>Seventh – Fifteenth Placements</td>
<td>78</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>440</strong></td>
</tr>
</tbody>
</table>

As shown in the table, shelter care was recorded as the placement type 440 times for the 374 children in the sample. It comprised the initial placement for 222 (59.4%) of the 374 children. Following the initial placement, the use of shelter care declined as a placement setting for children, i.e., it was less likely after the initial placement setting that a child would be moved to a shelter care facility. However, children continued to be placed in shelters for subsequent placements (218 times) up to the fifteenth placement. Any one child could have been placed in a shelter for multiple placements after the initial placement, therefore, 218 does not relate to the number of cases but to the number of times it was used as a placement after the initial placement.

Shelter care stays are generally designed to be 30 days or less. OKDHS policy regarding children’s stays in shelter facilities includes the following:

- Children age five years and younger are to remain in a shelter for no longer than five days. If the child does not return home by the end of the five days, the child must be discharged to an emergency foster family home. However, as noted above, the goal of OKDHS is to place children younger than age six in a family setting within 24 hours of removal.\(^2\)

- Children age six and older are to remain in shelter care for no more than 30 days. If an extended stay is required, the child’s length of stay in the shelter must not exceed 60 days.\(^2\)

Table 17 provides information about the length of time that children of various ages spent in their initial shelter placement upon entry into OKDHS custody. As shown, the OKDHS policy requirements were not adhered to for many of the children in the sample.

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\(^{21}\) OAC 340:75-10-9  
\(^{22}\) Ibid.
### Table 17
**Age of Child at Entry by Time in a Shelter as Initial Placement**

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Time in Shelter (Number of Days)</th>
<th>1 – 7</th>
<th>8 – 14</th>
<th>15 – 30</th>
<th>31 – 59</th>
<th>60 or more</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 year</td>
<td></td>
<td>16</td>
<td>10</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>28</td>
</tr>
<tr>
<td>1 year but less than 3 years</td>
<td></td>
<td>22</td>
<td>7</td>
<td>7</td>
<td>4</td>
<td>1</td>
<td>41</td>
</tr>
<tr>
<td>3 years but less than 5 years</td>
<td></td>
<td>18</td>
<td>9</td>
<td>5</td>
<td>1</td>
<td>0</td>
<td>33</td>
</tr>
<tr>
<td>5 years but less than 10 years</td>
<td></td>
<td>32</td>
<td>12</td>
<td>17</td>
<td>7</td>
<td>7</td>
<td>75</td>
</tr>
<tr>
<td>10 years but less than 13 years</td>
<td></td>
<td>7</td>
<td>1</td>
<td>8</td>
<td>4</td>
<td>0</td>
<td>20</td>
</tr>
<tr>
<td>13 years but less than 18 years</td>
<td></td>
<td>8</td>
<td>2</td>
<td>6</td>
<td>3</td>
<td>4</td>
<td>23</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>103</strong></td>
<td><strong>41</strong></td>
<td><strong>45</strong></td>
<td><strong>19</strong></td>
<td><strong>12</strong></td>
<td><strong>220</strong>*</td>
</tr>
</tbody>
</table>

*Information regarding the dates of shelter placement was missing for two children.

42.9 percent of the infants and 18.7 percent of children ages 5-10 who entered shelter care remained there longer than permitted under OKDHS policy.

Key findings with regard to adherence to OKDHS policy concerning shelter placement were the following:

- Of the 28 infants (children younger than one year old) who were placed in shelter care as an initial placement, 12 (42.9%) were in shelter care for longer than one week, in violation of OKDHS policy.

- Of the 69 children who were younger than age three and who were placed in shelter care as an initial placement, 31 (44.9%) were in the shelter longer than one week, in violation of OKDHS policy.

- Of the 75 children who were at least age five but younger than age 10 and who were placed in shelter care as an initial placement, 14 (18.7%) were in the shelter for longer than one month.

- 31 (14.0%) of the 222 children initially placed in a shelter were in a shelter for 30 days or longer, in violation of OKDHS best practice policy, and 12 of these children were in a shelter for 60 days or longer.

The data in Table 17 above also demonstrate that although shelter placements are generally not considered appropriate for very young children:

- 35.9 percent (28 children) of the 78 children in the sample who were infants (younger than age one) at the time of their entry into OKDHS custody were initially placed in a shelter.

- 62 percent (41 children) of the 66 children who were one to two years old at the time of their entry into OKDHS custody were initially placed in a shelter.
• 68.7 percent (33 children) of the 48 children who were three to four years old at the time of their entry into OKDHS custody were initially placed in a shelter.

**35.9 percent (28 children) of the 78 children in the sample who were infants (younger than age one) at the time of their entry into OKDHS custody were initially placed in a shelter.**

A key finding is that the use of shelter care for children in the sample did not increase the likelihood of future placement stability for those children. In particular, of the 222 children whose initial placement was in a shelter care facility, 84.2 percent (187 children) had at least two additional placements after the shelter placement, i.e., they experienced three or more placements while in OKDHS custody. In addition, of the 187 children who had at least two additional placements, 74.3 percent (139) had at least one placement after the shelter placement that lasted less than one month in duration.

**Use of Relative Placements**

The literature generally indicates that placing children with relatives promotes stability in the living situations of children in foster care. For example, in one study we reviewed that was based on foster care data from 2000-2005 in five States, children who were initially placed in relative foster homes were more likely to remain in their initial placement than children who were initially placed in non-relative foster homes. For example, in Connecticut, the length of the initial placement for a child placed in relative care was on average three times longer than the initial placement of a child placed in non-relative care. Defining placement instability as three or more placements within a year of entry into care, children in relative placements were more likely to experience placement stability than children who were not in relative care.23

Another study of over 100,000 foster children in Illinois between 1998 and 2007 indicated that children in relative care were more likely to experience placement stability (i.e., less than three placements within a year of entry). Less than one-quarter of children in relative foster care experienced placement instability, whereas 39 percent of children in non-relative care did.24

Another study of around 5,500 children who entered foster care in California between the ages of zero and six found that children who were placed in relative care were more likely to experience placement stability (i.e., less than three placements after the first year in care). Thirty percent of children in relative care experienced placement instability, whereas 52 percent of children in non-relative care did. Regardless of the child’s age at entry, children in relative care had fewer moves than children in non-relative care.25

The findings from the OKDHS review indicated that almost one out of ten children (8.3%) was initially placed with a relative upon entry into OKDHS custody. The percentage increased

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23 Koh (2010)
24 Koh and Testa (2008)
25 Webster, Barth, and Needell (2000)
to three out of ten children for the second placement. However, after the second placement, the percentage of relative placements declined as the number of placements increased.

Among the first four placement settings for children in the sample, there were 243 placements with relatives. Of these placements, 131 (53.9%) disrupted and the children were moved to another placement.

Table 18 below shows the outcomes of placing children with relatives as the first, second, third, or fourth placement setting for the children in the sample.

### Table 18
**Outcomes of Relative Placements**

<table>
<thead>
<tr>
<th>Outcome of Placement</th>
<th>When relative is 1st placement</th>
<th>When relative is 2nd placement</th>
<th>When relative is 3rd placement</th>
<th>When relative is 4th placement</th>
</tr>
</thead>
<tbody>
<tr>
<td>No disruption (i.e., last placement recorded)</td>
<td>13 (42.0%)</td>
<td>41 (41.0%)</td>
<td>26 (38.8%)</td>
<td>16 (35.6%)</td>
</tr>
<tr>
<td>Child moved to a trial reunification that was last placement recorded</td>
<td>3 (9.7%)</td>
<td>7 (7.0%)</td>
<td>3 (4.5%)</td>
<td>3 (6.7%)</td>
</tr>
<tr>
<td>Placement disrupted and child moved to another placement</td>
<td>15 (48.3%)</td>
<td>52 (52.0%)</td>
<td>38 (56.7%)</td>
<td>26 (57.8%)</td>
</tr>
<tr>
<td>Total relative placements</td>
<td>31</td>
<td>100*</td>
<td>67</td>
<td>45</td>
</tr>
</tbody>
</table>

*There were 104 children with relatives as second placement but insufficient data about subsequent placements for four children.

**Among the first four placement settings for children in the sample, there were 243 placements with relatives. Of these placements, 131 (53.9%) disrupted and the children were moved to another placement.**

With a disruption rate of 53.9 percent for children placed with relatives during their first four placements, we did not find a high degree of placement stability for children in relative care.
Reasons for Placement Changes

The reason that children were most often moved from the first to second placement was because they needed a less restrictive placement, raising concerns about the appropriateness of the first placement.

This section provides data regarding the primary reasons why children in the sample changed placements. For each placement change, reviewers could identify up to two reasons for the change and there were 28 reason options.

The key findings with regard to the reasons for placement changes are the following:

- The reason “to move the child to a less restrictive placement” was noted 334 times. This reason represented 43.9 percent of reasons for the change from the first to the second placement, but this percentage declined to less than 25 percent of reasons for subsequent placement changes.

- The reason “caregiver requested that the child be moved” was noted 208 times. This reason represented only 5.5 percent of the first placement changes and 11.7 percent of the second placement changes. However, by the sixth and seventh placement changes, this reason accounted for 29.3 and 26.2 percent of the reasons noted, respectively. This may be due to an increase in behavior problems with increases in placement changes.

- The reason “child needed higher level of care and exhibited threatening behavior” was only noted 87 times for children with 10 or more placements.

- The reason “move to Trial Reunification” was mentioned 105 times. Of these 105 mentions, 66.7 percent were used to explain one of the first three placement changes.

- The reason “failed trial reunification” was mentioned 50 times.

Efforts to Prevent Placement Changes

Reviewers were asked to indicate whether OKDHS had offered services to the foster parents to prevent any of the placement changes experienced by the child. Reviewers noted that in 169 (49.3%) of the 344 cases in which the child had at least two placement settings by June 1, 2010, it would not have been appropriate to prevent any of the placement changes that the children experienced (i.e. move to a pre-adoptive home, placement with relative or maltreatment occurred in the home).

The following case example highlights the issue of not providing services to prevent placement disruptions found by reviewers.
This child is a 16 year-old female who entered OKDHS custody in 2003 when she was nine years old due to her mother’s arrest related to drug charges. During her time in OKDHS custody she has been in 29 placements, including nine placements in a shelter. Prior to her entry into custody, she had been diagnosed with Oppositional Defiant Disorder (ODD), neurotic depression, and Post-Traumatic Stress Disorder, had been hospitalized twice for mental health concerns, and received ongoing mental health services. Despite her need for mental health support, the child’s first four placements were with non-therapeutic caregivers. Her initial placement in a regular foster home was disrupted because the placement could not meet her behavioral needs; however, after a three day placement at a shelter, she was returned to the same home. After three subsequent placements in a shelter, a therapeutic foster home, and a shelter, the child was returned to the original foster home that had been unable to meet her behavioral needs. That placement was disrupted after five months because, again, the placement could not meet her behavioral needs. She was then placed in a psychiatric hospital for over two months and then returned to the same foster home. The placement disrupted again after a month, for the same reason. Throughout her time in care, she was placed in the original, non-therapeutic foster home seven times, with an average stay of three months, never longer than five months. Each time that she was removed from the home, the reason was “placement cannot meet the child’s behavioral needs” yet there is no evidence that the foster parents were offered services or support to help them maintain the placements. After two unsuccessful placements in therapeutic foster homes followed by two shelter placements, the child was placed in a D+ facility where she received intensive treatment for her behavioral and mental health needs. After she was discharged from this facility, she was not placed in another therapeutic placement for over two years. Instead, the child was placed in a series of seven regular foster homes, none of which was able to accommodate her behavioral needs. She was then returned to the same D+ facility, where she remains.

The findings regarding services offered to caregivers in the 175 cases where maintaining any disrupted placement would have been appropriate are shown in Chart 1 below:

**Chart 1**

**Services Offered to Caregiver(s) to Prevent a Child’s Placement Disruptions**

- Services Offered to Prevent All Placement Disruptions - 6.5% of children
- Services Offered to Prevent Some Placement Disruptions - 16.6% of children
- No Services Offered - 76% of children

*N=174*  
*Data for one case are missing*
In 12 cases (6.9%), services were offered to caregivers to try and prevent all placement changes experienced by the child.

In 29 cases (16.6%), services were offered to caregivers to try and prevent some placement changes experienced by the child but not others.

In 133 cases (76.0%), no services were offered to caregivers to try and prevent any of the placement changes experienced by the child.

With regard to whether or not services were offered to the child to try to prevent placement disruptions, reviewers indicated that in 164 of the 344 cases in which the child had at least two placement settings by June 1, 2010, it would not have been appropriate to offer services to the child to prevent any of the placement changes that the child experienced. The findings for the remaining 180 cases are shown in Chart 2 below:

**Chart 2**

**Services Offered to the Child to Prevent the Child’s Placement Disruptions**

<table>
<thead>
<tr>
<th>Service Provided</th>
<th>Percentage of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services Offered to Prevent All Placement Disruptions</td>
<td>- 7.2% of children</td>
</tr>
<tr>
<td>Services Offered to Prevent Some Placement Disruptions</td>
<td>- 18.9% of children</td>
</tr>
<tr>
<td>No Services Offered</td>
<td>- 72.2% of children</td>
</tr>
</tbody>
</table>

*Data for three cases are missing

- In 13 cases (7.2%), services were offered to children to try and prevent all placement changes experienced by the child.
- In 34 cases (18.9%), services were offered to children to try and prevent some placement changes experienced by the child but not others.
- In 130 cases (72.2%), no services were offered to children to try and prevent any of the placement changes experienced by the child.

*No services to prevent placement changes were offered to foster caretakers in 76 percent of the cases and to children in 72 percent of the cases in situations in which it would have been appropriate to try to prevent the placement disruption.*
Child Behavior Concerns

Although behavior concerns related to children in custody raise issues that are not directly related to placement stability, our review of the literature described earlier indicates that as placement changes increase, so does the likelihood of behavioral issues. Therefore, we are presenting the information from the case reviews on the children’s behavior concerns in this section of the report.

Reviewers were asked to determine if there was documentation in the child’s record that someone identified a child behavior as an area of concern. The instrument allowed the reviewer to record up to three behaviors identified at a given time, and up to three times/incidents during the child’s most recent entry into OKDHS custody. Key findings of this analysis are presented below.

Number of children with identified behavior concerns

- 159 children (42.5%) in the case review sample had at least one incident where behavior concerns were identified.
- 88 children (23.5%) had at least two incidents where behavior concerns were identified.
- For 28 (31.8%) of the 88 children with at least two incidences of identified behavior concerns, the same problem was identified in the first and second incident.
- 51 children (13.6%) had three incidents where behavior concerns were identified.

Identified behavior concerns

Table 19 provides the frequency that various behavior concerns were identified.
Table 19
Frequency of Behavioral Concerns Identified in Three Incidents

<table>
<thead>
<tr>
<th>Behavior Concern</th>
<th>Number Identified in Time 1</th>
<th>Number Identified in Time 2</th>
<th>Number Identified in Time 3</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child is aggressive to other children</td>
<td>56</td>
<td>28</td>
<td>19</td>
<td>103</td>
</tr>
<tr>
<td>Child has school-related behavior problems</td>
<td>38</td>
<td>31</td>
<td>17</td>
<td>86</td>
</tr>
<tr>
<td>Child is aggressive to self or talks about/threatens self-aggression</td>
<td>21</td>
<td>11</td>
<td>14</td>
<td>46</td>
</tr>
<tr>
<td>Child is aggressive to foster family</td>
<td>23</td>
<td>12</td>
<td>2</td>
<td>37</td>
</tr>
<tr>
<td>Child exhibits psychotic behaviors (hallucinations, delusions, etc.)</td>
<td>3</td>
<td>2</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Child is hyperactive/agitated</td>
<td>19</td>
<td>5</td>
<td>4</td>
<td>28</td>
</tr>
<tr>
<td>Child has problems sleeping, eating, bedwetting</td>
<td>19</td>
<td>10</td>
<td>3</td>
<td>32</td>
</tr>
<tr>
<td>Child is withdrawn/appears depressed</td>
<td>13</td>
<td>2</td>
<td>3</td>
<td>18</td>
</tr>
<tr>
<td>Child exhibits unusual/unexplained/abnormal behaviors (e.g., masturbating in public, cruelty to animals, defecation)</td>
<td>31</td>
<td>8</td>
<td>13</td>
<td>52</td>
</tr>
<tr>
<td>Child runs away</td>
<td>12</td>
<td>12</td>
<td>11</td>
<td>35</td>
</tr>
<tr>
<td>Child acts out sexually</td>
<td>19</td>
<td>9</td>
<td>2</td>
<td>30</td>
</tr>
<tr>
<td>Child tried alcohol and/or drugs</td>
<td>7</td>
<td>2</td>
<td>2</td>
<td>11</td>
</tr>
<tr>
<td>Child steals</td>
<td>11</td>
<td>10</td>
<td>2</td>
<td>23</td>
</tr>
<tr>
<td>Child has anger problems/exhibits violent outbursts</td>
<td>7</td>
<td>1</td>
<td>1</td>
<td>9</td>
</tr>
<tr>
<td>Other*</td>
<td>5</td>
<td>5</td>
<td>1</td>
<td>11</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>284</strong></td>
<td><strong>148</strong></td>
<td><strong>94</strong></td>
<td><strong>526</strong></td>
</tr>
</tbody>
</table>

*Other includes unique responses such as “adjustment to foster care,” “disobedience,” “parentified child,” “lack of attachment and boundaries,” etc.

As shown in the table, the most frequently occurring behavior problems were the following:

- Aggression to other children – 19.6 percent of all identified problems
- School-related behavior problems – 16.3 percent of all identified problems
- Unusual/unexplained/abnormal behaviors – 9.9 percent of all identified problems
- Self-aggression or threat of self-aggression – 8.7 percent of all identified problems

*Aggressive behaviors were the most commonly identified behavior concerns for children in the sample.*

We were also interested in seeing how the agency responded to the children’s behavior concerns as they were identified. Table 20 provides information pertaining to the actions taken by the agency within 60 days of the behavior being identified.
Table 20
Action Taken by the Agency in Response to Child’s Behavior Concerns

<table>
<thead>
<tr>
<th>Action Taken</th>
<th>Number of Actions Taken</th>
<th>Percent of Actions Taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling continued or provided</td>
<td>156</td>
<td>31.4</td>
</tr>
<tr>
<td>Health/mental health/substance abuse assessments and services arranged for child</td>
<td>90</td>
<td>18.1</td>
</tr>
<tr>
<td>Child removed from the placement temporarily or permanently</td>
<td>58</td>
<td>11.7</td>
</tr>
<tr>
<td>CPS assessment or investigation initiated (including calling police)</td>
<td>48</td>
<td>9.7</td>
</tr>
<tr>
<td>Placement in residential treatment facility/psychiatric hospital continued or arranged</td>
<td>48</td>
<td>9.7</td>
</tr>
<tr>
<td>Evaluation for provision of psychotropic drugs</td>
<td>29</td>
<td>5.8</td>
</tr>
<tr>
<td>Services (i.e., counseling or behavior management training) provided to caregiver to help them address behavior concerns</td>
<td>21</td>
<td>4.2</td>
</tr>
<tr>
<td>No action taken</td>
<td>18</td>
<td>3.6</td>
</tr>
<tr>
<td>Other</td>
<td>15</td>
<td>3.0</td>
</tr>
<tr>
<td>Education-related services arranged</td>
<td>14</td>
<td>2.8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>497</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

The most frequent action taken by the agency in response to identified behavior concerns was the continuation or provision of counseling, which represents 31.4 percent of the total number of actions taken. The most important finding here is the lack of provision of services to the child’s caregivers to help them address the identified problems. Of the 497 actions identified as taken by the agency in response to the child’s behavioral concern, only 21 (4.2 percent) involved providing services to the caregiver.

Only 4.2 percent of the actions taken by OKDHS in response to child behavior problems involved providing services to the caregiver.

Time in Foster Care Prior to Identified Behavior Concerns

We examined the identification of behavior concerns according to the length of time children had been in OKDHS custody to shed light on whether children were entering custody with behavior concerns or if they developed the behavior concerns following entry into custody.

For one-half of the children in the sample, the child’s behavior problems were not identified until the child had been in custody for at least six months.
Key findings of this analysis were the following:

- For 50 percent of the children with identified behavior problems, the first incident where behavior problems were identified occurred when the child had been in OKDHS custody for less than six months.

- For 50 percent of the children, the problem behaviors were not identified until the child had been in OKDHS custody for longer than six months.

- For 36.6 percent of the children, the child had been in OKDHS custody for longer than one year before the problem was identified.

- For 10 percent of the children, the child had been in OKDHS custody for longer than three years before the problem was identified.

These data suggest that although one-half of the children in the sample may have entered OKDHS custody with behavior problems (although we cannot confirm this), a large percentage of identified behavior problems appear to have arisen during the child’s stay in OKDHS custody. The length of time that children remain in OKDHS custody suggests that children’s behavior problems may be the result, at least in part, of being in OKDHS custody.

*When compared to children in custody for less than six months, children in custody for more than six months had substantially higher identified incidences of school problems, aggressiveness, sexual acting out, hyperactivity, and unusual or abnormal behaviors.*

Children in OKDHS custody for longer than six months are more likely than children in OKDHS custody for less than six months to exhibit school-related behavior problems (71.1%), aggressiveness towards foster family (60.9%), sexual acting out behaviors (73.7%), hyperactivity and agitation (63.2%), unusual/abnormal behaviors (61.3%), and problems with anger (85.7%).

In comparison, children who exhibited behavior problems at entry or early on in foster care (i.e., less than six months) were more likely than other children to have tried alcohol and other drugs (71.4%) and to exhibit self-aggressive behaviors (71.4%).
PART 4: ACHIEVING PERMANENCY FOR CHILDREN IN OKDHS CUSTODY

This chapter provides information about the length of time that children in the case review sample spent in OKDHS custody as of June 1, 2010, the permanency goals for the children, and efforts to achieve adoption when appropriate. Our analysis resulted in the following key findings:

- As of June 1, 2010, 49 percent of the children in the sample had been in OKDHS custody for two years or longer, and 30.7 percent had been in custody for three years or longer.

- The older the child was on June 1, 2010, the more likely the child was to have been in OKDHS custody for a longer period of time, suggesting that many of the older children in the sample aged while in OKDHS custody rather than entering custody at older ages.

- 29.1 percent of children had a concurrent permanency goal established upon entering OKDHS custody. That percentage declined to four percent of children with concurrent goals as of June 1, 2010.

- Children in the sample experienced multiple permanency goal changes, with 35.2 percent having three or more different consecutive permanency goal changes by June 1, 2010. The longer the child was in foster care, the more likely he or she was to have multiple permanency goal changes.

Why is Length of Time in Custody Important?

We know from the research that the longer children are in foster care, the less likely it is that they will achieve permanency through reunification, adoption or guardianship.26 Akin’s study of children who entered care in a Midwestern state in 2006 found that the likelihood of reunification decreases after 18 months in care; the likelihood of guardianship decreases after 20 months in care; and the likelihood of adoption decreases after 36 months in care.27 Becker et al found that a foster child’s age is a significant factor in achieving permanency, and that each year increase in age reduces the child’s odds of adoption by 22 percent. Older foster children are less likely to be adopted and more likely to return to care after a failed reunification.28 Children who are in care for longer periods of time are also more likely to experience multiple placement changes.29

As noted elsewhere in this report, children in foster care are more susceptible to problems with regard to education, behavior, mental health and so forth, that may be increased with time in

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26 Akin (2011) and Kemp and Bodonyi (2002)
27 Akin (2011)
29 Webster, Barth, and Needell (2000)
In fact, behavioral healthcare expenditures for children who remain in care are 61 percent higher than for children who are successfully reunified.\textsuperscript{30}

### Time in OKDHS Custody

Many of the children in the sample were in OKDHS custody for long periods of time by June 1, 2010 without achieving permanency. Because only 20 of the children in the sample were discharged from OKDHS custody between March 1, 2010 (the date that the sample of children was identified) and June 1, 2010 (the end of the period under review), it may be assumed that the remaining 354 children in the sample will be in OKDHS custody for longer periods of time before they are discharged to some form of permanent home or age out of the system. For the child in the case example from our case review below, even after spending nine years in OKDHS custody, he was leaving custody with no plan for the future.

This child is a 17 year-old male who entered OKDHS custody in 2001 when he was eight years old, due to confirmed allegations of failure to protect, lack of supervision, inadequate or dangerous shelter, exposure to domestic violence, and sexual abuse. During the child’s nine years in custody, he lived mostly in a family setting for the first three years; however, the remaining six years were spent almost exclusively in hospitals and congregate care settings. He has experienced approximately 30 placements while in custody: eight in therapeutic foster homes, two in shelters, eight in psychiatric hospitals, and twelve in a residential facility providing therapeutic or treatment services to children. As of May 2010, when he was 17 years old, the Individualized Service Plan noted that the child had not confirmed what his plan would be when he turns 18. He had mentioned living with his mother, obtaining an apartment, or living in a transitional living home. The parental rights of both parents were terminated several years ago and a goal of adoption had been established since June 2003. However, by 2010, the child’s permanency goal was Planned Alternative Permanent Placement.\textsuperscript{31}

Eleven of the 20 children who were discharged from OKDHS custody between March 1, 2010 and June 1, 2010, had been in custody for two years or longer. The specific times in custody for the 20 children discharged are the following:

- Three children were discharged (one to reunification and one to guardianship) in less than 12 months of entry;

\textsuperscript{30} Becker, Jordan, and Larsen (2007)

\textsuperscript{31} 42 U.S.C. 622 (b) (8) (A) (iii) (II). Planned Alternative Permanent Placement refers to a child’s permanency goal that is recognized under the Adoption and Safe Families Act, which requires States to have a plan to return children to families from which they have been removed when appropriate, or to place children for adoption or with a legal guardian, or, if adoption or legal guardianship is determined not to be appropriate, to place children in some other planned, permanent living arrangement which may include a residential educational program. In practice, this often means that children with a goal of Planned Alternative Permanent Placement will remain in foster care until emancipating.
• Two children were discharged to reunification in at least 12 months but less than 18 months of entry;

• Four children were discharged in at least 18 months but less than 24 months; three to reunification and one to adoption;

• Five children were discharged in at least 24 months but less than 36 months; two to reunification and two to adoption;

• Three children were discharged to adoption in at least 36 months but less than 48 months; and

• Three children were discharged to adoption in 48 months or more.

Table 21 provides information pertaining to the length of time in OKDHS custody that children in the sample had spent as of June 1, 2010 or at the time of discharge.

<table>
<thead>
<tr>
<th>Time in OKDHS custody</th>
<th>Number of Children</th>
<th>Percent of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 12 months</td>
<td>83</td>
<td>22.2</td>
</tr>
<tr>
<td>At least 12 but less than 18 months</td>
<td>67</td>
<td>17.9</td>
</tr>
<tr>
<td>At least 18 but less than 24 months</td>
<td>41</td>
<td>11.0</td>
</tr>
<tr>
<td>At least 24 but less than 36 months</td>
<td>68</td>
<td>18.2</td>
</tr>
<tr>
<td>At least 36 but less than 48 months</td>
<td>41</td>
<td>11.0</td>
</tr>
<tr>
<td>48 or more months</td>
<td>74</td>
<td>19.8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>374</strong></td>
<td><strong>100.1</strong></td>
</tr>
</tbody>
</table>

*20 children were discharged from OKDHS custody between March 1, 2010 and June 1, 2010

49 percent of the children in the sample had been in OKDHS custody for two years or longer by June 1, 2010, and almost one-third of the children had been in custody for three years or longer as of June 1, 2010.

The median length of stay in OKDHS custody of the children in our sample as of June 1, 2010 was approximately 23 months, with 48.9 percent (183) of the children having been in OKDHS custody for two years or longer by June 1, 2010. This median exceeds the national median of 15.4 months for time in foster care as of September 30, 2009, as reported in the Federal report of the Adoption and Foster Care Analysis and Reporting System (AFCARS). In addition, 115 children (30.7%) in the sample had been in OKDHS custody for three years or longer as of June 1, 2010 or at the time of discharge.

There was a significant relationship between the child’s age as of June 1, 2010 and the time the child had been in OKDHS custody. The older the child was on June 1, 2010, the more likely the child was to have been in OKDHS custody for longer periods of time (Chi-Square = 140.684, p < .000). This finding suggests that many of the older children in the sample aged while they were in OKDHS custody rather than entering custody at older ages. In fact, there was no significant relationship between the child’s age at entry and time in OKDHS custody as of June 1, 2010.

The older the child was on June 1, 2010, the more likely the child was to have been in OKDHS custody for longer periods of time, suggesting that many of the older children in the sample aged while they were in OKDHS custody rather than entering custody at older ages.

Permanency Planning

In addition to examining the long periods of time that many children had been in OKDHS custody by June 1, 2010, we reviewed the planning processes that affect the timely achievement of permanency for children in custody. First, we explored the use of “concurrent planning” for children in custody as a means of achieving timely permanency. Second, we explored the stability and patterns of permanency goals that were established for children in custody by OKDHS.

This case example from the review illustrates the concerns over the appropriateness of permanency goals and not achieving permanency for children in foster care.

This child is a six year-old female who entered OKDHS custody in April 2009 when she was five years old, due to significant parental domestic violence, which resulted in the broken leg of a sibling during an altercation between the parents. While the child was in OKDHS custody, she experienced nine placements, seven of which occurred during a six-month period, including a trial reunification with her parents that lasted 13 days. The trial reunification failed because of a domestic altercation, resulting in the mother going to the hospital and the father going to jail. This little girl was in two shelter placements after the trial reunification, each lasting approximately one week. She was placed in a relative foster home last year and remained there as of June 2010. Despite this history, she has had a single goal of return home since she entered care.

Permanency Goals for Children

Concurrent goals are permanency goals that are established simultaneously so that an alternate permanency plan is in place if the preferred goal, such as reunification, cannot be achieved; for example, a child might have concurrent goals of return to own home and adoption. In concurrent planning, an alternative permanency goal is pursued at the same time as the
preferred goal. In 1997, the Federal government acknowledged the importance of concurrent planning in the Adoption and Safe Families Act, by providing that reasonable efforts to finalize an alternate permanency plan may be made concurrently with reasonable efforts to reunify the child and family.

Studies on the effectiveness of concurrent planning suggest that the practice can reduce both the number of placement disruptions a child experiences while in foster care and length of time in care. Another study found that children in foster care in the United Kingdom, all under age three, whose cases utilized concurrent planning, achieved permanency more quickly than a control group, or previous studies of larger populations of children in care. The study’s findings suggest that concurrent planning is an effective way to achieve permanency quickly for infants whose early development benefits by being in a stable environment with a responsive caregiver.

An evaluation of the Kentucky Adoption Opportunities Project, a federally funded project started in 1997 that piloted methods of expedited permanency planning, including concurrent planning for children at high risk of remaining in care for long periods of time, showed promising results. The project’s success with reducing the number of placements a child had and the time in care were especially notable. Sixty-three percent of the children in urban counties and 50 percent of the children in rural counties had a maximum of two placements. The average time in care for children in urban counties at the time was 31.6 months, but for the children participating in the project it was reduced to 11.6 months. The average time in care for children in rural counties at the time was 24.7 months, which was reduced to 16.9 months for children participating in the program.

As shown in Table 22 below, at their entry into OKDHS custody, the majority of children in the sample had either a single permanency goal of return home (59.6%) or return home was one of the concurrent goals established for the child (27.8%).

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33 Katz, 1999; Lutz, 2000
34 45 Code of Federal Regulations 1356.21 (b)(4)
35 Gerstenzang and Freundlich (2005)
37 Cited in Martin, Barbee, Antle, and Sar (2002)
Table 22
Initial Permanency Goal at Entry into OKDHS Custody

<table>
<thead>
<tr>
<th>Initial Permanency Goal</th>
<th>Number of Children</th>
<th>Percent of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Return Home</td>
<td>223</td>
<td>59.6</td>
</tr>
<tr>
<td>Concurrent goals of return home and adoption or return home and adoption preparation</td>
<td>98</td>
<td>26.2</td>
</tr>
<tr>
<td>Adoption or Adoption Preparation*</td>
<td>31</td>
<td>8.3</td>
</tr>
<tr>
<td>Guardianship</td>
<td>5</td>
<td>1.3</td>
</tr>
<tr>
<td>Planned Alternative Permanent Placement</td>
<td>3</td>
<td>0.8</td>
</tr>
<tr>
<td>Maintain in own home</td>
<td>2</td>
<td>0.5</td>
</tr>
<tr>
<td>Concurrent goals of return home and guardianship</td>
<td>2</td>
<td>0.5</td>
</tr>
<tr>
<td>Concurrent goals of return home and planned alternative permanent placement</td>
<td>4</td>
<td>1.1</td>
</tr>
<tr>
<td>Concurrent goals of adoption and guardianship</td>
<td>2</td>
<td>0.5</td>
</tr>
<tr>
<td>Concurrent goals of adoption and planned alternative permanent placement</td>
<td>2</td>
<td>0.5</td>
</tr>
<tr>
<td>Concurrent goals of guardianship and planned alternative permanent placement</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td>Other</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>374</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

*Child had a single goal of either adoption or adoption preparation (28 children), or a concurrent goal of adoption and adoption preparation (3 children).

Overall, only 29.1 percent of the children in the sample had concurrent goals established upon the child’s entry into OKDHS custody.

The data in Table 23 with regard to the children’s permanency goals as of June 1, 2010 show a different picture. On that date, the percentage of children with a goal of return home had decreased, with only 43.8 percent of the children having a goal of return home either as a single or concurrent goal. In comparison, the percentage of children with a goal of adoption or adoption preparation increased from 8.3 percent to 41.2 percent. Also, the percentage of children with some form of concurrent goals decreased from 29.1 percent at initial entry to four percent on June 1, 2010. This suggests that although concurrent planning was evident for some cases early on, it tended to decrease with increases in children’s time in custody.
Table 23
Permanency Goal as of June 1, 2010

<table>
<thead>
<tr>
<th>Permanency Goal as of June 1, 2010</th>
<th>Number of Children</th>
<th>Percent of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Return Home</td>
<td>152</td>
<td>40.6</td>
</tr>
<tr>
<td>Adoption or Adoption Preparation*</td>
<td>144</td>
<td>38.5</td>
</tr>
<tr>
<td>Guardianship</td>
<td>10</td>
<td>2.7</td>
</tr>
<tr>
<td>Planned Alternative Permanent Placement</td>
<td>30</td>
<td>8.0</td>
</tr>
<tr>
<td>Maintain in own home</td>
<td>3</td>
<td>0.8</td>
</tr>
<tr>
<td>Concurrent goals of return home and guardianship</td>
<td>2</td>
<td>0.5</td>
</tr>
<tr>
<td>Concurrent goals of return home and adoption or return home and adoption preparation</td>
<td>7</td>
<td>1.9</td>
</tr>
<tr>
<td>Concurrent goals of return home and planned alternative permanent placement</td>
<td>3</td>
<td>0.8</td>
</tr>
<tr>
<td>Concurrent goals of adoption and guardianship</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td>Concurrent goals of adoption or adoption preparation and planned alternative placement</td>
<td>2</td>
<td>0.5</td>
</tr>
<tr>
<td>Child not in OKDHS custody on June 1, 2010</td>
<td>20</td>
<td>5.3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>374</strong></td>
<td><strong>99.9</strong></td>
</tr>
</tbody>
</table>

*Child had a single goal of either adoption or adoption preparation

29.1 percent of children had a concurrent permanency goal established upon entering OKDHS custody. That percentage declined to four percent of children with concurrent goals as of June 1, 2010.

Stability and Patterns of Permanency Goals

Because of the differences between children’s goals at entry and as of June 1, 2010, we explored the patterns of changes in permanency goals over that time period to determine both the stability of permanency goals and the pattern of goal changes. This analysis is not related to concurrent planning, which involves establishing two goals simultaneously with the intent that the agency will work toward achieving those goals concurrently. As noted above, concurrent planning was not evident in the children’s permanency goals as of June 1, 2010.

The purpose of the analyses provided in this section is to explore whether OKDHS is establishing appropriate permanency goals for children and pursuing them diligently, or whether OKDHS is establishing permanency goals for children that may not be appropriate and/or may not be diligently pursued, resulting in more changes in the permanency goal.

Our first analysis in this area looked at the number of permanency goals that had been established for the children in the sample. The results of this analysis are shown in Table 24 below.
Table 24
Number of Consecutive Permanency Goals as of June 1, 2010*

<table>
<thead>
<tr>
<th>Number of Consecutive Permanency Goals as of June 1, 2010**</th>
<th>Number of Children</th>
<th>Percent of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>One goal</td>
<td>156</td>
<td>41.9</td>
</tr>
<tr>
<td>Two goals</td>
<td>85</td>
<td>22.8</td>
</tr>
<tr>
<td>Three goals</td>
<td>70</td>
<td>18.8</td>
</tr>
<tr>
<td>Four goals</td>
<td>33</td>
<td>8.9</td>
</tr>
<tr>
<td>Five or more goals</td>
<td>28</td>
<td>7.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>372</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

*Permanency goal data for two children are missing because of data quality concerns
**In this analysis, concurrent goals are considered as one goal.

As noted above, the numbers reflect the number of consecutive permanency goals, not the number of different types of permanency goals. By consecutive, we are referring to the series of goal changes rather than the type of goal. Thus a child with four consecutive permanency goals could have the goal of adoption or return home or some other goal represented twice in that series. Concurrent goals are considered as a “single” consecutive goal, so that a child with initial concurrent goals of adoption and return home, followed by a single goal of adoption would be considered to have two consecutive permanency goals.

Children in the case review sample experienced multiple goal changes, with 35.2 percent having three or more consecutive permanency goals.

Although it may be expected that many children in foster care would be likely to have up to two consecutive permanency goals if the original goal could not be achieved, case reviewers identified three or more consecutive goals for a substantial percentage (35.2%) of children in the case review sample, including 33 children (8.9%) who had four consecutive permanency goals by June 1, 2010 and 32 children (7.5%) who had five or more consecutive goals by that date.

In our case review, there was a significant relationship between the number of permanency goals and the time the child was in OKDHS custody (Chi Square = 202.66, p< .000). The longer the child was in OKDHS custody, the more likely the child was to have multiple goal changes. The reasons for this are not clear. However, it may be that as children are in custody for long periods of time without achieving permanency, they experience multiple goal changes as a result of the agency not establishing appropriate goals and/or a lack of diligent effort to achieve the permanency goals that were established early on.

Similarly, there also was a significant relationship between the number of permanency goals and the number of primary caseworkers assigned to the child (Chi Square (16) = 46.905; p <000). Of the 65 children who had four or more consecutive permanency goals, 37 had five more primary caseworkers. Again, although no clear causal relationships can be identified from this finding, it may be that as new caseworkers are assigned to a case, they are inclined to
establish new permanency goals based on their perceptions of what is most appropriate for the child. Thus, multiple turnovers in caseworkers can be associated with multiple goal changes.

Additional analyses of the patterns of goal changes resulted in the following findings:

- The extent of goal changes did not seem to vary as a function of the type of the child’s initial goal. Children with an initial goal of return home were as likely to have subsequent goal changes (39.4% had subsequent goal changes) as were children with an initial goal of adoption or adoption preparation (40% had subsequent goal changes), or children with initial concurrent goals of adoption and return home (37.1% had subsequent goal changes).

- Almost two-thirds of the children (62.0%) had goal changes that seemed to progress logically over the course of the agency’s interventions with the child and family, such as changes from return home to adoption, or return home to concurrent goals of return home/adoption and then finally to adoption. However, in 38 percent of the cases, the children had unexpected or unusual patterns of goal change such as return home followed by adoption followed by return home again, and then followed by adoption again. For many of these children, the goal of adoption was interspersed throughout a chain of goals rather than being the final goal, and the selection of the goals did not indicate any clear direction in permanency planning.

**Achieving Permanency through Adoption**

In order to achieve permanency through adoption, a child must be free for adoption; that is, there must be a termination of parental rights for all relevant parents, either through a voluntary surrender or court determination. The Adoption and Safe Families Act of 1997 requires States to seek termination of parental rights (TPR) for any child who has been in custody for 15 of the most recent 22 months or to document the reason why TPR was not sought.38

As of June 1, 2010, 128 children (34.4%) in the sample were free for adoption. Of the 244 children who were not free for adoption as of June 1, 2010, 30.7 percent of these children had been in custody for longer than two years and 23.0 percent of these children had been in custody for longer than three years without achieving permanency through some other option.

For the 128 children who were free for adoption, Table 25 presents information about the length of time between their entry into OKDHS custody and the time the child became free for adoption.

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38 42 U.S.C. § 675(5)(E)
Table 25

<table>
<thead>
<tr>
<th>Length of time from entry to becoming free for adoption</th>
<th>Number of children</th>
<th>Percent of children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 12 months</td>
<td>28</td>
<td>21.9</td>
</tr>
<tr>
<td>At least 12 months but less than 24 months</td>
<td>47</td>
<td>36.7</td>
</tr>
<tr>
<td>At least 24 months but less than 36 months</td>
<td>23</td>
<td>18.0</td>
</tr>
<tr>
<td>36 months or more</td>
<td>30</td>
<td>23.4</td>
</tr>
<tr>
<td>Total</td>
<td>128</td>
<td>100</td>
</tr>
</tbody>
</table>

The data in the table indicate that 30 of the children (23.4%) who were free for adoption did not become free until they had been in OKDHS custody for three years or longer. In addition, 13 of these 30 children had been in OKDHS custody for four years or longer and six of these 13 children were in custody for five years or longer before becoming free for adoption.

Although, as shown in Table 23 above, on June 1, 2010, 144 children in the case sample had a goal of adoption or adoption preparation, there were a total of 187 children in the sample who had a single permanency goal of adoption at some time during their most recent episode in OKDHS custody. Table 26 provides information about how long these children were in OKDHS custody before the single permanency goal of adoption was established.

Table 26

<table>
<thead>
<tr>
<th>Time to goal of adoption</th>
<th>Number of Children</th>
<th>Percent of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 12 months</td>
<td>66</td>
<td>35.3</td>
</tr>
<tr>
<td>At least 12 months but less than 18 months</td>
<td>28</td>
<td>15.0</td>
</tr>
<tr>
<td>At least 18 months but less than 24 months</td>
<td>29</td>
<td>15.5</td>
</tr>
<tr>
<td>At least 24 months but less than 36 months</td>
<td>38</td>
<td>20.3</td>
</tr>
<tr>
<td>36 months or more</td>
<td>26</td>
<td>13.9</td>
</tr>
<tr>
<td>Total</td>
<td>187</td>
<td>100</td>
</tr>
</tbody>
</table>

As shown in the table, more than one-third (34.2%) of the children with a single goal of adoption were in OKDHS custody for two years or longer before the goal of adoption was established as a single goal. In addition, 13.9 percent were in custody for three years or longer and 13 of the children in this latter group were actually in custody for four years or longer before the goal of adoption was established.

In addition, although 66 children had a single goal of adoption that was established within 12 months of entering OKDHS custody, for 23 of these 66 children (34.8%), the adoption goal was followed by a change to another goal, such as reunification, guardianship, or planned alternative permanency placement. Therefore, only 43 children had a goal of adoption established within 12 months of entering OKDHS custody that actually remained their permanency goal until June 1, 2010. For many of the children in this latter group, adoption was the child’s initial goal.
The extended periods of time that many children in the sample experienced between entering custody and having a goal of adoption or becoming free for adoption is concerning because the probability of a child being adopted declines with increasing age. Therefore, these delays increase the likelihood of children aging out of custody without having a permanent home.

Additional information about adoption activities is presented below for the 223 children (59.6%) in the sample who had a single or concurrent goal of adoption or adoption preparation at some time during their most recent entry into OKDHS custody.

- At the time that the goal of adoption was first established, an adoptive family had been identified for only 47 children (21.1%).
- 114 (51%) of the children had never been placed in a pre-adoptive home during their most recent entry.
- 24.5 percent of the children ever placed in a pre-adoptive home experienced a placement disruption in that placement.
- The cases of 72 children (32.3%) had never been referred to an adoption worker to assist in finding an adoptive family.
This section provides our findings with regard to the services provided to children in OKDHS custody and their caretakers that may impact children’s well-being. The following are the key findings reported in this section:

- The appropriateness of the child’s permanency plan and steps taken to achieve the goal for the child were documented in less than two-thirds (62.3%) of the case plans, despite Federal and OKDHS requirements to include them in the case plans of all children in foster care.

- Almost one-half of the cases (45.2%) did not identify the services to be provided to the child in the case planning documents, despite OKDHS policy requiring this information to be included in the official case plan.

- Of the 242 children in the sample who were age five at the start of the September 2009 school year, 48 (19.8%) did not have information regarding school performance in their case file, despite Federal requirements to include educational information in the case plans.

- The child’s health record was not included in the case plans for 70.9 percent of cases despite Federal requirements to include it in all case plans for children in foster care.

- In 31 percent of the cases, the child’s caseworker or supervisor did not visit the child at least monthly while the child was in custody during the review period from June 2009-May 2010, despite OKDHS policy requiring monthly visits. For 41 percent of the months during which a caseworker or supervisor did not visit the child, there was no indication in the case file that an attempt to arrange a visit was made.

- Only 10 (25%) of the 40 youth in the case review sample who were eligible for Independent Living (IL) services as of March 1, 2010 had an IL plan in their file. Of these 10 youth, only 6 ever received the IL services that were specified in their plan.

We reviewed the child’s primary service planning documents in the OKDHS file, i.e., the Individual Service Plan (ISP), ISP Progress Report, or Treatment Plan (the predecessor to ISPs), in order to determine whether certain critical pieces of information were included in the documents. Under Federal statute, each child in foster care under the care and responsibility of the State agency, e.g., OKDHS, is required to have a case plan that includes certain information critical to planning for and caring for the child in care. In Oklahoma, the ISP and the Treatment Plan are vital components of the case plan. According to the policy of OKDHS, the agency prepares and maintains a written individualized service plan for any child who has been adjudicated deprived and furnishes the plan to the court within 30 days after adjudication. OKDHS policy specifies that, amongst other things, the ISP must include the permanency plan for the child, the reason for selection of that plan, a description of the steps being taken by

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39 42 U.S.C. §§ 671(a)(16), 675(1)
OKDHS to finalize the plan, and a schedule of the frequency of services and the means by which delivery of the services will be assured or, as necessary, the proposed means by which support services or other assistance will be provided to enable the parent or the child to obtain the services.\[40\]

Table 27 below provides information on the presence of this information in the service planning documents, as found in the case review.

<table>
<thead>
<tr>
<th>Type of Information Documented in the Individual Service Plan (ISP), ISP Progress Report or Treatment Plan</th>
<th>Number of Cases</th>
<th>Percent of Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appropiateness of child’s placement</td>
<td>235</td>
<td>62.8</td>
</tr>
<tr>
<td>Appropiateness of permanency plan and steps taken to achieve goal</td>
<td>233</td>
<td>62.3</td>
</tr>
<tr>
<td>Services to be provided to the child</td>
<td>205</td>
<td>54.8</td>
</tr>
<tr>
<td>Service delivery/access process and schedule</td>
<td>124</td>
<td>33.2</td>
</tr>
<tr>
<td>Child’s health record</td>
<td>109</td>
<td>29.1</td>
</tr>
<tr>
<td>Plan for visitation with siblings and parents or court documentation indicating that visitation would be harmful</td>
<td>108</td>
<td>28.9</td>
</tr>
<tr>
<td>Child’s educational record*</td>
<td>94</td>
<td>50.0</td>
</tr>
<tr>
<td>Plan for ensuring educational stability*</td>
<td>36</td>
<td>19.1</td>
</tr>
</tbody>
</table>

*There were 188 applicable cases in which children were in first through twelfth grade by June 1, 2010

The most commonly documented information in the service planning documents was the appropriateness of the child’s placement, and the appropriateness of the permanency plan and steps taken to achieve the goal for the child. Still, these were documented in less than two-thirds of the cases despite Federal requirements and OKDHS policy requirements to include them in the case plans of all children in foster care.\[41\]

**The appropriateness of the child’s permanency plan and steps taken to achieve the goal for the child were documented in less than two-thirds (62.3%) of the case plans despite Federal and OKDHS requirements to include them in the case plans of all children in foster care.**

In almost one-half of the cases (45.2%), the most recent ISP, ISP Progress Report or Treatment Plan did not identify the services to be provided to the child, and in over two-thirds of the cases (250 or 66.8%) the service delivery or services access process and schedule was not included, despite requirements in OKDHS policy to include this information.\[42\] The child’s health

\[40\] OAC 340:75-6-40.4
\[41\] OAC 340:75-6-40.4; 42 U.S.C. § 675
\[42\] OAC 340:75-6-40.4
record was not included in 70.9 percent of cases despite Federal requirements to include it in all case plans for children in foster care.\(^{43}\) In 50 percent of applicable cases, the child’s educational record was not included despite Federal requirements to include it in all case plans for children in foster care.\(^{44}\)

The child’s health record was not included in 70.9 percent of children’s case plans, despite Federal requirements to include it in all case plans for children in foster care.

**Caseworker Visits with Child**

This section provides our findings regarding the frequency of face-to-face visits with a child in OKDHS custody on at least a monthly basis. Federal requirements are for caseworkers to visit children in foster care at least monthly.\(^{45}\) Also, OKDHS policy requires visits with each foster child a minimum of one time per month, with no less than two visits per quarter in the foster placement.\(^{46}\)

**Why are Caseworker Visits with Children in Foster Care Important?**

The findings from the Federal Child and Family Service Reviews (CFSR) in all States between 2001 and 2004 demonstrated an association between a positive rating on caseworker visits and positive child welfare outcomes in other areas. Very strong associations (based on the size of the Chi-Square) were found between ratings for the frequency and quality of caseworker visits with children and the following other items under review: risk of harm to children being adequately addressed; meeting the needs of providing services to children, parents, and foster parents; and child and family involvement in case planning. Highly significant relationships, although not as strong, also were found between the frequency and quality of caseworker visits with children and providing services to prevent the child’s removal from the home; establishing an appropriate permanency goal for the child in a timely manner; achieving permanency goals of reunification, guardianship, and permanent placement with relatives in timely manner; visits with parents and siblings in foster care; seeking relatives as potential placement options; meeting children’s educational needs; meeting children’s physical health needs; and meeting children’s mental health needs.\(^{47}\)

In 31 percent of the cases in the sample (116 cases), the child’s caseworker or supervisor did not visit the child at least once monthly for all months during the 12-month period ending on May 31, 2010. Of the 397 reasons provided in the file for not visiting the child, 41.3 percent were identified as “no indication that a visit was arranged.” This is a substantial departure from OKDHS policy and Federal requirements.

\(^{43}\) 42 U.S.C. § 675(1)(C)
\(^{44}\) Ibid.
\(^{45}\) 42 U.S.C. § 622(b)(17)
\(^{46}\) OAC 340-75-6-48
Table 28 provides information pertaining to the reasons a child was not seen in person by the OKDHS caseworker or supervisor during the period of June 2009 through May 2010. Based on documentation in the case file, the reviewer determined whether or not there should have been a visit each month for the 12 months during this period.

<table>
<thead>
<tr>
<th>Reason Child Was Not Seen</th>
<th>Number of Reasons</th>
<th>Percent of Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td>No indication that a visit was arranged</td>
<td>164</td>
<td>41.3</td>
</tr>
<tr>
<td>Other*</td>
<td>113</td>
<td>28.5</td>
</tr>
<tr>
<td>Child in foster care out of the state</td>
<td>94</td>
<td>23.7</td>
</tr>
<tr>
<td>Child runaway, AWOL</td>
<td>16</td>
<td>4.0</td>
</tr>
<tr>
<td>Visit attempted, child not at location</td>
<td>8</td>
<td>2.0</td>
</tr>
<tr>
<td>Foster caregiver did not cooperate with arranging visit</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td>Visit arranged but foster caregiver cancelled</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td>Child welfare worker or supervisor left agency</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>397</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

* Most of these were someone other than the child’s caseworker or supervisor conducting the visit.

In 31 percent of the cases, the child’s caseworker or supervisor did not visit the child at least once monthly while the child was in custody during the prior 12 months. In 41 percent of the cases, the reason for not visiting the child was identified as “no indication that a visit was arranged.”

We reviewed the documentation of the caseworker visits with the children through case notes recorded in the files pertaining to the child who was the subject of the review. Consistent with the policy of OKDHS, we only counted case notes that had some substantive information pertaining to the child, since the purpose of the case notes is to document information pertaining to the child’s safety, well-being, and issues relevant to the State being the child’s legal custodian. Since Federal requirements are that children be visited at least monthly by the caseworker, we would have expected to see case notes documenting those visits, as well as other contacts and interactions with the child, on at least a monthly basis. We reviewed for the presence of case notes for the 12-month period preceding the end of our review period while the child was in the custody of OKDHS. We found that although the majority of cases (69.0%) had case notes in the

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48 OAC 340:75-6-40.6, Instructions to Staff, states that information contained in the contacts is essential to evaluating the case circumstances for making permanent plan case decisions. Policy states that the child welfare worker documents information when making contact with a child in out-of-home placement, parent(s), or placement provider(s) that includes and addresses: (1) adjustment and behavior; (2) connections that include, but are not limited to parents, siblings, family, or other important people in the child's life; (3) permanency; (4) medical, dental, immunizations, and medications; (5) developmental needs; (6) psychological and associated medications; (7) education and extracurricular activities; (8) employment, if applicable; (9) personal care, hygiene, and diet; (10) living environment and safety issues; (11) clothing and related needs; (12) values, beliefs, religion, language, traditions, and other related factors; and (13) requests requiring follow up.
file for all eligible months, 29.1 percent of the cases (109) only had case notes in the file for some, but not all, of the eligible months.

**Physical and Mental Health Services**

There were 26 (6.9%) children in the sample who did not receive all mental health services recommended by a service provider. There were 18 children who did not receive all physical health services recommended by a service provider.

**Educational Information**

School related problems are a clearly identified issue for children in foster care. Common issues include: higher rates of absenteeism and tardiness, and increased behavioral problems in school.\(^{49}\) Academically, children in foster care are more likely to repeat a grade, receive special education services,\(^ {50}\) perform below grade level and not complete high school than children who are not in foster care.\(^ {51}\) Though no single cause can account for all the discrepancies between the educational and school performance of children who are and are not in foster care, educational mobility, or frequent school changes is frequently cited as an influencing factor.

A study of children in Chicago Public Schools found that an increasing number of school changes, resulted in an increasingly poor school performance. Moving schools four or more times resulted in a loss of achievement equal to six months in reading grade equivalency and five months in math grade equivalency\(^ {52}\) for the students in the study. Another study found that students who have experienced a high number of school changes are more likely to have repeated a grade.\(^ {53}\) A California study found that children who changed schools even once were less than half as likely to graduate as those who did not change schools – even when controlling for other variables that affect high school completion.\(^ {54}\)

Several factors involved in changing schools contribute to subsequent issues with academic performance. A change in school is considered an “ecological transition” where the settings, roles and expectations of the child are changed.\(^ {55}\) A child has to adjust to a new environment while also forming new relationships with teachers and peers. Students who have multiple foster placements in a year are less likely than other children to be involved in extracurricular activities at school.\(^ {56}\) Curriculum and instruction also varies from school to school, so academic material can be missed or repeated when changing schools.\(^ {57}\) Students with a number of school changes are also more likely to experience gaps in enrollment.

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\(^{50}\) Ibid.

\(^{51}\) Burley, Mason, Halpern, Mina. (2001)

\(^{52}\) Temple, Judy; Reynolds, Arthur (1999)


\(^{54}\) Casey Family Programs

\(^{55}\) Temple, Judy; Reynolds, Arthur (1999)

\(^{56}\) Ayasse, Robed. (1995)

\(^{57}\) Temple, Judy; Reynolds, Arthur (1999)
A factor that aggravates the effects of school changes especially for children in foster care is a delay in the transfer of school records. Poor record keeping and slow record transfer can result in credits being lost, inappropriate class placement and the delay of special education services.58 One study found “less than one-fourth the cumulative files of a random sample of students in foster care were readily accessible and complete.”59 A study completed by the Children’s Services Division of the State of Oregon found that children in foster care who were identified as eligible for special education services who experienced multiple placement changes were less likely to receive those services than children in stable placements.60

While these findings are applicable to all children, they have particular relevance to children in foster care who may be particularly susceptible to changes in schools and the effects of record keeping regarding their education.

A key finding of the case review was the lack of education-related information in the case files. Of the 242 children in the sample who were age five at the start of the September 2009 school year, 48 (19.8%) did not have information regarding school performance in the child’s case file, despite Federal requirements to include educational information in the case plans.61 In addition, report cards for all reporting periods were found in only five (2.1%) cases, while 96 cases (39.7% of the 242 cases in which the target child was school-aged) did not have any report cards at all in the case file. For the 194 cases in which reviewers noted that the child’s education-related information was provided in the case file, 60.8 percent (118 cases) included only discussions between the caseworker and the foster parent or child about the child’s school performance and no formal education-related information.

Finally, although there were 68 cases with documentation in the case file that the child had received special education services at some time during his or her most recent entry into OKDHS custody, there was no Individualized Education Program (IEP)62 in the files of 11 (16.2%) of these children.

Despite the lack of documentation regarding education-related information, education-related concerns were noted in 125 (51.4%) of the 242 cases in which the children were school-aged at the start of the 2009 school year (September 2009). Services were provided to children to address all education-related concerns in only 84 (67.2%) of the 125 cases, with children in 41 cases (32.8%) not receiving any services designed to address their education-related concerns.

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Of the 242 children in the sample who were age five at the start of the September 2009 school year, 48 (19.8%) did not have information regarding school performance in the child’s case file, despite Federal requirements to include educational information in the case plans.

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58 Zetlin, Andrea; Weinberg, Lois; Luderer, Jaqueline Wade (2004)
59 Ibid.
60 Ayasse, Robed. (1995)
61 42 U.S.C. § 675(1)(C)
62 20 U.S.C. § 1414 (d)(1)(A), (d)(2)(A). The Individual with Disabilities Education Act (IDEA) requires public schools to develop an IEP for every student with a disability who is found to meet the federal and state requirements for special education.
Despite Federal requirements that children in foster care under the care and responsibility of the State must have a plan for educational stability, 63 there was no plan in the case file for ensuring the child’s educational stability in 90.7% of the applicable cases. The lack of a plan for education stability is reflected in the large number of school changes experienced by the children. Key findings with regard to school changes are the following:

- 108 (56.2%) of the 192 children who were school-aged when they entered OKDHS custody had a school change at initial placement that was not related to “graduating” from one school level to another, such as elementary school to middle school or middle school to high school.

- Once children were in OKDHS custody, 128 (52.7%) of the 242 children who were age five or older at the start of the most recent school year (September 2009), experienced at least one school change that was not related to graduating from one school level to another. The following are the frequencies of school changes experienced by these 128 children:
  - 37 children (15.2%) had one school change
  - 56 children (23.%) had two to three school changes
  - 35 children (14.4 %) had four or more school changes

**Reasons for School Changes**

Key findings with regard to the reasons for school changes other than “graduating” to a new school level are the following:

- For 299 (61%) of the 489 school changes experienced by the children, the reason for the school change was that the placement had changed and the new placement was not in the former school district and transportation was not feasible.

- For 59 of the 489 school changes experienced by the children, the reason for the school change was that the child’s behavior required a special school environment.

- For 84 of the 489 school changes experienced by the children, no reason for the change was provided in the case file.

**Independent Living Services**

Federal requirements obligate States to provide services to youth in foster care to help them make a successful transition from foster care to independent living. 64 These services are generally referred to as independent living (IL) services and usually include services such as life skills education, employment preparation and training, specialized education services,

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63 42 U.S.C. § 675(1)(G)  
64 42 U.S.C. §§ 675(1)(D), 677
mentoring, and transitional living assistance.\textsuperscript{65} In addition, OKDHS policy requires that a plan for IL services, usually called an ILP, be developed for every child in the custody of OKDHS who is in an out-of-home placement upon reaching the age of 16 years.\textsuperscript{66} The Oklahoma Independent Living Act ensures that youth: (a) who are currently in out-of-home care; (b) who were in out-of-home care nine months or more between ages 16 to 18; (c) who were in out-of-home care on their 18th birthday; (d) or who entered a permanent guardianship with kin or adoption after the age of 16 receive the provision of services necessary to become self-reliant and productive citizens, including, but not limited to, protection, support, transitional planning, housing, medical coverage, and education services.\textsuperscript{67}

The provision of IL services to youth in custody is important because many youth aging out of foster care do not have a transition to adulthood or a support system to fall back on, but rather they experience an abrupt change after emancipation.\textsuperscript{68} Youth who have exited the foster care system are more likely to be homeless, unemployed, dependent on public assistance, and are at higher risk for physical and mental health difficulties, engagement in risky behaviors and involvement with the criminal justice system than their counterparts who were not in foster care.\textsuperscript{69}

Independent Living Programs are designed to teach teenagers who will age out of care basic life skills and provide them with resources that will make the transition to independence more successful. Factors used to measure the success of the transition are educational attainment; employment; housing status; and health and life skills outcomes.\textsuperscript{70}

A study by Lemon et al that used data from the Pathways to College Study, a study which followed 216 youth who had been emancipated from foster care, and interviews with IL coordinators found that youth in foster care who participated in Independent Living Programs had an increased likelihood of living independently, having stable living arrangements and attaining financial independence.\textsuperscript{71} IL program participants were also more likely to have been taught concrete skills, such as how to open a bank account, budget money and balance a checkbook.\textsuperscript{72} They were also more likely to have been taught psycho-emotional/social skills, like how to set and achieve goals, ask for help and find opportunities for training and education.\textsuperscript{73}

Montgomery, et al analyzed eight studies (seven from the U.S., one from the U.K.) that examined outcomes from various Independent Living Programs. Their analysis found that most studies favored ILP participants over non-ILP participants in the areas of educational attainment, employment, housing status and health and life skills outcomes. The most statistically significant results were in the areas of educational attainment and stable housing.\textsuperscript{74}

\textsuperscript{65} Ibid.
\textsuperscript{66} OAC 340:75-6-110; OAC 340:75-6-40.4
\textsuperscript{67} OAC 340:75-6-110; 10A O.S. § 1-9-107
\textsuperscript{68} Geenen and Powers (2007)
\textsuperscript{69} Montgomery, Donkoh, and Underhill(2006)
\textsuperscript{70} Ibid.
\textsuperscript{71} Lemon, Hines, and Merdinger (2005)
\textsuperscript{72} Ibid.
\textsuperscript{73} Ibid.
\textsuperscript{74} Montgomery, Donkoh, and Underhill (2006)
The case example below from the review illustrates some of the concerns regarding the provision of Independent Living Services to youth in OKDHS custody.

This child is a 16 year-old female who entered OKDHS custody in 2009 when she was 15 years old due to confirmed allegations of neglect, abandonment, and educational neglect. She is also a mother to a son who was born prior to her entry into custody and a daughter who was born approximately eight months after she entered custody. The son lived with his paternal grandparents while the daughter lived with her teen mother sporadically. While in OKDHS custody, she has experienced six placements: three in shelters, two in the same foster home, and one in the home of a relative in another State. She has been on runaway status four times. As of the case review, the file indicated that the child wanted to go to work and had an interview, and that she did not like public school and dropped out. An independent living plan was not found in the child’s file. The file indicated that an Independent Living Community Contracted Services Enrollment Form was completed by the child’s worker; however, about three months later, the child indicated that she “looks forward to getting enrolled in Independent Living,” suggesting she had never begun the services. The file also indicated that the child completed her Ansell Casey Life Skills Test and that the enrollment form had been faxed.

Only 10 (25.0%) of the 40 youth in the case review sample who were eligible for IL services as of March 1, 2010 had an IL plan in their file. Furthermore, only 6 of those 10 youth ever received the IL services that were specified in their plan.

Only 10 (25%) of the 40 youth in the case review sample who were eligible for Independent Living (IL) services as of March 1, 2010 had an IL plan in their file, and only 6 of those 10 youth ever received the IL services that were specified in their plan.
PART 6: SIBLING PLACEMENTS AND VISITATION

We reviewed the cases to determine whether or not brothers and sisters who were in OKDHS custody were placed together while in foster care, and if they were not, to identify the documented reasons for not placing them together. For brothers and sisters who were separated in different foster care placements, we also identified the frequency of their visits with each other during the 12-month period ending on May 31, 2010. It is important to note here that Federal requirements are that siblings in foster care are to be placed in the same foster home unless the State documents that placement together would be contrary to their safety or well-being. If they are placed separately, the Federal requirement is that they have frequent visitation or other interactions unless the State documents that it would be contrary to their safety or well-being.75

The following are the key findings with respect to sibling placements and visitation:

- Of the 285 children with siblings in OKDHS custody, 13 percent (37) were not placed together with all of their siblings and either no justification was provided or the only justification provided was that the agency could not find a home that would take the sibling.

- One out of every five eligible children had no visits with their siblings in separate foster care placements during the 12 months prior to June 1, 2010.

Importance of Placing Brothers and Sisters Together

Removing a child from his or her home due to abuse or neglect not only involves separating the child from parents but can also involve disruption or loss of relationships with brothers and sisters. In the past two decades, sibling relationships have been increasingly recognized as playing a role in children’s development.76 Children who were previously in foster care are more likely to report dissatisfaction with frequency of contact with siblings (63%) than dissatisfaction with frequency of contact with parents (44%).77

Relationships between brothers and sisters often span a lifetime and, for children removed from their parents, the continued presence of siblings may be vital for maintaining a sense of safety and emotional continuity in an unknown and potentially frightening situation.78 In a survey of caseworkers, the most commonly cited factors in making a decision to place siblings together involved alleviating the sense of loss and serving as a source of support for each other.79

Wulczyn et al studied placement patterns for siblings in custody over time. The research indicates that whether or not a child is placed with siblings initially upon entering care is a strong

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75 42 U.S.C. § 671 (a)(31)(A),(B)
77 Festinger, T. (1983)
79 Smith, M. C. (1996)
determinant of sibling placement over time. Overall, the percentage of siblings who remain together declined over time.80 James et al found that the earlier siblings can be placed together following entry into out-of-home placement, the greater the chance of maintaining the sibling relationship.81 A study found that adolescents who were placed alone after a history of joint sibling placements were at greater risk for placement disruption than those who were placed with a consistent number of siblings while in foster care. Maintaining sibling ties might be particularly important for children in foster care given the enormity of the losses that they have already experienced.82

**Siblings Placed Together**

There were 285 cases where a child was eligible to be placed with all of his/her siblings at the time of the child’s most recent entry into OKDHS custody. Of these 285 cases, 33.7 percent of the children (96) were not placed with all of their siblings upon entry. A justification for not placing the siblings together was documented in the case file in a majority of the 96 cases (71.9%). The following justifications for not placing the children with all of their siblings upon entry were documented:

- One or more of the siblings had special medical or mental health needs (32 cases)
- One or more of the siblings had a behavior problem that constituted a safety risk for the other siblings or that required a specialized placement (19 cases)
- One or more of the siblings had already been in foster care with foster parents for a long period of time before the child entered OKDHS custody and the foster parents were unable or unwilling to take another child (5 cases)
- OKDHS was unable to find a family that could take the sibling group (15 cases)

Of the 285 children with siblings in OKDHS custody, 13 percent (37) were not placed together with all of their siblings and either no justification was provided or the only justification provided was that the agency could not find a home that would take the sibling. Of the 285 children, 9.1 percent (26) were not placed together with all of their siblings and no justification was provided.

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82 Leathers, S.J. (2005)
Looking at the status of siblings placed together as of June 1, 2010, we found 276 cases where a child was eligible to be placed with all of his/her siblings as of June 1, 2010. Of these 276 cases, 49.3 percent of the children (136) were not placed with all of their siblings. A justification was provided in almost all of the cases (127 or 93.4%) as to why the children were not placed with their siblings. In nine of the 276 cases (3.3%), the siblings were separated and no justification was provided. Table 29 provides information pertaining to the justification for the separate placement of the child from his/her siblings as of June 1, 2010.

Table 29
Justification Documented for Separation of Siblings as of June 1, 2010

<table>
<thead>
<tr>
<th>Justification*</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child or sibling(s) has special medical or mental health needs</td>
<td>62</td>
<td>30.3</td>
</tr>
<tr>
<td>Child or sibling(s) has behavior problems</td>
<td>46</td>
<td>22.4</td>
</tr>
<tr>
<td>Length of time in foster care of one or more siblings</td>
<td>15</td>
<td>7.3</td>
</tr>
<tr>
<td>Agency unable to find caregiver to take the sibling group</td>
<td>23</td>
<td>11.2</td>
</tr>
<tr>
<td>Other**</td>
<td>59</td>
<td>28.8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>205</td>
<td>100.0</td>
</tr>
</tbody>
</table>

*Multiple justifications could be identified for one case.
**Most common other reasons cited include: court approved sibling separation for adoption; one sibling is on AWOL status; and children are half siblings and one is placed with biological parent or other relative.

In one-third of the 136 cases (30.3%) where the siblings were separated as of June 1, 2010, the justification for the separation was that the child or one or more siblings had special medical or mental health needs that required a special level of care and assistance. In one-fifth of the 136 cases (22.4%), the child or one or more siblings had behavior problems that posed a safety risk to the other siblings.

Sibling Visits

Reviewers were asked to determine whether or not there was documentation in the case file of a sibling visitation plan that covered the time period from June 1, 2009 to May 31, 2010 and addressed the frequency of visitation among siblings who were in OKDHS custody but were not placed together. OKDHS policy requires that the ISP include a plan and schedule for regular and frequent visitation for the child and the child’s parent(s) or legal guardian and siblings, unless the court has determined that visitation, even if supervised, would be harmful to the child.83

Visits with siblings were applicable in 172 cases.84 Of these 172 cases, the findings were as follows:

- Child had visits with siblings in all eligible months – 48 (27.9%)
- Child had visits with siblings in some eligible months but not all – 86 (50.0%)
- Child had no visits with siblings in any eligible month – 38 (22.1%)

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83 OAC 340:75-6-40.4
84 This excludes six cases where information was missing.
One out of every five eligible children had no visits with their siblings in separate foster care placements during the 12 months prior to June 1, 2010.

The case example below from the review illustrates the concern with the lack of sibling visitation.

This child is a nine year-old male who entered OKDHS custody in 2008 at the age of seven, along with a male sibling, who was eight years old, due to confirmed allegations of failure to protect and threat of harm by the mother. The children had been living with their father, a registered sex offender whose parental rights had been terminated, for one and one-half years prior to entry into OKDHS custody. The brothers were initially placed together overnight in a shelter and were then moved to the same foster home. The brothers remained together for one week, until one was placed in a psychiatric hospital and then discharged to a treatment foster care home. Since that time, the two brothers have not lived together while in OKDHS custody. There was no documentation of a visitation plan for the brothers in either of their case files. For approximately one year, there were only two sibling visits documented although there was no indication that transportation was a problem, as the brothers lived approximately one hour away from each other.

Table 30 provides the frequency of sibling visitation that was specified in the sibling visitation plan or court order. These data only pertain to the 172 children for whom sibling visitation was applicable.

Table 30
Frequency of Sibling Visitation

<table>
<thead>
<tr>
<th>Frequency of Sibling Visitation</th>
<th>Number</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>No frequency specified or no visitation plan</td>
<td>131</td>
<td>76.1</td>
</tr>
<tr>
<td>At least once per week</td>
<td>12</td>
<td>7.0</td>
</tr>
<tr>
<td>Less often than once per week, but at least twice per month</td>
<td>11</td>
<td>6.4</td>
</tr>
<tr>
<td>Once per month</td>
<td>17</td>
<td>9.9</td>
</tr>
<tr>
<td>Less often than once per month</td>
<td>1</td>
<td>0.6</td>
</tr>
<tr>
<td>Total</td>
<td>172</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Despite the OKDHS policy noted, either there was no sibling visitation plan in the file or the frequency of visitation was not noted in three-quarters of the cases (76.1%).

There was either no sibling visitation plan in the file or the frequency of visitation was not noted in the visitation plan in 76.1 percent of eligible cases, which is in violation of OKDHS policy.
PART 7: CASEWORKER TURNOVER

This section of the report addresses the issue of caseworker turnover and the number of caseworkers assigned to a child’s case. This is a critical issue, because one of the key concerns for children in foster care is establishing connections with caring adults. We have already shown in previous chapters that the extreme lack of placement stability and the frequency of very short-term placements make it highly unlikely that many children in OKDHS custody will be able to establish caring and stable relationships with their foster caretakers. In this section, we demonstrate that the extensive amount of caseworker turnover also makes it highly unlikely that children will be able to develop a stable relationship with their caseworker or achieve permanency outcomes. It is important to consider this section in light of information provided on case review findings related to placement stability and achievement of permanency for children in foster care.

Among the key findings of the case review in this area are the following:

- 29.1 percent of children had five or more primary caseworkers assigned while in OKDHS custody; and 36 children (9.6%) had 10 or more secondary caseworkers assigned.

- There was a significant relationship between the number of primary caseworkers and the number of consecutive permanency goals established for the child. Over one-half of the children who had four or more permanency goals while in OKDHS custody also had five or more primary caseworkers assigned to them.

- There was a significant relationship between the number of caseworkers and the length of time before a child became free for adoption. Of the 30 children who were in foster care for three years or longer before becoming free for adoption, 19 (63.3%) had five or more caseworkers.

Why is Caseworker Turnover Important?

We reviewed several studies on the effects of caseworker turnover on children in foster care. Among the major studies in this area, Shapiro found that caseworker stability contributed to the likelihood of achieving reunification, and Pardeck found that having a single caseworker contributed to the likelihood of reunification especially in the first three years the child is in care.

Ryan et al analyzed data about caseworker characteristics from 5765 foster care cases in Illinois between 1995 and 2004. They found that caseworker turnover was associated with significantly longer stays in foster care, meaning if a child has two or more caseworkers he or she is more likely to be in foster care for a longer period of time than a child who only has one

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85 Shapiro, D. (1976)
caseworker. Multiple caseworkers also decreased the likelihood of reunification with the child’s biological parents.87

In a report to Congress, the United States General Accounting Office (GAO) noted that child welfare workers interviewed by GAO stated high turnover rates and staffing shortages leave remaining staff with insufficient time to establish relationships with children and families and to make the necessary decisions to ensure safe and stable permanent placements.88 The GAO analysis of the Child and Family Service Reviews corroborated what caseworkers said and found that large caseloads and worker turnover delay the timeliness of abuse and/or neglect investigations and limit the frequency of worker visits with children, preventing agencies’ attainment of some key federal safety and permanency outcomes. The report also noted that caseworker turnover disrupts the continuity of services, especially when newly assigned caseworkers have to conduct or re-evaluate educational, health and safety assessments due to poor or insufficient information in the case files left behind by others.89 This also speaks to the importance of documentation in the case files addressed earlier in this report.

**Caseworker Assignments**

The primary caseworker is defined as the OKDHS worker in the county of court jurisdiction who was assigned to the child during the most recent episode in OKDHS custody.90 The secondary worker is defined as the OKDHS worker in the county where the child has been placed (if the child is moved outside the county of court jurisdiction) who was assigned to the child during the most recent episode in OKDHS custody (this category does not include independent living workers, intake workers, workers who facilitate family group conferences, etc.).91 Thus, changes in secondary caseworkers may be due to the placement changes that children experience rather than caseworker turnover.

The following are the number of primary caseworkers assigned to the children in the case review sample by June 1, 2010:

- 148 (39.6%) children had one to two primary caseworkers.
- 117 (31.3%) children had three to four primary caseworkers.
- 109 (29.1%) children had five or more primary caseworkers.

The children in the sample had the following number of secondary caseworkers during the same time period:

- 301 (80.5%) children had at least one secondary caseworker.

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87 Ryan, Garnier, Zephyr, and Zhai (2006)
88 U.S. General Accounting Office, p. 19
89 U.S. General Accounting Office, pp 3-4
90 OAC 340:75-6-48
91 Ibid.
• 124 children (41.2%) had one to two secondary caseworkers.
• 64 children (2.3%) had three to four secondary caseworkers.
• 113 children (37.5%) had five or more secondary caseworkers.
• 36 (9.6%) children had 10 or more secondary caseworkers.

36 children (9.6%) had 10 or more secondary caseworkers assigned while in OKDHS custody and 29.1 percent of children had five or more primary caseworkers.

A significant relationship was found between the number of primary caseworkers and the number of permanency goals (Chi Square (16) = 46.905; p < .000). In general, larger numbers of primary caseworkers were associated with larger numbers of permanency goals. Key findings are as follows:

• Of the 33 children with four permanency goals, 21 (87.9%) had five or more primary caseworkers.
• Of the 65 children with four or more permanency goals, 37 (56.9%) had five or more primary caseworkers.
• In comparison, of the 309 children with less than four permanency goals, only 72 (23.3%) had five or more primary caseworkers.

Over one-half of the children who had four or more permanency goals while in OKDHS custody also had five or more primary caseworkers assigned to them.

Chart 3 presents information pertaining to children with five or more primary caseworkers and the number of permanency goals assigned during the most recent entry into OKDHS custody.
Of the 309 children with less than four permanency goals assigned while in OKDHS custody, 72 (23.2%) had five or more primary caseworkers. There were 65 children who had four or more permanency goals assigned, and of these, 37 (56.9%) had five or more primary caseworkers.

A significant relationship was also found between the number of primary caseworkers and the time to the child becoming free for adoption (Chi square = 42.589; p < .000). In general, longer times in OKDHS custody prior to being free for adoption were associated with higher numbers of primary caseworkers. This may be due to new caseworkers re-evaluating case goals and the status of the child before moving forward with a case. Key findings with regard to this relationship were the following:

- Of the 30 children who were in foster care for three years or longer before becoming free for adoption, 19 (63.3%) had five or more caseworkers.

- In comparison, of the 75 children who were free for adoption in less than 24 months, 25 (33.3%) had five or more caseworkers.
REFERENCES


## APPENDICES:

**Appendix A**
Resume of Dr. Jerry Milner

**Appendix B**
Resume of Dr. Jacqueline Smollar

**Appendix C**
List of Documents Reviewed

**Appendix D**
Case Review Instrument

**Appendix E**
Sampling Details

**Appendix F**
Quality Assurance Guidelines
APPENDIX A: RESUME OF DR. JERRY MILNER

JERRY MILNER, D.S.W.

Jerry Milner serves as the Vice President for Child Welfare Practice for the Center for the Support of Families, Inc. (CSF). Dr. Milner brings over 35 years of public sector child welfare experience at the local, state and federal levels. During his tenure as State child welfare director in Alabama, he led efforts to reform child welfare practice in the State according to System of Care principles. His work has been concentrated in the areas of administration and management, program evaluation, quality assurance and improvement, technical assistance and training, and adoption. He has served as director of adoption, quality management, and the Family Service Division in Alabama responsible for statewide administration of all child welfare programs. Dr. Milner worked with the Federal Children’s Bureau to implement and manage the Child and Family Service Reviews (CFSR) of State child welfare services programs in all 50 States, the District of Columbia, and Puerto Rico. The CFSR is a Federal review of title IV-E and IV-B State plan requirements that all States must undergo periodically. At the State and Federal levels, he has designed, implemented, and managed ongoing processes for evaluating the effectiveness of child welfare practices and policies on the outcomes for children and families, and recommending improvement strategies. At CSF, his work is focused on assisting State and local child welfare agencies in evaluating their child welfare programs and implementing needed improvements in their practice, policies, and procedures.

CSF WORK EXPERIENCE

JBS International, Inc.
October 2010 to Present

Dr. Milner provides technical assistance to the Illinois Department of Children and Families, through a contract with the U.S. Department of Health and Human Services, to assist the State in reducing the risk of long-term foster care for children served by the State, using principles of implementation science and evidence-based child welfare practices.

Massachusetts Department of Children and Family Services External Review and Recommendations Project
September 2010 to Present

Dr. Milner manages the review of case records and reporting on progress in the State’s efforts to comply with Federal Child and Family Service Review requirements.

Children’s Rights, Inc.
June 2010 to Present

Dr. Milner serves as an expert witness in class action lawsuit proceedings on behalf of children in foster care in a State, and manages the project to complete a review of a statistically valid sample of child welfare cases, provide analysis, and a final report.

Mississippi Department of Human Services Child Welfare Practice Model Project
October 2008 to Present

Dr. Milner managed the project to assess current child welfare practice in Mississippi and assist the Department to develop a statewide model of child welfare practice. He managed the completion of several foster care services assessments in the State and the analysis of foster care rates paid on behalf of children in foster care in the State. He currently manages the project to implement the practice model statewide and to
assist the Department in implementing a statewide settlement agreement and manages a financial assessment of the Department's expenditures and claiming.

**Connecticut Department of Children and Family Services Child Welfare Practice Model Project**
*October 2008 to June 2009*

Dr. Milner managed the project to assess current child welfare practice in Connecticut and assist the Department to develop a statewide model of child welfare practice.

**Massachusetts Department of Children and Family Services External Review and Recommendations Project**
*July 2008 through December 2008*

Dr. Milner managed the project to conduct a review of the State’s child welfare practices and programs related to child safety, and to make recommendations for improving practice regarding child safety in the State.

**Washington State Department of Social and Health Services**
*July 2008*

Dr. Milner provided expert consultation on child welfare practice to the Department in the implementation of its statewide settlement agreement pursuant to the *Braam* lawsuit.

**Philadelphia Department of Human Services Child Welfare Re-Design Project**
*January 2008 to December 2009*

Dr. Milner provided technical assistance and project consultation for the re-design project, which was focused on training and consultation for the implementation of an approach to addressing child safety in the City of Philadelphia.

**Philadelphia Department of Human Services Title IV-E Eligibility Project**
*January 2008 to Present*

Dr. Milner provides technical assistance and project consultation for the project which provides quality assurance of the Department’s title IV-E foster care eligibility determinations, and conduct studies on various aspects of the City’s title IV-E eligibility program.

**PREVIOUS WORK EXPERIENCE**

**Children’s Bureau, Administration for Children and Families, U.S. Department of Health and Human Services**
*Senior Child Welfare Specialist, November 1999 to Present*

Dr. Milner was responsible for the national implementation and management of the Federal Child and Family Service Review (CFSR) of State child welfare services programs. The CFSR evaluates the outcomes of State child welfare programs with regard to safety, permanency, and well-being. The review also promotes child welfare principles and practices that support community-based services, family-centered practice, individualizing services to children and families, and increasing the capacity of parents to meet their children's needs. Dr. Milner’s responsibilities included leading CFSR reviews nationally; providing review-related guidance to Federal staff in Regional Offices and Central Office; promoting best practices; analyzing and presenting national CFSR findings and results; developing and revising review instruments and guidance; and managing the Program Improvement Plan process resulting from the CFSR. He supervised Federal employees and contractors responsible for CFSR activities in the Children’s Bureau, including human resource functions such as developing position descriptions and performance standards, interviewing and recommending new hires, and conducting employee performance appraisals.
Children’s Bureau, Administration on Children and Families, U.S. Department of Health and Human Services  
Child Welfare Fellow, January 1995 to June 1996 (full-time) and October 1998 to October 1999 (part-time)  

Dr. Milner, through an Intergovernmental Personnel Act (IPA) assignment, was responsible for serving on a team that developed an outcome-based approach to Federal reviews of State child welfare services programs (the Child and Family Service Review), including the instruments and procedures manual used in the process, piloting the reviews in 14 States, and drafting Federal regulations governing the review process.

Alabama Department of Human Resources  
Director, Family Services Division (State child welfare director), October 1997 to November 1999  

Dr. Milner was responsible for administering and managing all child welfare and adult service programs in the State including family preservation and support, foster care, adoptions, child protective services; title IV-E eligibility determinations and revenue maximization functions; training; quality assurance; services to adults including foster care, day care, and protective services; licensing and regulatory functions for child care facilities; management of statewide quality assurance functions for child welfare services; and, executive sponsorship of program operations for the development of the Department’s statewide automated child welfare information system (SACWIS), and management of legacy information systems. Dr. Milner was responsible for managing the implementation of child welfare reforms statewide under the provisions of a Federal consent decree framed within System of Care principles and requiring changes in the State’s programs to reflect: home and community-based service delivery, individualizing service delivery to children and families, enhanced permanency achievement for children in foster care, and placement of children in foster care in family-based settings rather than congregate placements, among other reforms. He had responsibility for managing the staff of the State’s child welfare division, including developing and updating job descriptions, interviewing and hiring staff, and conducting performance appraisals for managers of the division.

Alabama Department of Human Resources  
Director, Division of Quality Management, July 1996 to October 1997  

Dr. Milner was responsible for administering statewide quality control functions for the Food Stamp and TANF programs and quality assurance functions for child welfare services, as described below. He had personnel and management responsibility for the division of staff providing these functions.

Alabama Department of Human Resources  
Director, Division of Quality Management, March 1996 to July 1996  

Dr. Milner was responsible for implementing and managing a statewide outcome-based quality assurance system for child welfare services based on statewide and county-level data on the outcomes for children and families served by the agency and qualitative information derived from case reviews and interviews with children, parents, foster parents, agency staff, the courts, and other child welfare stakeholders. Also, this position included programmatic (not technical) responsibility for the Department’s existing statewide management information system for child welfare services and development of a new statewide automated child welfare information system (SACWIS), and administration of Federal financial resources for child welfare services. As a newly created division, he was responsible for developing job descriptions and requirements for all the staff in the division, and for hiring and evaluating staff.

Alabama Department of Human Resources  
Director, Division of Quality Management, January 1993 to January 1995  

Dr. Milner was responsible for coordinating and administering statewide child welfare program areas including foster care and child protective services policy; adoption policy and services; staff and provider training; and title IV-E eligibility for foster care and adoption assistance.
Supervisor, Office of Adoption, January 1988 to December 1992

Dr. Milner was responsible for administering the statewide adoption program, including policy development, Federal and State adoption assistance, Interstate Compact on Placement of Children, authoring grant proposals, legislative activities, and personnel and staff management responsibilities which included establishing new positions, developing job requirements and descriptions to match the functional requirements of the program, and oversight of employee performance.

Alabama Department of Human Resources
Adoption Consultant, March 1983 to January 1988

Dr. Milner was responsible for providing technical assistance to all County Departments in the State on adoption planning for children, making adoptive placements, approving adoption applications and providing services to adult adoptees.

Lee County Department of Human Resources
Child Welfare Supervisor, October 1979 to March 1983

Dr. Milner was responsible for supervising social work staff providing foster care services, foster home licensing, adoption services, and child protective services, and serving as field instructor for undergraduate social work students in field internships.

Tallapoosa County Department of Human Resources
Social Worker, July 1974 through September 1979

Dr. Milner was responsible for providing child welfare services in a rural setting, including child protective services, foster care and adoption services, counseling, and licensing foster and day care homes.

ADDITIONAL PREVIOUS WORK EXPERIENCE

Frequent child welfare presenter at national and regional meetings and conferences, such as meetings sponsored by the Department of Health and Human Services, Child Welfare League of America, Association of Public Human Service Administrators, and other organizations.

Adjunct Assistant Professor, Auburn University at Montgomery, Department of Sociology, 1987 - 1999. Courses taught: Social Welfare Policy and Programs, Child Welfare. (Teaching experience)


EDUCATION

UNIVERSITY OF ALABAMA

UNIVERSITY OF ALABAMA

AUBURN UNIVERSITY
Political Science, Bachelor of Arts, June 1974

PROFESSIONAL AFFILIATIONS

National Association of Social Workers (NASW) 1978-1997, Chairperson, Montgomery Unit, 1986-88, Chapter Nominations and Leadership Chair 1987-89

Academy of Certified Social Workers (ACSW) 1985-1997

Licensed Certified Social Worker, License No. 0430C, 1985-2001
AWARDS


Assistant Secretary’s ACF Honor Award for Organizational Team Achievement. Administration for Children and Families, U.S. Department of Health and Human Services, 2004.


Secretary’s Award for Distinguished Service. U.S. Department of Health and Human Services, May 2000.


Assistant Secretary’s Excellence Award. Administration for Children and Families, U.S. Department of Health and Human Services, September 1996.

PUBLICATIONS


SPECIAL SKILLS

Grantsmanship

♦ Project Director: “Training in Recruitment and Group Preparation of Adoptive Families for Special Needs Children” Adoption Opportunities Grant No. 90-CO-0297 09/01/87 - 01/31/89

♦ Co-Author/Project Director: “Expediting Placement of Special Needs Children Through Resource Development” Adoption Opportunities Grant No. 90-CO-0377 10/01/87 - 09/30/89

♦ Author/Project Director: “Expediting Placement of Minority Children Through Resource Development” Adoption Opportunities Grant No. 90-CO-0437 09/30/89 - 08/31/92

♦ Author/Project Director: “Planning for Permanency Through Termination of Parental Rights” Adoption Opportunities Grant No. 90-CO-0595 10/01/91 - 09/30/93

♦ Project Advisor: “Recruitment of Rural Families for the Adoption of Special Needs Children” Adoption Opportunities Grant No. 90-CO-0598 10/01/92 - 09/30/94
Principal Author: Planning Grant for Alabama in the Family-to-Family Initiative, The Annie E. Casey Foundation 10/01/92 - 06/30/93

Principal Author/Project Director: Implementation Grant for Family-to-Family Initiative, The Annie E. Casey Foundation 10/01/93 - 12/31/97

REFERENCES

- Peter Watson, Director, National Resource Center for Organizational Improvement, pwatson@usm.maine.edu
- Carol Wilson Spigner, Professor, University of Pennsylvania, spignerds@sp2.upenn.edu
APPENDIX B: RESUME OF DR. JACQUELINE SMOLLAR

JACQUELINE SMOLLAR, Ph.D.
55 Calle Del Medio
Sedona, AZ 86336

Education

1981 Ph.D., Developmental Psychology, Catholic University of America
1976 M.A., Developmental Psychology, Catholic University of America
1967 B.A., Sociology, New York University

Professional Experience

2008 – Present Independent Consultant
2004 - 2008 ICF Consulting/Children's Bureau
1999 - 2004 James Bell Associates, Director
1998 - 1999 CSR, Incorporated, Senior Research Associate
Walter R. McDonald & Associates, Inc., Senior Research Associate
1994 - 1998 Independent Consultant
1992 - 1994 KRA Corporation, Director, Research on Children, Youth and Families
1990 - 1992 Cygnus Corporation, Director of Research
1988 - 1990 CSR, Incorporated, Senior Analyst/Project Director
1973 - 1988 Catholic University, Life Cycle Institute, Research Associate
1987 - 1988 Catholic University, Department of Psychology, Instructor
1976 - 1977 Catholic University, Department of Psychology, Instructor
1976 - 1977 American University, Department of Psychology, Instructor

Career Brief

I have extensive experience managing Federal contracts; conducting research and program evaluation in the areas of services to children, youth, and families and child and adolescent development; and providing program and evaluation-related technical assistance to State agencies and nonprofit service organizations. Over the past two decades, I have conducted program evaluations, developed outcome assessments and performance standards, and provided evaluation and programmatic technical assistance to the following types of programs:

- Child welfare, including family preservation and support, child protective services, foster care, and adoption programs;
- Community-based collaborations to provide comprehensive health and human services;
- Runaway and homeless youth programs;
Child maltreatment prevention, placement prevention, and intervention programs;
Programs addressing child maltreatment and family substance abuse;
Programs serving pregnant and/or parenting youth;
Substance abuse prevention and treatment programs for youth;
Community-based nutrition education programs for low income families; and
Head Start programs.

I also have presented numerous workshops on conducting evaluations and preparing evaluation reports and was the lead writer on two evaluation guides for program managers, one written under a contract with the Administration for Children, Youth and Families (A Program Manager's Guide to Evaluation), and other for the Office of the Assistant Secretary for Policy and Evaluation (Evaluating Privatization Initiatives in Child Welfare: A Guide for Program Managers).

Current Projects

- **Evaluation of the Wendy's Wonderful Kids Program.** For this project, I serve as a senior research associate to Child Trends for their evaluation of the Wendy's Wonderful Kids national adoption project. I provide technical assistance to Child Trends in conducting the adoption and participate in site visits, data analyses, and report preparation.

- **Evaluation of the Mississippi Diligent Recruitment Program.** For this project, I am designing, implementing, and analyzing an outcome and implementation evaluation of a Mississippi grant program funded by the Children’s Bureau of the Federal Administration for Children and Families.

- **Provision of Technical Assistance to Grantees funded under the Federal Long-Term Foster Care Prevention initiative.** For this project, I am providing technical assistance to Arizona’s child welfare agency in implementing a project to address the factors that result in children remaining in foster care for long periods of time.

Recent Projects

- **Child and Family Services Review (CFSR) Final Reports.** For this project, I serve as consultant to ICF International. I analyze the case-review data and stakeholder interview information from the onsite CFSR review, and prepare the final reports for individual States after completion of their onsite CFSR.

- **Adoption Services Specialized Administrative Support Quality Assurance.** For this project, I serve as a senior research associate to Child Trends in the provision of technical assistance to the State of Ohio in the area of adoption. In this capacity, I conduct and analyze surveys of stakeholders throughout the State of Ohio and prepare reports based on survey findings, facilitate discussion groups and focus groups, and present reports to stakeholders based on the findings of the discussion groups and focus groups. I also will work with Ohio in developing the CFSR Program Improvement Plans in the areas of adoption assessed by the CFSR.

- **Quality Improvement Center on the Privatization of Child Welfare Services.** For this project I served as a consultant to Planning and Learning Technologies, Incorporated and wrote an evaluation manual entitled Evaluating Privatized Child Welfare Programs: A Guide for Program Managers. The manual was part of a series of reports prepared for the Office of the Assistant Secretary for Policy and Evaluation, Department of Health and Human Services.
• **Technical Specialist for the Child and Family Services Review.** For this project, I provided technical support to the Children’s Bureau of the Administration for Children and Families for the Child and Family Services Reviews (CFSR). This included the following tasks:
  - Assisting the Children’s Bureau data team in developing composite measures for the CFSR.
  - Conducting national trainings on the composites and measure for State child welfare agency staff and Federal regional office and central office staff.
  - Analyzing data for individual State CFSR reviews and preparing the State final report.

**Past Projects**

Brief summaries of projects that I have been involved in or directed are provided below.

• **Preparation of Annual Report to Congress on Child Welfare Outcomes.** For this project, I analyzed data from the National Child Abuse and Neglect Data System and the Federal Adoption and Foster Care Analysis and Reporting System, prepared state-specific and national data tables pertaining to 27 national child welfare measures, and wrote the annual Report to Congress.

• **Preparation of the Final Reports for each State’s Federal Child and Family Services Review (CFSR) and Analysis of Cross-State data.** Project Director. For this project, I managed a team of five staff members. I was responsible for analyzing the data from each State’s CFSR, writing the individual State reports, analyzing cross-State data pertaining to CFSR findings, and preparing a report summarizing the findings. I also established a workgroup to make recommendations to the Children’s Bureau regarding changes to the CFSR process and facilitated the three workgroup meetings.

• **Development of Performance Measures and a Performance-Based Incentive System for the Nation’s Child Welfare System.** Project Manager (WRMA). In response to the requirements of the Adoption and Safe Families Act, the Children’s Bureau of ACF initiated a process for developing outcomes and measures that could be used to assess the performance of State child welfare systems, including both the foster care and the child protective services systems. This process was to lead to a Report to Congress on State performances with respect to identified outcomes, and a Report to Congress on a Performance-Based Incentive System for Child Welfare. I assisted Children’s Bureau staff in convening an advisory panel, developing outcomes and measures, identifying potential performance-based incentive systems, and preparing the reports to Congress.

• **Developing a System of Program Accountability under the John H. Chafee Foster Care Independence Program.** Subcontract Manager. For this project, James Bell Associates, as a subcontractor to Westat Corporation, assisted the Children’s Bureau of ACF in developing a system (including outcomes & measures) for assessing State performance in providing independent living services to current and former foster care youth. I conducted a review of the literature of research on outcomes for youth emancipated from the foster care system and prepared a report, facilitated focus groups around the nation to obtain input from the field regarding appropriate outcomes and measures for the assessment system, assisted Westat in preparing the Report to Congress, worked with Westat in drafting and revising outcomes and measures, and co-facilitated the project’s advisory group meetings.
also was involved in preparing the necessary information for developing regulations pertaining to the Chafee data system.

- **Evaluation of the Quality Improvement Centers (QIC).** Senior Research Associate. The Children’s Bureau provided funding to five organizations and institutions to develop and implement Quality Improvement Centers (QIC) in child welfare focusing on child maltreatment issues (4 centers) and adoption issues (1 center). The Children’s Bureau contracted with JBA to conduct a process and outcome evaluation of these efforts. Under this contract, I had the lead role in evaluating two of the QICs and participated in developing evaluation tools and materials.

- **Technical Assistance on Program Evaluation for Adoption Opportunities Grantees and Child Abuse and Neglect Grantees.** Senior Research Associate. This project, conducted under contract with the Children’s Bureau, involved providing evaluation-related technical assistance to the Children’s Bureau grantees. I provided evaluation-related technical assistance to grantees through site visits, telephone discussions, presentations at annual meetings, and written reports.

- **Synthesis of the Final Evaluation Findings from the School-Based Child Maltreatment Services Grantees.** Project Director. The Children’s Bureau contracted with JBA to review and synthesize the final reports of 18 grantees that received Federal funding to develop and implement school-based child maltreatment prevention projects. For this contract, I designed and supervised the information synthesis process and prepared the synthesis report.

- **Development of Evaluation Manuals for ACYF Grantees.** Project Director and Independent Contractor. For this project, I developed materials and served as the lead writer for four evaluation manuals designed to assist program managers and staff in conceptualizing and conducting their own evaluations. This included the *Program Manager’s Guide to Evaluation*, and an evaluation guide for program managers operating Head Start programs, programs funded by the Family and Youth Services Bureau, and programs funded by the Children’s Bureau.

- **Develop Best Practice Guidelines for the Infant Adoption Awareness Training Program.** Senior Research Associate. The Children’s Bureau contracted with JBA to conduct a series of discussions with experts in the area of infant adoption to identify best practices with regard to training public health agency workers in presenting the adoption option to women experiencing unplanned pregnancies. I conducted many of the interview discussions and prepared the final report presenting the experts’ recommendations.

- **Evaluation Technical Assistance to Demonstration Projects Addressing the Problem of Chronic Child Neglect.** Project Director/Independent Consultant. Eleven 5-year research and demonstration projects were funded by the Children’s Bureau’s Office of Child Abuse and Neglect (OCAN) to develop and evaluate innovative service approaches for families reported to child protective services for problems related to chronic neglect. I provided evaluation-related technical assistance to the grantees and facilitated the annual grantees’ meeting.

- **Family Preservation and Support Services Implementation Study.** Senior Research Associate. This study, conducted for ACF, examined how States and local communities implemented family preservation and family support programs under funding provided by the Family Preservation and Support Act, now known as the Promoting Safe and Stable Families Act. For this study, I reviewed State and local documents and plans pertaining to PSSF programs, conducted interviews with State
and local personnel regarding the implementation process, and prepared summary reports on individual State and local implementation processes.

- **Evaluation of the Emergency Services Grantees Funded by the National Center on Child Abuse and Neglect.** Project Director (KRA). In 1993, NCCAN funded 91 grantees to develop innovative approaches to providing (1) services for families experiencing substance abuse and child maltreatment problems or (2) multidisciplinary training involving both child protective services and substance abuse treatment personnel. The grantees were to hire third-party evaluators to evaluate their efforts. For this project, I managed an effort to conduct a cross-site evaluation of the emergency services projects involving collection of data on the implementation process and a meta-analysis of the findings of the individual grantee evaluations. This included developing interview and survey instruments and a survey approval package for the Office of Management and Budget (OMB).

- **Technical Assistance to Emergency Services Grantees Funded by the National Center on Child Abuse and Neglect (NCCAN).** Project Director (KRA). This project, also funded by NCCAN, involved providing programmatic and evaluation-related TA to the 91 Emergency Services grantees.

- **Evaluation of Six Native American placement prevention and reunification projects.** Project Director (CSR). For this study, funded by the Children’s Bureau, I developed the research design, interview and other data collection instruments; collected and analyzed the data, and prepared the final report and a set of recommendations to the Children’s Bureau.

- **Study of Short-Term Foster Care.** Project Director (CSR). This study was conducted for the Research and Evaluation Division of ACYF in conjunction with the Children’s Bureau. The study was designed to assess the differences between child protective services cases involving the short-term placement of children in out-of-home care (less than 90 days) and those in which families received services while the children remained at home. Six States and 12 counties were included in the study, 3 States with very high levels of short-term foster care and 3 with very low levels. The assessment focused on analysis of State policies and data, and involved collecting data on the characteristics of the child protective services system, children, families, and caseworkers.

The following are additional projects for which I served either as a senior analyst, consultant, or project director:

- **Project Director:** Managed and designed assessment and survey instruments designed to provide management support and technical assistance to the Drug Abuse Prevention Programs for Runaway and Homeless Youth funded by FYSB.

- **Consultant:** Developed process evaluation survey instruments, constructed an analysis plan, conducted telephone and onsite interviews, and prepared case study reports for the evaluation of Team Nutrition, a national nutrition education project funded by Food and Consumer Services, USDA.

- **Project Director:** Managed a national project to provide evaluation TA and prepare a synthesis report on ten Community Nutrition Education Projects for low income families, funded by the Food and Consumer Services division of the United Stated Department of Agriculture.

- **National Consultant:** Assisted the National Resource Center on Child Maltreatment in the development and implementation of a national leadership initiative on substance
abuse in Child Protective Services cases leading toward the production of a monograph and the delivery of a national symposium.

- Consultant: Worked with the Head Start Bureau in developing a strategic plan for an accreditation program for Family Services Workers within the Head Start Program.
- Consultant: Provided evaluation-related technical assistance to 18 school-based child maltreatment prevention projects funded by the Office of Child Abuse and Neglect of the Children’s Bureau.
- Consultant: Provided evaluation-related technical assistance to Family Support Center demonstration projects funded by the Office of Community Services, Department of Health and Human Services.
- Consultant: Developed an inventory of effective child welfare and child protective services practices for the Department of Children and Family Services, State of Illinois.
- Consultant: Evaluated five disaster preparedness projects for the Corporation for National Service.
- Consultant: Developed a synthesis report on the Head Start Homeless Families Demonstration Projects designed to provide Head Start and other services to homeless families for the Head Start Bureau.
- Consultant: Developed a final report outline and cross-project report on the Head Start Target Cities Demonstration Projects designed to provide substance abuse training and intervention skills to Head Start program staff.
- Consultant: Developed a cross-site analysis of the Head Start Teaching Center Demonstration Projects for the Training and Technical Assistance Division of the Head Start Bureau.
- Consultant: Assisted Baltimore City’s Healthy Start, Inc. develop a needs assessment for a Management Information System.
- Consultant: Conducted an inventory analysis of the Head Start Publications Management Center and developed and tested a feedback system for assessing the use and effectiveness of selected Head Start publications.
- Project Director: Developed for FYSB a theoretical framework for understanding youth development that identified the critical characteristics associated with positive youth development and the kinds of experiences and interactions that foster development of those characteristics.
- Project Director: Developed, for ACF, a statistical profile of one-parent families and a literature review of the current state-of-the-art with respect to knowledge about these families.
- Project Director: Managed and conducted a survey for the Office of Human Development Services (now ACF) to identify best practices in DHHS-funded Youth Self-Sufficiency Projects.
- Senior analyst: Conducted a survey for the Office of the Assistant Secretary for Planning and Evaluation on family involvement in services to youth, specifically pregnant and parenting teenagers, runaway youth, and adolescent substance abusers. Analyzed survey data and prepared final report.
Senior Analyst: Participated in a study of family involvement in programs serving pregnant and parenting adolescents, funded by the Adolescent Family Life (AFL) division of the Office of Adolescent Pregnancy Prevention, DHHS.

Principal Investigator: Evaluated a Red Cross national pregnancy prevention program funded by AFL.

Principal Investigator: Assessed the Maryland State Department of Education's Home-School Cooperation Program.

In addition to the projects listed above, while employed as a Research Associate at the Life Cycle Institute at Catholic University, I conducted research in the field of adolescent cognitive and social development. This research resulted in several publications and in the co-authorship of a book entitled Adolescent Relationships with Mothers, Fathers and Friends, published by the University of Chicago Press.

Awards

On October, 2003: I received the Administration for Children and Families, Assistant Secretary's 2003 Honor Award for Outstanding Contractor.

Publications


Smollar, J., and Ooms, T., 1988. *Young Unwed Fathers: Research Review, Policy Dilemmas, and Options.* Report to the Assistant Secretary for Planning and Evaluation, DHHS.


Smollar, J., Youniss, J., and Ooms, T., 1986. *Family Relationships of Adolescents in Crisis: An Assessment of Research and Programs.* Report to the Assistant Secretary for Planning and Evaluation, DHHS.


APPENDIX C: LIST OF DOCUMENTS REVIEWED

• The child welfare policies of OKDHS, found at www.okdhs.org/library/policy


• The Child and Family Services Review (CFSR) Statewide Assessment, June 2007, prepared by OKDHS. Children’s Bureau Website: www.acf.hhs.gov/programs/cb
APPENDIX D: CASE REVIEW INSTRUMENT

D.G. v. Henry Case Record Protocol
COVER SHEET – PROTOCOL

Case Identification:
C.1 OKDHS Client ID number [ ] (7 digits)
C.2 CSF Case Review ID number [ ] (3 digits)
C.3 Name of county having responsibility for the case as of March 1, 2010: ________
C.4 Child’s first name: ________

Instructions: The child’s first name identifies the target child for your case review. OKDHS files are set up by family and not by child, therefore, any given case can contain information about multiple children. It is very important that you enter only information that is relevant to the target child, unless more general information is requested. If there is information in the file but your child is not specified in that information, consider it as missing information. For example, if there is a document that indicates that the caseworker visited “the children” but the document does not specify your child by name or mention your child in any of the summary information about the contact, then this would not be entered as a caseworker visit with the target child.

Case Reader:
C.5 Name (print) ________
C.6 Reviewer ID Number [ ] (2 digits)
C.7 Date case review began (XX/XX/YYYY) M DD YY
C.8 Date protocol submitted to coordinator for QA M DD YY
C.9 Date received from with QA responses M DD YY
C.10 Date resubmitted to coordinator for QA M DD YY

Instructions: This section is to be completed by the case reviewer at the appropriate times. Your reviewer ID will serve as your signature. All dates should be entered here, and throughout, in this format: MM DD YYYY. If the QA person did not have any questions or concerns about the protocol and did not return it for revision, enter 0s in all of the date boxes for C.9 and C.10

Quality Control Reviewer:
C.11 Name (print) ________
C.12 QA ID Number [ ] (2 digits)
C.13 Date case review protocol received M DD YY
C.14 Date QA review completed and returned to coordinator for reviewer corrections M DD YY

Instructions: This section is to be completed by the QA person at the appropriate times. If there is no need to return the case to the reviewer, enter 0s in all of the date boxes for C.14

Inter-rater (IR) reliability reviewer (if relevant):
C.16 Name (print) ________
C.17 Inter-rater reliability ID [ ] (2 digits)
C.18 Date IR review completed (including identification of discrepancies): M DD YY
C.19  Date IR issues resolved and protocol submitted to coordinator for QA  M  D  Y

Instructions: If there are no IR issues, enter 0s in all of the date boxes for C.19

Case Eligibility Determination:

C.20  Was the child in OKDHS custody on March 1, 2010 and had the child been in custody for at least 60 days as of that date?
1= Yes  2= No

If NO, sign and date above and return protocol to coordinator.

Important Note: Please disregard all case documentation after June 1, 2010, as it will not be included in the review.

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SECTION I: DEMOGRAPHIC INFORMATION AND CURRENT STATUS

A. Child and Family Characteristics

1.1 Child’s date of birth

1.2 Child’s gender:  1 = Male  2 = Female

1.3 Child’s race/ethnicity:* (select only one)

*NOTE: Using AFCARS and U.S. Bureau of the Census standards, children of Hispanic origin may be of any race
1 = White Non-Hispanic  4 = Native American or Alaskan Native Non-Hispanic
2 = Black Non-Hispanic  5 = Asian or Pacific Islander Non-Hispanic
3 = Hispanic of any race  6 = Two or more races non-Hispanic
7 = Other (Specify ______)  8 = Cannot determine

Instructions (1.3): Use “Cannot determine” when you are unable to find information in the case file regarding the child’s race and/or ethnicity. Use “Other” when information is provided, but it does not fit any of the categories. When this occurs please provide an explanation below.

1.4 According to the information in the case file, what was the date of the child’s most recent (current) entry into OKDHS custody?

Instructions (1.4): If the date of the most recent entry into OKDHS custody is not documented in the case record, enter (zeros) 0s in all of the date boxes.

Definition: “Entry into OKDHS custody” is defined as the date that the child was removed from the home and placed by OKDHS in an out-of-home placement.

Clarification (1.4): Use the specific date the child was removed from the home.

1.5 Is the child in OKDHS custody as of June 1, 2010?  1 = Yes  2 = No

Clarification (1.5): If the child is in a trial reunification and is placed in the home with the parents, then do not consider that as a discharge from OKDHS custody. Please note that “trial reunification” and “trial home visit” are used interchangeably throughout the review protocol.

1.6 What was the date of the child’s discharge from OKDHS custody?  M __________ D __________ Y __________

Instructions (1.6): If the child has not been discharged from OKDHS custody, enter 0s in all of the date boxes.

1.7 OKDHS custody?  What is the reason documented in the case file for the child’s most recent discharge from

1. Return to own home (reunify with parents/prior legal guardian)
2. Reunification with relatives
3. Adoption
4. Emancipation
5. Legal guardianship
6. Transfer to another service system
7. Other ________
8. NA – The child has not been discharged
1.8  Is there documentation in the case file that the child had one or more prior entries into OKDHS custody?  
1 = Yes  2 = No

Grid 1-A: Dates of prior entries into OKDHS custody and discharges and reasons for discharge.

Instructions for Grid 1-A: If the child does not have any previous entries into OKDHS custody (i.e., question 1.8 is answered as a No) enter 0 (zeros) in all of the date boxes and reason boxes in the grid. If there is documentation in the case file indicating that the child had a previous entry into OKDHS custody (i.e., question 1.8 was answered as a Yes), but no dates are provided in the file for the entry or discharge, enter 0 (zero) in all of the date boxes and reason boxes.

For the “Reason” Column, use the discharge reason codes provided under question 1.7

<table>
<thead>
<tr>
<th>Entry date</th>
<th>Discharge date</th>
<th>*Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.9.</td>
<td>1.10.</td>
<td>1.11</td>
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<tr>
<td>1.12</td>
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<td>1.16.</td>
<td>1.17</td>
</tr>
<tr>
<td>1.18</td>
<td>1.19.</td>
<td>1.20</td>
</tr>
</tbody>
</table>

B: Diligent Searches for Mothers, Fathers, and Relatives

Instructions (1.21 and 1.22): A response of NA would apply if the rights of the child’s parents or legal guardians had been terminated prior to entry into OKDHS custody and the child’s primary caretaker prior to entry was not an adoptive parent.

1.21  Is there documentation in the case file that the identity of the child’s mother was known at the time of the child’s most recent entry into OKDHS custody (within one week)?  
1 = Yes  2 = No  3 = NA

If yes, provide Bates stamp number where you found this information ________
If yes, provide efile name of documentation source ________

Instructions: The case file that you are reviewing will have a Bates stamp number on every page. It is most likely to be on the bottom right hand side of the page. When asked, please record this page number. This will help us answer any QA questions and concerns and can be used to support findings.

1.22  Is there documentation in the case file that the whereabouts of the child’s mother was known within a week of the child’s most recent entry into OKDHS custody?  
1 = Yes  2 = No  3 = NA

If yes, provide Bates stamp number where you found this information ________
If yes, provide efile name of documentation source ________
1.23 Is there documentation in the case file of due diligence to identify and/or notify the mother within 30 days of the child’s most recent entry into OKDHS custody?

1 = Yes  2 = No  3 = NA

If yes, provide Bates stamp number where you found this information
If yes, provide efile name of documentation source

Instructions (1.23): Use NA if the child was removed from the mother’s home and there was no need to identify or notify the mother.

Clarification (1.23): If the mother’s identity is known (1.21 is 1=Yes) and the mother’s whereabouts are known (1.22 is 1=Yes), then answer question 1.23 as 3= NA.

1.24 Is there documentation in the case file that the identity of the child’s father was known at the time of the child’s most recent entry into OKDHS custody (within one week)?

1 = Yes  2 = No  3 = NA

If yes, provide Bates stamp number where you found this information
If yes, provide efile name of documentation source

1.25 Is there documentation in the case file that the whereabouts of the child’s father was known within a week of the child’s most recent entry into OKDHS custody?

1 = Yes  2 = No  3 = NA

If yes, provide Bates stamp number where you found this information
If yes, provide efile name of documentation source

Instructions (1.24 and 1.25): For questions 1.24 and 1.25, the use of NA would apply if the rights of the child’s parents or legal guardians had been terminated prior to entry into OKDHS custody and the child’s primary caretaker prior to entry was not an adoptive parent.

1.26 Is there documentation in the case file of due diligence to identify and/or notify the father within 30 days of the child’s most recent entry into OKDHS custody?

1 = Yes  2 = No  3 = NA

If yes, provide Bates stamp number where you found this information
If yes, provide efile name of documentation source

Instructions (1.26): Use NA if the child was removed from the father’s home and there was no need to identify or notify the father.

Clarification (1.26): If the father’s identity is known (1.24 is 1=Yes) and the father’s whereabouts are known (1.25 is 1=Yes), answer question 1.26 as 3= NA.

1.27 At the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file that the identity of any of the child’s maternal relatives was known?

1 = Yes  2 = No

If yes, provide Bates stamp number where you found this information
If yes, provide efile name of documentation source
1.28 At the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file that the whereabouts of the child’s maternal relatives was known?  
1 = Yes  2 = No  3 = NA (No maternal relatives were known at the time of entry)  
If yes, provide Bates stamp number where you found this information _______  
If yes, provide efile name of documentation source _______  

1.29 Is there documentation in the case file of due diligence to identify and/or notify the child’s maternal relatives within 30 days of the child’s most recent entry into foster care?  
1 = Yes  2 = No  3 = NA  
If yes, provide Bates stamp number where you found this information _______  
If yes, provide efile name of documentation source _______  

**Clarification (1.29): If the identity of maternal relatives is known (1.27 is 1=Yes) and the whereabouts of maternal relatives is known (1.28 is 1=Yes), answer question 1.29 as 3=NA.**  

1.30 If maternal relatives were identified and located, is there documentation in the case file that identified maternal relatives were evaluated as possible placement options? (enter only one number)  
1 = All identified maternal relatives were evaluated as possible placement options  
2 = Only some identified maternal relatives were evaluated as placement options  
3 = No identified maternal relatives were evaluated as possible placement options  
4 = Efforts to contact maternal relatives were not successful  
5 = No maternal relatives were identified  
If answers 1, 2, 3 or 4, provide Bates stamp number where you found this information _______  
If answers 1, 2, 3 or 4, provide efile name of documentation source _______  

**Clarification (1.30 and 1.31): The ‘evaluation’ for questions 1.30 and 1.31 does not need to be a formal evaluation. Record of a conversation between the worker and a relative about being a placement option is sufficient. If the relative was not interested in becoming a placement option, then the reviewer does not need to look for additional information. If the relative was interested, then the reviewer needs to look for additional information about how the relative was evaluated as a potential placement resource.**  

1.31 If some or no maternal relatives were evaluated as placement options, was a reason provided in the case file as to why these maternal relatives were not evaluated as possible placement options?  
1 = Yes  2 = No  3 = NA  
If yes, provide Bates stamp number where you found this information _______  
If yes, provide efile name of documentation source _______  

**Instructions (1.31): Use NA if all identified maternal relatives were evaluated as possible placement options (category 1 above) or no maternal relatives were identified (category 5).**  

1.32 At the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file that the identity of any of the child’s paternal relatives was known?  
1 = Yes  2 = No  
If yes, provide Bates stamp number where you found this information _______  
If yes, provide efile name of documentation source _______
1.33 □ At the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file that the whereabouts of the child’s paternal relatives was known?
   1 = Yes  2 = No  3 = NA (No paternal relatives were known at the time of entry)
   If yes, provide Bates stamp number where you found this information _______
   If yes, provide efile name of documentation source _______

1.34 □ Is there documentation in the case file of due diligence to identify and/or notify the child’s paternal relatives within 30 days of the child’s most recent entry into OKDHS custody?
   1 = Yes  2 = No  3 = NA
   If yes, provide Bates stamp number where you found this information _______
   If yes, provide efile name of documentation source _______

   Clarification (1.34): If the identity of paternal relatives is known (1.32 is 1=Yes) and the whereabouts of paternal relative’s is known (1.33 is 1=Yes), answer question 1.34 as 3=NA.

1.35 □ If paternal relatives were identified and located, is there documentation in the case file that identified paternal relatives were evaluated as possible placement options?
   1 = All identified paternal relatives were evaluated as possible placement options
   2 = Only some identified paternal relatives were evaluated as placement options
   3 = No identified paternal relatives were evaluated as possible placement options
   4 = Efforts to contact paternal relatives were not successful
   5 = No paternal relatives were identified
   If answers 1, 2, 3 or 4, provide Bates stamp number where you found this information _______
   If answers 1, 2, 3 or 4, provide efile name of documentation source _______

   Clarification (1.35 and 1.36): The “evaluation” referenced in questions 1.35 and 1.36 does not need to be a formal evaluation. Record of a conversation between the worker and a relative about being a placement option is sufficient. If the relative was not interested in becoming a placement option, then the reviewer does not need to look for additional information. If the relative was interested, then the reviewer needs to look for additional information about how the relative was evaluated as a potential placement resource.

1.36 □ If only some or no paternal relatives were evaluated as placement options, was a reason provided in the case file as to why these paternal relatives were not evaluated as possible placement options?
   1 = Yes  2 = No  3 = NA
   If yes, provide Bates stamp number where you found this information _______
   If yes, provide efile name of documentation source _______

   Instructions (1.36): Use NA if all identified paternal relatives were evaluated as possible placement options (category 1 above) or no paternal relatives were identified (category 5).
C. Reason for Child’s Most Recent Entry Into Custody of OKDHS

1.37 Is there a document in the case file that specifies the reasons for the child’s most recent entry into OKDHS custody?

1 = Yes  2 = No

Question 1-A: What are the reasons for the child’s most recent entry into OKDHS custody?

Instructions(1.38-1.61): Enter a 1 in the box for ALL reasons that apply, and 0 for all those that don’t apply. If there is a document in the file specifying the reasons, use the information in that document to answer this question. If there is no document (question 1.37 is answered NO) then base your answer on what you can ascertain from the information in the case file.

1.38 Child physical abuse – child was assaulted, hit, poisoned, or burned so severely that serious injury resulted or could have resulted.

1.39 Child physical abuse – child has bruising or burns on any part of the body.

1.40 Child physical abuse – the child was systematically tortured or inhumanely punished.

1.41 Child physical abuse - the Person or Persons Responsible for the Child (PRFC) purposefully or systematically withheld essential food or nourishment from the child. For example, the child was denied food for extended periods as a form of punishment for real or imagined misbehavior.

1.42 Child neglect - the child is 3 years of age or younger and the PRFC demonstrates no attachment to the child and has seriously inappropriate parenting skills.

1.43 Child neglect - the PRFC exhibited reckless disregard for the child's safety that caused or could have caused serious injury. For example, the PRFC left a young child in the care of an obviously irresponsible or dangerous person.

1.44 Child environmental neglect - the physical condition of the home is dangerous and poses an immediate threat of serious injury to the child.

1.45 Child medical neglect – the PRFC refuses to obtain or consent to medical or psychiatric care for the child that is immediately required, as documented by medical evaluation, to prevent or treat a serious injury or disease. The child's physical condition shows signs of severe deterioration and the PRFC(s) seems unwilling or unable to respond.

1.46 Child educational neglect – the PRFC refuses to allow the child to attend school or provide appropriate home schooling.

1.47 Child sexual abuse or exploitation - the child was sexually abused or sexually exploited and the perpetrator has access to the child.

1.48 PRFC mental illness – The PRFC appears to suffer from mental illness or mental retardation so severe that he or she does not provide for the child’s basic needs.

1.49 PRFC substance abuse – The PRFC appears to have a substance abuse problem that is so severe that he or she does not provide for the child’s basic needs and often is significantly intoxicated.

1.50 PRFC abandonment – The PRFC has abandoned the child

1.51 PRFC incarceration or hospitalization

1.52 PRFC deceased

1.53 PRFC requested child’s removal

1.54 Potential child endangerment – There is significant domestic violence in the home that affects the child

1.55 Potential child endangerment – The child is born substance exposed
1.56 Potential child endangerment – There is reason to suspect, based on a history of frequent moves or of hiding the child from outsiders, that, during the investigation, the PRFC may flee with the child and the child is in danger.

1.57 Potential child endangerment - There is specific evidence that the PRFC’s anger and discomfort about the report and subsequent investigation will result in serious retaliation against the child.

1.58 Potential child endangerment - A baby is born to a PRFC who is currently involved in an open permanency planning case and has not successfully completed the court-ordered individualized service plan or there is a pending motion to terminate parental rights.

1.59 Potential child endangerment - Parental rights were terminated for other children and there is harm or significant threat of harm to other children in the home of the PRFC.

1.60 Potential child endangerment – PRFC has committed murder or manslaughter of any child; aided or abetted, attempted, conspired, or solicited to commit voluntary manslaughter of any child; committed a felony assault upon any child that resulted in the child receiving serious bodily injury; or subjected any child to aggravated circumstances including, but not limited to, heinous and shocking abuse, or heinous and shocking neglect.

1.61 Other (specify) ____

1.62 According to information in the case file, was the child’s most recent entry into OKDHS custody the result of a report alleging child abuse or neglect that was investigated or assessed and the finding of the investigation or assessment was either substantiated-services recommended or substantiated-court involvement recommended?

1 = Yes      2 = No      3 = Cannot determine the finding of the investigation or assessment

Instructions (1.63): For this question, a maltreatment allegation refers to any report to the child welfare agency that alleges any conditions pertaining to child abuse or neglect.

1.63 During the life of the case, how many maltreatment reports were documented in the case record as being received on this family in which one or more of the children in the family was identified as the alleged victim of maltreatment?

Definition (1.63): “Life of the case” refers to the date of the first recorded report alleging abuse or neglect that was received by the agency, even if the report was screened out.

Definition: Maltreatment report refers to a report that alleges any of the conditions listed from 1.38 to 1.61

1.64 How many maltreatment reports were documented in the case record as being received on this family in which one or more of the children was identified as the victim and the report finding was unfounded-services recommended, substantiated-services recommended, or substantiated-court involvement recommended.

1.65 According to information in the case file, how many maltreatment reports that identified the target child for this case review as the victim of maltreatment were found to be unfounded-services recommended, substantiated-services recommended, or substantiated-court involvement recommended?

1.66 For the child’s most recent entry into foster care, is there documentation in the case file of reasonable efforts to prevent the removal of the child from the home?

1 = Yes      2 = No      3 = NA (efforts to prevent removal were not appropriate given the case situation)

If yes, provide Bates stamp number where you found this information _______

If yes, provide efile name of documentation source _______

Clarification (1.66): If “Reasonable efforts” is checked on a court order, then choose “1=Yes” even if there is no further documentation in the case file of what those efforts were.
SECTION II: CASE PLANNING AND CASE MANAGEMENT

A. Individual Service Plans (ISPs)

Instructions: According to OK Policy, the components of the case plan that comprise the Child’s ISP include: Forms 04KI005E-Child’s Individualized Service Plan (ISP); 04KI012E-Individualized Service Plan (ISP) (which focuses on the parent); 04KI004E-Placement Provider Information; and 04KI014E-Individualized Service Plan (ISP) Progress Report. However, in the pilot review of cases, the form numbers did not always appear on documents identified as an ISP and it is not clear whether the plan for the child is included in a different form than the plan for the parent. In answering the questions below, it may be easiest to conduct a search for “ISP” in all of the files provided to identify all ISP-related documents. Answer the questions below ONLY using documents identified as ISP or ISP-Progress Report, including ISP reports submitted for court hearings that may be titled as ISP followed by the type of hearing (e.g., adjudication, pre-trial, dispositional report).

2.1 Does the child’s case record include at least one individualized service plan (ISP) that was completed during the child’s most recent entry into custody?

1 = Yes  2 = No

Instructions (2.1): Question 2.1 may be answered as a “Yes” if there is at least one document in the file titled ISP that is NOT an ISP-Progress Report.

2.2 What is the date of the earliest ISP that was completed after the date of the child’s most recent entry into OKDHS custody?

M   D   Y

Instructions (2.2): Check the date of the child’s most recent entry into OKDHS custody that was reported for Section I, question 1.4 and compare that date to the date of the earliest document that is titled ISP and that is NOT an ISP-Progress Report. Enter the date of the earliest ISP after entry into custody in the date boxes above. If there is no ISP in the file, enter 0s (zeros) in all of the date boxes.

2.3 What is the date of the most recently completed ISP (that is NOT an ISP-Progress Report)?

M   D   Y

Instructions (2.3): if there is only one ISP in the case file that is not identified as a progress report, enter the same date for questions 2.2 and 2.3.

Clarification (2.4, 2.5 and 2.6): While the target child may not be listed on the front page of the ISP or ISP Progress Report in “Family Members Involved in the ISP”, the ISP or the ISP Progress Report should be considered for questions 2.4, 2.5 and 2.6 if the either document contains SIGNIFICANT information about the target child. Minor references to the child (e.g. child was present at visit) should not be counted.

2.4 Does the case file include at least one ISP-Progress Report that was completed during the child’s most recent entry into custody?

1 = Yes  2 = No

2.5 What is the date of the earliest ISP-Progress Report documented in the case file that was completed after the date of the child’s most recent entry into OKDHS custody?

M   D   Y

Instructions (2.5): If there is no ISP-Progress Report in the case file, enter zeros in all of the date boxes.

2.6 What is the date of the most recently completed ISP-Progress Report documented in the case file?

M   D   Y

Instructions (2.6): If there is no ISP-Progress report in the case file, enter zeros in all of the date boxes. If there is only one ISP-Progress Report in the case file, enter the same date for questions 2.5 and 2.6.
### B. Initial Case Planning

#### 2.7

What is the permanency plan goal identified for the child in the initial Child ISP or in another document in the cases file if an initial ISP cannot be found?

1 = Return to own home  
2 = Adoption  
3 = Adoption preparation  
4 = Guardianship  
5 = Planned alternative permanent placement  
6 = Emancipation  
7 = Maintain in own home  
8 = Concurrent goals of return to own home and guardianship  
9 = Concurrent goals of return to own home and adoption  
10 = Concurrent goals of return to own home and planned alternative permanent placement  
11 = Concurrent goals of return to own home and emancipation  
12 = Concurrent goals of return to own home, guardianship, and planned alternative permanent placement  
13 = Concurrent goals of adoption and guardianship  
14 = Concurrent goals of adoption and planned alternative permanent placement  
15 = Concurrent goals of adoption and emancipation  
16 = Concurrent goals of guardianship and planned alternative permanent placement  
17 = Concurrent goals of guardianship and emancipation  
18 = Concurrent goals of planned alternative permanent placement and emancipation  
19 = Concurrent goals of adoption and adoption preparation  
20 = Concurrent goals of return to own home and adoption preparation  
21 = Concurrent goals of guardianship and adoption preparation  
22 = Concurrent goals of planned alternative permanent placement and adoption preparation  
23 = There is no permanency plan goal in the initial ISP  
24 = Other  
25 = No goal is identified  
26 = NA-Child no longer in care

**Instructions:** Based on pilot reviews, permanency goal information may be listed in the ISP’s done for various court hearings. In these documents there are two columns for goals. For purposes of answering this question, if both columns are filled out, they should be treated as concurrent goals. If only one column is completed, then it should be treated as a single goal.

#### 2.8

If the initial Child ISP indicates that the child’s permanency plan goal is planned alternative permanent placement, is there documentation in the case file that the goals of return to own home, adoption, and guardianship were considered and ruled out prior to establishing the goal of planned alternative placement?

1 = Yes  
2 = No  
3 = NA (child’s initial permanency goal was not planned alternative permanent placement)

If yes, provide Bates stamp number where you found this information ________

If yes, provide efile name of documentation source ________
2.9 □ Does the initial Child ISP indicate that another goal was under consideration in addition to the one(s) identified, although it was not specified as a permanency plan goal in the ISP?
   1 = Yes  2 = No  3 = NA (there is no ISP or there is no identified permanency plan goal)

If yes, provide Bates stamp number where you found this information __________
If yes, provide efile name of documentation source __________

Instructions (2.9): This question is asking about goals OTHER than the ones identified as either single or concurrent goals. For example, adoption may not be identified as either a single or concurrent goal, but somewhere in the ISP, there may be an indication that the agency is considering the goal of adoption.

2.10 □ What is the other goal under consideration in addition to the one(s) identified in the initial ISP?

Instructions (2.10): In answering this question, use the codes under question 2.7. If there is no other goal under consideration, use code “25” = No goal is identified

Question 2-A: Which of the following information is contained in the child's initial ISP? (enter “1” for all that apply and 0 for all that do not apply. Make sure there is an entry in each box.)

Instructions (2.11-2.22): This information is to be taken from the earliest ISP after the date of the child’s entry into foster care. Documents titled ISP-Progress Report should NOT be used for this information.

□ 2.11 Identification of the problems or conditions leading to the "deprived child" adjudication and an assessment of child and family needs
□ 2.12 Identification of the specific services to be provided to the child (including, but not limited to, educational, medical and drug abuse treatment, and mental health services)
□ 2.13 A schedule of the frequency of services and the means by which delivery of the services will be assured or, as necessary, and the proposed means by which support services or other assistance will be provided to enable the parent or the child to obtain the services and an assessment of child and family needs
□ 2.14 Child’s health record
□ 2.15 Child’s educational record
□ 2.16 The name of the child welfare worker assigned to the case

Clarification (2.16): If there is a signature on the document that is from the primary or secondary worker, then answer “1” for question 2.16, even if the worker’s name is not printed on the document. If the signature is that of another worker, then answer “0.”

□ 2.17 Performance criteria that measures the progress of the child toward completion of the individualized service plan including, but not limited to, desired outcomes, time frames for achieving objectives, and time frames for addressing the identified problems
□ 2.18 The services to be provided to the foster parent to facilitate the child’s return home or to another permanent placement
□ 2.19 A description of the child’s placement and explanation of whether the placement is the least restrictive, most family-like setting available, and in as close proximity as possible to the home of the parent or parents or legal guardian of the child when the case plan is reunification, and how the placement is consistent with the best interests and special needs of the child
□ 2.20 A plan and schedule for regular and frequent visitation for the child and the child’s parents and siblings or a court document indicating that the court has determined that visitation would be harmful to the child.
□ 2.21 A plan for ensuring the educational stability of the child while in out-of-home placement – i.e., to prevent school changes due to placement or continuity in enrollment if a school change occurs.
2.22 The permanency plan for the child, the reason for selection of that plan and a description of the steps being taken by OKDHS to achieve the plan (including child-specific recruitment efforts if the permanency plan is adoption or legal guardianship and services to the parents if the permanency plan is return to own home)

Question 2-B: Which of the following information is contained in the initial treatment plan?

Instructions: Pilot test reviewers found a document called “Treatment Plan” in the case file that seemed to specify some of the information under 2.10. If you can locate that document, complete the items below entering “1” for all that apply and 0 for all that do not apply. If there is no treatment plan in the file, enter 0s in all of the boxes.

Clarification (2.23-2.35): For questions 2.23-2.34 consider only the initial Treatment Plan, NOT an ISP, ISP Progress Report or any other documentation.

2.23 Identification of the problems or conditions leading to the “deprived child” adjudication
2.24 Identification of the specific services to be provided to the child (including, but not limited to, educational, medical and drug abuse treatment, and mental health services)
2.25 A schedule of the frequency of services and the means by which delivery of the services will be assured or, as necessary, and the proposed means by which support services or other assistance will be provided to enable the parent or the child to obtain the services
2.26 Child’s health record
2.27 Child’s educational record
2.28 The name of the child welfare worker assigned to the case

Clarification (2.28): If there is a signature on the document that is from the primary or secondary worker, then answer “1” for question 2.28, even if the worker’s name is not printed on the document. If the signature is that of another worker, then answer “0.”

2.29 Performance criteria that measures the progress of the child toward completion of the individualized service plan including, but not limited to, desired outcomes, time frames for achieving objectives, and time frames for addressing the identified problems
2.30 The services to be provided to the foster parent to facilitate the child’s return home or to another permanent placement
2.31 A description of the child’s placement and explanation of whether the placement is the least restrictive, most family-like setting available, and in as close proximity as possible to the home of the parent or parents or legal guardian of the child when the case plan is reunification, and how the placement is consistent with the best interests and special needs of the child
2.32 A plan and schedule for regular and frequent visitation for the child and the child’s parents and siblings or a court document indicating that the court has determined that visitation would be harmful to the child.
2.33 A plan for ensuring the educational stability of the child while in out-of-home placement – i.e., to prevent school changes due to placement or continuity in enrollment if a school change occurs.
2.34 The permanency plan for the child, the reason for selection of that plan and a description of the steps being taken by OKDHS to achieve the plan (including child-specific recruitment efforts if the permanency plan is adoption or legal guardianship and services to the parents if the permanency plan is return to own home)

2.35 What is the date of the first treatment plan found in the case file (after the date of the child’s most recent entry into OKDHS custody)?

Instructions (2.35): If there is no treatment plan or no date for the treatment plan, enter 0s in all of the date boxes.
C. Ongoing Case Planning

2.36 As of June 1, 2010, what is the permanency goal plan identified for the child that is documented in the case file? (Enter only one code)

1 = Return to own home
2 = Adoption
3 = Adoption preparation
4 = Guardianship
5 = Planned alternative permanent placement
6 = Emancipation
7 = Maintain in own home
8 = Concurrent goals of return to own home and guardianship
9 = Concurrent goals of return to own home and adoption
10 = Concurrent goals of return to own home and planned alternative permanent placement
11 = Concurrent goals of return to own home and emancipation
12 = Concurrent goals of return to own home, guardianship, and planned alternative permanent placement
13 = Concurrent goals of adoption and guardianship
14 = Concurrent goals of adoption and planned alternative permanent placement
15 = Concurrent goals of adoption and emancipation
16 = Concurrent goals of guardianship and planned alternative permanent placement
17 = Concurrent goals of guardianship and emancipation
18 = Concurrent goals of planned alternative permanent placement and emancipation
19 = Concurrent goals of adoption and adoption preparation
20 = Concurrent goals of return to own home and adoption preparation
21 = Concurrent goals of guardianship and adoption preparation
22 = Concurrent goals of planned alternative permanent placement and adoption preparation
23 = Cannot determine the current permanency goal as of June 1, 2010.
24 = Other
25 = No goal is identified
26 = NA-Child no longer in care

Grid 2-A – Dates of Child’s permanency goals

Instructions (2.37-2.48): Complete Grid 2-A for all permanency plan goals identified for the child during the child’s most recent entry into foster care starting with the initial goal and using the codes listed under question 2.36. Identify the goal and the date established and date changed. If a concurrent goal was added to the initial goal, use the date that the concurrent goal was added as the “date changed,” and identify the appropriate concurrent goals code for the new permanency goal. Remember that a “permanency plan goal” can be EITHER a single goal or one of the possible concurrent goals listed under 2.32. Enter 0 (zero) in the date boxes when there is no goal change.

<table>
<thead>
<tr>
<th>Permanency Goal(s)</th>
<th>Date Established (If no date, use zero)</th>
<th>Date Changed (If no date, use zero)</th>
</tr>
</thead>
<tbody>
<tr>
<td>First</td>
<td>2.38 M D Y</td>
<td>2.39 M D Y</td>
</tr>
<tr>
<td>Second</td>
<td>2.41 M D Y</td>
<td>2.42 M D Y</td>
</tr>
<tr>
<td>Third</td>
<td>2.44 M D Y</td>
<td>2.45 M D Y</td>
</tr>
<tr>
<td>Fourth</td>
<td>2.47 M D Y</td>
<td>2.48 M D Y</td>
</tr>
</tbody>
</table>

Note: You may be able to find this information in the KIDS file under Section VIII. Family Progress, Heading H – Permanency plan. Or it may be found on forms titled “OKDHS Court Report” with the number 04K1009E. If you can identify information indicating that a goal change occurred, but there is no information about the dates, complete column 1, and enter a 0 (zero) for all of the date information.
Clarification (2.49, 2.50, 2.51): Since the focus of these questions is related to Permanency Goals, the reviewer should also consider Treatment Plans that contain information about permanency plan goals.

2.49 □ Does the most recent ISP or ISP-Progress Report indicate that another permanency plan goal may be under consideration in addition to the one or ones identified as the goal(s) in the most recent ISP or ISP-Progress Report?
   1 = Yes   2 = No
   3 = NA (the initial ISP is the only one in the file and there are no ISP-Progress Reports

Instructions (2.49): This question is asking about goals OTHER than the ones identified as either single or concurrent goals. For example, adoption may not be identified as either a single or concurrent goal, but somewhere in the ISP, there may be an indication that the agency is considering the goal of adoption.

2.50 □ What is the other permanency plan goal under consideration in addition to the one(s) identified as the permanency goal(s) in the most recent ISP?

Clarification (2.50): Also consider permanency goal information in the most recent ISP Progress Report.

Instructions: In answering this question, use the codes under question 2.36. If no other goals are under consideration, enter a 0 (zero).

2.51 □ If the most recent ISP or ISP-Progress Report indicates that the child’s current permanency plan goal is planned alternative permanent placement, is there documentation in the case file that the goals of return to own home, adoption, and guardianship were considered and ruled out prior to establishing the goal of planned alternative placement?
   1 = Yes   2 = No
   3 = NA (child’s most recent permanency goal was not planned alternative permanent placement)

If yes, provide Bates stamp number where you found this information ______
If yes, provide efile name of documentation source ______

2.52 □ If the child had a single goal of planned alternative permanent placement at any time during the most recent entry into foster care, is there documentation in the case file that this goal was periodically re-evaluated for appropriateness?
   1 = Yes   2 = No
   3 = NA (child did not have a goal of planned alternative permanent placement at any time during the most recent entry into OKDHS custody)

If yes, provide Bates stamp number where you found this information ______
If yes, provide efile name of documentation source ______
Question 2-C: Which of the following information does the child’s most recent ISP or ISP Progress Report contain? (Enter a “1” for all that apply)

Instructions (2.53-2.64): Consider the response used for Questions 2.3 and 2.6, and then use the most recent plan. This information is to be taken from the earliest ISP OR ISP-Progress report after the date of the child’s entry into foster care. Documents titled ISP-Progress Report can be used for this information if there is no ISP in the case file other than the initial one, and there are multiple ISP-Progress Reports. Enter a “1” for all that apply, and a “0” for all that do not apply. Make sure that each box is completed.

- 2.53 A description and evaluation of the progress made with regard to achieving ISP objectives since the initial and/or prior ISP including an updated family and child needs assessment
- 2.54 Identification of the specific services to be provided to the child (including, but not limited to, educational, medical and drug abuse treatment, and mental health services)
- 2.55 A schedule of the frequency of services and the means by which delivery of the services will be assured or, as necessary, and the proposed means by which support services or other assistance will be provided to enable the parent or the child to obtain the services
- 2.56 Child’s health record
- 2.57 Child’s educational record
- 2.58 The name of the child welfare worker assigned to the case

Clarification (2.58): If there is a signature on the document that is from the primary or secondary worker, then answer “1” for question 2.58, even if the worker’s name is not printed on the document. If the signature is that of another worker, then answer “0.”

- 2.59 Performance criteria that measures the progress of the child toward completion of the individualized service plan including, but not limited to, desired outcomes, time frames for achieving objectives, and time frames for addressing the identified problems
- 2.60 The services to be provided to the foster parent to facilitate the child’s return home or to another permanent placement
- 2.61 A description of the child’s placement and explanation of whether the placement is the least restrictive, most family-like setting available, and in as close proximity as possible to the home of the parent or parents or legal guardian of the child when the case plan is reunification, and how the placement is consistent with the best interests and special needs of the child
- 2.62 A plan and schedule for regular and frequent visitation for the child and the child’s parents and siblings or a court document indicating that the court has determined that visitation would be harmful to the child.
- 2.63 A plan for ensuring the educational stability of the child while in out-of-home placement
- 2.64 The permanency plan for the child, the reason for selection of that plan and a description of the steps being taken by OKDHS to achieve the plan (including child-specific recruitment efforts if the permanency plan is adoption or legal guardianship and services to the parents if the permanency plan is return to own home)

2.65 Are there child or family needs identified in other documents in the case file, such as case notes, court orders, caretaker reports, service provider reports, etc. that are not addressed in the most recent ISP or ISP-Progress Report or any prior ISP’s?

1 = Yes    2 = No

Clarification (2.65): When answering this question, do not consider any treatment plans that were found in the file. Reviewers may skip question 2.65 initially and come back to it after completing the entire protocol. After conducting a thorough review, the reviewer will be able to identify other needs of the child or family that were not addressed in the ISPs or ISP-Progress Reports and record them here.
Question 2-D: What were the child or family needs identified in other documents that were not addressed in any ISP?

Instructions (2.66-2.71): Write in the identified need that was not addressed in the ISP and then document where you found that information. If no needs identified (i.e., the answer to question 2.66 is No), write in None for 2.66 through 2.71. When answering this question, do not consider any treatment plans that were found in the file.

2.66  ____  Bates stamp______  Efile Source ______
2.67  ____  Bates stamp______  Efile Source ______
2.68  ____  Bates stamp______  Efile Source ______
2.69  ____  Bates stamp______  Efile Source ______
2.70  ____  Bates stamp______  Efile Source ______
2.71  ____  Bates stamp______  Efile Source ______

2.72  ____  Is there a document titled Treatment Plan in the case file other than the initial Treatment Plan reported under question 2-B in Part A, initial planning.
       1 = Yes   2 = No   3 = NA (there was no treatment plan at all in the file)

2.73  What is the date of the most recent Treatment Plan?  M___  D___  Y___

Instructions (2.73): If there is no treatment plan at all or no treatment plan other than the initial treatment plan, enter 0 in all of the date boxes.
Question 2-E: Which of the following does the child’s most recent Treatment Plan contain?

Instructions (2.74-2.85): If there is no treatment plan, enter 0 in all of the boxes from 2.74 to 2.85. If there is a treatment plan, enter a 1 for all that apply and a 0 for all that do not apply. Make sure that all boxes are completed.

- 2.74 A description and evaluation of the progress made with regard to achieving ISP objectives since the initial and/or prior ISP.
- 2.75 Identification of the specific services to be provided to the child (including, but not limited to, educational, medical and drug abuse treatment, and mental health services)
- 2.76 A schedule of the frequency of services and the means by which delivery of the services will be assured or, as necessary, and the proposed means by which support services or other assistance will be provided to enable the parent or the child to obtain the services
- 2.77 Child’s health record
- 2.78 Child’s educational record
- 2.79 The name of the child welfare worker assigned to the case
- 2.80 Performance criteria that measures the progress of the child toward completion of the individualized service plan including, but not limited to, desired outcomes, time frames for achieving objectives, and time frames for addressing the identified problems
- 2.81 The services to be provided to the foster parent to facilitate the child’s return home or to another permanent placement
- 2.82 A description of the child’s placement and explanation of whether the placement is the least restrictive, most family-like setting available, and in as close proximity as possible to the home of the parent or parents or legal guardian of the child when the case plan is reunification, and how the placement is consistent with the best interests and special needs of the child
- 2.83 A plan and schedule for regular and frequent visitation for the child and the child’s parents and siblings or a court document indicating that the court has determined that visitation would be harmful to the child.
- 2.84 A plan for ensuring the educational stability of the child while in out-of-home placement
- 2.85 The permanency plan for the child, the reason for selection of that plan and a description of the steps being taken by OKDHS to achieve the plan (including child-specific recruitment efforts if the permanency plan is adoption or legal guardianship and services to the parents if the permanency plan is return to own home)

D. CW Worker’s Assignment and Case Management

2.86 Based on information in the case file, what was the total number of PRIMARY OKDHS Child Welfare Workers assigned to the child’s case during the child’s most recent episode in OKDHS custody (the primary worker is the worker in the county of jurisdiction)?

2.87 Based on information in the case file, what was the total number of SECONDARY OKDHS Child Welfare Workers assigned to the child’s case during the child’s most recent episode in OKDHS custody (the secondary worker is the worker in the county of service. Do not include IL workers, Intake workers, workers who facilitate family group conferences, etc.)?

2.88 According to information in the case file, how long a period of time was there no caseworker assigned to the case?
1 = Less than one week
2 = More than one week but less than one month
3 = At least one month but less than 2 months
4 = Two months or longer
5 = NA (either there was no time when the child did not have an assigned caseworker or the length of time cannot be determined from the case file)
GRID 2-B: Presence of Case Notes in the Case File

Instructions for Grid 2-B: indicate for each month during the 12 months from June 1, 2009 through May 31, 2010 whether case notes were found in the case record. If there ARE case notes for a month when the child as not in foster care for the entire month, enter 1 for Yes. If there ARE NO CASE NOTES for one month and the child was not in foster care for the entire month, enter 3 for NA.

Questions 2.89 – 2.100 have been deleted from the instrument.

<table>
<thead>
<tr>
<th>Months</th>
<th>Case notes found in case records?</th>
<th>Documentation Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/2009</td>
<td>2.102</td>
<td>Efie Doc: _________</td>
</tr>
<tr>
<td>8/2009</td>
<td>2.103</td>
<td>Efie Doc: _________</td>
</tr>
<tr>
<td>9/2009</td>
<td>2.104</td>
<td>Efie Doc: _________</td>
</tr>
<tr>
<td>10/2009</td>
<td>2.105</td>
<td>Efie Doc: _________</td>
</tr>
<tr>
<td>12/2009</td>
<td>2.107</td>
<td>Efie Doc: _________</td>
</tr>
<tr>
<td>1/2010</td>
<td>2.108</td>
<td>Efie Doc: _________</td>
</tr>
<tr>
<td>2/2010</td>
<td>2.109</td>
<td>Efie Doc: _________</td>
</tr>
<tr>
<td>3/2010</td>
<td>2.110</td>
<td>Efie Doc: _________</td>
</tr>
<tr>
<td>4/2010</td>
<td>2.111</td>
<td>Efie Doc: _________</td>
</tr>
<tr>
<td>5/2010</td>
<td>2.112</td>
<td>Efie Doc: _________</td>
</tr>
</tbody>
</table>

Case notes in the form of a running narrative were generally not found in the pilot testing. However, Contact forms can be found in the file that document contacts made by the child welfare worker with various parties. There is a comments section on the contact form. If these contact forms contain substantive information relevant to the target child, then they may be considered “case notes.” If they just mention that a contact was made and that information was requested or given, they should not be considered case notes.
GRID 2-C: Caseworker contacts with child

Instructions for GRID 2-C. During the 12-month period from June, 2009 to May 31, 2010, list the total number of times the child’s child welfare worker or supervisor had face-to-face contact with the child within the month.

1) If there were no visits in a month and the child was in foster care for the entire month, enter 0 in column 2 and using the key, insert the reason for the lack of a visit in the corresponding box for the month.

2) If there are no visits in a month and the child was not in foster care for the entire month, enter 98 for NA in the boxes in column 2 and 10 for NA in the reason column.

3) If there were visits in a month and the child was not in foster care for the entire month, enter the number of contacts for that month in column 2 and 11 in the reason column. Be sure to include contacts made with the child while the child was placed at home on a trial reunification.

<table>
<thead>
<tr>
<th>Months</th>
<th># of times child’s CW worker or supervisor had contact with the child (Enter 98 for NA)</th>
<th>Reason child was not seen</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/2009</td>
<td>2.113</td>
<td>2.114</td>
</tr>
<tr>
<td>7/2009</td>
<td>2.115</td>
<td>2.116</td>
</tr>
<tr>
<td>8/2009</td>
<td>2.117</td>
<td>2.118</td>
</tr>
<tr>
<td>9/2009</td>
<td>2.119</td>
<td>2.120</td>
</tr>
<tr>
<td>10/2009</td>
<td>2.121</td>
<td>2.122</td>
</tr>
<tr>
<td>11/2009</td>
<td>2.123</td>
<td>2.124</td>
</tr>
<tr>
<td>12/2009</td>
<td>2.125</td>
<td>2.126</td>
</tr>
<tr>
<td>1/2010</td>
<td>2.127</td>
<td>2.128</td>
</tr>
<tr>
<td>2/2010</td>
<td>2.129</td>
<td>2.130</td>
</tr>
<tr>
<td>3/2010</td>
<td>2.131</td>
<td>2.132</td>
</tr>
<tr>
<td>4/2010</td>
<td>2.133</td>
<td>2.134</td>
</tr>
<tr>
<td>5/2010</td>
<td>2.135</td>
<td>2.136</td>
</tr>
</tbody>
</table>

Key: Reason for Lack of Face-to Face Contact (select only one)

01 = Child in foster care out of the state
02 = CW worker/supervisor left agency
03 = Visit arrangement but foster caregiver canceled visit
04 = Foster caregiver failed to cooperate with arranging visit
05 = Visit attempted, child not at location
06 = Child runaway/AWOL
08 = No indication in the record that the CW worker or supervisor arranged a visit
09 = Other (specify) __________
10 = NA – child not in custody for entire month
11 = Child was seen that month
During the 12-month period from June 1, 2009 through May 31, 2010, did OKDHS staff other than the child welfare worker or supervisor assigned to the case have face-to-face contact with the child?

1 = Yes  2 = No  3 = Cannot Determine

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source _______

Instructions (2.137): Use “Cannot Determine” if there is some evidence of agency contact with the child, but you are unable to identify the job description of the person making the contact.

Grid 2-D: Frequency of contacts by OKDHS staff other than child welfare worker or supervisor

Instructions for Grid 2-D:
1) If the answer to question 2.137 is 1 = Yes, indicate the number of visits and the staff (other than the child welfare worker or supervisor) who had face-to-face contact with the child.
2) If the answer to questions 2.137 is 2 = No, enter 0 in each of the boxes in Column 2 below.

Pilot testing indicated that sometimes the name of someone who had contact with the child is in the file, but there is no title or job description for that person and the person is not the assigned child welfare worker or supervisor. In those situations, next to “other” enter the term “unknown job description”

<table>
<thead>
<tr>
<th>Staff</th>
<th>Number of visits in the 12 month period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homemaker</td>
<td>2.138</td>
</tr>
<tr>
<td>Case assistant</td>
<td>2.139</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>2.140a __________ 2.140b __________</td>
</tr>
</tbody>
</table>

Is there documentation in the case file that the child’s child welfare worker or supervisor had a face-to-face contact with the child in the child’s placement within the first two weeks of the child’s most recent entry into foster care?

1 = Yes  2 = No

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source _______
E. Child Welfare Worker Visits with Parent/Previous Custodian

If, at any time during the 12-month period from June 1, 2009 to May 31, 2010, the child's primary or concurrent permanency goal was “return to own home” (i.e., reunification with biological parents or legal guardians) complete Grid 2-E. If “return to own home” was not a primary or concurrent permanency goal at any time during that 12-month period, enter 0s in all of the data boxes in Grid 2-E.

GRID 2-E: Caseworker Contacts with Parents/Guardians

Instructions for Grid 2-E. In the grid below, list the total number of times the child’s OKDHS child welfare Worker/supervisor had face-to-face contact with the parent/guardian each month during the 12-month period from June 1, 2009 through May 31, 2010.

1) Enter the number of face-to-face contacts even if the child was not in foster care for the entire month or the goal was not reunification for the entire month.

2) Enter 3=NA if for any given month there were no face-to-face contacts and the child was not in OKDHS custody for the entire month; the goal was not reunification for that month; or the parent could not be located, was deceased, had surrendered his/her rights, or his/her rights were terminated involuntarily.

3) If the answer in column 1 or 3 is 2=No or 3=NA, then enter 0 in columns 2 or 4.

<table>
<thead>
<tr>
<th>Months</th>
<th>(1). Was there a visit between the child’s case worker/sup and <strong>mother</strong> (birth/female guardian) with whom reunification is planned?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1=Yes 2=No 3=NA</td>
</tr>
<tr>
<td>6/2009</td>
<td>2.142 2.143 2.144 2.145</td>
</tr>
<tr>
<td>7/2009</td>
<td>2.146 2.147 2.148 2.149</td>
</tr>
<tr>
<td>8/2009</td>
<td>2.150 2.151 2.152 2.153</td>
</tr>
<tr>
<td>9/2009</td>
<td>2.154 2.155 2.156 2.157</td>
</tr>
<tr>
<td>10/2009</td>
<td>2.158 2.159 2.160 2.161</td>
</tr>
<tr>
<td>11/2009</td>
<td>2.162 2.163 2.164 2.165</td>
</tr>
<tr>
<td>12/2009</td>
<td>2.166 2.167 2.168 2.169</td>
</tr>
<tr>
<td>1/2010</td>
<td>2.170 2.171 2.172 2.173</td>
</tr>
<tr>
<td>2/2010</td>
<td>2.174 2.175 2.176 2.177</td>
</tr>
<tr>
<td>3/2010</td>
<td>2.178 2.179 2.180 2.181</td>
</tr>
<tr>
<td>4/2010</td>
<td>2.182 2.183 2.184 2.185</td>
</tr>
<tr>
<td>5/2010</td>
<td>2.186 2.187 2.188 2.189</td>
</tr>
</tbody>
</table>
F. OKDHS Child Welfare Worker’s Contacts with Foster Caregiver

GRID 2-F: Caseworker Contacts with Foster Parents

Instructions for Grid 2-F. In the grid below, list the total number of times an OKDHS child welfare worker/supervisor had face-to-face contact with the foster parent (at least one of the foster parents, if married) within the month, during the 12-month period from June 1, 2009 to May 31, 2010

1) If the child was not in a relative or non-relative foster family home at any time during the 12-month period, enter 0 in all of the boxes.

2) Enter 1=Yes in column 1 if there were visits even though the child was not in the foster home for the entire month. Enter 2=No in column 1 if there are no visits and the child was placed the entire month. Enter 3 =NA in column 1 if there are no visits and the child was not placed in a foster family home for the entire month.

3) If a child welfare worker/supervisor did not see the foster parent during a month, using the key, insert the reason for the lack of a visit in column 4.

4) If column 1 is 2=No or 3=NA, then enter 0 in the boxes in columns 2, 3 and 4.

Clarification (Grid 2-F): When reviewing a contact/visit between a worker and the child in the foster home, the reviewer should not count this contact/visit as the worker having contact with the foster parent unless there is explicit documentation indicating the worker actually had contact with the foster parent(s).

<table>
<thead>
<tr>
<th>Month</th>
<th>(1). Was there a visit between the child’s case worker/sup and foster caregiver?</th>
<th>(2). # of times case worker/sup saw foster caregiver</th>
<th>(3). # of times case worker/sup saw foster caregiver in the foster home</th>
<th>(4). Reason for lack of face-to-face contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/2009</td>
<td>2.190</td>
<td>2.191</td>
<td>2.192</td>
<td>2.193</td>
</tr>
<tr>
<td>7/2009</td>
<td>2.194</td>
<td>2.195</td>
<td>2.196</td>
<td>2.197</td>
</tr>
<tr>
<td>8/2009</td>
<td>2.198</td>
<td>2.199</td>
<td>2.200</td>
<td>2.201</td>
</tr>
<tr>
<td>9/2009</td>
<td>2.202</td>
<td>2.203</td>
<td>2.204</td>
<td>2.205</td>
</tr>
<tr>
<td>10/2009</td>
<td>2.206</td>
<td>2.207</td>
<td>2.208</td>
<td>2.209</td>
</tr>
<tr>
<td>11/2009</td>
<td>2.210</td>
<td>2.211</td>
<td>2.212</td>
<td>2.213</td>
</tr>
<tr>
<td>12/2009</td>
<td>2.214</td>
<td>2.215</td>
<td>2.216</td>
<td>2.217</td>
</tr>
<tr>
<td>1/2010</td>
<td>2.218</td>
<td>2.219</td>
<td>2.220</td>
<td>2.221</td>
</tr>
<tr>
<td>2/2010</td>
<td>2.222</td>
<td>2.223</td>
<td>2.224</td>
<td>2.225</td>
</tr>
<tr>
<td>3/2010</td>
<td>2.226</td>
<td>2.227</td>
<td>2.228</td>
<td>2.229</td>
</tr>
<tr>
<td>4/2010</td>
<td>2.230</td>
<td>2.231</td>
<td>2.232</td>
<td>2.233</td>
</tr>
<tr>
<td>5/2010</td>
<td>2.234</td>
<td>2.235</td>
<td>2.236</td>
<td>2.237</td>
</tr>
</tbody>
</table>

Key: Reason for Lack of Face-to-Face Contact (select only one)
1 = Child in foster care out-of-state
2 = Child welfare worker/supervisor left agency
3 = Child welfare worker arranged visits but foster caregiver canceled visit
4 = Child Welfare worker arranged visit but foster caregiver failed to cooperate
5 = Visit attempted, foster caregiver not at location
6 = Child AWOL/runaway
7 = There is no indication in the case record that case worker/supervisor arranged a visit
8 = Other (specify) _______
9 = NA, foster parent was seen.
GRID 2-G: Caseworker Visits with Congregate Care Facility Staff

In the grid below, list the total number of times an OKDHS child welfare worker/supervisor had face-to-face OR telephone contact with the facility within the month, during the 12-month period from June 1, 2009 to May 31, 2010.

1) If the child was not in a congregate care facility at any time during the 12-month period, enter 0 in all of the boxes.
2) Enter 1=Yes in column 1 if there were visits or calls even though the child was not in the facility for the entire month. Enter 2=No in column 1 if there are no visits or calls and the child was placed the entire month. Enter 3 =NA in column 1 if there are no visits or calls and the child was not placed in a facility for the entire month.
3) If a child welfare worker /supervisor did not see or talk to the facility staff during a month, using the key, insert the reason for the lack of a visit or call in column 4.
4) If column 1 is 2=No or 3=NA, then enter 0 in the boxes in columns 2, 3 and 4.

<table>
<thead>
<tr>
<th>Month</th>
<th>(1). Was there a visit or call between caseworker/ supervisor and facility staff member</th>
<th>(2). # of times case worker/sup talked to facility staff member on the phone</th>
<th>(3). # of times case manager/sup saw facility staff person face-to-face</th>
<th>(4). Reason for lack of contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/2009</td>
<td>2.238</td>
<td>2.239</td>
<td>2.240</td>
<td>2.241</td>
</tr>
<tr>
<td>7/2009</td>
<td>2.242</td>
<td>2.243</td>
<td>2.244</td>
<td>2.245</td>
</tr>
<tr>
<td>8/2009</td>
<td>2.246</td>
<td>2.247</td>
<td>2.248</td>
<td>2.249</td>
</tr>
<tr>
<td>9/2009</td>
<td>2.250</td>
<td>2.251</td>
<td>2.252</td>
<td>2.253</td>
</tr>
<tr>
<td>10/2009</td>
<td>2.254</td>
<td>2.255</td>
<td>2.256</td>
<td>2.257</td>
</tr>
<tr>
<td>11/2009</td>
<td>2.258</td>
<td>2.259</td>
<td>2.260</td>
<td>2.261</td>
</tr>
<tr>
<td>12/2009</td>
<td>2.262</td>
<td>2.263</td>
<td>2.264</td>
<td>2.265</td>
</tr>
<tr>
<td>1/2010</td>
<td>2.266</td>
<td>2.267</td>
<td>2.268</td>
<td>2.269</td>
</tr>
<tr>
<td>2/2010</td>
<td>2.270</td>
<td>2.271</td>
<td>2.272</td>
<td>2.273</td>
</tr>
<tr>
<td>3/2010</td>
<td>2.274</td>
<td>2.275</td>
<td>2.276</td>
<td>2.277</td>
</tr>
<tr>
<td>4/2010</td>
<td>2.278</td>
<td>2.279</td>
<td>2.280</td>
<td>2.281</td>
</tr>
<tr>
<td>5/2010</td>
<td>2.282</td>
<td>2.283</td>
<td>2.284</td>
<td>2.285</td>
</tr>
</tbody>
</table>

Key: Reason for Lack of Telephone or Face-to-Face Contact (select only one)
1 = Child in facility that is out-of-state
2 = Child welfare worker/supervisor left agency
3 = Child welfare worker arranged visit or phone call but facility staff member canceled visit or call
4 = Child welfare worker attempted to arrange visit or call, but facility staff member failed to cooperate
5 = Visit attempted, facility staff member not at location
6 = Child AWOL/runaway
7 = Calls attempted, facility staff member did not return call
8 = There is no indication in the case record that the child welfare worker or supervisor arranged a visit or call
9 = Other (specify) 
10 = NA, staff was seen
H. Permanency Hearings and Termination of Parental Rights

Instructions: The information regarding permanency hearings is based on information found in OKDHS policy. Since it is OKDHS policy, we are using that as the standard.

2.286 For the child’s most recent entry into OKDHS custody, is there documentation in the case file that a permanency hearing was held within 6 months of the child’s adjudication or within 8 months of the child’s removal from the home, whichever came first?
   1 = Yes
   2 = No permanency hearings has been held for the child
   3 = A hearing was held but it was later than the specified timeframes

If yes, provide Bates stamp number where you found this information
If yes, provide efile name of documentation source

Instructions: A permanency hearing is a court hearing held to determine the appropriate permanency goal for the child and whether a change in plan is necessary, and to order completion of all steps necessary to finalize the permanent plan. If there is no court hearing that is called the permanency hearing but there is documentation of a court hearing that addresses all of these issues relevant to achieving permanency, then that hearing may be considered as a permanency hearing.

Special Note: For purposes of meeting legal requirements, OK policy defines the date of entry into foster care as the date of the adjudication or the date that is 60 days after the date on which the child is removed from the home. However, please note that for completing this protocol, when an item refers to the child’s most recent entry into OKDHS custody, this means the date of the child’s actual removal from the home.

2.287 For the child’s most recent entry into OKDHS custody, is there documentation in the case file that a permanency hearing was held at least 6 months from the first hearing and every 6 months thereafter?
   1 = Yes – after the initial hearing there was a hearing every 6 months for as long as the child was in foster care
   2 = No – no subsequent permanency hearings were held after the initial hearing even though the child was in foster care for longer than 6 months after the first hearing.
   3 = Some subsequent permanency hearings were held, but they were longer than 6-months apart.
   4 = NA – There was no initial permanency hearing
   5 = NA - There was an initial hearing, but the subsequent hearing would have occurred outside the period under review.

2.288 For the child’s most recent entry into foster care, is there a document in the case file that identifies the findings of the child’s first permanency hearing?
   1 = Yes  2 = No  3 = NA (no permanency hearing has been held)

If yes, provide Bates stamp number where you found this information
If yes, provide efile name of documentation source
Question 2-F: What were the findings of the child’s initial permanency hearing

Instructions (2.289-2.299)-: If the answer to 2.288 is 1=Yes, enter 1 for all that apply below and 0 (zero) for all that do not apply. If the answer is 2=No or 3=NA, enter 0 (zero) in all of the boxes. Make sure that all boxes are completed.

2.289 OKDHS has made reasonable efforts to finalize the permanency plan that is in effect for the child.
2.290 OKDHS has not made reasonable efforts to finalize the permanency plan that is in effect for the child.
2.291 The child’s out-of-home placement continues to be appropriate and in the best interest of the child.
2.292 The child’s out-of-home placement is not appropriate or in the best interest of the child.
2.293 The current placement is not expected to be permanent, and a timetable is provided for achieving permanency through reunification, adoption, guardianship, or a planned alternative permanent living arrangement
2.294 Reasonable efforts were made to place siblings who have been removed in the same foster care, guardianship or adoptive placement, if appropriate to the safety and well-being of siblings
2.295 Reasonable efforts were not made to place siblings together
2.296 Order for OKDHS to return the child to biological parents or legal guardians
2.297 The current (at the time of the permanency hearing) permanency plan goal is not appropriate and should be changed.
2.298 The current permanency goal for the child continues to be appropriate
2.299 Other (specify)________

GRID 2-H: Termination or Voluntary Surrender of Parental Rights

Instructions for GRID 2-H. Complete the grid below indicating if the agency has ever taken steps to seek termination of parental rights or voluntary surrender of parental rights.

If there is a petition for TPR that has been filed but not been granted, enter 0 in all of the subsequent date boxes.

If the answer to the initial question is 3= NA (the agency has never taken steps to seek termination of parental rights), enter 0 in all of the date boxes.

Clarification (Grid 2-H): Only consider the target child when answering this question, not siblings.

<table>
<thead>
<tr>
<th>Grid 2-H</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Mother</td>
</tr>
<tr>
<td>(1). Petition filed for Termination of parental rights</td>
</tr>
<tr>
<td>2.300 1 = Yes 2 = No 3 = NA</td>
</tr>
<tr>
<td>If YES, 2.301 date termination petition filed</td>
</tr>
<tr>
<td>M D Y</td>
</tr>
<tr>
<td>2.302 date termination petition granted</td>
</tr>
<tr>
<td>M D Y</td>
</tr>
<tr>
<td>(2). Voluntary surrender</td>
</tr>
<tr>
<td>2.306 1 = Yes 2 = No 3 = NA</td>
</tr>
<tr>
<td>If YES, 2.307 date Court approved surrender</td>
</tr>
<tr>
<td>M D Y</td>
</tr>
</tbody>
</table>
2.310   □   If the child's most recent entry into OKDHS custody began before January 1, 2009, has a petition for Termination of Parental Rights (TPR) been filed with the court?
   1 = Yes    2 = No    3 = NA – child not in foster care for 17 months.

   If yes, provide Bates stamp number where you found this information ________
   If yes, provide efile name of documentation source ________

Question 2-G: Which of the following are documented in the child’s case file for not seeking TPR?

Instructions (2.311-2.313): For the following items enter a 1 in the box if the information noted is documented in the case file. Enter a 0 in the box if the information is not in the case file OR the child’s most recent entry into OKDHS was after January 1, 2009.

   □  2.311 A documented reason in the child’s individual service plan (ISP) or a court finding that filing a TPR petition would not be in the best interests of the child
   □  2.312 Documentation that at the time the child had been in foster care for 17 months, the child was in a placement with a relative and continued to be in a relative placement until the date of the case read or discharge from OKDHS custody.
   □  2.313 Documentation in the case file that OKDHS did not make reasonable efforts to achieve the child’s goal of reunification.
SECTION III: FAMILY VISITS

A. Sibling Placements

3.1 ☐ At the date of the child’s most recent entry into OKDHS custody, is there documentation in the case file that the child had at least one sibling who entered custody with the child or who was already in OKDHS custody?  
   1 = Yes  2 = No

3.2 ☐ At the date of the child’s most recent entry into OKDHS custody, how many siblings entered or were in foster care at the same time as the child?

   Instructions (3.2): In calculating the number of siblings, do not count the child. For example, if the child entered foster care with one other sibling, the number of siblings would be entered as “1”. Enter 0 if the child did not have any siblings in foster care documented in the case file (i.e., question 3.1 was answered No)

3.3 ☐ At the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file that the child was placed with all or some of his or her siblings?  
   1 = All - the child was placed with all siblings  
   2 = Some - The child was placed with some but not all siblings  
   3 = None – The child was not placed with any siblings  
   4 = Cannot determine – The child had one or more siblings in foster care at the time of the most recent entry, but it is not clear from the information in the case file whether they were placed together  
   5 = NA - The child did not have any siblings in foster care

3.4 ☐ Is there documentation in the case file that efforts were made at the time of the child’s most recent entry into OKDHS custody to find or develop a placement that would accept the entire sibling group?  
   1 = Yes  2 = No  3=NA (The child did not have any siblings entering or in foster care)

   If yes, provide Bates stamp number where you found this information ______

   If yes, provide efile name of documentation source ______

3.5 ☐ Is there documentation in the case file of a justification for not placing all siblings together at the time of the child’s most recent entry into OKDHS custody?  
   1= Yes  2 = No  3 = NA (The child did not have any siblings in foster care or they were all placed together)

   Question 3-A: What was the justification(s) documented in the case file for not placing all siblings together at the time of the child’s most recent entry into OKDHS?

   Instructions (3.6-3.10): Enter a 1 for all reasons that are documented in the case file. Enter a 0 if a reason is not documented in the case file, if the child was not separated from any of his or her siblings, or if the child had no siblings in foster care.

   ☐ 3.6 One or more siblings had special medical or mental health needs that required a special level of care and assistance

   ☐ 3.7 One or more siblings had behavior problems that pose a safety risk to the other siblings.

   ☐ 3.8 One or more siblings had been in OKDHS custody for a long period of time, and the foster caregiver will not provide care for other siblings, and a determination was made that moving one or more siblings from the current foster care placement was not in their best interest

   ☐ 3.9 The agency was unable to find a caregiver able to accommodate the entire sibling group.

   ☐ 3.10 Other (specify) ______
Is there documentation in the case file that as of June 1, 2010, the child was placed with all or some of his or her siblings?

1 = All - the child is placed with all siblings as of June 1, 2010
2 = Some - The child was placed with some but not all siblings as of June 1, 2010
3 = None – The child was not placed with any siblings as of June 1, 2010
4 = Cannot determine – The child has one or more siblings in foster care at the time of the case review, but it is not clear from the information in the case file whether they were placed together on June 1, 2010.
5 = NA – the child has no siblings in foster care

Between the time of the child’s most recent entry into foster care and the time of the case review, is there documentation in the case file of efforts made to find or develop a placement that would accept the entire sibling group?

1 = Yes  2 = No  
3 = NA (child has no siblings in foster care or all siblings have been placed together continuously during the child’s most recent entry into foster care)

If yes, provide Bates stamp number where you found this information _________
If yes, provide efile name of documentation source_________

Is there documentation in the case file of a justification for why the siblings currently are placed separately?

1 = Yes  2 = No  3 = NA (siblings are placed together or child has no siblings in OKDHS custody)

Question 3-B: What was the justification documented in the case file for the current separation of siblings as of June 1, 2010?

Instructions (3.14-3.18: Enter a 1 for all reasons that are documented in the case file. Enter a 0 if a reason is not documented in the case file, if the child was not separated from any of his or her siblings, or if the child had no siblings in foster care.

3.14 Child or one or more siblings has special medical or mental health needs that require a special level of care and assistance

3.15 Child or one or more siblings has behavior problems that pose a safety risk to the other siblings.

3.16 One or more siblings have been in OKDHS custody for a long period of time, and the foster caregiver) will not provide care for other siblings, and a determination was made that moving one or more siblings from the current foster care placement was not in their best interest

3.17 The agency was unable to find a caregiver able to accommodate the entire sibling group.

3.18 Other (specify) _________

B. Sibling Visitation

Is there documentation in the case file of a sibling visitation plan that covers the time period from Jun 1, 2009 to May 31, 2010 and addresses the frequency of visitation among siblings who in OKDHS custody but are not placed together?

1 = Yes  2 = No  
3 = NA (Child has no siblings in OKDHS custody or child has no siblings in OKDHS custody who are placed separately)

Instructions: This plan should be included in an ISP that was completed prior to those dates, an ISP-Progress Report or a court order.
3.20 □ What is the frequency of sibling visitation specified in the sibling visitation plan or court order?
   1 = At least once a week
   2 = Less frequently than once a week but at least twice a month
   3 = At least once a month
   4 = Less frequently than once a month (specify) _______
   5 = No frequency is specified
   6 = Visitation with one or more siblings is not considered to be in the best interest of one or more siblings
   7 = NA – Child has no siblings in OKDHS custody or none that are placed separately.

3.21 □ Is there documentation in the case file that one or more of the child’s siblings in OKDHS custody who is in a different placement is not included in the child’s sibling visiting plan or in visits with the child?
   1 = Yes    2 = No
   3 = NA (Child does not have siblings in OKDHS custody or siblings are all placed together)

If Yes, please describe the circumstances (for example, one of the siblings is in an adoptive placement and the pre-adoptive parents do not want the child to have contact with his or her siblings). ______
**GRID 3-A: Sibling Contacts**

*Instructions for GRID 3-A.* Using the grid below, for each month of the time period from June 1, 2009 to May 31, 2010, list the total number of times the child had visits with any of his or her siblings who are in OKDHS custody. If a child visited with several siblings at the same time, count that as 1 visit. If a child visited with siblings in foster care during a visit with the biological mother or father, count that as 1 visit. If a child had a visit with a sibling who was not in OKDHS custody do not count that as a visit. Enter “98” (NA) if during the month the child and his or her sibling(s) were all placed together, the child and/or all of the child’s sibling(s) were not in OKDHS custody during the entire month, or visitation with a sibling was determined to be “not in the child’s best interest.”

*Clarification (Counting Family Visits):* If there is documentation that a visit has occurred but no date indicating when it occurred, the reviewer should look at surrounding documentation in the file to ‘bracket’ the time period in which the visit took place (ie., the month/year). The record needs to clearly indicate the target child’s involvement in the visit referenced. If a reviewer has to estimate when a visit occurred using surrounding documents, the lack of documentation of the actual visit should be recorded in question 7.21.*If there is documentation, such as a report to a court that weekly visits occurred, those visits should be counted.

<table>
<thead>
<tr>
<th>Grid 3-A</th>
<th>Sibling Contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Months</strong></td>
<td># of face-to-face visits with any sibling in OKDHS custody (Enter “98” if NA)</td>
</tr>
<tr>
<td>6/2009</td>
<td>3.22</td>
</tr>
<tr>
<td>7/2009</td>
<td>3.23</td>
</tr>
<tr>
<td>8/2009</td>
<td>3.24</td>
</tr>
<tr>
<td>9/2009</td>
<td>3.25</td>
</tr>
<tr>
<td>10/2009</td>
<td>3.26</td>
</tr>
<tr>
<td>11/2009</td>
<td>3.27</td>
</tr>
<tr>
<td>12/2009</td>
<td>3.28</td>
</tr>
<tr>
<td>1/2010</td>
<td>3.29</td>
</tr>
<tr>
<td>2/2010</td>
<td>3.30</td>
</tr>
<tr>
<td>3/2010</td>
<td>3.31</td>
</tr>
<tr>
<td>4/2010</td>
<td>3.32</td>
</tr>
<tr>
<td>5/2010</td>
<td>3.33</td>
</tr>
</tbody>
</table>
C. Proximity of child’s placement to parents

3.34 [ ] At the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file regarding the proximity of the child’s initial placement to the parents or legal guardians?

   1 = Child’s placement was in the same community as parents or legal guardians
   2 = Child’s placement was in the same county as parents or legal guardians
   3 = Child’s placement was in adjacent county, but close to the parent’s or legal guardian’s residence
   4 = Child’s placement was in an adjacent county, but not close to the parent’s or legal guardian’s residence
   5 = Child’s placement was in Oklahoma but not in the same or adjacent county
   6 = Child’s placement was in another State
   7 = Information about the location of child’s placement related to parent’s/legal guardian’s residence was not included in file
   8 = NA
   9 = Within forty miles of parents or legal guardians residence, but cannot determine more specifically

3.35 [ ] At the time of the child’s most recent entry into OKDHS custody, was a justification for not placing the child in the same community or same or adjacent county (close to the parent’s or legal guardian’s residence) documented in the case file?

   1 = Yes  2 = No  3 = NA (use if the answer to question 3.34 is “1”, “2”, “3”, or “7”)

If yes, provide Bates stamp number where you found this information _______

If yes, provide efile name of documentation source _______

Question 3-C: What was the justification provided in the case file for not placing the child in the same community as the parents/legal guardians or in the same or adjacent county?

Instructions (3.36-3.41): Enter a 1 for all justifications that are documented in the case file. Enter a 0 if a reason is not documented in the case file or if the child's placement was in the same community, county, or adjacent county as the residence of the parents/legal guardians.

[ ] 3.36 Child needed special services that were not available in close proximity to parents or legal guardians

[ ] 3.37 Child was placed with a relative at the request of parents or legal guardian and the relative’s home was not in close proximity to the parents or legal guardian

[ ] 3.38 The agency was unable to find an appropriate placement that was in close proximity to parents or legal guardian

[ ] 3.39 The court determined that contact with parents or legal guardian was not in the child’s best interest

[ ] 3.40 The permanency plan at the time of entry into OKDHS custody was adoption.

[ ] 3.41 Other (specify): _______
3.42 As of June 1, 2010, what is the proximity of the child’s placement to the residence of the parents or legal guardians?

Instructions (3.42): If the child was discharged from foster care prior to June 1, 2010, use the location of the child’s placement at the time of discharge in answering this question.

1 = Child’s current placement is in the same community as parents or legal guardians
2 = Child’s current placement is in the same county as parents or legal guardians
3 = Child’s current placement is in adjacent county, but close to the parent’s or legal guardian’s residence
4 = Child’s current placement is in an adjacent county, but not close to the parent’s or legal guardian’s residence
5 = Child’s current placement is in Oklahoma but not in the same or adjacent county
6 = Child’s current placement is in another State
7 = Information about the location of child’s placement related to parent’s/legal guardian’s residence is not included in file
8 = NA (As of June 1, 2010, parental rights have been terminated or the agency has filed for termination of parental rights, parents/ legal guardians are deceased or incarcerated, or the parents have moved and it is not clear where they are located.)
9 = Within forty miles of parents or legal guardians residence, but cannot determine more specifically

3.43 Between the time of the child’s most recent entry into foster care and June 1, 2010, is there documentation in the case file of efforts to find a placement that was in closer proximity to parents or legal guardians?

1 = Yes  2 = No  3 = NA

Instructions (3.43): Use NA if child’s current placement is in close proximity to parents/legal guardians, parental rights have been terminated or the agency has filed for termination of parental rights, or parents/ legal guardians are deceased or incarcerated.

3.44 Is there documentation in the case file of a justification for why the child’s placement as of June 1, 2010 is not in close proximity to parents or legal guardians (i.e., the answer to question 3.42 is 4, 5 or 6).

1 = Yes  2 = No  3 = NA (use if the answer to question 3.42 is 1, 2, or 3)

Question 3-D: What was the justification provided in the case file for the child not being placed in the same community as the parents/legal guardians or in the same or adjacent county as of June 1, 2010?

Instructions (3.45-3.50): Enter a 1 for all justifications that are documented in the case file. Enter a 0 if a justification is not documented in the case file or if the child’s placement on June 1, 2010 was in the same community, county, or adjacent county as the residence of the parents/legal guardians.

3.45 Child needs special services that were not available in close proximity to parents or legal guardians
3.46 Child is placed with a relative at the request of parents or legal guardian and the relative’s home is not in close proximity to the parents or legal guardian
3.47 The agency was unable to find an appropriate placement that was in close proximity to parents or legal guardian
3.48 The court determined that contact with parents or legal guardian was not in the child’s best interest
3.49 The current permanency plan is adoption or legal guardianship or emancipation
3.50 Other (specify): ________
D. Parent-Child Visitation

3.51  At the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file that the agency made concerted efforts to arrange a visit between the child and parents/legal guardians to take place no later than one week after the child’s removal?

   1 = Yes  2 = No  3 = NA

Instructions (3.51): Use NA if there is documentation that visitation is not in the best interests of the child or the parent is unable to visit due to incarceration, illness or some other reason.

If yes, provide Bates stamp number where you found this information ______
If yes, provide efile name of documentation source ______

3.52  Is there documentation in the case file that at some time during the period from June 1, 2009 to May 31, 2010, the child’s single permanency plan goal or concurrent permanency plan goal was return home or “…return to the care of the parent or legal guardian from whom the child was removed?”

   1 = Yes  2 = No
GRID 3-B: Child-Parent Contacts: Goal of Return Home

Instructions for GRID 3-B: In the grid below, list the total number of times the parent(s) or legal guardians had visits with the child within each month during the 12-month period from June 1, 2009 to May 31, 2010. Enter “98” (NA) in all relevant data boxes if during the month the child was in the home on trial reunification, the child’s parent(s) or legal guardians were deceased, the child was not in custody of OKDHS during the entire month, or the goal was not reunification for that month.

*If the child was in custody of OKDHS for part of a month, or the goal was reunification for part of a month, and a visit with parents is documented in the case file for that month, then that visit should be counted in columns 1 and 3.*

Enter “98” (NA) if the child did not have goal of return home at any time during the 12-month period.

<table>
<thead>
<tr>
<th>Grid 3-B</th>
<th>Child-Parent Contacts: Goal of return home</th>
</tr>
</thead>
<tbody>
<tr>
<td>Months</td>
<td>(1) # of child’s face-to-face visits with mother/female guardian (Enter “98” if NA)</td>
</tr>
<tr>
<td>6/2009</td>
<td>3.53</td>
</tr>
<tr>
<td>7/2009</td>
<td>3.57</td>
</tr>
<tr>
<td>8/2009</td>
<td>3.61</td>
</tr>
<tr>
<td>9/2009</td>
<td>3.65</td>
</tr>
<tr>
<td>10/2009</td>
<td>3.69</td>
</tr>
<tr>
<td>11/2009</td>
<td>3.73</td>
</tr>
<tr>
<td>12/2009</td>
<td>3.77</td>
</tr>
<tr>
<td>1/2010</td>
<td>3.81</td>
</tr>
<tr>
<td>2/2010</td>
<td>3.85</td>
</tr>
<tr>
<td>3/2010</td>
<td>3.89</td>
</tr>
<tr>
<td>4/2010</td>
<td>3.93</td>
</tr>
<tr>
<td>5/2010</td>
<td>3.97</td>
</tr>
</tbody>
</table>

**Key: Reason why no visit occurred**

1 = Caseworker did not schedule a visit
2 = Caseworker scheduled a visit but parent/legal guardian did not show up
3 = Caseworker tried to schedule a visit, but no one was available to supervise the visit
4 = Caseworker tried to schedule a visit, but no one was available to transport the child to the visit
5 = Caseworker tried to schedule a visit, but parent did not return calls
6 = Caseworker tried to schedule a visit but foster parent would not cooperate
7 = Caseworker tried to schedule a visit but child was ill
8 = Caseworker tried to schedule a visit, but child refused to attend
9 = Visitation with this parent was determined by the court to not be in the best interest’s of the child
10 = NA – there was a parent/guardian visit with the child
11 = Other (specify) ________
12 = NA - the child’s goal was not return home.
13 = NA, child was not in custody
3.101 □ □ □ Is there documentation in the case file of a mother-child visitation plan that covers the 12-month time period from June 1, 2009 to May 31, 2010 and addresses the frequency of visitation between the child and his or her mother?
   1 = Yes  2 = No
   3 = NA (The court has determined that visitation with mother is not in the child’s best interest, the agency has filed for TPR or TPR has been granted, the mother is deceased or incarcerated, the mother cannot be located, the child did not have a goal of return home at any time during the 12-month period))

Instructions (3.101): This plan should be included in an ISP that was completed prior to those dates, an ISP-Progress Report or a court order.

3.102 □ □ □ What is the frequency of the mother-child visitation specified in the most recent visitation plan or court order prior to June 1, 2010?
   1 = At least once a week
   2 = Less frequently than once a week but at least twice a month
   3 = At least once a month
   4 = Less frequently than once a month (specify) ______
   5 = No frequency is specified
   6 = NA - The court has determined that visitation with mother is not in the child’s best interest, the agency has filed for TPR or TPR has been granted, the mother is deceased or incarcerated, the mother cannot be located, or the child did not have a goal of return home at any time during the 12 month period prior to June 1, 2010.

3.103 □ □ □ If the frequency established in the visitation plan for mother and child changed during the 12-month period from June 1, 2009 to May 31, 2010, what was the nature of the change?
   1 = Visitation frequency stated in the plan increased
   2 = Visitation frequency stated in the plan decreased
   3 = Visitation was stated in the plan as terminated
   4 = NA – no change in visitation frequency
   5 = NA – visitation frequency is not applicable because the court has determined that visitation with mother is not in the child’s best interest, the agency has filed for TPR or TPR has been granted, the mother is deceased or incarcerated, the mother cannot be located, or the child did not have a goal of return home at any time during the 12 month period prior to June 1, 2010.

3.104 □ □ □ Is there documentation in the case file of a father-child visitation plan that covers the 12-month time period from June 1, 2009 to May 31, 2010 and addresses the frequency of visitation between the child and his or her father?
   1 = Yes  2 = No
   3 = NA (The court has determined that visitation with father is not in the child’s best interest, the agency has filed for TPR or TPR has been granted, the father is deceased or incarcerated, the father cannot be located, the child did not have a goal of return home at any time during the 12-month period)

Instructions (3.104): This plan should be included in an ISP that was completed prior to those dates, an ISP-Progress Report or a court order.
3.105 What is the frequency of the father-child visitation specified in the most recent visitation plan or court order prior to June 1, 2010?

1 = At least once a week
2 = Less frequently than once a week but at least twice a month
3 = At least once a month
4 = Less frequently than once a month (specify): ________
5 = No frequency is specified
6 = NA - The court has determined that visitation with father is not in the child's best interest, the agency has filed for TPR or TPR has been granted, the father is deceased or incarcerated, the father cannot be located, or the child did not have a goal of return home at any time during the 12 month period prior to June 1, 2010.

3.106 If the frequency established in the visitation plan for father-child visitation changed during the 12-month period from June 1, 2009 to May 31, 2010, what was the nature of the change?

1 = Visitation frequency increased
2 = Visitation frequency decreased
3 = Visitation was terminated
4 = NA – no change in visitation frequency
5 = NA – visitation frequency is not applicable because the court has determined that visitation with father is not in the child’s best interest, the agency has filed for TPR or TPR has been granted, the father is deceased or incarcerated, the father cannot be located, or the child did not have a goal of return home at any time during the 12 month period prior to June 1, 2010.

3.107 Is there documentation in the case record that the child’s current placement location made it difficult to arrange frequent parent-child visitation?  1 = Yes  2 = No  3 = NA

Instructions (3.107): Use NA if child’s placement location was in close proximity to parents or legal guardians

If yes, provide Bates stamp number where you found this information ________
If yes, provide efile name of documentation source ________

3.108 Is there documentation in the case file that the child’s current (as of June 1, 2010) or most recent placement (if discharged from OKDHS custody prior to June 1, 2010) a Trial Home Visit?

1 = Yes  2 = No

3.109 What was the date that the trial home visit placement began?

M __ D __ Y __

Instructions (3.109): Enter 0 in all date boxes if the child’s current placement is not a Trial Home Visit. Enter 8 in all the boxes if the child’s current placement is a Trial Home Visit, but it is not possible to identify the date that the placement began.

Question 3-E: Is there documentation in the case file that during the 6-month period prior to the child’s placement in a trial home visit visitation arrangements for the child and parent/prior legal guardian included any of the following?

Instructions (3.110-3.114): Enter “1” for all that apply, enter 0 for each one that does not apply

3.110 Unsupervised daytime visits
3.111 Overnight visits at child’s parent’s/legal guardian’s home
3.112 Weekend overnight visits at child’s parent’s/legal guardian’s home
3.113 Visits longer than a weekend at child’s parent’s/legal guardian’s home
3.114 Visits are not applicable because child is not in a trial home visit
GRID 3-C: Child-Parent Contacts: Goal of Adoption or Adoption Preparation

**Instructions:** Use Grid 3-C to identify the child-parent visitation for the 12-month period prior to the date that the child’s permanency goal was changed to adoption or adoption preparation.

1) In calculating the 12 months, use the first date that adoption or adoption preparation was established as a single or concurrent goal as identified in Section II.

2) If the child did not have a goal of adoption or adoption preparation at any time during the most recent entry into foster care, enter 98 in all of the relevant data boxes.

3) Enter 98 in all the columns, if during a month the child was in the home on trial reunification, the child’s parent(s) or legal guardians were deceased, or the child was not in custody of OKDHS during the entire month, or the goal was not return home for that month.

**Clarification (Grid 3-C):** Enter 98 for all boxes in the grid, including the “months” column if there were no visits or if child did NOT have a goal of adoption or adoption preparation. When entering months, start with the oldest month first (e.g. January 2010 and fill in subsequent rows in chronological order (e.g. February, March, April, etc.).

### Child-Parent Contacts: Goal of Adoption or Adoption Preparation

<table>
<thead>
<tr>
<th>Months (enter MM/YYYY)</th>
<th># of child’s face-to-face visits with mother/female guardian</th>
<th>If no visits, reason why no visits occurred</th>
<th># of child’s face-to-face visits with father/male guardian</th>
<th>If no visits, reason why no visits occurred</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.115</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>3.119</td>
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<td>3.123</td>
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<td>3.127</td>
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<td>3.131</td>
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<td>3.135</td>
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<td>3.139</td>
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<td>3.143</td>
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<td>3.147</td>
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<td>3.151</td>
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<td>3.155</td>
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<tr>
<td>3.159</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**KEY: REASON VISIT DID NOT OCCUR**

1 = Caseworker did not schedule a visit
2 = Caseworker scheduled a visit but parent/legal guardian did not show up
3 = Caseworker tried to schedule a visit, but no one was available to supervise the visit
4 = Caseworker tried to schedule a visit, but no one was available to transport the child to the visit
5 = Caseworker tried to schedule a visit, but parent did not return calls
6 = Caseworker tried to schedule a visit but foster parent would not cooperate
7 = Caseworker tried to schedule a visit but child was ill
8 = Caseworker tried to schedule a visit, but child refused to attend
9 = Visitation with this parent was determined by the court to not be in the best interest's of the child
10 = NA – there was a parent/guardian visit with the child
11 = Other (specify) _____
98 = NA
SECTION IV: SERVICES

A. Child Mental Health Services

4.1 □ For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that the child was ever formally evaluated for mental illnesses or developmental disorders?
   1 = Yes  2 = No

4.2 □ What was the date of the first evaluation for mental illness or developmental disorders that is documented in the case file?

   M □ D □ Y □

   Instructions (4.2): Make sure that the date of the first evaluation for mental illness or developmental disorders is after the date of the child’s most recent entry into foster care. Enter a 0 in all date boxes if the child was never evaluated for mental illnesses or developmental disorders OR if you cannot find the date of the evaluation.

4.3 □ For the child’s most recent entry into OKDHS custody, is there information in the case file that suggests that the child needed a formal evaluation for a mental illness or developmental disorder, even if one was not received?
   1 = Yes  2 = No  3 = NA

   If yes, then identify Bates stamp number where you found this information _______
   If yes, then identify efile name of documentation source _______
   If yes, then please describe the information: _______

4.4 □ For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that a medical or mental health provider ever diagnosed the child as having mental illnesses or development disorders or identified problems associated with mental illnesses or developmental disorders?
   1 = Yes  2 = No

   If yes, provide Bates stamp number where you found this information _______
   If yes, provide efile name of documentation source _______

4.5 □ For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file of a professional recommendation to provide specific services to the child to address mental illnesses or developmental disorders?
   1 = Yes  2 = No

   If yes, provide Bates stamp number where you found this information _______
   If yes, provide efile name of documentation source _______

4.6 □ For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that the child received some or all recommended services to address mental illnesses or developmental disorders?
   1 = All – all recommended services were provided
   2 = Some – some recommended services were provided but not all
   3 = None – no recommended services were provided
   4 = NA – There was no documentation in the file that any services were recommended
   5 = NA, no mental illness or developmental disorders were identified

   If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source

Question 4-A: What reason or reasons are provided in the case file for the child not receiving the services?

Instructions (4.7-4.20): Enter 1 for all that apply and 0 for those that do not apply. If there was no documentation in the file that any services were recommended to address a mental illness or developmental disorder, enter 0 for all reasons. Enter the Bates stamp number for all that apply

4.7 Service was not available in that locality
   Bates stamp number ______ Efile Source Doc ______

4.8 Service was available, but there was a waiting list
   Bates stamp number ______ Efile Source Doc ______

4.9 Eligibility requirements were not met
   Bates stamp number ______ Efile Source Doc ______

4.10 Service was available only out of state and there were no funds available to access the service
    Bates stamp number ______ Efile Source Doc ______

4.11 There were problems with scheduling times
    Bates stamp number ______ Efile Source Doc ______

4.12 Service was available, but no transportation was available to access services
    Bates stamp number ______ Efile Source Doc ______

4.13 Parent would not consent to service
    Bates stamp number ______ Efile Source Doc ______

4.14 Child would not consent to service and refused to cooperate
    Bates stamp number ______ Efile Source Doc ______

4.15 Caregiver did not facilitate access to services and case manager/supervisor did not make other arrangements
    Bates stamp number ______ Efile Source Doc ______

4.16 Service provider refused to provide service to eligible child
    Bates stamp number ______ Efile Source Doc ______

4.17 Case worker/supervisor did not make arrangements for service
    Bates stamp number ______ Efile Source Doc ______

4.18 Case worker did not inform caregiver how to access service
    Bates stamp number ______ Efile Source Doc ______

4.19 Other (specify) _______
    Bates stamp number ______ Efile Source Doc ______

4.20 No reason documented in record

---

B. Child Medical and Dental Health Services

4.21 ______ At the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file that OKDHS gave the child’s health records to the caregiver (family or facility) with whom the child was placed?
   1 = Yes     2 = No
   3 = Cannot Determine (Use if there is information indicating that the agency gave the child’s health records to a caregiver, but there is no information about when that happened)

   If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source

4.22 For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that the child received a physical examination/health screening while in custody?
   1 = Yes   2 = No

   If yes, provide Bates stamp number where you found this information
   If yes, provide efile name of documentation source

4.23 For the child’s most recent entry into OKDHS custody, what was the date of the first physical examination/health screening documented in the case file?

   M       D       Y

   Instructions (4.23): Make sure that the date of the first physical examination is after the date of the child’s most recent entry into foster care. If there was no physical examination/health screening documented in the case file, enter 0 in all of the data boxes.

4.24 For the child’s most recent entry into OKDHS custody, is there documentation in the case file that the child received routine annual health screenings/physical exams?
   1 = Yes   2 = No   3 = NA (child not in foster care for a year at the time of the case review)

   If yes, provide Bates stamp number where you found this information
   If yes, provide efile name of documentation source

4.25 For the child’s most recent entry into OKDHS custody, is there documentation in the case file that the child received an EPSDT with the following schedule of frequency: a) six health screenings during the child’s first year of life; b) two screenings in the child’s second year of life; c) one screening yearly for the child age two through five years; and d) one screening every other year for the child age six through 20 years?
   1 = Yes   2 = No   3 = NA (Child not in foster care long enough to have screenings)

   If yes, provide Bates stamp number where you found this information
   If yes, provide efile name of documentation source

4.26 For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that a medical provider ever diagnosed the child as having medical problems?
   1 = Yes   2 = No

   If yes, provide Bates stamp number where you found this information
   If yes, provide efile name of documentation source

4.27 For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that a medical provider ever recommended specific types of treatments for the child’s medical problems?
   1 = Yes   2 = No   3 = NA (no medical problems identified)

   If yes, provide Bates stamp number where you found this information
   If yes, provide efile name of documentation source
4.28 For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that the child received some or all recommended services or treatments to address medical problems?

1 = All – there is documentation indicating that all recommended services were provided
2 = Some – there is documentation indicating that some recommended services were provided but not all
3 = None – there is no documentation that any recommended services were provided
4 = NA – No services to address medical problems were recommended
5 = NA – No medical problems were identified

If All or Some, provide Bates stamp number where you found this information ________
If All or Some, provide efile name of documentation source ________
Question 4-B: What reason or reasons are provided in the case file for the child not receiving recommended services or treatments to address medical problems?

*Instructions (4.29-4.42): Enter 1 for all that apply and 0 for those that do not apply. If there were no services recommended, or no medical problems identified, enter 0 in all boxes. Provide the Bates stamp number for all reasons that apply.*

<table>
<thead>
<tr>
<th>Reason</th>
<th>Bates stamp number</th>
<th>Efile Source Doc</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.29 Service was not available in that locality</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.30 Service was available, but there was a waiting list</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.31 Eligibility requirements were not met</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.32 Service was available only out of state and there were no funds available to access the service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.33 There were problems with scheduling times</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.34 Service was available, but no transportation was available to access services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.35 Parent would not consent to service</td>
<td></td>
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<tr>
<td>4.36 Child would not consent to service and refused to cooperate</td>
<td></td>
<td></td>
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<tr>
<td>4.37 Caregiver did not facilitate access to services and case manager/supervisor did not make other arrangements</td>
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<tr>
<td>4.38 Service provider refused to provide service to eligible child</td>
<td></td>
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<tr>
<td>4.39 Case worker/supervisor did not make arrangements for service</td>
<td></td>
<td></td>
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<tr>
<td>4.40 Case worker did not inform caregiver how to access service</td>
<td></td>
<td></td>
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<tr>
<td>4.41 Other (specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.42 No reason documented in record</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4.43  For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that the child ever received a dental examination?
1 = Yes  2 = No  3 = NA (If child is age 2 or younger)

If yes, provide Bates stamp number where you found this information ________
If yes, provide efile name of documentation source ________

4.44  For the child’s most recent entry into OKDHS, what was the date of the first dental examination documented in the case record?

M __ D __ Y __

Instructions (4.44): Be sure that the date of the dental examination is after the date of the child’s most recent entry into foster care. If there is no documentation of a dental examination, enter 0 in all of the date boxes

4.45  For the child’s most recent entry into OKDHS custody, is there documentation in the case file that the child received routine annual dental evaluations
1 = Yes  2 = No  3 = NA

If yes, provide Bates stamp number where you found this information ________
If yes, provide efile name of documentation source ________

Instructions (4.45): Use NA if child is age 2 or younger, child has not been in foster care for 12 months after the initial dental examination, or there is no documentation that the child ever received an initial dental examination.

4.46  For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that a dental provider ever diagnosed the child as having dental problems?
1 = Yes  2 = No

If yes, provide Bates stamp number where you found this information ________
If yes, provide efile name of documentation source ________

4.47  For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that a dental provider ever recommended specific types of treatments for the child’s dental problems?
1 = Yes  2 = No  3 = NA (no dental problems identified in the case file)

If yes, provide Bates stamp number where you found this information ________
If yes, provide efile name of documentation source ________

4.48  For the child’s most recent entry into OKDHS custody, is there documentation in the child’s case file that the child received some or all recommended services or treatments to address dental problems?
1 = All – there is documentation indicating that all recommended services were provided
2 = Some – there is documentation indicating that some recommended services were provided but not all
3 = None – there is no documentation that any recommended services were provided
4 = NA – No services to address dental problems were recommended
5 = NA – No dental problems were identified

If yes, provide Bates stamp number where you found this information ________
If yes, provide efile name of documentation source ________
Question 4-C: What reason or reasons are provided in the case file for the child not receiving recommended services or treatments to address dental problems?

Instructions (4.49-4.62): Enter 1 for all that apply and 0 for those that do not apply. If there were no services recommended or no dental problems identified, enter 0 in all boxes. Provide the Bates stamp number for all reasons that apply.

<table>
<thead>
<tr>
<th></th>
<th>Reason</th>
<th>Bates stamp number</th>
<th>Efile Source Doc</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.49</td>
<td>Service was not available in that locality</td>
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<tr>
<td>4.50</td>
<td>Service was available, but there was a waiting list</td>
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<td></td>
</tr>
<tr>
<td>4.51</td>
<td>Eligibility requirements were not met</td>
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<td></td>
</tr>
<tr>
<td>4.52</td>
<td>Service was available only out of state and there were no funds available to access the service</td>
<td></td>
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</tr>
<tr>
<td>4.53</td>
<td>There were problems with scheduling times</td>
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<tr>
<td>4.54</td>
<td>Service was available, but no transportation was available to access services</td>
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</tr>
<tr>
<td>4.55</td>
<td>Parent would not consent to service</td>
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<td></td>
</tr>
<tr>
<td>4.56</td>
<td>Child would not consent to service and refused to cooperate</td>
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</tr>
<tr>
<td>4.57</td>
<td>Caregiver did not facilitate access to services and case manager/supervisor did not make other arrangements</td>
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</tr>
<tr>
<td>4.58</td>
<td>Service provider refused to provide service to eligible child</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.59</td>
<td>Case worker/supervisor did not make arrangements for service</td>
<td></td>
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<tr>
<td>4.60</td>
<td>Case worker did not inform caregiver how to access service</td>
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<tr>
<td>4.61</td>
<td>Other (specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.62</td>
<td>No reason documented in record</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
C. Child’s Education and Educational Services

Instructions (4.63-4.119): The questions in Part C should be answered only if the child was age 5 or older at the start of the most recent school year (September 2009). If the child was younger than age 5 on September 1, 2009, enter 0 in all of the data boxes in Part C.

4.63 [ ] At the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file that the agency gave the child’s school records to the caregiver (family or facility) with whom the child was placed no later than 14 days after placement?
   1 = Yes   2 = No   3 = Cannot Determine
   If yes, provide Bates stamp number where you found this information [ ]
   If yes, provide efile name of documentation source [ ]

Instructions (4.63): Use “Cannot Determine” if there is information that the agency gave the child’s school records to the foster parents, but the time that this happened is not clear.

4.64 [ ] For the child’s most recent entry into OKDHS custody, is there documentation in the case file that the foster caregiver was provided with training or advice on advocating for the child with the school system if necessary?
   1 = Yes   2 = No   3 = NA (child is not in a family foster home)
   If yes, provide Bates stamp number where you found this information [ ]
   If yes, provide efile name of documentation source [ ]

4.65 [ ] What was the child’s educational level or status at the time of the child’s most recent entry into OKDHS custody? (select only one)
   1 = Kindergarten or preschool
   2 = Grade 1 through 5
   3 = Grade 6 through 12
   4 = Not in school, but of school age
   5 = Enrolled in post-high school education/vocational training
   6 = Enrolled in a GED program
   7 = Other (specify) [ ]
   8 = Cannot determine from information in the case record.
   9 = NA – at the time of entry into foster care child was not eligible for school enrollment

Provide Bates stamp number where you found this information [ ]
Provide efile name of documentation source [ ]

4.66 [ ] What is the child’s educational level or status as of June 1, 2010?
   1 = Kindergarten or preschool
   2 = Grade 1 through 5
   3 = Grade 6 through 12
   4 = Not in school, but of school age
   5 = Enrolled in post-high school education/vocational training
   6 = Enrolled in a GED program
   7 = Other (specify) [ ]
   8 = Cannot determine from information in the case record
4.67 ☐ For the child’s most recent episode in OKDHS custody, is there information in the case file about the child’s overall school performance (including attendance)?
   1 = Yes  2 = No  3 = NA (child not enrolled in school)

If yes, provide Bates stamp number where you found this information  
If yes, provide efile name of documentation source  

Question 4-D: What school-related information is included in the case file

Instructions (4.68-4.72): Enter 1 if found in the case file, enter 0 if not found in the case file.

☐ 4.68 Report cards for each grading period that the child is in OKDHS custody
☐ 4.69 Report cards for some grading periods but not others
☐ 4.70 Individualized educational plans
☐ 4.71 Documentation of discussions between caseworker or foster parent and school staff or between caseworker and child
☐ 4.72 Other (Specify) ________

4.73 ☐ For the child’s most recent entry into OKDHS custody, were any concerns noted in the case file regarding the child’s overall school performance (including attendance)?
   1 = Yes  2 = No  3 = NA (Child not enrolled in school although age eligible)

If yes, provide Bates stamp number where you found this information  
If yes, provide efile name of documentation source  

Question 4-E: What concerns were identified in the case file?

Instructions (4.74-4.79): Enter 1 if a concern was identified in the case file and 0 if a concern was not identified.

☐ 4.74 Child was not attending school regularly
   Bates stamp number ________  Efile Source Doc ________

☐ 4.75 Child’s performance was below average (GPA less than 2.0)
   Bates stamp number ________  Efile Source Doc ________

☐ 4.76 Child had behavior problems at school
   Bates stamp number ________  Efile Source Doc ________

☐ 4.77 Child had been suspended from school
   Bates stamp number ________  Efile Source Doc ________

☐ 4.78 Child had been expelled from school
   Bates stamp number ________  Efile Source Doc ________

☐ 4.79 Other (specify) ________
   Bates stamp number ________  Efile Source Doc ________
4.80  [ ] For the child’s most recent entry into OKDHS custody, is there documentation in the case file that services were provided or actions taken to address the identified school-related concerns?

1 = All – There is documentation indicating that services were provided to address all identified concerns
2 = Some – There is documentation indicating that services were provided to address some identified concerns but not all.
3 = None – There is no documentation that services were provided to address any of the identified concerns
4 = NA – No school-related problems were identified

Please provide Bates stamp number where you found this information ________
Please provide efile name of documentation source ________

4.81  [ ] For the child’s most recent entry into OKDHS custody, is there documentation of a plan in the case file for ensuring the child’s educational stability (as described in 4.81 through 4.83 below) while in out-of-home placement?

1 = Yes  2 = No  3 = NA

If yes, provide Bates stamp number where you found this information ________
If yes, provide efile name of documentation source ________

Question 4-F: Does the plan for educational stability include the following information?

Instructions (4.82-4.85): Enter 1 for all that apply and 0 for all that do not apply.

[ ] 4.82 Assurances that the placement of the child considers the appropriateness of the current educational setting and the proximity to the school in which the child was enrolled at the time of placement.

Bates stamp number ________  Efile Source Doc ________

[ ] 4.83 Efforts on the part of OKDHS to coordinate with local educational agencies to ensure that the child remains in the school in which the child was enrolled at the time of placement.

Bates stamp number ________  Efile Source Doc ________

[ ] 4.84 If remaining in the school is not in the best interests of the child, assurances by OKDHS and the local educational agencies to provide immediate and appropriate enrolment in a new school with all of the child’s educational records provided to the school in a timely manner.

Bates stamp number ________  Efile Source Doc ________

4.85  [ ] For the child’s most recent entry into OKDHS custody, is there documentation in the case file that a change of school was required at the time of the initial or subsequent placements?

1 = Yes  2 = No  3 = NA
Grid 4-A: Change of School Information

Instructions for Grid 4-A: Use Grid 4-A to report information on changes in the child’s enrollment in school. Enter 0 in all data boxes if the child did not change schools at the time of entry into foster care or at any time during the child’s current episode in OKDHS custody. Enter 0 in all data boxes after the child’s last school change. Do not enter a school change due to a change in school classification, such as a change from preschool to elementary school, elementary school to middle school or middle school to high school.

Using the key for Reason for Change below the table, insert the reason the child changed schools as documented in the case file, and the date of the child’s last day at the old school and first day at the new school. If these dates are not available, enter 0 in all of the date boxes.

Clarification (Grid 4-A): If there is a reason for school change, but not a date of the change, enter the reason for change using the key below and enter “0” in the date boxes.

<table>
<thead>
<tr>
<th>School Change</th>
<th>Reason for Change</th>
<th>Date child left old school/last day</th>
<th>Date child began new school/first day</th>
</tr>
</thead>
<tbody>
<tr>
<td>At initial entry</td>
<td>4.86 Efile</td>
<td>4.87 M D Y</td>
<td>4.88 M D Y</td>
</tr>
<tr>
<td>First change</td>
<td>4.89 Efile</td>
<td>4.90 M D Y</td>
<td>4.91 M D Y</td>
</tr>
<tr>
<td>Second change</td>
<td>4.92 Efile</td>
<td>4.93 M D Y</td>
<td>4.94 M D Y</td>
</tr>
<tr>
<td>Third change</td>
<td>4.95 Efile</td>
<td>4.96 M D Y</td>
<td>4.97 M D Y</td>
</tr>
<tr>
<td>Fourth change</td>
<td>4.98 Efile</td>
<td>4.99 M D Y</td>
<td>4.100 M D Y</td>
</tr>
<tr>
<td>Fifth change</td>
<td>4.101 Efile</td>
<td>4.102 M D Y</td>
<td>4.103 M D Y</td>
</tr>
<tr>
<td>Sixth change</td>
<td>4.104 Efile</td>
<td>4.105 M D Y</td>
<td>4.106 M D Y</td>
</tr>
</tbody>
</table>

Key: Reason for Change (select only one)
1=Child completed last grade in enrolled school
2=School staff recommended change
3=Foster parents recommended change
4=Child requested change
5=Foster parent moved
6=Child’s placement was changed and placement was not in former school district and transportation former school was not feasible
7=Child’s behavior required special school environment
8 = No reason provided in the case file
9 = Other (specify) ________
4.110  
During the child’s most recent entry into OKDHS custody, is there documentation in the case record of a recommendation that the child be assessed for eligibility for special education services?  
1 = Yes  2 = No  
If yes, provide Bates stamp number where you found this information ________  
If yes, provide efile name of documentation source ________  

4.111 What is the date of this recommendation?  M ______ D ______ Y ______  

Instructions(4.111): Enter 0 in all boxes if there is no recommendation that the child be assessed for eligibility for special education services  

4.112 During the child’s most recent entry into OKDHS custody, even when there is no recommendation for assessment for special education services in the file, is there information in the case file that the child demonstrates educational problems that would suggest the need for an assessment of eligibility for special education services?  
1 = Yes  2 = No  
If yes, provide Bates stamp number where you found this information ________  
If yes, provide efile name of documentation source ________  

Instructions: To answer this question you should consider the information that is available in the case file on school performance, particularly grades and behavior problems, and also case notes regarding discussions between child welfare worker and foster parents, child welfare worker and school staff, and child welfare worker and child.  

4.113 For the child’s most recent entry into OKDHS custody, is there documentation in the case file of a formal determination regarding special education eligibility or ineligibility?  
1 = Yes  2 = No  3 = NA  
If yes, provide Bates stamp number where you found this information ________  
If yes, provide efile name of documentation source ________  

4.114 What was the date of the formal determination that is documented in the case file?  M ______ D ______ Y ______  

Instructions (4.114)s: Enter 0 in all date boxes if there was no formal determination or if no date is identified  

4.115 Is there documentation in the case file that the formal determination concluded that the child is eligible for special education services?  
1 = Yes  2 = No  3 = NA (no formal determination documented)  

4.116 For the child’s most recent entry into OKDHS custody, is there documentation in the case file that the child was ever referred for special education services?  
1 = Yes  2 = No
4.117 What was the date of referral for special education services?

M [ ] D [ ] Y [ ]

*Instructions (4.117): Enter 0 in all the date boxes if there was no referral for special education services or if the date of referral is not available in the case file.*

4.118 For the child’s most recent entry into OKDHS, is there documentation in the case file that the child ever received special education services?

1 = Yes 2 = No

4.119 What was the date that the child began receiving special education services?

M [ ] D [ ] Y [ ]

*Instructions (4.119): Enter 0 in all the date boxes if the child did not receive special education services or if the date that services began is not available in the case file.*

D. Youth Services: Independent Living Services

*Instructions: Complete Part D only for children who are 16 years of age or older prior March 1, 2010. For children who were not 16 years of age or older as of March 1, 2010, enter 0 in all of the data boxes in Part D.*

4.120 For the child’s most recent entry into OKDHS custody, is there an independent living (IL) plan documented in the case file?

1 = Yes 2 = No

If yes, provide Bates stamp number where you found this information ________

If yes, provide efile name of documentation source ________

*Clarification (4.120): There must be an identifiable IL plan in the file. Case notes stating IL services are being provided are not sufficient to answer “1” to question 4.120. See “Clarification Document 1-4” for specific Oklahoma policy on IL plans for further information.*

4.121 What is the date of the earliest IL plan documented in the case file?

M [ ] D [ ] Y [ ]

*Instructions (4.121): If there is no plan or if the date of the plan is not available in the case file, enter a 0 in each of the date boxes.*

Question 4-G: Is any of the following information included in the IL plan?

*Instructions (4.122-4.127): Enter 1 if the information is in the IL plan and 0 if the information is not in the IL plan. If there is no IL plan, enter 0 in all of the data boxes.*

4.122 Objectives regarding educational, vocational or employment planning and services to ensure that objectives will be attained.

4.123 Information about how the youth’s transportation needs will be met in order for the youth to access educational, vocational or employment services, including assistance in obtaining a driver’s license, if appropriate.

4.124 Objectives related to money management and services to ensure that objectives will be attained.

4.125 Objectives related to housing and services to ensure that objectives will be attained.

4.126 Objectives related to development of social and recreational skills and services to ensure that objectives will be attained.

4.127 Objectives related to establishing and maintaining connections with the child’s family and community and services to ensure that objectives will be attained.
4.128 Is there documentation in the case record indicating that the child received the services identified in the IL plan?

1 = All – There is documentation indicating that the youth received all identified services
2 = Some – There is documentation indicating that the youth received some but not all services
3 = None – There is no documentation that the youth received any of the services
4 = NA – there is no IL plan
5 = NA – there is an IL plan but no services were identified

Question 4-H: What reason or reasons are provided in the case file for the youth not receiving identified IL services?

Instructions (4.129-4.141): Enter 1 for all reasons that are documented in the case file and enter 0 for reasons that are not documented in the case file. If there is no IL plan or the IL plan did not identify any services, enter 0 in all of the data boxes. For all reasons that are documented, enter the Bates Stamp number (BSN).

☐ 4.129 Service was not available in that locality
   Bates stamp number _______  Efile Source Doc _______

☐ 4.130 Service was available, but there was a waiting list
   Bates stamp number _______  Efile Source Doc _______

☐ 4.131 Eligibility requirements were not met
   Bates stamp number _______  Efile Source Doc _______

☐ 4.132 There were problems with scheduling times
   Bates stamp number _______  Efile Source Doc _______

☐ 4.133 Service was available, but no transportation was available to access services
   Bates stamp number _______  Efile Source Doc _______

☐ 4.134 Parent would not consent to service
   Bates stamp number _______  Efile Source Doc _______

☐ 4.135 Child would not consent to service and refused to cooperate
   Bates stamp number _______  Efile Source Doc _______

☐ 4.136 Caregiver did not facilitate access to services and case manager/supervisor did not make other arrangements
   Bates stamp number _______  Efile Source Doc _______

☐ 4.137 Service provider refused to provide service to eligible child
   Bates stamp number _______  Efile Source Doc _______

☐ 4.138 Case worker/supervisor did not make arrangements for service
   Bates stamp number _______  Efile Source Doc _______

☐ 4.139 Case worker did not inform caregiver how to access service
   Bates stamp number _______  Efile Source Doc _______

☐ 4.140 Other (specify) _______
   Bates stamp number _______  Efile Source Doc _______

☐ 4.141 No reason documented in record
E. Services to Birth Parents and Caregivers

Complete part E if at any time during the child’s most recent entry into OKDHS custody, the child’s permanency goal included the goal of “return home” or “return to the home of parents or legal guardian” as either a single or concurrent goal. If the child did not have this goal at any time during his or her most recent entry into foster care, enter 0 in all of the data boxes in Part E.

4.142 During the time of the child’s most recent entry into OKDHS custody, is there documentation in the case file that an outside (i.e., not an agency caseworker or supervisor) professional conducted formal assessments or evaluations on the child’s parents or legal guardians?

1 = Yes  2 = No

Question 4-I: What types of formal professional assessments or evaluations are documented in the case record.

Instructions (4.143-4.150): Enter 1 for all professional assessments or evaluations that are documented in the case file. Enter 0 for assessments or evaluations that are not documented in the case file. For all that are documented, provide the BSN where you found the information.

☐ 4.143 Mother (or female legal guardian) mental health evaluation
    Bates stamp number _______  Efile Source Doc _______

☐ 4.144 Father (or male legal guardian) mental health evaluation
    Bates stamp number _______  Efile Source Doc _______

☐ 4.145 Mother (or female legal guardian) substance abuse assessment
    Bates stamp number _______  Efile Source Doc _______

☐ 4.146 Father (or male legal guardian) substance abuse assessment
    Bates stamp number _______  Efile Source Doc _______

☐ 4.147 Mother (or female legal guardian) assessment of mental competence (intelligence level)
    Bates stamp number _______  Efile Source Doc _______

☐ 4.148 Father (or male legal guardian) assessment of mental competence (intelligence level)
    Bates stamp number _______  Efile Source Doc _______

☐ 4.149 Mother (or female legal guardian) other (specify) _______
    Bates stamp number _______  Efile Source Doc _______

☐ 4.150 Father (or male legal guardian) other (specify) _______
    Bates stamp number _______  Efile Source Doc _______
Grid 4-B: Services to parents or legal guardians

Instructions for GRID 4-B: In column (a) enter a 1 for all problems that apply. Make sure that the reasons for the child’s entry into foster care listed in Section I are included. However, other problems may be identified in the course of the case review, and these also should be identified in column (a). In the table below the term “Parent” includes the legal caretakers of the child prior to entry into foster care. These could be biological parents, adoptive parents, or legal guardians.

Clarification (Grid 4-B): If the problem in column (a) does not apply to the Parent/Legal Guardians, enter “0” in all the columns for that row.

<table>
<thead>
<tr>
<th>(a). Parent/Legal guardian problem?</th>
<th>(b). Were services offered to parents w/in 60 days of child’s entry into foster care?</th>
<th>(c). Did the parent/previous custodian refuse services or participate sporadically in the services?</th>
<th>(d). Are services currently (at the time of the case review) being provided?</th>
<th>(e) Was the problem resolved at the time of the case review?</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.156 Mother-child environmental neglect</td>
<td>4.157</td>
<td>4.158</td>
<td>4.159</td>
<td>4.160</td>
</tr>
<tr>
<td>4.161 Mother-mental illness</td>
<td>4.162</td>
<td>4.163</td>
<td>4.164</td>
<td>4.165</td>
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<tr>
<td>4.176 Mother-substance abuse</td>
<td>4.177</td>
<td>4.178</td>
<td>4.179</td>
<td>4.180</td>
</tr>
<tr>
<td>4.181 Mother-child educational neglect</td>
<td>4.182</td>
<td>4.183</td>
<td>4.184</td>
<td>4.185</td>
</tr>
<tr>
<td>4.186 Mother-child medical neglect</td>
<td>4.187</td>
<td>4.188</td>
<td>4.189</td>
<td>4.190</td>
</tr>
<tr>
<td>4.191 Mother – Lack of supervision or failure to supervise child</td>
<td>4.192</td>
<td>4.193</td>
<td>4.194</td>
<td>4.195</td>
</tr>
<tr>
<td>4.196 Father – child physical abuse</td>
<td>4.197</td>
<td>4.198</td>
<td>4.199</td>
<td>4.200</td>
</tr>
<tr>
<td>(a). Parent/Legal guardian problem?</td>
<td>(b). Were services offered to parents w/in 60 days of child’s entry into foster care?</td>
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<tr>
<td>1 = Yes 2 = No</td>
<td>1 = Yes 2 = No</td>
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</table>

| (c). Did the parent/previous custodian refuse services or participate sporadically in the services? |
| 1 = Yes 2 = No                      |

| (d). Are services currently (at the time of the case review) being provided? |
| 1 = Yes 2 = No                                                                |

| (e) Was the problem resolved at the time of the case review? |
| 1 = Yes 2 = No 3 = Cannot determine                               |

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<th>Father – substance abuse</th>
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<th>4.224</th>
<th>4.225</th>
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<table>
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<tr>
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<th>Father - child educational neglect</th>
<th>4.227</th>
<th>4.228</th>
<th>4.229</th>
<th>4.230</th>
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<table>
<thead>
<tr>
<th>4.236</th>
<th>Father - Inadequate supervision or failed to supervise</th>
<th>4.237</th>
<th>4.238</th>
<th>4.239</th>
<th>4.240</th>
</tr>
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SECTION V: PLACEMENT AND ADOPTION SERVICES

A. Placement stability and services

5.1 Using the categories of OKDHS-specific placement settings provided below, what was the child’s placement setting as of June 1, 2010 or at the time of discharge from foster care, if relevant?

_Instructions: Enter only one code._

1 = Non-Relative Foster Home - Child Welfare foster family care
2 = Non-Relative Foster Home - Tribal approved foster family care
3 = Non-Relative Foster home – Foster family home provided through the Developmental Disabilities Services Division of OKDHS
4 = Non-Relative Foster home - CW foster family care/Kinship/Non-Relative - This is a home where the child is related to the placement provider through an emotional bond but not through blood, marriage, or adoption
5 = Non-paid foster home - Kinship/Non-Relative – This refers to placements with persons who have an emotional bond to the child and who do not receive foster care payments from OKDHS
6 = Contracted foster care home
7 = Non-Relative foster home - Tribal approved foster care-Kinship/Non-relative
8 = CW foster family care/Kinship/Relative
9 = Non-paid foster home - Kinship/Relative/non-paid – This refers to placements with persons who are related to the child by blood, marriage, or adoption, and who do not receive foster care payments
10 = Tribal approved foster care kinship/relative
11 = Trial reunification in biological home- with either parent or guardian
12 = Trial adoption – this refers to a placement in which adoption is pending. It may be in the home of a biological parent
13 = Therapeutic Foster Care Home
14 = Shelter – OKDHS
15 = Shelter – Private
16 = Shelter – Tribal
17 = Shelter – Youth services
18 = Emergency foster care group home
19 = Emergency foster care family
20 = Shelter host homes
21 = DHHS group homes
22 = OKDHS operated group home
23 = level B - Residential resource/facility
24 = level D – Residential resource/facility
25 = Level E – Residential resource/facility 25 = Residential maternity services
26 = Level C – Residential resource/facility
27 = Psychiatric residential treatment center
28 = Res. Individualized therapeutic services.
29 = Level D+ - residential resource/facility
30 = Tribal residential facility
31 = Acute psychiatric hospital
32 = Children’s convalescent center
33 = Detention
34 = Residential diagnosis evaluation center
35 = Hospital (medical)
36 = JD McCarty
37 = Northern Oklahoma Resource Center
38 = Southern Oklahoma Resource Center
39 = Specialized community home
40 = Residential Resource/Facility OKDHS operated
41 = Agency companion home
42 = Nursing Home
43 = Non-OKDHS operated facilities (some include group homes)
44 = DDSD Assisted living
45 = DDSD Companion
46 = Bridge home
47 = Residential crisis stabilization
48 = Child is AWOL/on runaway status
49 = Child’s current placement does not appear to fit any of these categories (specify information about placement)

5.2 Based on your review of the case record, which of the following categories best identifies the child’s placement as of June 1, 2010?

Instructions: Enter only one code number. In determining the appropriate number, note that OKDHS policy uses the term Kinship Care to refer to placements in which the child is related by blood, marriage, or adoption as well as placements in which the child is related by emotional tie or bond— that is the person is viewed as part of the parent’s and/or child’s extended “family” network. For purposes of this instrument, we are calling placements with persons related by blood, marriage, or adoption “relative placements,” and person related by emotional bond “kinship placements.” Please note that placement with a noncustodial parent is not considered as a placement with a foster parent, but may be considered as a trial reunification or trial adoption.

1 = Child is in placement with a non-therapeutic non-relative foster family in which the foster parent is not related to the child by blood, marriage, or adoption and was not known to the child or to the child’s family prior to the placement.
2 = Child is in placement with a therapeutic non-relative foster family in which the foster parent is not related to the child by blood, marriage, or adoption and was not known to the child or to the child’s family prior to placement.
3 = Child is in placement with a non-therapeutic relative foster family and the foster parent is related to the child by blood, marriage, or adoption or is a person who was known to the child or to the child’s family prior to entry into OKDHS custody.
4 = Child is in placement with a therapeutic relative foster family and the foster parent is related to the child by blood, marriage, or adoption or is a person who was known to the child or to the child’s family prior to entry into OKDHS custody.
5 = Child is in placement with a non-therapeutic relative emergency foster family in which the foster parent is related to the child by blood, marriage, or adoption or is a person who was known to the child or child’s family prior to entry into OKDHS custody.
6 = Child is in placement with a non-therapeutic non-relative emergency foster family that provides emergency foster care for children until a more long-term placement can be found.
7 = Child is in his or her own home on a trial reunification residing with the parent or legal guardian from whom the child was removed.
8 = Child is in a trial “permanency” placement or trial adoption in the home of the noncustodial parent or parent from whose home the child was not removed.
9 = Child is in placement with a non-related pre-adoptive family on which a homestudy has been completed and the family has been approved as an adoptive placement (this includes foster family homes that have already gone through the adoption process and are waiting only for court finalization)
10 = Child is in placement with a relative pre-adoptive family on which a homestudy has been completed and the relative has been approved as an adoptive placement and the family is waiting for court finalization. The relative may be related to the child by blood, marriage or adoption or may be a person who was known to the child and the child’s family prior to entry into OKDHS custody.
11 = Child is in a congregate care placement that is a facility for providing residential shelter services until a more long-term placement can be located.
12 = Child is in a congregate care placement that is a facility for providing therapeutic or treatment services to children on a residential basis.
13 = Child is in a congregate care placement that provides residential group care to children in OKDHS custody.
14 = Child is in a juvenile justice-operated detention center
15 = Child is in an independent living situation, such as an IL specialized community home or apartment.
16 = Other (specify) _____
5.3 If the child is in a foster family home of some type as of June 1, 2010, is there documentation in the case file that the foster family home receives maintenance payments from OKDHS?

1 = Yes - there is documentation indicating that the foster family home receives maintenance payments from OKDHS
2 = No - there is documentation indicating that the foster family home does not receive maintenance payments from OKDHS, but may receive child-related payments from Social Security or Temporary Assistance to Needy Families (TANF)
3 = Cannot determine from information in the case file – there is no mention in the file as to whether the foster family does or does not receive maintenance payments
4 = NA – child not in a foster family home

Grid 5-A - Placement changes

Instructions for Grid 5-A: Report on all placement changes that occurred from the time of the child’s most recent entry into OKDHS custody until June 1, 2010, including emergency placements and trial home visit placements. If the child’s placement did not change from the time of the most recent entry into OKDHS custody enter the type of initial placement and the date, and leave the rest blank. Use the codes provided below in the Keys for type of placement and reason for leaving. Up to 2 reasons can be entered in the Reason column. If more than 30 placements during the current episode, use a separate sheet and attach.

The pilot test indicated that this information may need to be pieced together. There are placement change screens in KIDS, but they may not cover all placement changes. You may need to look at contact information (for the name of the foster parent) as well as court reports.

Clarification (Grid 5-A): Once all the placement change information for the child is entered in this grid, the reviewer may leave the rest of the grid blank.

<table>
<thead>
<tr>
<th>Placement Number</th>
<th>Type (Key 1)</th>
<th>Date child entered</th>
<th>Date child left placement</th>
<th>Reasons for placement change (Key 2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial placement</td>
<td>5.4</td>
<td>5.5 M D Y</td>
<td>5.6 M D Y</td>
<td>5.7 5.8</td>
</tr>
<tr>
<td>Second placement</td>
<td>5.9</td>
<td>5.10 M D Y</td>
<td>5.11 M D Y</td>
<td>5.12 5.13</td>
</tr>
<tr>
<td>Third placement</td>
<td>5.14</td>
<td>5.15 M D Y</td>
<td>5.16 M D Y</td>
<td>5.17 5.18</td>
</tr>
<tr>
<td>Fourth placement</td>
<td>5.19</td>
<td>5.20 M D Y</td>
<td>5.21 M D Y</td>
<td>5.22 5.23</td>
</tr>
<tr>
<td>Placement</td>
<td>5.24 M</td>
<td>5.25 M</td>
<td>5.26 M</td>
<td>5.27</td>
</tr>
<tr>
<td>-------------</td>
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<tr>
<td>Fifth</td>
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<tr>
<td>Sixth</td>
<td>5.29 M</td>
<td>5.30 M</td>
<td>5.31 M</td>
<td>5.32</td>
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<tr>
<td>Seventh</td>
<td>5.34 M</td>
<td>5.35 M</td>
<td>5.36 M</td>
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<tr>
<td>Eighth</td>
<td>5.39 M</td>
<td>5.40 M</td>
<td>5.41 M</td>
<td>5.42</td>
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<td>Ninth</td>
<td>5.44 M</td>
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<td>5.50 M</td>
<td>5.51 M</td>
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<td>5.55 M</td>
<td>5.56 M</td>
<td>5.57</td>
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<td>5.60 M</td>
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<tr>
<td>Fifteenth</td>
<td>5.74 M</td>
<td>5.75 M</td>
<td>5.76 M</td>
<td>5.77</td>
</tr>
<tr>
<td>Sixteenth</td>
<td>5.79 M</td>
<td>5.80 M</td>
<td>5.81 M</td>
<td>5.82</td>
</tr>
<tr>
<td>Seventeenth</td>
<td>5.84 M</td>
<td>5.85 M</td>
<td>5.86 M</td>
<td>5.87</td>
</tr>
<tr>
<td>Eighteenth</td>
<td>5.89 M</td>
<td>5.90 M</td>
<td>5.91 M</td>
<td>5.92</td>
</tr>
<tr>
<td>Nineteenth</td>
<td>5.94 M</td>
<td>5.95 M</td>
<td>5.96 M</td>
<td>5.97</td>
</tr>
<tr>
<td>Placement</td>
<td>Code 1</td>
<td>Code 2</td>
<td>Code 3</td>
<td>Code 4</td>
</tr>
<tr>
<td>--------------------</td>
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<td>--------</td>
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</tr>
<tr>
<td>Twentieth placement</td>
<td>5.99</td>
<td>5.100 M</td>
<td>D</td>
<td>Y</td>
</tr>
<tr>
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<td>5.104</td>
<td>5.105 M</td>
<td>D</td>
<td>Y</td>
</tr>
<tr>
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<td>D</td>
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</tr>
<tr>
<td>Twenty third placement</td>
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<td>5.115 M</td>
<td>D</td>
<td>Y</td>
</tr>
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<td>5.119</td>
<td>5.120 M</td>
<td>D</td>
<td>Y</td>
</tr>
<tr>
<td>Twenty fifth placement</td>
<td>5.124</td>
<td>5.125 M</td>
<td>D</td>
<td>Y</td>
</tr>
<tr>
<td>Twenty sixth placement</td>
<td>5.129</td>
<td>5.130 M</td>
<td>D</td>
<td>Y</td>
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<tr>
<td>Twenty seventh placement</td>
<td>5.134</td>
<td>5.135 M</td>
<td>D</td>
<td>Y</td>
</tr>
<tr>
<td>Twenty eighth placement</td>
<td>5.139</td>
<td>5.140 M</td>
<td>D</td>
<td>Y</td>
</tr>
<tr>
<td>Twenty ninth placement</td>
<td>5.144</td>
<td>5.145 M</td>
<td>D</td>
<td>Y</td>
</tr>
<tr>
<td>Thirtieth placement</td>
<td>5.149</td>
<td>5.150 M</td>
<td>D</td>
<td>Y</td>
</tr>
</tbody>
</table>

*SPECIAL NOTE: for more than 30 placements, please see question 5.216*

**KEY 1:** Type of Placement - use code numbers for the categories listed under question 5.2, not those listed under question 5.1

**KEY 2:** Reason Documented for Child Changing Placement (select up to two reasons). *If only one reason is provided enter 98 for NA in the second reason box*

1 = Child requested the placement change  
2 = Placement change was intended to reunify siblings
3 = Placement change was requested by birth family so that the child would be closer to them
4 = Placement change was done to place child in a pre-adoptive home
5 = Placement change was done to place teen parent and child together
6 = Placement change was done because the caregiver did not want to adopt or commit to child on a long-term basis
7 = Placement change was done because the caregiver was not providing adequate care
8 = Placement change was necessary because the foster home exceeded maximum limits
9 = Placement change was done because the child needed a higher level of care
10 = Placement change was necessary because the agency did not issue a new license to foster parents
11 = Placement change occurred because the child was arrested
12 = Placement change was done because the child’s behavior presented a serious danger to self or others
13 = Child ran away from a placement
14 = Placement change was done because a medical/mental health professional recommended that the child be moved to a different setting.
15 = Placement change was done because the child needed a less restrictive placement (i.e., step down)
16 = Placement change was done because the caregiver requested that the child be moved due to the child’s behavior
17 = Placement change was necessary because the foster caregiver was suspected of child abuse or neglect of child or other children in the home.
18 = Placement change was done because the foster caregiver was incapacitated by illness in the family
19 = Placement change was done to move the child to a caregiver of the same race/ethnicity as the child.
20 = Placement change was done to move the child to parent’s home for a trial reunification
21 = Placement change was done because trial reunification was not successful
22 = Placement change was necessary because the foster home was closed by the agency.
23 = Placement change occurred because the caregiver requested that the child be moved due to lack of OKDHS services and supports
24 = Placement change occurred because of concerns about safety-related incidents in the caregiver home or facility
25 = Placement change occurred at the request of birth parents because they did not like the caregivers.
26 = Placement change occurred to move the child to a more long-term stable placement
27 = Placement change occurred to move the child to a placement with a relative or fictive kin
28 = Other _______

Clarification (5.154 - 5.158): If NA is the only possible response, then use 98=NA. Use “98” for not applicable on question 5.157 regardless of why it is NA.

5.154 For any of the placement changes described in Grid 5-A, is there documentation in the case file that the child’s Child Welfare worker or some other OKDHS staff person offered services to the caregiver to maintain the placement if maintaining the placement was appropriate?

Instructions (5.154): For this item, the “caregiver” refers to either the foster parent, the biological parent (if the child was in a trial reunification), or a facility staff member

1 = All – there is documentation in the case file that services to maintain the placement were offered to caregivers in all situations in which maintaining the placement was appropriate.
2 = Some – there is documentation in the case file that services to maintain the placement were offered to caregivers in some but not all situations in which maintaining the placement was appropriate
3 = None – there is no documentation in the case file that services to maintain the placement were offered to caregivers in any situations in which maintaining the placement was appropriate
4 = Documentation indicates that maintaining the placement with the caregiver (including the facility if it is a congregate care placement) was not appropriate for any of the child’s placement changes

If the answer is 1, 2, or 4, provide Bates stamp number where you found this information _______

If the answer is 1, 2, or 4, provide efile name of documentation source_______
For any of the placement changes described in Grid 5-A, is there documentation in the case file that the Child Welfare worker or some other OKDHS staff person offered or provided services to the child to maintain the placement if maintaining the placement was appropriate?

1 = All – there is documentation in the case file that services to maintain the placement were offered to the child in all situations in which maintaining the placement was appropriate.
2 = Some – there is documentation in the case file that services to maintain the placement were offered to the child in some but not all situations in which maintaining the placement was appropriate
3 = None – there is no documentation in the file that services to maintain the placement were offered to the child in any situations in which maintaining the placement was appropriate
4 = Documentation indicates that maintaining the placement with caregivers was not appropriate for any of the child’s placement changes

If the answer is 1, 2, or 4, provide Bates stamp number where you found this information _______
If the answer is 1, 2, or 4, provide efile name of documentation source _______

For the child’s most recent placement change prior to the placement location as of June 1, 2010, is there documentation that maintaining the child in the prior placement would have been appropriate. That is, it would have been in the best interests of the child if the placement had not changed.

1 = Yes – there is documentation in the case file that maintaining the placement would have been in the child’s best interest
2 = No – there is documentation in the case file that maintaining the placement would NOT have been in the child’s best interest
3 = NA – there is no information in the file about whether maintaining the placement was or was not in the child’s best interest.

If the answer is 1 or 2, provide Bates stamp number where you found this information _______
If the answer is 1 or 2, provide efile name of documentation source _______

Instructions (5.156): A placement may be said to be in the child’s best interest if it meets the child’s needs for a safe and stable environment. For example, if the child is placed with a foster parent and is bonded to the foster parent, but the foster parent becomes ill, it may have been appropriate for the agency to provide services to maintain the placement during the illness so she or he could continue to as a caregiver for the child.

For the child’s most recent placement change before June 1, 2010, is there documentation in the case file that the foster care provider, facility staff member caring for the child, parent (if on a trial reunification placement) and/or the child discussed the possibility of the placement disrupting with the child’s Child Welfare worker prior to the disruption?

Clarification (5.517): Use “98=NA” for not applicable regardless of the reason the response is NA.

1 = Yes - There is documentation in the case file indicating that the possibility of placement disruption was discussed with the child’s Child Welfare worker prior to the disruption
2 = No – There is no documentation in the case file indicating that the possibility of placement disruption was discussed with the child’s Child Welfare worker prior to the disruption
98 = NA, a relative/kinship resource was identified and the child was moved intentionally to a relative/kinship caregiver

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source _______
5.158 □ □ □ Is there documentation in the case file that the child’s Child Welfare worker took actions to prevent the most recent placement disruption?

1 = Yes, there is documentation in the case file indicating that actions were taken to prevent the disruption
2 = No, there is no documentation in the case file indicating that actions were taken to prevent the disruption
3 = NA – there is documentation in the case file indicating that no actions were desirable

Question 5-A: What were the key actions taken?

*Instructions (5.159-5.160): Write in your response. If there is no documentation in the file of any actions taken, enter “None.”*

<table>
<thead>
<tr>
<th>5.159</th>
<th>Action</th>
<th>BSN</th>
<th>Efile</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.160</td>
<td>Action</td>
<td>BSN</td>
<td>Efile</td>
</tr>
</tbody>
</table>

5.161 □ □ □ For the child’s placement as of June 1, 2010, is there documentation in the case file that the foster care provider, facility staff member caring for the child, biological parent (if on a trial reunification), and/or the child discussed the possibility of the placement disrupting with the Child Welfare Worker?

1 = Yes – There is documentation in the case file indicating that the caregiver or child discussed with the Child Welfare worker the possibility of the placement as of June 1, 2010 disrupting.
2 = No – There is no documentation in the case file indicating that the caregiver or child discussed with the child welfare worker the possibility of the placement as of June 1, 2010 disrupting.

5.162 □ □ □ Is there documentation in the case file that the child’s Child Welfare worker took actions to prevent the disruption of the child’s placement as of June 1, 2010 placement disruption?

1 = Yes - There is documentation indicating that the Child Welfare worker took actions to prevent possible disruption
2 = No – There is no documentation indicating that the Child Welfare worker took actions to prevent possible disruption.
3 = NA – There was no indication of a possible placement disruption or there is documentation that no actions were needed or would have been appropriate.

Question 5-B: What were the key actions taken that were documented in the case file?

*Instructions (5.163 and 5.164): Write in your response. If there is no documentation in the file of any actions taken, enter “None.”*

<table>
<thead>
<tr>
<th>5.163</th>
<th>Action</th>
<th>BSN</th>
<th>Efile</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.164</td>
<td>Action</td>
<td>BSN</td>
<td>Efile</td>
</tr>
</tbody>
</table>
B. Adoption

Part B must be completed for children who had a goal of adoption or adoption preparation at some time during the child's most recent entry into OKDHS custody. If the child did not have a goal of adoption or adoption preparation, enter 0 in all of the data boxes for Part B.

5.165 On what date was the plan for adoption as the permanency goal first documented in either the child's individual service plan (ISP) or a formal review (either an administrative review or court review)?

M [ ] D [ ] Y [ ]

On that date, was the child: (Enter “1” for all that apply. If none apply, leave all boxes blank)

- [ ] 5.166 Six (6) years of age or older
- [ ] 5.167 Member of a sibling group of two (2) or more to be placed together
- [ ] 5.168 Had documented physical, emotional, or mental handicap
- [ ] 5.169 Had documented medical conditions

5.170 On what date was the plan for adoption preparation as the permanency goal first documented in either the child’s individual service plan (ISP) or a formal review (either an administrative review or court review)?

M [ ] D [ ] Y [ ]

5.171 On the date that adoption or adoption preparation was established as a single or concurrent permanency plan goal, is there documentation in the case file that there was an identified adoptive family for the child?

1 = Yes – There is documentation in the case file indicating that there was an identified adoptive family for the child
2 = No – There is documentation in the case file indicating that there was not an identified adoptive family for the child.
3 = Cannot determine – There is no information in the case file about whether there was or was not an identified adoptive family

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source _______

5.172 Is there documentation in the case file that the child's case was ever referred to a specialized adoption worker for assistance, such as an area adoption specialist, area adoption supervisor, or a caseworker in the Children and Family Services Division Adoption Services Section?

1 = Yes - there is documentation in the case file of this type of referral
2 = No – there is no documentation in the case file of this type of referral

5.173 What was the date that the case was referred to a specialized worker for assistance with the adoption process?

Instructions (5.173): If there was no referral, enter 0 in all of the date boxes

M [ ] D [ ] Y [ ]
During the child’s most recent entry into OKDHS custody, is there documentation in the case file that the child was in a pre-adoptive home at any time?

1 = Yes, there is documentation indicating that the child was in a pre-adoptive home at any time
2 = No, there is documentation indicating that the child was not in a pre-adoptive home at any time
3 = Cannot determine – there is no information about the type of some or all of the child’s placement locations

Definition: A pre-adoptive home is a home in which adoption is being actively pursued with the family. That is, an adoption home study has been completed or has been requested for the family.

What was the first date documented in the case file that the child was placed in a pre-adoptive home?

Instructions 5.175): If the child is not placed in a pre-adoptive home, enter 0 in all of the date boxes.

What is the status if this pre-adoptive placement as of June 1, 2010 as documented in the case file?

1 = The placement disrupted
2 = The child is still in the placement awaiting adoption finalization
3 = The adoption has been finalized
4 = NA – the child was not in a pre-adoptive placement at any time

Question 5-C: What are the reasons documented in the case file for the disruption of the pre-adoptive placement

Instructions (5.177-5.181): If there was no pre-adoptive placement or the pre-adoptive placement did not disrupt, enter a 0 in all the data boxes. If there was a pre-adoptive placement that disrupted, enter 1 for all reasons that apply and 0 for all reasons that do not apply.

The family could not manage the child’s behavior
The family did not receive the necessary services to support the placement
Changes occurred in the family (e.g., divorce or death) that resulted in the family no longer wanting to adopt the child
The child did not want to be adopted by the family
Other (specify) _______

Is there documentation in the case file of child specific recruitment efforts to locate an adoptive family once the goal of adoption or adoption preparation was established?
1 = Yes – there is documentation in the case file that child specific recruitment efforts were made to locate an adoptive family
2 = No – there is no documentation in the case file of child specific recruitment efforts.
3 = NA – child specific recruitment was not necessary since there was an adoptive family identified for the child at the time of goal establishment.

Question 5-D: What are the child-specific recruitment efforts that are documented in the case file?

Instructions (5.183-5.191): If there are no child-specific recruitment efforts documented or none were necessary, enter 0 in all of the data boxes. If there were child-specific recruitment efforts enter 1 for all that apply and 0 for all that do not apply.

Local foster family resource recruitment
Local adoptive family resource recruitment
Referral to the State Adoption Exchange
5.186 Referral to regional or national adoption exchange  
5.187 Inclusion in the Statewide Adoption staffing process  
5.188 Referral to a private agency for the purpose of adoption recruitment/placement  
5.189 Inclusion in special media events or Heart Gallery, public service announcements  
5.190 Referral to the Wendy’s Wonderful Kids adoption recruitment project  
5.191 Other (specify)  

5.192 ___ Is there documentation in the file that the foster family with whom the child resided on June 1, 2010 was considered by OKDHS as an adoptive resource for the child?  
1 = Yes – There is documentation in the file that the foster family was considered as an adoptive resource for the child  
2 = No – There is documentation in the file that the foster family was not considered as an adoptive resource for the child  
3 = Cannot determine – There is no documentation in the file as to whether the foster family was or was not considered as an adoptive resource for the child  
4 = NA – The child’s placement as of June 1, 2010 or at the time of discharge was not with a foster family or the child’s placement as of June 1 is a pre-adoptive home.  

Instructions (5.192): Use NA if the child is not placed in foster family placement or is currently placed in a pre-adoptive home.

Question 5-D: What were the reasons why the foster family with whom the child resided as of June 1, 2010 was not considered an adoptive resource for the child? (Enter “1” for all that apply)  

Instructions (5.193-5.199): Answer this question if there is documentation in the case file that the foster family with whom the child resided on June 1, 2010 WAS NOT considered as an adoptive resource. If this does not apply, enter 0 in all of the data boxes. If it does apply, enter 1 for all reasons that apply and 0 for all that do not apply.  

Clarification (5.193-5.199): If the answer to Question 5.192 is 1=Yes, then use 0 for questions 5.193 - 5.199.

5.193 Foster child does not want to be adopted by foster caregiver  
5.194 Foster caregiver does not want to adopt the child  
5.195 Foster caregiver does not want to adopt child’s siblings who are free for adoption  
5.196 A relative wants to adopt  
5.197 Foster caregiver has health problems  
5.198 Agency did not approve the caregiver as an adoptive resource  
5.199 Other (specify)  

5.200 ___ Is there documentation in the case file that possible adoption by the foster parents with whom the child resided on June 1, 2010 was discussed with the child?  
1 = Yes - There is documentation in the case file that possible adoption by these foster parents with whom the child resided on June 1, 2010 was discussed with the child  
2 = No - There is documentation in the case file that possible adoption by these foster parents WAS NOT discussed with the child  
3 = Cannot determine – There is no information in the case file about whether or not adoption by the foster parents was discussed with the child  
4 = NA- The child is not in a foster family placement, is currently in a pre-adoptive home, or is age 3 or younger  

Instructions (5.200): Use NA if the child is not placed in a foster family placement, is currently placed in a pre-adoptive home, or is age 3 or younger.)
5.201  □□□□  Is there documentation in the case file that adoption was discussed with the foster parents with whom the child was placed on June 1, 2010?
   1 = Yes - There is documentation in the case file that possible adoption by these foster parents with whom the child resided on June 1, 2010 was discussed with the foster parents
   2 = No - There is documentation in the case file that possible adoption by these foster parents WAS NOT discussed with the foster parents
   3 = Cannot determine – There is no information in the case file about whether or not adoption by the foster parents was discussed with the foster parents
   4 = NA- The child is not in a foster family placement or the foster family placement is already a pre-adoptive home

If 1 or 2, provide Bates stamp number where you found this information _______
If 1 or 2, provide efile name of documentation source________

5.202  □□□□  According to information in the case file, did the foster parents caring for the child as of June 1, 2010 express an interest in pursuing adoption?
   1 = Yes – Information in the case file indicates that foster parents expressed an interest in adoption
   2 = No – Information in the case file indicates that foster parents expressed that they were not interested in pursuing adoption
   3 = Cannot determine – there is no mention in the case file about whether the foster parents were or were not interested in pursuing adoption
   4 = NA – child was not in a foster family placement or the foster family placement is already a pre-adoptive home.

If 1 or 2, provide Bates stamp number where you found this information _______
If 1 or 2, provide efile name of documentation source________

5.203  □□□□  According to information in the case file, were the foster parents caring for the child as of June 1, 2010 ever referred for an adoptive home study?
   1 = Yes  2 = No

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source________

5.204  On what date was the foster family caring for the child as of June 1, 2010 referred for an adoption home study?

   Instructions (5.204): If foster family not referred for an adoption home study, enter 0 in all of the date boxes.

   M □□ D □□ Y □□

5.205  □□□□  According to information in the case file, has the adoption home study been completed?
   1 = Yes
   2 = No, but the home study process has begun
   3 = No, and the home study process has not yet begun at the time of the case review even though there was a referral
   4 = NA – there was no referral for a home study or the child was not in a foster family home
5.206 On what date was the adoption home study completed?

*Instructions (5.206): If foster family not referred for an adoption home study or the home study is not completed, enter 0 in all of the date boxes.*

M _____ D _____ Y _____ Date adoption study completed

5.207 At the time of the case review, was the current foster family approved as an adoptive family for the child?

1 = Yes  2 = No  3 = Cannot determine whether the family has been approved

5.208 What was the date of approval of the foster family as an adoptive home for the child?

*Instructions (5.208): If foster family not pursuing adoption or child not in a foster family home, enter 0 in all of the date boxes.*

M _____ D _____ Y _____

5.209 Did the agency ever determine that the child is eligible for an adoption maintenance subsidy?

1 = Yes, the agency did make this determination and the child IS eligible
2 = Yes, the agency did make this determination and the child IS NOT eligible
3 = Cannot determine – there is no information in the file that a determination of eligibility was made

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source _______

*Provide dates for the following events (If these events have not occurred or if there is information that the event has occurred but no dates are included in the file, enter 0s in all of the date boxes.)*

5.210 What was the date of the first hearing for the TPR petition?

M _____ D _____ Y _____

5.211 What was the date of the initiation of the appeals process, if relevant

M _____ D _____ Y _____

5.212 What was the date of the resolution of all appeals?

M _____ D _____ Y _____

5.213 What was the date of the referral for home study if the prospective adoptive family was not the current foster family?

M _____ D _____ Y _____

5.214 What was the date that the home study for this family began?

M _____ D _____ Y _____

5.215 What was the date that the home study for this family was completed?

M _____ D _____ Y _____

5.216 If there were more than 30 placements, what was the total number of placements (including the 30), until June 1, 2010?

*Clarification (5.216): Use “98” for NA if there were less than 30 placements.*
Section VI: Placement Safety

Grid 6-A – Child Behavior Concerns

Instructions for Grid 6-A. Answer the following questions regarding child behaviors for the child’s most recent entry into OKDHS custody. Using the Keys, enter up to three behaviors or conditions identified as areas of concern, and up to three primary actions taken by the agency.

1) If there are less than three behaviors or three actions, enter 0 in the appropriate boxes.
2) If no child behaviors have been identified as a concern at any time during the child’s most recent entry into OKDHS custody, enter 0 in all of the boxes in the grid.

For the first column, identify the date of the earliest identification of the behavioral concern and identify the BSN where you found that information.

<table>
<thead>
<tr>
<th>Grid 6-A</th>
<th>Time 1</th>
<th>Time 2</th>
<th>Time 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Behavior</td>
<td>6.1 M D Y</td>
<td>6.9 M D Y</td>
<td>6.17 M D Y</td>
</tr>
<tr>
<td>a. Is there documentation in the child’s record that someone identified one of the behaviors in Key 1 (or a behavior not identified in Key 1) as an area of concern?</td>
<td>1 = Yes</td>
<td>2 = No</td>
<td>1 = Yes</td>
</tr>
<tr>
<td>6.2 BSN</td>
<td>6.10 BSN</td>
<td>6.18 BSN</td>
<td></td>
</tr>
<tr>
<td>Efile</td>
<td>Efile</td>
<td>Efile</td>
<td></td>
</tr>
<tr>
<td>b. What behavior(s) was identified? Use Key 1 Codes to identify up to 3 behaviors identified at a given time.</td>
<td>6.3</td>
<td>6.11</td>
<td>6.19</td>
</tr>
<tr>
<td>6.4</td>
<td>6.12</td>
<td>6.20</td>
<td></td>
</tr>
<tr>
<td>6.5</td>
<td>6.13</td>
<td>6.21</td>
<td></td>
</tr>
<tr>
<td>c. What actions were taken by the agency within 60 days of the behavior being identified? Use Key 2 Codes to identify up to 3 primary actions</td>
<td>6.6</td>
<td>6.14</td>
<td>6.22</td>
</tr>
<tr>
<td>6.7</td>
<td>6.15</td>
<td>6.23</td>
<td></td>
</tr>
<tr>
<td>6.8</td>
<td>6.16</td>
<td>6.24</td>
<td></td>
</tr>
</tbody>
</table>

Key 1: Child’s Behavior Identified as Areas of Concern (select up to 3) If less than 3 areas of concern, enter 0 in the data boxes

1 = The child has tried alcohol or other drugs
2 = The child plays with matches or sets fires
3 = The child is intentionally cruel to animals
4 = The child hurts other children
5 = The child hurts herself or himself
6 = The child talks about hurting her or himself
7 = The child has sleeping or eating problems
8 = The child has bedwetting problems
9 = The child masturbates in public
10 = The child purposely destroys things
11 = The child is withdrawn or seems depressed
12 = The child is hyperactive or agitated
13 = The child is socially withdrawn and has difficulty in communicating
14 = The child has other unusual or unexplained behaviors
15 = The child has attempted suicide
16 = The child perpetrates sexual abuse
17 = The child has been suspended or expelled from school
18 = The child refuses to go to school
19 = The child has serious behavioral problems in school
20 = The child has run away
21 = The child steals property or food
22 = The child has hallucinations or delusions
23 = The child exhibits an addiction to alcohol/drugs
24 = The child is aggressive to foster family
25 = The child engages in prostitution
26 = The child is aggressive to other children
27 = The child carries a weapon
28 = Other (specify) _______
KEY 2: Actions Taken (select up to 3 primary actions)

Definitions: The OK Child Protective Services assessment and investigation assignment guidelines include the following: (a) An assessment is conducted when a report meets the abuse or neglect guidelines and does not constitute a serious and immediate safety threat to a child. (b) An investigation is conducted when a report meets the abuse or neglect guidelines and constitutes a serious and immediate threat to the safety of a child.”

1 = Police called
2 = Child Protective Services Investigation initiated
3 = Child Protective Services Assessment conducted
4 = Information gathered
5 = Child removed and replaced temporarily
6 = Child removed and replaced permanently
7 = Health or mental health assessment arranged for the child
8 = Health or mental health assessment arranged for the caregiver
9 = Counseling provided to child
10 = Counseling provided to caregiver
11 = Child behavior management training arranged for caregiver
12 = Substance abuse assessment arranged for the child
13 = Educational services arranged for the child
14 = Mental health services arranged for the child
15 = Evaluation for psychotropic medications arranged for the child
16 = Substance abuse treatment services arranged for the child
17 = Placement in a residential treatment facility arranged for the child
18 = Arrangements made for meeting with staff from child’s school
19 = Foster home closed
20 = Other (specify) ______
21 = No actions taken
GRID 6-B: Caregiver, Household Member, or Facility Staff Member Behavior and Conditions in the Home/Facility

Instructions for GRID 6-B. Answer the following questions about concerns regarding caregiver, household member, or facility staff member’s behavior or conditions in the home/facility of placement for the child’s most recent entry into OKDHS custody.

1) If there are more than 3 documentations, enter the most recent ones.
2) Using the Keys, insert up to three behaviors or conditions identified as areas of concern, and up to three primary actions taken by the agency.
3) If there are less than three behaviors or three actions, insert 0 (for NA) in the appropriate boxes.
4) In the first row, identify the date of the earliest report of the behavioral concern and the BSN.
5) If there were no concerns regarding caregiver, household member, or facility staff member’s behaviors or conditions in the home/facility during the child’s most recent entry into OKDHS custody, enter 0 in all of the boxes.

<table>
<thead>
<tr>
<th>Caregiver, Household Member, or Facility Staff Member Behavior and Conditions in the Home/Facility</th>
<th>Time 1</th>
<th>Time 2</th>
<th>Time 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.25</td>
<td>M D Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.33</td>
<td>M D Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.41</td>
<td>M D Y</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. Is there documentation in the child’s record that someone identified a caregiver’s, household member’s or placement facility staff member’s behavior or condition in the home or facility as an area of concern?

1 = Yes    2 = No

6.26
BSN
Efile

b. What behavior(s) or condition(s) in the home/facility was identified? USE KEY 1 CODES to identify up to 3 most serious behavior(s) or condition(s)

6.27
6.28
6.29

6.35
6.36
6.37

6.43
6.44
6.45

c. What actions were taken by the agency within 60 days of the behavior/condition being identified? USE KEY 2 CODES to identify up to 3 primary actions

6.30
6.31
6.32

6.38
6.39
6.40

6.46
6.47
6.48

KEY 1: Caregiver’s/Other’s Behavior or Condition in Home/Facility (select up to 3 most serious). If only 1 or 2 conditions, use 0 for NA in the other boxes.

Instructions: Caregiver includes a foster parent or the facility staff member who is responsible for the child. “Other” includes other members of the foster family or employees of the facility who come into contact with the child.

1 = Caregiver/other misuses alcohol or other substances
2 = Caregiver/other does not provide adequate supervision
3 = Caregiver/other does not clothe child properly or fails to assure that child is clean and well groomed
4 = Caregiver/other does not provide nutritionally balanced meals or age appropriate snacks
5 = Caregiver/other does not provide child with a place to store personal belongings
6 = Caregiver’s home or facility does not have adequate living or sleeping space
7 = Caregiver’s home or facility is unsanitary
8 = Caregiver’s home or facility has hazardous conditions
9 = Caregiver’s home or facility violates fire safety requirements
10 = Caregiver uses corporal punishment (physical discipline) to manage the child’s behavior including the use of the hand or any object, such as a board, fly swatter, paddle, belt, switch, electrical cord, hair brush, or wooden spoon, to hit, strike, or swat the child for any reason
11 = Caregiver uses restraints to manage the child’s behavior including tying with a rope, cord, or other object
12 = The child suffered physical injury resulting from corporal punishment
13 = Caregiver/Other sexually abused or exploited the child
14 = Caregiver/Other makes derogatory remarks about the child and/or child’s family, race, religion, or cultural background
15 = Caregiver consistently threatens the child with removal from the home
16 = Caregiver withholds meals or clothing,
17 = Caregiver denies the child contact or visits with his or her family as punishment
18 = Caregiver assigns chores that are excessive or potentially harmful to the child
19 = Caregiver/Other abuses the child mentally or emotionally, including confinement to a room or closet
20 = Caregiver does not attend to the child’s health care needs.
21 = Lack of health care or medical neglect of child
22 = Caregiver does not attend to the child’s educational needs – e.g., does not send the child to school or take action if the child is not attending school
23 = Caregiver uses any of the following to discipline the child or manage the child’s behavior: slapping, pinching, shaking, biting, pushing, shoving, thumping, or rough jerking
24 = Caregiver curses at the child or uses verbal abuse
25 = Caregiver/other degrades the child in private or public
26 = Caregiver uses chemicals with the child such as mace, sleeping pills, or alcohol
27 = Caregiver consistently threatens the child with physical force
28 = Caregiver forces the child to assume and maintain unnatural positions, such as hold arms out-stretched from the body, pressing the nose against a wall, or forced squatting.
29 = Caregiver orders, allows, or encourages physical discipline or hitting by other children or other people in the home.
30 = Caregiver uses discipline practices such as washing the mouth out with soap or forcing the child to ingest certain foods as punishment, such as hot peppers or hot sauce.
31 = Caregiver requires the child to engage in forced physical exertion such as running laps or doing push-ups.

KEY 2: Action Taken (select up to 3 primary actions)

1 = Police called
2 = Child Protective Services Investigation initiated
3 = Child Protective Services Assessment conducted
4 = Information gathered
5 = Child removed and replaced temporarily
6 = Child removed and replaced permanently
7 = Health or mental health assessment arranged for the child
8 = Mental health assessment arranged for the caregiver
9 = Foster home closed temporarily, license suspended
10 = Foster home closed permanently, license revoked
11 = Alleged perpetrator remove from the home
12 = Alleged perpetrator removed from the facility
13 = Facility closed, license revoked
14 = Counseling provided to child
15 = Counseling provided to caregiver
16 = Training in appropriate child behavior management arranged for caregiver
17 = Evaluation for psychotropic medications arranged for the child
18 = Corrective actions taken to ensure compliance with health, fire and safety requirements
19 = Corrective actions planned but not taken
20 = Caregiver arrested
21 = Caseworker visits to the home increased
22 = Caseworker developed safety plan for caretaker
During the most recent entry into OKDHS custody, is there documentation in the file of any formal allegations/reports of child abuse or neglect identifying the child as the alleged victim while the child was in OKDHS custody?  

1 = Yes  
2 = No

**GRID 6-C- Allegations of maltreatment while in OKDHS custody**

*Instructions for Grid 6-C:*

1) If there were no formal allegations or reports of child abuse or neglect while the child was in OKDHS custody, enter 0 in all of the data boxes.

2) If there are not four allegation dates, enter 0 in all of the data boxes after the last allegation date.

3) If no CPS investigation or assessment was conducted, enter 0 in all of the date boxes in column 4

<table>
<thead>
<tr>
<th>Allegation Date</th>
<th>Allegations (Key 1) up to 3</th>
<th>Alleged Perpetrator (Key 2) up to 2</th>
<th>Date Formal CPS investigation or assessment initiated (Enter 0 if no CPS investigation or assessment was conducted)</th>
<th>Finding Key 3 (enter 0 for NA if no formal investigation)</th>
<th>Reason for lack of formal investigation Key 4 (answer only for formal investigations)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.50 M</td>
<td>D</td>
<td>Y</td>
<td>6.51</td>
<td>6.54</td>
<td>6.56</td>
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<td>6.59 M</td>
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<td>D</td>
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<td>6.72</td>
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<td>6.71</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>6.77 M</td>
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<tr>
<td>6.80</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Key 1: Allegations**

1 = Physical abuse – resulting in serious or life-threatening injuries such as fractures, burns or lacerations, near death conditions, head trauma,

2 = Physical abuse – torture, mutilation, maiming, forced ingestion of a dangerous substance, using physical restrictions, or confinement with life-threatening consequences

3 = Neglect – child left unsupervised or inadequate supervision

4 = Neglect – child alleged to have serious or life-threatening injuries due to lack of supervision

5 = Environmental neglect – Home or facility conditions are hazardous to health, child has inadequate shelter, food, or clothing – food is withheld.

6 = Medical neglect – failure to thrive or child not receiving critical medical services

7 = Educational neglect

8 = Emotional abuse or mental injury of child – include allegations of confinement or bizarre injuries

9 = Sexual abuse or exploitation

10 = PRFC mental illness – not competent to parent

11 = Child mental illness – child in need of services to protect self or others
12 = Child death
13 = PRFC substance abuse – not competent to parent
14 = Child substance abuse
15 = PRFC Child endangerment – PRFC Forces the child to perform chores, physical exercise, or assume positions that have the potential to cause harm to the child.
16 = Other ______

**Key 2: Alleged Perpetrators**
1. Foster mother
2. Foster father
3. Other foster child in the foster home
4. Child’s sibling in the foster home
5. Foster parents biological or adopted child
6. Other person living in the foster home
7. Facility staff member
8. Other child in facility
9. Biological mother/female guardian while on trial reunification
10. Biological mother/female guardian during unsupervised visit
11. Biological father/male guardian while on trial reunification
12. Biological father/male guardian during unsupervised visit
13. Biological sibling in the family home while child is on a trial reunification
14. Other person living in the family home while child is on a trial reunification
15. Other person visiting the family home while child is on a trial reunification
16. Other (specify) ______

**Key 3: Finding**
*Instructions: This column is to be used only if a formal investigation was conducted. If no formal investigation was conducted, enter 0 in the data boxes in the Finding column*

<table>
<thead>
<tr>
<th>Key</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Ruled out</td>
</tr>
<tr>
<td>2</td>
<td>Unsubstantiated – Services recommended</td>
</tr>
<tr>
<td>3</td>
<td>Substantiated – Services recommended</td>
</tr>
<tr>
<td>4</td>
<td>Substantiated – Court intervention recommended</td>
</tr>
<tr>
<td>5</td>
<td>Reasonable exercise of parental discipline</td>
</tr>
</tbody>
</table>

**Key 4: Reason why no formal investigation was conducted**
1. Report was screened out for both investigation and assessment because it did not meet eligibility requirements for acceptance
2. Report did not meet eligibility requirements for a Child Protective Services Investigation, although it was referred for an Child Protective Services Assessment (alternative response)
3. Report did not meet eligibility requirements for a Child Protective Services Investigation and it was not referred for a Child Protective Services Assessment (alternative response)
4. Report referred to the child’s Child Welfare worker for follow up
5. Other (specify) ______
6. No reason indicated in case file

**6.86**  
For any report that was referred for a formal investigation or assessment, is the investigation or assessment report in the child’s case file?
1 = Yes, there are investigation and assessment reports in the case file for all relevant investigations and assessments (alternative response)
2 = There are investigative and assessment reports in the file for some investigations and assessments, but not for others
3 = There are no investigative or assessment reports in the child case record, although there is documentation that a formal investigation was conducted for at least one of the reports and/or a referral was made for an assessment
4 = There were reports, but none of them were referred for a formal investigation or assessment
5 = NA – there were no reports
Grid 6-D – Action taken in response to investigations

Instructions for GRID 6-D. Using the findings reported in Grid 6-C (column 5), complete Grid 6-D for any report for which the finding was 2= Unsubstantiated-services recommended, 3= Substantiated-services recommended or 4= Substantiated-Court intervention recommended.

1) If none of those findings apply, enter 0 in all of the data boxes.
2) If there was a maltreatment allegation but there are no available dates for any of the required information, enter 0 in all of the date boxes.

<table>
<thead>
<tr>
<th>Date of Allegation (Use date reported in Grid 6-C for the relevant allegations)</th>
<th>Date investigation/assessment completed (enter 8 in the date boxes if investigation is still ongoing, and 0 if it is complete, but there is no date in the file)</th>
<th>Action taken during investigation/assessment (Key 1 – up to two actions)</th>
<th>Action taken after investigation completed (Key 1 – up to two actions)</th>
<th>Date action initiated (Use 0s if no date is provided in the file for initiating the action)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.87 M D Y</td>
<td>6.88 M D Y</td>
<td>6.89</td>
<td>6.91</td>
<td>6.93 M D Y</td>
</tr>
<tr>
<td>6.94 M D Y</td>
<td>6.95 M D Y</td>
<td>6.96</td>
<td>6.98</td>
<td>6.100 M D Y</td>
</tr>
</tbody>
</table>

Key 1: Actions
1. = Child removed from the foster home, but other children allowed to remain
2. = All children removed from the foster home.
3. = Trial home visit terminated and child returned to OKDHS placement
4. = Foster home closed permanently (license revoked)
5. = Foster home closed temporarily (license suspended)
6. = Child removed from the care facility but other children allowed to remain
7. = All children removed from the care facility
8. = Care facility closed permanently
9. = Care facility closed temporarily
10. = Facility alleged perpetrator suspended
11. = Employment of facility alleged perpetrator terminated
12. = Police called to investigate perpetrator for potential arrest
13. = No actions identified in the case file
14. = Other –specify _______

6.115 _______ During the child’s most recent entry into OKDHS custody, is there information in the case file that indicates that possible abuse or neglect occurred (including corporal punishment) while the child was in OKDHS custody but it was not formally reported and was not identified as a concern in Grid 6-B? Cite as many sources as applicable
1 = Yes 2 = No

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source _______
Question 6-A: What was the type of possible abuse or neglect indicated in the case file?

Instructions:
1) If there was no indication of possible abuse or neglect that was not reported or identified as a concern in Grid 6-B (i.e., question 6.121 was answered No), enter 0 in all of the data boxes.
2) If there was an indication, enter a 1 for all types that apply and a 0 for all types that do not apply.

- 6.116 Physical injury or maltreatment of child; includes corporal punishment
- 6.117 Sexual abuse or exploitation of child
- 6.118 Derogatory remarks or threats of removal from the home
- 6.119 Withholds meals, clothing, or locks the child out of home as a form of punishment
- 6.120 Denies the child contact or visits with his or her family as punishment
- 6.121 Assigns chores that are excessive or potentially harmful to the child
- 6.122 Mental injury or emotional abuse of child; includes confinement and bizarre injuries
- 6.123 Environmental neglect of child: conditions hazardous to health; inadequate shelter, food, clothing
- 6.124 Lack of health care or medical neglect of child
- 6.125 Inadequate supervision or failure to supervise by parent/caregiver (including facility staff)
- 6.126 Educational neglect of child
- 6.127 Child-on-child sexual abuse due to failure of caregiver (including facility staff) to supervise
- 6.128 Death of child
- 6.129 Other (specify): ______

6.130 For the child’s most recent entry into OKDHS custody, is there documentation in the case file that any formal or informal risk or safety assessments were conducted on an ongoing basis while the child was in his or her initial out-of-home placement?
   1 = Yes, there is documentation indicating that at least one risk or safety assessment was conducted while the child was in the initial placement
   2 = No, there is no documentation indicating that any risk or safety assessment was conducted while the child was in the initial placement
   3 = NA – the child was in the initial placement for less than 1 week

6.131 For the child’s most recent entry into OKDHS custody, is there documentation in the case file that a formal or informal risk or safety assessment was conducted while the child was in any subsequent out-of-home placements?
   1 = Yes  2 = No  3 = NA (the child only had one placement)

If yes, provide Bates stamp number where you found this information ______
If yes, provide efile name of documentation source________
6.132 If at any time during the child’s most recent entry into OKDHS custody the child was placed in a relative/kinship home that was not licensed (including the home of the noncustodial parent), is there documentation in the case file that the safety of the home was assessed prior to placement with the relative?

Instructions: In completing this question, you should consider criminal background checks AND other types of safety assessments, such as a home visit and discussion with relative about safety or risk concerns relevant to the child.

1 = Yes - There is documentation in the case file that the safety of the home was assessed in addition to criminal background checks
2 = No – There is documentation of criminal background checks but no other safety assessment
3 = No – There is no documentation of criminal background checks or other safety assessment
4 = NA – Child was never placed with in an unlicensed relative or kinship foster home

If 1 or 2, provide Bates stamp number where you found this information _______
If 1 or 2, provide efile name of documentation source _______

6.133 If at any time during the child’s most recent entry into OKDHS custody the child was placed in a relative/kinship home that was not licensed (including the home of the noncustodial parent), is there documentation in the case file that formal or informal risk or safety assessments were conducted on an ongoing basis while the child was in this placement.

1 = Yes  2 = No  3 = NA (child not placed with an unlicensed relative or kinship foster home)

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source _______

6.134 If at any time during the child’s most recent entry into OKDHS custody the child was placed in his or her own home on a trial reunification, is there documentation in the case file that the safety of the home was assessed prior to the trial reunification?

1 = Yes  2 = No  3 = NA (child not placed in a trial reunification)

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source _______

6.135 If there is documentation of a safety assessment prior to a Trial Reunification, does the assessment include an evaluation of the parent’s progress in changing the behaviors or conditions that resulted in the removal from the home?

1 = Yes  2 = No  3 = NA (child was not in a trial reunification placement or there is no safety assessment in the file)

If yes, provide Bates stamp number where you found this information _______
If yes, provide efile name of documentation source _______

6.136 If at any time during the child’s most recent entry into OKDHS custody the child was placed in his or her own home on a trial reunification, is there documentation in the case file that formal or informal safety assessments were conducted on an ongoing basis while the child was in the home.

1 = Yes  2 = No  3 = NA (child not placed in a trial reunification)
### SECTION VII: DOCUMENTATION AND MISSING INFORMATION

*Indicate whether the following information was missing from the file or was difficult to find.*

Enter 1 if information **WAS** in the file.

Enter 0 if the information **WAS NOT** in the file.

#### 7.1
- Documentation of history of maltreatment reports and findings

#### 7.2
- ISP form 04KI005E – Child

#### 7.3
- ISP form 04KI012E – Parent

#### 7.4
- ISP form 04KI004E – Placement provider information

#### 7.5
- Identification of permanency goal date changes

#### 7.6
- Visitation plans for siblings

#### 7.7
- Visitation plans for parent-child contacts

#### 7.8
- Case notes, other than contact forms

#### 7.9
- Court reports from permanency hearings

#### 7.10
- Caseworker face-to-face contacts with child documentation

#### 7.11
- Child’s placement history documentation

#### 7.12
- Documentation of filing for TPR if plan is adoption or adoption preparation

#### 7.13
- Childs’ placement history

#### 7.14
- Visitation history with siblings

#### 7.15
- Visitation history with parents

*Clarification: (7.14 and 7.15) If there is evidence of visitation with siblings and parents in case notes or other documents in the case file, then answer 1=Yes, for questions 7.14 and 7.15 even if there is not a formal visitation log.*

#### 7.16
- Caseworker face-to-face contacts with parent documentation

#### 7.17
- Health information

#### 7.18
- School information

#### 7.19
- Other (specify) ________

#### 7.20
- ISP form 04KI014E – ISP Progress Report

#### 7.21:
Describe any information of concern regarding this child’s case that is not captured through the questions on the protocol. Identify BSN for each information area you identify.
GRID 7-A: Placements

Instructions: Please list the first date of each placement and the names of the foster parents or facility for each placement. Once you have completed the information for each of the child’s placements, fill the remaining spaces with 0s.

<table>
<thead>
<tr>
<th>First day of placement (mm/dd/yyyy)</th>
<th>Name of foster parents or facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.22 M D Y</td>
<td>7.22a</td>
</tr>
<tr>
<td>7.23 M D Y</td>
<td>7.23a</td>
</tr>
<tr>
<td>7.24 M D Y</td>
<td>7.24a</td>
</tr>
<tr>
<td>7.25 M D Y</td>
<td>7.25a</td>
</tr>
<tr>
<td>7.26 M D Y</td>
<td>7.26a</td>
</tr>
<tr>
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<td>7.27a</td>
</tr>
<tr>
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<td>7.28a</td>
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<tr>
<td>7.52 M D Y</td>
<td>7.52a</td>
</tr>
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</table>
APPENDIX E: SAMPLING DETAILS

Sampling Process

The two tables below show the proportional results of the total population and the random sample selected for case review and analysis by case plan goal and by placement type.

<table>
<thead>
<tr>
<th>Case Plan Goal</th>
<th>Population Number</th>
<th>Population Percent</th>
<th>Sample Number</th>
<th>Sample Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Return to Own Home</td>
<td>3240</td>
<td>48.3</td>
<td>185</td>
<td>49.3</td>
</tr>
<tr>
<td>Adoption</td>
<td>2463</td>
<td>36.8</td>
<td>129</td>
<td>34.4</td>
</tr>
<tr>
<td>Planned Alternative Permanent Placement</td>
<td>434</td>
<td>6.5</td>
<td>31</td>
<td>8.3</td>
</tr>
<tr>
<td>Adoption Preparation</td>
<td>278</td>
<td>4.1</td>
<td>14</td>
<td>3.7</td>
</tr>
<tr>
<td>Guardianship</td>
<td>201</td>
<td>3.0</td>
<td>12</td>
<td>3.2</td>
</tr>
<tr>
<td>Missing Data</td>
<td>45</td>
<td>0.7</td>
<td>2</td>
<td>0.5</td>
</tr>
<tr>
<td>Maintain in Own Home</td>
<td>39</td>
<td>0.6</td>
<td>2</td>
<td>0.5</td>
</tr>
<tr>
<td>Emancipation</td>
<td>1</td>
<td>X&lt; 0.1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6701</strong></td>
<td><strong>100</strong></td>
<td><strong>375</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Proportionally, the sample population is generally representative of the total population of children in custody as it relates to the child’s most recent case plan goal. Children with goals of Return to Own Home and Planned Alternative Permanent Placement were slightly over-represented, while children with goals of Adoption and Adoption Preparation were slightly under-represented. The one case plan goal that was not explicitly represented in the case review sample was children with a goal of Emancipation, of which there was only one identified in the total population, although CSF believed it likely that some of the children with a goal of Planned Alternative Permanent Placement would be working toward a goal of emancipation.
Table 32
Placement Type

<table>
<thead>
<tr>
<th>Placement Type</th>
<th>Population Number</th>
<th>Population Percent</th>
<th>Sample Number</th>
<th>Sample Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Related Foster Care</td>
<td>2186</td>
<td>32.6</td>
<td>134</td>
<td>35.7</td>
</tr>
<tr>
<td>Kinship Foster Care</td>
<td>1970</td>
<td>29.4</td>
<td>106</td>
<td>28.3</td>
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<tr>
<td>Own Home</td>
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<td>11.7</td>
<td>40</td>
<td>10.7</td>
</tr>
<tr>
<td>Therapeutic Foster Care</td>
<td>680</td>
<td>10.2</td>
<td>35</td>
<td>9.3</td>
</tr>
<tr>
<td>Other Placements</td>
<td>570</td>
<td>8.5</td>
<td>31</td>
<td>8.3</td>
</tr>
<tr>
<td>Residential Facility</td>
<td>355</td>
<td>5.3</td>
<td>20</td>
<td>5.3</td>
</tr>
<tr>
<td>Shelter</td>
<td>70</td>
<td>1.0</td>
<td>4</td>
<td>1.1</td>
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<tr>
<td>Missing Data</td>
<td>43</td>
<td>0.6</td>
<td>1</td>
<td>0.3</td>
</tr>
<tr>
<td>No Removal No Placement</td>
<td>30</td>
<td>0.5</td>
<td>3</td>
<td>0.8</td>
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<tr>
<td>Group Home</td>
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<td>0.2</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>AWOL</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrelated Foster Care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6701</strong></td>
<td><strong>100</strong></td>
<td><strong>375</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

Comparison of the sample population to the total population by the most recent placement type also indicated a relatively proportional sample. It should be noted that of the 24 children selected to represent congregate care proportionally, none had a most recent placement of group home, of which 14 children (0.21%) of the total population were placed as of March 1, 2010. However, CSF did not stratify within the congregate care placement types because of the low numbers.
APPENDIX F: QUALITY ASSURANCE GUIDELINES

Oklahoma Case Review
Quality Assurance Guidelines

1. Ensure that every question has a response and that there are no blanks

2. Conduct spot-checks on source information (Bates stamp)

3. Ensure case readers answer appropriate follow-up questions when required by the flow of the instrument

4. Ensure there is consistent logic to the case reader’s responses for Section III Part A Sibling Placements and Part B Sibling Visitation

5. Ensure Section IV Part D is completed when necessary based on the child’s age as described in the instructions

6. Ensure Section IV Part E is completed if permanency goal was return home at anytime during the child’s most recent entry

7. Ensure Section V Part B Adoption is completed based on child’s permanency goal

8. If 6.115 is answered “Yes” look closely at answer to Question 6-A and the documentation reference provided for these questions