Rhode Island Department of Children, Youth & Families Andrew C. v Raimondo Monitoring Team Report Reporting Period #4 (January 1, 2020 – June 30, 2020)

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Description of Scope of Review

As outlined in the Settlement Agreement described in the case of *Andrew C. v. Raimondo*, the Monitoring Team is comprised of the Office of the Child Advocate (OCA) and the Data Validator. The Data Validator has since been hired by the Rhode Island Department of Children, Youth and Families (DCYF) and is identified as Public Consulting Group, Inc. (PCG). As outlined in Section 2(d) of the Settlement Agreement, the Data Validator is the "…final arbiter of the timeliness, accuracy of the methodology, as well as the statistical validity and reliability of the DCYF data…" As outlined in Section 2(f) of the Settlement Agreement, the OCA shall provide oversight to the commitments in the Agreement. The OCA "…shall receive and review the progress reports that have been determined to be valid and reliable by the Data Validator." The OCA "…shall confirm whether the commitment has been met or not met."

As part of the terms of the Settlement Agreement, DCYF must measure its performance on twenty indicators designed to ensure that children in out-of-home care due to an allegation of abuse or neglect receive the highest possible level of care. These outcomes include measures designed to evaluate the extent to which (a) children are placed in the most appropriate placement setting; (b) steps are taken by DCYF to maintain each child's connection to his or her family; (c) foster homes are properly licensed and that background checks are completed for all household members; (d) reports of abuse or neglect are screened in, investigated, and completed in a timely manner; and (e) case plans for children in out-of-home care are updated in a timely manner and contain the elements required by law.

Disposition of Progress Report for Fourth Reporting Period

The Monitoring Team is generating this report in compliance with the roles and responsibilities set forth in the Settlement Agreement. During the fourth Reporting Period, during which DCYF's performance was measured for the six-month period January 1, 2020 to June 30, 2020, the Monitoring Team continued to encounter issues which impacted its ability to validate the data and confirm whether some of the commitments in the Settlement Agreement were met.

Background and History of Concerns Regarding Statistical Validity in Prior Reporting Periods

In January 2020, PCG vocalized concerns regarding the statistical validity and reliability of the data. Based on the sample sizes evaluated, the Monitoring Team was unable to validate all of the data and outcomes for the first two Reporting Period. Subsequently, the Monitoring Team developed a draft report for DCYF leadership outlining the concerns with the sample sizes utilized during the first two Reporting Periods and presented the report on January 23, 2020. At the request of all parties, the Monitoring Team finalized the report which provided further specifics of the Monitoring Team's response and recommendations. The final report outlining the concerns and recommendations of the Monitoring Team was provided to all parties on March 16, 2020.

It was the intention of the Monitoring Team to work with the parties to resolve the issues identified in the March 2020 report to ensure the statistical reliability and validity of the data for prior Reporting Periods, as well as the current and future Reporting Periods. The Monitoring Team has discussed these concerns and recommendations with all parties on numerous occasions since the issues were first brought to the attention of DCYF leadership in January 2020. The Monitoring Team was hopeful that the recommendations would be implemented timely to prevent the same deficiencies from occurring in future Reporting Periods, to achieve progress with the lawsuit, and to prevent the State from incurring any additional litigation costs during a time of such fiscal uncertainty.

This discussion is still underway between the parties. The Monitoring Team had to proceed with its obligations under the Settlement Agreement and finalize the findings for all Reporting Periods based on the data provided. The statistical validity of the sample sizes, among other issues, remain unresolved. Therefore, many of the outcomes for Reporting Period 4 could not be validated. In accordance with Section C(2)(e) of the Settlement Agreement, the Monitoring Team report is a public document.

Following the conclusion of the fourth Reporting Period, PCG analyzed data provided by DCYF summarizing the Department's performance during the Reporting Period. From July through December 2020, PCG and OCA, in their joint role as the Monitoring Team, reviewed and discussed the data, the review process, and the extent to which statewide performance was able to be validated.

During the fourth Reporting Period, DCYF evaluated their performance across twenty measures in order to gauge compliance with the terms of the Settlement Agreement. PCG conducted a quantitative analysis of data provided by DCYF for the entire statewide universe of applicable cases, clients or events (for example, children entering care during a period) to determine whether DCYF met the criteria described in the Settlement Agreement for that measure; the results of these analyses were used to identify whether DCYF met the threshold for compliance described in each section of the Settlement Agreement.

In addition to this quantitative analysis of statewide outcomes, many of the measures outlined in the Settlement Agreement require that a qualitative review be conducted for validation of the measure. PCG, in its role as Data Validator, conducted qualitative reviews using either a data validation process or a review instrument, dependent upon the measure. The data validation process consisted of selecting a random sample of 100 records from the universe of eligible records and reviewing the original case documentation in order to verify the accuracy of the data as it is recorded in the Rhode Island Children's Information System (RICHIST) – Rhode Island's Statewide Automated Child Welfare Information System – to identify whether the data used to calculate the outcomes were valid and accurate. Review instruments were used for validation of the measures where the data was not easily quantifiable or was not recorded electronically and were used for only six measures: Visitation 6.2 (quality of caseworker visitation), each of the four Licensing measures (7.1 through 7.4) and Case Planning 10.3 (case plan Adoption Assistance and Child Welfare Act (AACWA) of 1980 compliance). For these measures, PCG developed review instruments to conduct the qualitative review.

To facilitate these reviews and the calculation of outcomes across each of the measures, DCYF supplied PCG with data files that were extracted and processed from RICHIST using syntax developed by DCYF. PCG conducted a review of the code used to derive the results for the fourth Reporting Period between January 1, 2019 and April 30, 2019, as part of the evaluation of the validity and accuracy of data compiled during Reporting Period 1. The syntax review consisted of an analysis of the database extraction code, the syntax used to derive exclusions and evaluate outcomes, and the sample size and methodology used to calculate the percentages reported and whether they align with the criteria outlined in the Settlement Agreement. PCG's review did not uncover any irregularities in any of the syntax used to calculate the percentages for any of the measures. While PCG did not discover any irregularities or apparent errors with the syntax during the first through fourth Reporting Periods, it will continue in future periods to validate the syntax utilized by DCYF to generate the samples and calculate statewide outcomes. In addition PCG will continue to conduct reviews for each measure in order to validate the accuracy of the outcomes reported by DCYF. During the fourth Reporting Period, PCG accompanied DCYF staff in generating and transmitting all data extracts to verify that the data provided by DCYF represented the true and complete extract of the processing scripts.

Following this syntax review, PCG selected a random sample of up to 100 records for each of the outcome measures and conducted a qualitative review to verify that the activities indicated by DCYF in the data were appropriately recorded and documented. During this review, PCG researched individual case and client records in RICHIST, and recorded the date(s) of the relevant

activity. These dates were then compared to the outcome calculated by the provided syntax to verify that the results were concordant with one another. As outlined in the following section, for fifteen of the 20 outcomes, the number of records reviewed was insufficient to achieve an appropriate and consistent level of statistical validity of the results.

The Monitoring Team determined that some of the samples provided were not large enough to be considered statistically significant. Without a statistically significant sample size, the Monitoring Team could not confirm whether some of the commitments in the Settlement Agreement were met for Reporting Period 4. There were no standards included in the Settlement Agreement outlining statistical significance or statistical validity, which led to samples that were not representative of the full population of records (or "universe") evaluated in the outcome measurement.

The Settlement Agreement resulting from the case of *Andrew C. v. Raimondo* describes a twotiered approach for evaluating the extent to which DCYF is achieving the outcomes described in the Settlement Agreement across twenty measures. The first step in measuring compliance on each measure is to calculate the statewide outcome; for those measures for which compliance can be calculated using data from RICHIST, outcomes are calculated programmatically (that is, using automated routines to parse and analyze the data for each case and categorize it as a "success" or "failure" on that measure). For sixteen of the 21 measures, this approach was employed, and outcomes were calculated across the entire universe of records to which the measure applies. For five measures, however, the Settlement Agreement describes a qualitative review process to identify outcomes on a case-by-case basis. DCYF is responsible for drawing a random sample of records, which are reviewed by the DCYF Quality Review team.

Measure	How Statewide Outcomes Calculated
Assessments 1.1	Universe
ASC ¹ Placements 2.2	Universe
ASC Placements 2.3a	Universe
ASC Placements 2.3b	Universe
Congregate Care 3.1	Universe
Congregate Care 3.2	Universe
Sibling Placement 4.1	Sample
Visitation 6.1	Universe
Visitation 6.2	Sample
Visitation 6.3b	Sample
Visitation 6.4b	Sample
Licensing 7.1	Universe
Licensing 7.2	Universe
Licensing 7.3	Universe
Licensing 7.4	Universe
CPS ² 8.1	Universe
CPS 8.2	Universe
CPS 8.3	Universe

Table 1, below, describes how DCYF calculated its statewide outcomes for each measure.

¹ Assessment and Stabilization Center

² Child Protective Services, the investigation division of DCYF

	How Statewide	
Measure	Outcomes Calculated	
Case Planning 10.2	Universe	
Case Planning 10.3	Sample	
Table 1: Method for Calculating Statewide Outcomes		

For the sixteen measures where outcomes can be measured for every eligible case, client or event statewide using data extracted from RICHIST, no sampling approach is required. However, for the five measures which a qualitative review process must be utilized to measure success against a sample of records, the Monitoring Team continues to recommend that the number of records reviewed by DCYF be sufficiently large to achieve 95 percent confidence with a three percent margin of error³ across each measure. This sample size will vary depending on the size of the statewide universe for the measure being evaluated. Based on the number of records in those universes during the Reporting Period, the number of records that should be reviewed by DCYF to reach this level of statistical significance is described in Table 2, below.

Measure	Universe Size	Recommended DCYF Sample Size	
Sibling Placement 4.1	224	186	112
Visitation 6.2	1,775	667	357
Visitation 6.3b	184	157	146
Visitation 6.4b	1,155	555	294
Case Planning 10.3	1,775	667	359

Table 2: Recommended DCYF Sample Sizes, Reporting Period 4

In the fourth Reporting Period, the number of records reviewed by DCYF for these five measures was insufficient to achieve 95 percent confidence in the results within a three percent margin of error.

PCG, in its role as Data Validator, employed a second review process on each of these five measures to verify that the outcomes reported by DCYF (whether via an automated calculation or a review process) were accurate, and that the processes which DCYF employed to evaluate statewide outcomes (whether algorithmically-derived or via a record review process) are sound. In order to verify the validity of DCYF's findings, PCG conducted a second-level review of a random sample of records on each of the twenty measures. PCG's initial proposal was to review 100 records on each measure; this "static" sample size resulted, however, in varying levels of statistical significance for each measure during the fourth Reporting Period. As the size of the applicable universe for each measure will vary for each Reporting Period, so too will the recommended sample sizes vary slightly in future Reporting Periods.

In order for PCG's qualitative review findings to have a consistent level of statistical validity, the Monitoring Team recommends that the number of records reviewed by PCG on each measure be

³ In lay terms, this means that there is a 95 percent likelihood that the aggregate outcomes calculated from the reviews conducted against the sample will fall within three percent of the actual statewide outcome. The approach by which these required sample sizes were derived is described in more detail in Appendix A, *Required Sample Size for Estimating Outcomes*.

of sufficient size such that if errors exist in only one percent of records initially reviewed by DCYF, that there is a 99 percent probability of at least one erroneous record being identified in the sample. While PCG recommends that DCYF conduct a sufficient number of reviews for the five "DCYF-reviewed" measures in order to attain 95 percent confidence in the statewide outcome, PCG recommends a higher standard when PCG is verifying the record-level outcomes reported by DCYF in order to maximize the likelihood of identifying errors – whether systemic or record-specific – in how those outcomes were identified. As such, PCG recommends an approach that will be 99 percent likely to identify any errors, assuming those errors are made in one percent of records.

The sample sizes for each measure that will achieve that level of statistical validity is provided in Table 3.

	How Statewide	Reporting Period #4 _(January 1, 2020 – June 30, 2020)		
	Outcomes	U	Recommended	
Measure	Calculated	Universe Size ⁴	PCG Sample Size	
Assessments 1.1	Universe	442	302	
ASC Placements 2.2	Universe	41	41	
ASC Placements 2.3a	Universe	32	32	
ASC Placements 2.3b	Universe	9	9	
Congregate Care 3.1	Universe	81	81	
Congregate Care 3.2	Universe	121	121	
Sibling Placement 4.1	Sample	186	185	
Visitation 6.1	Universe	2,200	450	
Visitation 6.2	Sample	667	357	
Visitation 6.3b	Sample	157	156	
Visitation 6.4b	Sample	555	333	
Licensing 7.1	Universe	286	257	
Licensing 7.2	Universe	377	295	
Licensing 7.3	Universe	186	143	
Licensing 7.4	Universe	127	126	
CPS 8.1	Universe	3,274	437	
CPS 8.2	Universe	2,634	426	
CPS 8.3	Universe	2,634	426	
Case Planning 10.2	Universe	1,622	404	
Case Planning 10.3	Sample	667	357 Derived 4	

Table 3: Recommended Data Validator Sample Sizes, Reporting Period 4

⁴ For those measures where outcomes are calculated against the statewide universe of records, the "Universe Size" is the number of records statewide that are "eligible" to be evaluated on the measure. For those five measures where outcomes are calculated through a Quality Review process employed by DCYF against a random sample of records (4.1, 6.2, 6.3b, 6.4b and 10.3), the ""Universe Size" reflects the recommended DCYF sample sizes described in Table 2.

The Settlement Agreement resulting from the case of *Andrew C. v. Raimondo* describes a twotiered approach for evaluating the extent to which DCYF is achieving the outcomes described in the Settlement Agreement across twenty measures. Section 1.1 of the Settlement Agreement describes DCYF's obligation to conduct an assessment for all children entering out-of-home care due to a report or suspicion of abuse or neglect, as well as those whose placement setting changed following a removal due to a report or suspicion of abuse or neglect.

The Settlement Agreement does not mandate a specific tool to be utilized when conducting these assessments, instead stating only that such assessments:

"[include] but [are] not limited to the assessments utilized by DCYF or the clinical opinion of a licensed health care professional in an Assessment and Stabilization Center, mental health inpatient facility, or a facility of equivalent level and type."

During the first four Reporting Periods under the Settlement Agreement, DCYF's statewide outcome on this measure was evaluated by considering whether any of five different tools were utilized to assess the needs of the child in or entering placement:

- Level of Need Assessment;
- Foster Care Rate Setting Assessment;
- Safety Assessment;
- Placement Request; or
- Risk and Protective Capacity Assessment.

The context in which "assessments" are used in Section 1 of the Settlement Agreement suggests that the intent is for a timely Level of Need Assessment to be completed for each child to better inform placement decisions and determine service needs. For example, Section 3.1(a) of the Settlement Agreement (regarding placements into a congregate care setting) indicates that a child should only be placed in congregate care if the child has treatment needs that require placement in a congregate setting, as found during the assessment process referenced in Section 1. This further suggests that the assessment completed pursuant to Section 1 should be evaluating the needs of the child.

As referenced in the Monitoring Team's reports for the first three Reporting Periods, DCYF continued in Reporting Period 4 to "count" some assessments as valid that did not evaluate the needs of the child. The Monitoring Team recommends that DCYF re-examine the structure of the assessments currently being conducted of children entering care or changing placements so that, at a minimum, the needs of the child are assessed across several different functional areas.

An example of a tool that assesses the needs of the child across several functional areas is the Child and Adolescent Needs and Strengths (CANS). This assessment includes the following domains:

• Life Domain Functioning, which may include (but not be limited to) the child's sleep function/habits, social functioning, sexual development, recreational activities,

development, communication skills, judgement, acculturation, legal challenges, physical health needs, daily functioning, and where applicable, independent living skills.

- Child Strengths, which may include (but not be limited to) interpersonal skills, sense of optimism, educational achievement, vocational needs, talents and interests, spiritual or religious needs, community life, permanency of relationships, and natural supports.
- School Functioning, which may include (but not be limited to) behavior, attendance and achievement in school, or the child's current educational setting.
- Planned Permanent Caregiver Strengths and Needs, which may include (but not be limited to) supervision, involvement with care, parenting knowledge, organizational skills, social resources, residential stability, physical and mental health, substance use or misuse, development, access to care, family stressors, self-care, employment, educational achievement, legal challenges, financial resources, transportation arrangements, and safety.
- Child Behavioral/Emotional Needs, which may include (but not be limited to) psychosis, impulsivity/hyperactivity, depression, anxiety, oppositional behavioral, overall conduct, adjustment to trauma, anger control, substance use or misuse, and eating disturbances.
- Child Risk Behaviors, which may include (but not be limited to) suicide risk, self-mutilation, other self-harming behaviors, danger to others, sexual aggression, runaway tendencies, delinquent behavior, fire-setting, sexually reactive behavior, bullying, and overall social behavior.

Section 1 of the Settlement Agreement also stipulates that the clinical opinion of a licensed health care professional employed by an ASC, mental health inpatient facility, or facility of equivalent level or type may be utilized to assess the needs of the child entering care or changing placements. This clinical opinion, provided it is documented in the child's case file in RICHIST, will also be considered as a valid assessment, in lieu of a DCYF-administered assessment that meets the above minimum standards.

At the onset of the Monitoring Team's work in 2018, PCG recommended a qualitative review of the assessments to confirm the quality and accuracy of the information. DCYF did not include this qualitative review in the scope of work required of the Monitoring Team, but the Monitoring Team continues to recommend adding this step to the process. At present, the scope of work is limited to a review of the list of placements occurring during each Reporting Period, and the date of the assessment that fell within the timeline of the Settlement Agreement. This review entails only verifying that the assessments in each case occurred on the date shown.

In addition to the current review that confirms that DCYF conducted timely assessments, the Monitoring Team recommends conducting a qualitative review that confirms the thoroughness and accuracy of the assessments. In a qualitative review, the Monitoring Team would confirm that the worker followed a standard process for each assessment e.g., documentation was used to inform the placement and service needs assessment, whether the individual completing the assessment personally met with the child, and if DCYF spoke with a provider(s) to inform the assessment (e.g. medical providers, clinical staff, etc.). The Monitoring Team respectfully requests consideration for the completion of a qualitative review of the assessments used to determine the placement decisions.

When evaluating whether an assessment of a child's service and/or treatment needs align with the intention of the Settlement Agreement, the Monitoring Team also recommends that PCG's

reviews indicate whether a face-to-face visit with the child occurred, and whether the needs of the child were discussed with the placement provider(s) or their clinical mental/behavioral health staff. In order to identify whether the evolving needs of the child are considered at the important touchpoints of a child's removal from the home or change of placement while in the custody of the Department, the Monitoring Team recommends that PCG evaluate whether the assessment has been updated, by comparing the findings and language of the current assessment to the most recent assessment completed for that child within the last 12 months. The Monitoring Team also wants to verify that the assessment process reviews the child's needs on an ongoing basis, which will allow DCYF to ensure that they are placed in the most appropriate and least restrictive placement. A process should be carved out for the instances where a child is clinically ready to be discharged from a restrictive setting but there are no qualifying placements available. The Monitoring Team recommends that these qualitative reviews be conducted against a statistically valid sample of removals and placement changes from each of the first four Reporting Periods, as well as in subsequent Reporting Periods.

Section 6.4: Parent-Child Visitation

As discussed above, the quality of visitation is being evaluated in the context of visitation between the caseworker and a child. This is reviewed utilizing the tool for the federal Child & Family Services Reviews (CFSR) process. However, Section 6.4 states that,

"[a]s with other areas of casework, DCYF shall assure the quality of parent-child visits through the continuous quality improvement process and provide documentation of the results of the continuous quality improvement process to the Monitoring Team and Plaintiffs' Attorneys."

This suggests that the Department is, or should be, conducting this quality improvement process for other areas of casework; that process, however, is not referenced in other sections of the Settlement Agreement, nor are the scope or minimum requirements of such a process defined. The Monitoring Team is seeking clarification on which sections and areas of casework would be subject to the aforementioned quality improvement process to verify whether this requirement has been completed.

Additionally, the Settlement Agreement requires that DCYF provide the Monitoring Team with documentation of the results of their continuous quality improvement process. To date, the Monitoring Team has not received this documentation and the requirement has not been met.

Section 8.3 Child Protective Services

Under Section 8.3, the Department is mandated to complete investigations within the time frames set forth in DCYF policy. However, should the investigation be continued due to circumstances beyond the control of DCYF, the extension of the time frame must be approved by a supervisor and must be accompanied by a safety assessment of the child. The Monitoring Team is seeking clarification whether the required safety assessment must be a new safety assessment completed subsequent to the request for an extension or whether the safety assessment completed during the pendency of the investigation is acceptable.

Under the terms of Section 1 of the Settlement Agreement, DCYF is being evaluated on the extent to which the Department conducts assessments for children entering out-of-home care resulting from a report or suspicion of abuse or neglect; those assessments must be conducted within 30 days of the removal from the home. DCYF is also responsible for assessing the needs of any child who changes placement settings subsequent to a removal due to a report or suspicion of abuse or neglect. Upon such a change in placement, the assessment must be conducted in the period between 60 days prior to the placement change and fourteen days following the placement change.

Four "exceptions" to this requirement are outlined in the Settlement Agreement:

- a) the placement move is to a placement setting that serves an equivalent level of need;
- b) the placement change occurs because the placement is no longer available for reasons unrelated to the changing needs of the child;
- c) the placement change is occurring to a child not in DCYF legal custody due to a report or suspicion of abuse or neglect, or the child is open to DCYF as a juvenile justice case and the placement change occurs due to juvenile justice or behavioral health reasons; or
- d) the placement change is occurring due to an order of the Rhode Island Family Court.

One outcome measure is described in the Settlement Agreement:

Assessments 1.1: Children entering care or changing placements during the Reporting Period, excepting entries or placement changes falling under one of the four exceptions described above, must receive an assessment within the designated timeframes. DCYF must achieve a successful outcome in 85 percent of removals and placement changes.

After attaining the goal described above for two consecutive six-month periods, DCYF shall exit from monitoring under Section 1 of the Settlement Agreement.

Assessments 1.1: All children removed/changing placements will be assessed.

Review of Universe Syntax and Statewide Outcome

DCYF identified 442 instances of a child being removed from the home or changing placement settings during the fourth Reporting Period, excluding those placement changes between placements that serve equivalent levels of need.

Of the 442 removals or placement changes, DCYF documented an assessment being conducted within the designated timeframe for 404 removals or placement changes, resulting in a statewide success rate of 91.40 percent. While this exceeds the 85 percent threshold described in the Settlement Agreement as previously noted, the number of removals and placement changes reviewed by PCG did not allow the Data Validator to validate the results at a sufficient level of statistical significance. Therefore, the Monitoring Team was unable to confirm that the standard outlined in the Settlement Agreement was met.

In addition, the Monitoring Team reiterates its recommendation that DCYF re-examine the nature of assessment being conducted on behalf of children entering care or changing placements to verify that in all instances of a child being removed from the home or an out-of-home placement setting, the needs of the child are assessed across all relevant functional areas.

Case Reviews

PCG identified a random sample of 100 records out of the universe of all removals or placement changes identified by DCYF as having had an assessment conducted within the timeframes mandated by the Settlement Agreement; PCG then verified that assessments were conducted within the appropriate timeframes. In each of the removals and placement changes reviewed, PCG found that an assessment was conducted within the designated timeframe.

Statistical Validity of Samples

DCYF evaluated outcomes for all 442 eligible removals or placement changes statewide, and the statistical validity of those results did not need to be calculated. PCG's review of 100 removals/placement changes (representing 27 percent of the statewide universe) is concordant with DCYF's findings with a margin of error of \pm 7.6 percent at a 95 percent confidence level. As described in the "Monitoring Team Sample Size Recommendations" section, the number of removals and placement changes reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of children entering care or changing placements during the fourth Reporting Period where the move was not to an equivalent level of need (442 instances), the Monitoring Team recommends increasing the number of reviews conducted by PCG from 100 removals and placement changes per Reporting Period to a sufficient number to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of reviews. Based on the 442 applicable instances during the fourth Reporting Period, 302 reviews would need to be conducted in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during each of the first four Reporting Periods exceeded the 85 percent threshold described in the Settlement Agreement, the Monitoring Team recommends that these reviews be retroactively conducted on removals and placement changes from two consecutive prior Reporting Periods. This will permit the findings from each Reporting Period that DCYF met the standard described in the Settlement Agreement to be appropriately credited to the Department, and – should the findings of the review be concordant with the outcomes reported by DCYF – this will permit the Monitoring Team to validate the statewide outcomes and support DCYF's exit from Section 1 of the Settlement Agreement.

Assessments 1.2: Exceptions to Section 1.1

Section 1.2 of the Settlement Agreement describes the exceptions to DCYF's obligations under Section 1.1 (as summarized in the previous section of this report) and does not include a requirement to calculate outcomes at the statewide level.

Assessments 1.3: Children Unavailable for Assessment

Section 1.3 of the Settlement Agreement describes the circumstances under which the requirement to conduct an assessment may be waived if the child is unavailable – for example, due to the child's runaway status, placement in a psychiatric hospital, or placement out of state. DCYF did not identify any children during the fourth Reporting Period whose assessment was delayed due to the unavailability of the child.

Corrective Action Plan Status

Section C(3) of the Settlement Agreement describes a process by which DCYF is responsible for developing a Corrective Action Plan (CAP) "should any of the Commitments set forth in this Agreement not be met for two consecutive 6-month Reporting Periods." While DCYF's performance on Section 1 exceeded the standard during the first two Reporting Periods, as outlined above, the Monitoring Team has been unable to fully validate the results due to the case reviews being neither of a sufficient number to achieve a minimum level of statistical validity, nor a sufficient depth to validate that each reviewed assessment evaluated the needs of the child. Until these questions are resolved, DCYF's responsibility to produce a CAP as it pertains to Section 1 of the Settlement Agreement remains.

Under the terms of Section 2 of the Settlement Agreement, DCYF is being evaluated on the extent to which the Department minimizes the number of children placed in shelters or "assessment and stabilization centers" (ASC). As described in the Settlement Agreement, no child should be placed in an ASC unless:

- a) the child has a demonstrated need for placement in an ASC;
- b) the placement is an emergency removal, immediate removal from the home is necessary and the ASC placement is in the best interest of the child per the professional judgment of the DCYF caseworker; or
- c) the placement at an ASC is due to an order of the Rhode Island Family Court.

For those children who are placed in an ASC, DCYF is responsible for conducting a review of the child's continued placement at least every 14 days until the child is discharged from the ASC; when a child is placed in an ASC longer than 60 days, DCYF must have documented approval for the continued placement from the DCYF Director or the Director's designee.

Three outcome measures are described in the Settlement Agreement:

- **ASC 2.2:** Placements during the Reporting Period into an ASC must be for one of the three exception reasons described above. DCYF must achieve a successful outcome in 100 percent of ASC placements (that is, all ASC placements must be for one of the three exception reasons).
- ASC 2.3a: Children placed into an ASC must have the appropriateness of that continued placement reviewed by DCYF at least every fourteen days. DCYF must achieve a successful outcome in 90 percent of ASC placements longer than fourteen days.
- **ASC 2.3b:** Children placed into an ASC for longer than 60 days must have the written approval of the Director or the Director's designee for the continued placement. DCYF must achieve a successful outcome in 95 percent of ASC placements longer than 60 days.

After attaining all three of the goals described above for two consecutive six-month periods, DCYF shall exit from monitoring under Section 2 of the Settlement Agreement. During each of the first two Reporting Periods, DCYF met or exceeded the threshold described for each of the three measures described in Section 2 of the Settlement Agreement. In addition, DCYF permitted the Data Validator to review nine placements during those Reporting Periods for which, subsequent to a removal or placement change, the caseworker indicated that the removal was for emergency reasons, and that the placement in the ASC was in the best interest of the child according to the

professional judgment of the caseworker.⁵ In each of those nine placements, the Data Validator found sufficient documentation of the decision-making process underlying that exercise of professional judgement, and the Monitoring Team was able to fully validate the results.

While DCYF's performance on this measure was sufficiently robust during the first two Reporting Periods that the Monitoring Team supports DCYF's exit from Section 2 of the Settlement Agreement effective June 30, 2019 (at the conclusion of the second Reporting Period), the Court has not yet approved DCYF's exit from that section of the Settlement Agreement. The Monitoring Team therefore continued to review and validate the data from Reporting Period 4 under the terms of Section 2 of the Settlement Agreement.

ASC 2.2: No placements in ASCs

Review of Universe Syntax and Statewide Outcome

DCYF identified 41 children who were placed in an ASC during the fourth Reporting Period. In each of the 41 placements, DCYF had an exception reason documented for the placement, resulting in a statewide outcome of 100 percent. This meets the 100 percent threshold described in Section 2.2 of the Settlement Agreement.

Case Reviews

PCG conducted a review of the 41 children who had placements into an ASC during the period where DCYF identified that an exception justifying the ASC placement was present in order to verify that such documentation was present within RICHIST. In each of the 41 placements, PCG found that DCYF had appropriately documented the reason for the placement; in four of those placements, however, the caseworker's professional judgment was cited as underlying the ASC placement. The Data Validator did not review the documentation supporting that exercise of professional judgment.

Statistical Validity of Samples

DCYF evaluated outcomes for all 41 ASC placements occurring statewide during the fourth Reporting Period, and the statistical validity of those results did not need to be calculated. Similarly, since PCG reviewed the full universe of applicable placements, the statistical validity of PCG's review did not need to be calculated, and no further changes to the sampling or review process is recommended.

Monitoring Team Recommendation

During the fourth Reporting Period, the size of the universe of children entering into an ASC placement with an exception reason present (41 children) was sufficiently small that PCG conducted a review of all such placements. Should DCYF be required to continue assessing and reporting on its performance into the fourth Reporting Period, the Monitoring Team requests that the Data Validator be afforded the same opportunity as in the first two Reporting Periods – namely, to review the four placements on which the caseworker's professional judgment was noted as justifying the ASC placement

⁵ During the first Reporting Period (July-December 2018), only one case referenced this "professional judgement" exception; during the second Reporting Period (January-June 2019), eight cases had such an exception noted.

ASC 2.3a: Reviews for 14-day ASC placements

Review of Universe Syntax and Statewide Outcome

DCYF identified 32 children whose placement in an ASC reached or exceeded the 14-day threshold during the Reporting Period. In each of the 32 placements, DCYF documented a review as occurring at least every fourteen days, resulting in a statewide outcome of 100 percent. This exceeds the 90 percent threshold described in Section 2.3a of the Settlement Agreement.

Case Reviews

PCG conducted a review of each of the 32 placements into an ASC identified by DCYF as having been reviewed every fourteen days which overlapped any point of the Reporting Period in order to verify that DCYF conducted reviews of the appropriateness of the continued placement. In each of the 32 placements, PCG found that DCYF had conducted such a review and documented the review correctly.

Statistical Validity of Samples

DCYF evaluated outcomes for all 32 ASC placements of longer than fourteen days in an ASC which overlapped any point of the Reporting Period, and the statistical validity of those results did not need to be calculated. Similarly, since PCG reviewed the full universe of eligible placements, the statistical validity of PCG's review did not need to be calculated, and no further changes to the sampling or review process is recommended.

Monitoring Team Recommendation

During the fourth Reporting Period, the size of the universe of children whose placement in an ASC placement was 14 days or longer (32 children) was sufficiently small that PCG conducted a review of all placements. No change to the reviews conducted during the fourth Reporting Period will be required; therefore, the Monitoring Team has confirmed that this benchmark has been met for Reporting Period 4.

ASC 2.3b: Approval for 60-day ASC placements

Review of Universe Syntax and Statewide Outcome

DCYF identified nine children who reached their 61st day of placement in an ASC during the Reporting Period. In each of those nine placements, DCYF obtained written approval from the Director or their designee on or prior to the 60th day of placement in the ASC. The statewide outcome on this measure during the fourth Reporting Period is 100 percent, exceeding the 95 percent threshold described in Section 2.3a of the Settlement Agreement.

Case Reviews

PCG conducted a qualitative review of each of the nine placements in an ASC reaching their 61st day during the Reporting Period in order to verify that written approval from the Director or their designee was documented. In each of the nine placements, PCG found that DCYF had obtained the approval of the DCYF Director or their designee on or before r the child's 60th day of placement in the ASC.

Statistical Validity of Samples

DCYF evaluated outcomes for all nine ASC placements reaching their 61st day during the fourth Reporting Period, and the statistical validity of those results did not need to be calculated. Similarly, since PCG conducted a qualitative review on all eligible placements, the statistical

validity of PCG's review did not need to be calculated, and no further changes to the sampling or review process is recommended.

Monitoring Team Recommendation

During the fourth Reporting Period, the size of the universe of children whose placement in an ASC placement reached their 60th day (nine children) was sufficiently small that PCG conducted a qualitative review of all placements. No change to the reviews conducted during the fourth Reporting Period will be required; therefore, the Monitoring Team has confirmed that this benchmark has been met for the fourth Reporting Period.

Corrective Action Plan Status

The Monitoring Team supports DCYF's exit from Section 2 of the Settlement Agreement based on its performance during each of the first two Reporting Periods, and anticipates that no CAP will be required in response to Section 2. Under the terms of Section 3 of the Settlement Agreement, DCYF is being evaluated on the extent to which the Department minimizes the number of children placed in congregate care settings. As described in the Settlement Agreement, no child should be placed in a congregate care setting unless:

- a) the child has treatment needs which necessitate placement in a congregate care setting, or the child has needs that cannot be addressed in a family-like setting;
- b) the child is awaiting step-down from congregate care to an appropriate family-like setting;
- c) the placement is an emergency removal necessitating immediate removal from the home and the placement in a congregate care setting is in the best interest of the child per the professional judgment of the DCYF caseworker while DCYF works to identify a placement in an appropriate family-like setting; or
- d) the placement in a congregate care setting is due to an order of the Rhode Island Family Court.

For those children who are placed in a congregate care setting for 90 days or longer, DCYF is responsible for conducting a review of the child's continued placement at least every 45 days following until the child is discharged from the congregate care setting. When a determination is made that a step-down to a more appropriate level of placement is warranted, DCYF will make that step-down within 30 days of the determination. Where the child is not placed into a family-like setting within that 30-day timeframe, the case must be reviewed by the Associate Director of the Permanency Division (or Director's designee) every fifteen days following the 45th day after which the step-down decision was made.

Two measures are described in the Settlement Agreement:

- **Congregate Care 3.1:** Placements during the Reporting Period into a congregate care setting must be for one of the four exception reasons described above. DCYF must achieve a successful outcome in 90 percent of its ASC placements (that is, 90 percent of congregate placements must be for one of the four exception reasons).
- **Congregate Care 3.2**: Children placed into a congregate care setting for 90 days or longer must have the appropriateness of that continued placement reviewed by DCYF at least every 45 days. DCYF must conduct these reviews in 90 percent of congregate care placements lasting 90 days or longer.

After attaining each of the goals described above for two consecutive six-month periods, DCYF shall exit from monitoring under Section 3 of the Settlement Agreement. During each of the first two Reporting Periods, DCYF met or exceeded the threshold described for both of the measures described in Section 3 of the Settlement Agreement. In addition, DCYF permitted the Data Validator to review seven placements during those Reporting Periods for which, subsequent to a removal or placement change, the caseworker indicated that the removal was for emergency reasons, and that the placement in the congregate setting was in the best interest of the child

according to the professional judgment of the caseworker.⁶ In each of those seven placements, the Data Validator found sufficient documentation of the decision-making process underlying that exercise of professional judgement, and the Monitoring Team was able to fully validate the results.

While DCYF's performance on this measure was sufficiently robust during the first two Reporting Periods that the Monitoring Team supports DCYF's exit from Section 3 of the Settlement Agreement effective June 30, 2019 (at the conclusion of the second Reporting Period), the Court has not yet approved DCYF's exit from that section of the Settlement Agreement. The Monitoring Team therefore continued to review and validate the data from Reporting Period 4 under the terms of Section 3 of the Settlement Agreement.

Congregate Care 3.1: No children placed in congregate setting unless exception documented

Review of Universe Syntax and Statewide Outcome

DCYF identified 81 children who were placed in a congregate care setting during the fourth Reporting Period, excluding children placed into an Acute Residential Treatment Services setting. In 64 of the 81 placements, DCYF documented an exception reason for the placement, resulting in a statewide success rate of 79.01 percent. This falls short of the 90 percent threshold described in Section 3.1 of the Settlement Agreement.

Case Reviews

PCG conducted a qualitative review of each of the 64 eligible placements into a congregate care setting during the period in order to verify that the exception justifying the placement was appropriately documented within RICHIST. In each of the 64 placements, PCG found that DCYF had appropriately documented the reason for the placement.

Statistical Validity of Samples

DCYF evaluated outcomes for all 81 placements into a congregate care setting occurring statewide during the Reporting Period, and the statistical validity of those results did not need to be calculated. Similarly, since PCG did not review a sample of placements, the statistical validity of PCG's review did not need to be calculated, and no further changes to the sampling or review process is recommended.

Monitoring Team Recommendation

During the fourth Reporting Period, the size of the universe of children entering into a congregate care setting (81 children) was sufficiently small that PCG conducted a qualitative review of all placements for which an exception was noted. No change to the reviews conducted during the fourth Reporting Period will be required. While the Monitoring Team confirms that the outcome was fully validated, the benchmark was not met for Reporting Period 3.

⁶ During the first Reporting Period (July-December 2018), two cases referenced this "professional judgement" exception; during the second Reporting Period (January-June 2019), five cases had such an exception noted.

Congregate Care 3.2: Reviews of 90+-Day Congregate Care Placements

Review of Universe Syntax and Statewide Outcome

DCYF identified 121 children who reached their 90th day of placement in a congregate care setting during the fourth Reporting Period, or who had been placed in a congregate care setting for at least 90 days as of the first day of the Reporting Period. In 116 of those 121 placements, DCYF conducted a review of the appropriateness of that continued placement at least every 45 days following the 90th day of placement. This review identified 95.9 percent of placements as continuing to be appropriate, exceeding the 90 percent threshold described in Section 3.2 of the Settlement Agreement.

Case Reviews

Of the 121 placements involving a child who reached their 90th day of placement in a congregate care setting during the Reporting Period, or who had been placed in a congregate care setting for at least 90 days as of the first day of the Reporting Period, PCG reviewed the 116 placements identified by DCYF as having achieved a successful outcome on this measure – that is, that DCYF had conducted a review of the appropriateness of the continued placement at least every 45 days following the 90th day in the congregate placement. PCG found that DCYF had conducted the reviews every 45 days as required in each of the 116 placements.

Statistical Validity of Samples

DCYF evaluated outcomes for all 121 placements into a congregate care setting occurring statewide during the Reporting Period, and the statistical validity of those results did not need to be calculated. Similarly, since PCG did not review a sample of placements, the statistical validity of PCG's qualitative review did not need to be calculated, and no further changes to the sampling or review process is recommended.

Monitoring Team Recommendation

During the fourth Reporting Period, the size of the universe of children whose placement in a congregate placement was 90 days or longer (121 children) was sufficiently small that PCG conducted a qualitative review of all applicable placements. The Monitoring Team recommends that this evaluation of all eligible placements continue in future Reporting Periods. No change to the reviews conducted during the fourth Reporting Period will be required; therefore, the Monitoring Team has confirmed that this benchmark was met for the fourth Reporting Period.

Corrective Action Plan Status

The Monitoring Team supports DCYF's exit from Section 3 of the Settlement Agreement based on its performance during each of the first two Reporting Periods, and anticipates that no CAP will be required in response to Section 3.

Under the terms of Section 4 of the Settlement Agreement, DCYF is being evaluated on the extent to which siblings⁷ who enter out-of-home care within 30 days of each other, or whose placement changes, are placed in the same placement setting. As described in the Settlement Agreement, siblings entering care or who change placements should be placed together unless:

- a) DCYF determines that co-placement would be harmful and/or not in the best interest of at least one sibling;
- b) at least one of the siblings has treatment needs that necessitate placement in a specialized facility;
- c) the size of the sibling group makes co-placement impossible due to licensing regulations;
- d) it is in the best interest of at least one sibling to be placed into a kinship setting in which the other siblings cannot be placed; or
- e) a specific placement is due to an order of the Rhode Island Family Court.

One outcome measure is described in the Settlement Agreement:

Sibling Placement 4.1: Siblings removed or changing placements during the Reporting Period must be placed in the same setting unless one of the five exception reasons described above applies. DCYF must draw a random sample of eligible "events" to review (siblings entering care, or a change in placement for at least one member of a sibling group in care), and must achieve a successful outcome in 80 percent of reviewed cases.

After attaining the goal described above for two consecutive six-month periods, DCYF shall exit from monitoring under Section 4 of the Settlement Agreement.

Sibling Placement 4.1: Siblings Placed Together

Review of Sampling Syntax and Statewide Sample

DCYF pulled a random sample of 112 cases in which siblings entered care during the period, or were placed together during the period and the placement setting of at least one sibling changed. This random sample was stratified by DCYF Region, and each case was reviewed by a member of the DCYF Quality Review team in order to identify (a) whether an exception to the Settlement Agreement requirements applied to the siblings; and if not (b) whether the siblings were placed together.

DCYF did not identify any cases in which a valid exception existed to the requirement that the siblings be placed together. For this measure, DCYF found that in 74 cases (66.07%) the siblings were placed together upon their entry into out-of-home care or the placement change of at least

⁷ For the purposes of this measure, "siblings" are defined as children who have at least one parent in common through birth or adoption, who lived together immediately prior to placement and who entered placement within 30 days of one another.

one sibling. This statewide outcome of 66.1 percent falls short of the 80 percent threshold described in Section 4.1 of the Settlement Agreement.

Case Reviews

PCG conducted a case review of each of the 74 cases where DCYF found that the siblings had been placed together. In each of the 74 cases reviewed, PCG verified that the siblings were placed in the same setting upon their removal from the home or placement change.

Statistical Validity of Samples

DCYF evaluated outcomes for 112 of 224 eligible cases statewide (representing 50.0 percent of the statewide universe); this sample is statistically valid with 95 percent confidence and a margin of error of ± 6.56 percent. As described in the "Monitoring Team Sample Size Recommendations" section, the number of cases reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of sibling groups entering out-of-home care or changing placements during the fourth Reporting Period (224 cases), the Monitoring Team recommends increasing the number of cases reviewed by DCYF to 186 cases in order to achieve 95 percent confidence in the results, with a margin of error of no more than three percent.

Assuming that DCYF implements the above recommended sample size for their initial review, the Monitoring Team further recommends increasing the size of the sample of cases for which a second-level review is conducted by PCG from 100 cases to a sufficient number of cases to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of cases. Based on the 186 cases that the Monitoring Team recommended DCYF review during the fourth Reporting Period, 185 cases would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during the first four Reporting Periods did not reach the 80 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these case reviews be retroactively conducted on cases from those Reporting Periods, but that the revised sampling criteria be applied in future Reporting Periods.

Corrective Action Plan Status

As previously noted, Section C(3) of the Settlement Agreement requires DCYF to author a Corrective Action Plan when it does not meet any of the Commitments outlined in the Settlement Agreement for two consecutive Reporting Periods. DCYF has not met the standards described in Section 4, and the Monitoring Team awaits receipt of the CAP from DCYF.

Under the terms of Section 5 of the Settlement Agreement, DCYF is tasked with attaining casework goals as described in the areas of visitation (Section 6 of the Settlement Agreement) and case planning (Section 10).

No additional outcome measures – beyond those described in Sections 6 and 10 – are defined in Section 5 of the Settlement Agreement.

Workload Study Status

DCYF was to utilize the results from the first Reporting Period to establish a baseline of current DCYF compliance with the case plan content and timeliness elements evaluated under the terms of Section 10 of the Settlement Agreement. Starting with the second Reporting Period (January 1, 2019–June 30, 2019), should DCYF not attain the commitments outlined in Sections 6 and 10 in two consecutive periods, DCYF will be responsible for conducting a workload study in consultation with the Monitoring Team. In the second and third Reporting Periods, DCYF either did not achieve the commitments outlined in Sections 6 and 10 (6.2, 6.3b, 6.4b, 10.2 and 10.3), and/or the Monitoring Team was unable to validate the statewide result due to an insufficient number of cases being reviewed (6.1). Therefore, under the terms of the settlement agreement DCYF must now conduct a workload study in consultation with the Monitoring Team. The Monitoring Team is awaiting the opportunity to discuss with the Department the parameters and plan for the workload study.

In the Monitoring Team report that summarized performance during the July 1, 2019 – December 31, 2019 reporting period, the Monitoring Team described several factors that might impact such a workload study; the components that a robust workload study should include; the mechanics of conducting such a study; and how the results of the study might be utilized. Those recommendations are attached to this report as Appendix D.

Under the terms of Section 6 of the Settlement Agreement, DCYF is being evaluated on the extent to which children in out-of-home care are visited by caseworkers on a regular basis; that those visits appropriately assess issues pertaining to the safety, permanency, and well-being of the children; and that visits between siblings in care, and between children in care and their parents for cases with a goal of reunification, occur as often as described in the case plan.

Four outcome measures are described in the Settlement Agreement:

- Visitation 6.1: Each full calendar month that a child is in out-of-home placement, they should experience at least one face-to-fact visit with a member of the DCYF Care Team in their placement setting. DCYF must achieve a successful outcome in 95 percent of full calendar months that children are in out-of-home care.
- Visitation 6.2: Children in out-of-home care during the Reporting Period must have visitation that meet the federal CFSR criteria to be rated as a "strength" in terms of frequency and quality. DCYF must draw a random sample of eligible cases to review and must achieve a successful outcome in 85 percent of reviewed cases.
- Visitation 6.3b: Siblings in out-of-home care during the Reporting Period must have visitation between the siblings which occurs at the frequency indicated in their case plans if they are not placed together. DCYF must draw a random sample of eligible cases to review and must achieve a successful outcome in 85 percent of reviewed cases.
- Visitation 6.4b: Children in out-of-home care during the Reporting Period for whom the case plan goal is reunification must have visitation with their parents that occurs at the frequency indicated in their case plans. DCYF must draw a random sample of eligible cases to review and must achieve a successful outcome in 85 percent of reviewed cases.

Upon attaining the goals described for Visitation 6.1 for two consecutive Reporting Periods, DCYF shall exit from the terms of the Settlement Agreement for that measure. Similarly, upon attaining the goals described for Visitation 6.2 for two consecutive Reporting Periods, DCYF shall exit from the terms of the Settlement Agreement for that measure.

The Visitation 6.3b and Visitation 6.4b are incorporated into Section 10 of the Settlement Agreement (Case Planning), and the criteria for DCYF's exit from the terms of the Settlement Agreement for those measures are described in the "Section 10: Case Planning" section of this report.

Visitation 6.1: Caseworker Face-to-Face Visits with Children

Review of Universe Syntax and Statewide Outcome

DCYF identified 2,200 children who were in care at least one full calendar month during the fourth Reporting Period, spanning 11,521 full calendar months. In 11,076 of those months, the child in care experienced at least one face-to-face visit with a member of the DCYF Care Team, resulting in a statewide outcome of 96.14 percent. While this exceeds the 95 percent threshold described in the Settlement Agreement as previously noted, the number of cases reviewed by PCG did not allow the Data Validator to validate the results at a sufficient level of statistical significance. Therefore, the Monitoring Team was unable to confirm that the standard outlined in the Settlement Agreement was met.

Case Reviews

PCG identified a random sample of 100 children placed for at least one full calendar month during the Reporting Period and were identified by DCYF as having had at least one caseworker visit for each of those months. PCG then reviewed each of those cases in order to verify that DCYF had appropriately documented that the face-to-face visit occurred with the child during each full calendar month that the child was in care during the Reporting Period. In each of the 100 cases reviewed, PCG found that visitation was appropriately documented.

Statistical Validity of Samples

DCYF evaluated outcomes for all 2,200 eligible cases statewide, and the statistical validity of those results did not need to be calculated. PCG's case review of 100 children in care for at least one full calendar month during the Reporting Period (representing 4.55 percent of the statewide universe) is concordant with DCYF's findings with a margin of error of ±9.8 percent at a 95 percent confidence level. As described in the "Monitoring Team Sample Size Recommendations" section, the number of cases reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of children served in out-of-home care for at least one full calendar month during the first Reporting Period (2,200 children), the Monitoring Team recommends increasing the number of cases reviewed by PCG from 100 cases per Reporting Period to a sufficient number of cases to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of cases. Based on the 2,200 eligible cases during the fourth Reporting Period, 450 cases would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during the fourth Reporting Period exceeded the 95 percent threshold described in the Settlement Agreement, the Monitoring Team recommends that these case reviews be retroactively conducted on cases from the Reporting Period. This will permit the findings from this Reporting Period that DCYF met the standard to be appropriately credited to DCYF. Should this retroactive review not be conducted for the fourth Reporting Period, the Monitoring Team will be unable to validate that the standard described in the Settlement Agreement has been met. Additionally, the Monitoring Team will be unable to validate the statewide results in future periods, until a sufficiently large sample of cases is reviewed.

Visitation 6.2: Quality of Face-to-Face Visits

Review of Sampling Syntax and Statewide Sample

DCYF pulled a random sample of 357 cases of children in care at any point during the first four months of the period. This random sample was stratified by DCYF Region, and each case was reviewed by a member of the DCYF Quality Review team in order to evaluate whether the quality of the visits meets the criteria used for the federal CFSR to rate as case as a "strength." This methodology excluded children entering care during the final sixty days of the period, as those children were not in care long enough for a case plan to be developed during the period.

Of the 357 cases reviewed by DCYF, 155 cases (43.42%) were rated as a "strength." This outcome falls short of the 85 percent threshold described in Section 6.2 of the Settlement Agreement.

Case Reviews

PCG conducted a second-level review of 100 of the 155 cases reviewed by DCYF which were rated as a "strength," and evaluated the quality of visitation using the same federal CFSR instrument and case review criteria employed by the DCYF Quality Review Team. The purpose of this case review was to verify the findings of the DCYF review. In each of the 100 cases reviewed, PCG agreed with the rating assigned by the DCYF Quality Review team.

Statistical Validity of Samples

DCYF evaluated outcomes for 357 of the 1,775 eligible cases statewide (representing 20.11 percent of the statewide universe); this sample is statistically valid at a 95 percent confidence level with a margin of error of \pm 4.64 percent. As described in the "Monitoring Team Sample Size Recommendations" section, the number of cases reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of children served in out-of-home care during the fourth Reporting Period (1,775 children), the Monitoring Team recommends increasing the number of cases reviewed by DCYF from twenty percent (approximately 357 cases) to 667 cases in order to achieve 95 percent confidence in the results, with a margin of error of no more than three percent.

Assuming that DCYF implements the above recommended sample size for their initial review, the Monitoring Team further recommends increasing the size of the sample of cases for which a second-level review is conducted by PCG from 100 cases to a sufficient number to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of cases. Based on the 667 cases that the Monitoring Team recommended DCYF review during the fourth Reporting Period, 357 cases would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during each of the first three Reporting Periods did not reach the 85 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these case reviews be retroactively conducted on cases from those Reporting Periods, but that the revised sampling criteria be applied in future Reporting Periods.

Visitation 6.3b: Sibling Visitation

Review of Sampling Syntax and Statewide Sample

DCYF pulled a random sample of 146 sibling groups (of 184 total statewide) involving siblings in care at any point during the first four months of the period. This random sample was stratified by DCYF Region, and each case was reviewed by a member of the DCYF Quality Review team in order to evaluate whether visitation between the siblings occurred at (at minimum) the frequency described in the siblings' case plans. This methodology excluded siblings entering care during the final sixty days of the period, as those sibling groups were not in care long enough for a case plan to be developed during the period.

Of the 146 sibling groups reviewed, 39 were found to have visitation that occurred at least as often as what was stipulated in the siblings' case plan. In addition to cases where visitation did not occur at the frequency recommended in the case plan, cases where the appropriate frequency of visits between siblings was not specified in the case plan were also counted as non-compliant on this measure. This outcome of 43.42 percent falls short of the 85 percent threshold described in Section 6.3b of the Settlement Agreement.

Case Reviews

PCG conducted a second-level review of each of the 39 cases reviewed by DCYF which were deemed to be compliant and evaluated whether that visitation did occur; in each of those cases, PCG found DCYF's findings to be accurate.

Statistical Validity of Samples

DCYF evaluated outcomes for 146 of the 184 eligible cases statewide (representing 79.35 percent of the statewide universe); this sample is statistically valid at a 95 percent confidence level with a margin of error of ±3.70 percent. PCG's second-level review was conducted against each of the 146 the cases where DCYF indicated that sibling visitation occurred according to the frequency outlined in the case plan, and the statistical validity of the case review did not need to be calculated.

Monitoring Team Recommendation

Based on the size of the statewide universe of sibling groups served in out-of-home care during the fourth Reporting Period (184 sibling groups), the Monitoring Team recommends increasing the number of cases reviewed by DCYF to 156 cases in order to achieve 95 percent confidence in the results, with a margin of error of no more than three percent.

Assuming that DCYF implements the above recommended sample size for their initial review, the Monitoring Team further recommends increasing the size of the sample of cases for which a second-level review is conducted by PCG from two cases to a sufficient number to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of cases. Based on the 156 cases that the Monitoring Team recommended DCYF review during the fourth Reporting Period, each of those 156 cases would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during each of the first four Reporting Periods did not reach the 85 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these case reviews be retroactively conducted on cases from those Reporting Periods, but that the revised sampling criteria be applied in future Reporting Periods.

Visitation 6.4b: Parent-Child Visitation

Review of Sampling Syntax and Statewide Sample

DCYF pulled a random sample of 294 cases (of 1,155 total statewide) involving children in outof-home placements with a goal of reunification. This random sample was stratified by DCYF Region, and each case was reviewed by a member of the DCYF Quality Review team in order to evaluate whether visitation between the child and parent occurred at the frequency required in the child's case plan, excepting cases where parents are not attending visits despite DCYF employing measures to maximize the parents' ability to participate in the visit. This methodology excluded children entering care during the final sixty days of the period since those children were not in care long enough for a case plan to be developed during the period

Of the 294 cases reviewed, 125 cases (42.52%) were found to have visitation between the parent and the child that occurred at least as often as what was required by the case plan. Similar to measure 6.3b, cases where the appropriate frequency of visits between the parent and child was not specified in the case plan were also counted as non-compliant on this measure. This outcome falls short of the 85 percent threshold described in Section 6.4b of the Settlement Agreement.

Case Reviews

PCG conducted a second-level review of each of the 125 cases reviewed by DCYF which were found to have had all parental visitations required by the case plan, and evaluated whether that visitation did occur; in all cases, PCG verified that DCYF's findings were accurate.

The Settlement Agreement also describes in Section 6.4(b) that:

"...[a]s with other areas of casework, DCYF shall assure the quality of parent-child visits through the continuous quality improvement process and provide documentation of the results of the continuous quality improvement process to the Monitoring Team and Plaintiffs' Attorneys."

To date, DCYF has not provided documentation of the results of this continuous quality improvement process. The type of documentation that DCYF should provide is not specified. This section also indicates that the quality improvement process should be applied in other areas of casework, however the other sections this may have been intended to apply is not specified.

Statistical Validity of Samples

DCYF evaluated outcomes for 294 of the 1,155 eligible cases statewide (representing 25.45 percent of the statewide universe); this sample is statistically valid at a 95 percent confidence level with a margin of error of ±4.94 percent. PCG's second-level review was conducted against the universe of all 125 cases where visitation occurred at the frequency outlined in the case plan, and the statistical validity of those results did not need to be calculated. As described in the "Monitoring Team Sample Size Recommendations" section, the number of cases reviewed by DCYF were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of children served in out-of-home care with a goal of reunification during the fourth Reporting Period (1,155 children), the Monitoring Team recommends increasing the number of cases reviewed by DCYF from 25 percent (294 cases) to

555 cases in order to achieve 95 percent confidence in the results, with a margin of error of no more than three percent.

Assuming that DCYF implements the above recommended sample size for their initial review, the Monitoring Team further recommends increasing the size of the sample of cases for which a second-level review is conducted by PCG from 100 cases to a sufficient number to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of cases. Based on the 555 cases that the Monitoring Team recommended DCYF review during the fourth Reporting Period, 333 cases would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during each of the first four Reporting Periods did not reach the 85 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these case reviews be retroactively conducted on cases from those Reporting Periods, but that the revised sampling criteria be applied in future Reporting Periods.

The Monitoring Team would also recommend that the appropriate documentation of the continuous quality improvement process be provided as required by the Settlement Agreement and guidance be provided on what other "areas of casework" the continuous quality improvement process applies. The Monitoring Team wants to ensure that the reviews are complete and thorough.

Corrective Action Plan Status

As previously noted, Section C(3) of the Settlement Agreement requires DCYF to author a Corrective Action Plan when it does not meet any of the Commitments outlined in the Settlement Agreement for two consecutive Reporting Periods. DCYF has not met the standards described in Section 6, and the Monitoring Team awaits receipt of the CAP from DCYF.

Under the terms of Section 7 of the Settlement Agreement, DCYF is being evaluated on the extent to which non-kinship foster homes into which children have been placed are appropriately licensed; that background checks are conducted for all members of a prospective foster home who are age 18 or older; that kinship foster home license applications are completed in a timely manner; and that background checks are conducted in a timely manner for all foster homes for which a license is due for renewal and in which a child is placed during the Reporting Period.

Four outcome measures are described in the Settlement Agreement:

- Licensing 7.1: No child may be placed in a non-kinship home without an active license, unless the placement was made pursuant to an order of the Rhode Island Family Court. DCYF must achieve a successful outcome in 100 percent of placements into a non-kinship home during the Reporting Period.
- Licensing 7.2: No child may be placed into a prospective kinship foster home (that is, one where licensure is pending) unless background checks have been conducted for all household members age 18 or older, excepting those instances where the placement was made pursuant to an order of the Rhode Island Family Court. DCYF must achieve a successful outcome in 100 percent of placements into a foster home during the Reporting Period where licensure is pending.
- Licensing 7.3: Kinship foster home licensing applications must be completed within six months of the date of application. DCYF must achieve a successful outcome in 95 percent of applications where the licensing application was submitted during the Reporting Period.
- Licensing 7.4: DCYF must conduct background checks for all household members age 18 or older in foster homes within 30 days of the date that the home's licensure renewal is due. DCYF must achieve a successful outcome in 85 percent of licensing renewals where the renewal was due during the Reporting Period.

After attaining the goals described above for two consecutive six-month periods, DCYF shall exit from monitoring under Section 7 of the Settlement Agreement.

Licensing 7.1: Licensing of Non-Kinship Placements

Review of Universe Syntax and Statewide Outcome

DCYF identified 286 placements into a non-kinship foster home during the Reporting Period. In 276 of those placements, DCYF identified that the non-kinship foster home was licensed during the entire time the child was placed there during the Reporting Period, resulting in a statewide outcome of 96.50 percent. This does not meet the 100 percent threshold described in the Settlement Agreement.

Case Reviews

PCG identified a random sample of 100 placements into a non-kinship foster home occurring during the Reporting Period and conducted a qualitative review in order to verify that the foster home license was active the entire period the child was placed in that home during the Reporting Period. In each of the 100 placements reviewed, PCG found that the foster home license was active the entire timeframe under review.

Statistical Validity of Samples

DCYF evaluated outcomes for all 286 placements statewide, and the statistical validity of those results did not need to be calculated. PCG's qualitative review of 100 placements (representing 34.97 percent of the statewide universe) is concordant with DCYF's findings with a margin of error of \pm 7.9 percent at a 95 percent confidence level. As described in the "Monitoring Team Sample Size Recommendations" section, the number of placements reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of children entering into a non-kinship placement during the fourth Reporting Period (286 children), the Monitoring Team recommends increasing the number of placements reviewed by PCG from 100 placements per Reporting Period to a sufficient number to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of records. Based on the placements evaluated during the fourth Reporting Period, 257 placements would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during the first four Reporting Periods did not reach the 100 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these reviews be retroactively conducted on placements from the first through fourth Reporting Periods, but that the revised sampling criteria be applied in future Reporting Periods.

Licensing 7.2: Background Checks for Kinship Homes

Review of Universe Syntax and Statewide Outcome

DCYF identified 377 placements into a kinship foster home during the Reporting Period where the foster home was pending licensure. In 352 of those 377 placements, DCYF identified that background checks had been conducted for all household members age 18 or older, resulting in a statewide outcome of 93.37 percent. This outcome falls short of the 100 percent threshold described in Section 7.2 of the Settlement Agreement.

Case Reviews

PCG identified a random sample of 100 placements into a foster home occurring during the Reporting Period where the foster home was pending licensure and conducted a qualitative review in order to identify whether backgrounds checks had been conducted on all household members age 18 or older. In each of the 100 placements reviewed, PCG found that the outcome reported by DCYF was accurate.

Statistical Validity of Samples

DCYF evaluated outcomes for all 377 applicable placements statewide, and the statistical validity of those results did not need to be calculated. PCG's qualitative review of 100 placements (representing 26.5 percent of the statewide universe) is concordant with DCYF's findings with a margin of error of ±8.4 percent at a 95 percent confidence level. As described in the "Monitoring Team Sample Size Recommendations" section, the number of placements reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of children entering into a prospective foster home whose licensure was pending during the first Reporting Period (377 children), the Monitoring Team recommends increasing the number of placements reviewed by PCG from 100 placements per Reporting Period to a sufficient number to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of records. Based on the 377 placements evaluated during the fourth Reporting Period, 295 placements would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during the first four Reporting Periods did not reach the 100 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these qualitative reviews be retroactively conducted on placements from the first through fourth Reporting Periods, but that the revised sampling criteria be applied in future Reporting Periods.

Licensing 7.3: Timely Completion of Kinship License Applications

Review of Universe Syntax and Statewide Outcome

As this measure evaluates DCYF's compliance over a six-month timeframe, measured prospectively from the time each kinship home submits its application for licensure, analysis of this measure includes a "lag" of one full Reporting Period behind other outcomes measured as a result; that is, when evaluating outcomes for the fourth Reporting Period (January 1, 2020 – June 30, 2020) DCYF and PCG examined kinship licensing applications submitted between July 1, 2019–December 31, 2019, which under the terms of the Settlement Agreement must each be completed by June 30, 2020 (the end of the fourth Reporting Period).

DCYF identified 186 kinship home applications filed during the prior Reporting Period. In 41 of those 186 applications, an order of the Rhode Island Family Court mandated placement with the kinship provider and were excluded from the analysis. In one of the remaining 145 kinship licensing applications, the child was discharged prior to the expiration of the six-month deadline for completing the application, leaving 144 applications to be evaluated on this outcome. Of those 144 kinship licensing applications, DCYF completed the application within six months for 93 applications, resulting in a statewide outcome of 64.58 percent. This falls short of the 95 percent threshold described in Section 7.3 of the Settlement Agreement.

Case Reviews

PCG conducted a qualitative review on each of the 93 applications meeting the criteria outlined in the Settlement Agreement in order to verify that the application was completed within the sixmonth timeframe described in Section 7.3 of the Settlement Agreement. In each of the 93 applications reviewed, PCG found that the outcome reported by DCYF was accurate.

Statistical Validity of Samples

DCYF evaluated outcomes for all 144 applicable kinship home applications submitted statewide during the prior Reporting Period, and the statistical validity of those results did not need to be calculated. Similarly, since PCG did not review a random sample of applications, the statistical validity of PCG's qualitative review did not need to be calculated.

Monitoring Team Recommendation

Based on the size of the statewide universe of kinship foster home licensure applications submitted during the fourth Reporting Period (144 applications), the Monitoring Team recommends increasing the number of applications reviewed by PCG from 100 applications per Reporting Period to a sufficient number to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of records. Based on the 144 applications evaluated during the fourth Reporting Period, 143 applications would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during the first four Reporting Periods did not reach the 95 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these qualitative reviews be retroactively conducted on applications from the first through fourth Reporting Periods, but that the revised sampling criteria be applied in future Reporting Periods.

Licensing 7.4: Background Checks within 30 Days of License Renewal

Review of Universe Syntax and Statewide Outcome

DCYF identified 127 foster homes where the license was due for renewal during the fourth Reporting Period, and a child was placed in the home during the Reporting Period. For 47 of those 127 foster homes, DCYF identified that background checks were conducted for all household members age 18 or older within 30 days of the due date for the renewal, and that a home inspection was conducted within 30 days of that same due date. This statewide outcome of 37.01 percent falls short of the 85 percent threshold described in Section 7.4 of the Settlement Agreement.

Case Reviews

PCG conducted a review of all 47 foster homes where DCYF's performance was evaluated as a "success" on this measure in order to identify whether background checks had been conducted on all household members age 18 or older, and whether a home inspection had been conducted within 30 days of the license due date. In each of the 47 cases reviewed, PCG found that the outcome reported by DCYF was accurate.

Statistical Validity of Samples

DCYF evaluated outcomes for all 127 applicable kinship home applications due during the Reporting Period, and the statistical validity of those results did not need to be calculated. Similarly, since PCG did not review a sample of cases, the statistical validity of PCG's case review did not need to be calculated.

Monitoring Team Recommendation

During the fourth Reporting Period, the size of the universe of licensure renewals coming due where DCYF identified timely completion of background checks (47 renewals) was sufficiently

small that PCG conducted a case review of all successful cases. The Monitoring Team recommends that this evaluation of all eligible cases continue in future Reporting Periods. No change to the case reviews conducted during the fourth Reporting Period will be required.

Corrective Action Plan Status

As previously noted, Section C(3) of the Settlement Agreement requires DCYF to author a Corrective Action Plan when it does not meet any of the Commitments outlined in the Settlement Agreement for two consecutive Reporting Periods. DCYF has not met the standards described in Section 7, and the Monitoring Team awaits receipt of the CAP from DCYF.

Under the terms of Section 8 of the Settlement Agreement, DCYF is being evaluated on the extent to which DCYF screens in reports of abuse or neglect in a timely manner; whether they respond to screened-in reports in a timely manner; and whether they complete their investigation of screened-in reports in a timely manner.

Three outcome measures are described in the Settlement Agreement:

- **CPS 8.1:** DCYF must make a screening decision within timeframes consistent with Rhode Island statute – 30 minutes for reports designated as having an "emergency" priority level; two hours for reports designated as having an "immediate" priority level; and four hours for reports designated as having a "routine" priority level. DCYF must achieve a successful outcome in 90 percent of reports received during the Reporting Period.
- **CPS 8.2:** For reports of abuse or neglect that are screened in, DCYF must respond to the report by making contact or attempting to make contact with the victim or someone involved in the case within timeframes described by Rhode Island statute – two hours for reports designated as having an "emergency" priority level; twelve hours for reports designated as having an "immediate" priority level; and 48 hours for reports designated as having a "routine" priority level. DCYF must achieve a successful outcome in 90 percent of screened-in reports received during the Reporting Period.
- **CPS 8.3:** For reports of abuse or neglect that are screened in, DCYF must complete the investigation within 30 days of the report, or within 45 days if the investigation is continued due to circumstances beyond the control of DCYF; investigations completed in 31 to 45 days must have supervisor approval documented for the extension. DCYF must achieve a successful outcome in 85 percent of screened-in reports received during the Reporting Period.

After attaining each of the goals described above for two consecutive six-month periods, DCYF shall exit from monitoring under Section 8 of the Settlement Agreement.

CPS 8.1: Timely Screening Decisions

Review of Universe Syntax and Statewide Outcome

DCYF identified 3,274 reports of abuse or neglect that were received during the fourth Reporting Period, excluding those calls that were classified as "Information & Referral." In 3,067 of those 3,274 reports (93.68%), DCYF made a screening decision within the timeframes outlined by statute. While this exceeds the 90 percent threshold described in the Settlement Agreement as previously noted, the number of reports reviewed by PCG did not allow the Data Validator to validate the results at a sufficient level of statistical significance. Therefore, the Monitoring Team was unable to confirm that the standard outlined in the Settlement Agreement was met.

Case Reviews

PCG conducted a qualitative review of 100 reports of abuse or neglect received during the Reporting Period which met the criteria in the Settlement Agreement in order to verify that the screening decision was made within the timeframe mandated by Rhode Island statute. In each of the 100 reports reviewed, PCG found that the outcome reported by DCYF was accurate.

Statistical Validity of Samples

DCYF evaluated outcomes for all 3,274 applicable reports of abuse or neglect received during the Reporting Period, and the statistical validity of those results did not need to be calculated. PCG's qualitative review of 100 reports (representing 3.1 percent of the statewide universe) is concordant with DCYF's findings with a margin of error of ±9.65 percent at a 95 percent confidence level. As described in the "Monitoring Team Sample Size Recommendations" section, the number of reports reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of CPS reports received during the fourth Reporting Period (3,274 reports), the Monitoring Team recommends increasing the number of reports reviewed by PCG from 100 reports per Reporting Period to a sufficient number to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of records. Based on the 3,274 reports evaluated during the fourth Reporting Period, 437 reports would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Though DCYF's performance on this measure during the fourth Reporting Period exceeded the 90 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these reviews be retroactively conducted on reports from this period, as this measure must be passed in conjunction with all measures in the CPS domain (CPS 8.1, CPS 8.2, and CPS 8.3) in order to exit from monitoring under the Settlement Agreement; as described in the following sections, DCYF's performance did not meet the benchmark for either of the other two measures referenced in Section 8 of the Settlement Agreement.

CPS 8.2: Timely Face-to-Face Contact within Child

Review of Universe Syntax and Statewide Outcome

DCYF identified 2,634 reports of abuse or neglect that were received during the fourth Reporting Period and subsequently screened in for investigation. In 2,154 of those 2,634 reports (81.78%), DCYF made contact with the alleged victim or someone involved in the case or report within the timeframe mandated by DCYF statute. This result does not meet the 90 percent benchmark as established in the Settlement Agreement.

Case Reviews

PCG conducted a qualitative review of 100 reports of abuse or neglect received during the Reporting Period meeting the criteria outlined in the Settlement Agreement which were screened in by DCYF in order to verify that contact was made within the mandated timeframe. In each of the 100 reports reviewed, PCG found that the outcome reported by DCYF was accurate.

Statistical Validity of Samples

DCYF evaluated outcomes for all 2,634 applicable reports of abuse or neglect received during the Reporting Period, and the statistical validity of those results did not need to be calculated. PCG's review of 100 screened-in reports (representing 3.8 percent of the statewide universe) is concordant with DCYF's findings with a margin of error of ±9.61 percent at a 95 percent confidence level. As described in the "Monitoring Team Sample Size Recommendations" section, the number of reports reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of CPS reports screened in during the fourth Reporting Period (2,634 reports), the Monitoring Team recommends increasing the number of reports reviewed by PCG from 100 reports per Reporting Period to a sufficient number of reports to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of records. Based on the 2,634 reports evaluated during the fourth Reporting Period, 426 reports would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

DCYF's performance on this measure during the fourth Reporting Period did not meet the baseline established in the Settlement Agreement, and the Monitoring Team does not recommend that reviews be conducted retroactively on this measure to achieve the required level of statistical validity.

CPS 8.3: Timely Completion of Investigation

Review of Universe Syntax and Statewide Outcome

As described in the previous section, DCYF identified 2,634 reports of abuse or neglect that were received during the fourth Reporting Period and subsequently screened in for investigation. In 1,734 of those 2,634 reports (65.83%), DCYF completed the investigation within the timeframe mandated by Rhode Island statute. This does not exceed the 85 percent threshold described in the Settlement Agreement.

In each of the first three Reporting Periods, DCYF provided to PCG a list of reports of abuse or neglect for which the investigation had been completed within 31-45 days of the report with supervisor approval. In the fourth Reporting Period, the Department did not provide a similar list; they have indicated, however, that in the fifth Reporting Period and beyond, those data will be captured in RICHIST, and included in the data extracts provided to PCG.

Case Reviews

PCG conducted a qualitative review of 100 reports of abuse or neglect received during the Reporting Period which were screened in by DCYF which were identified as a success in order to verify that the investigation was completed within the timeframe provided by DCYF. In each of the 100 reports reviewed, PCG found that the outcome reported by DCYF was accurate.

Statistical Validity of Samples

DCYF evaluated outcomes for all 2,634 applicable reports of abuse or neglect received during the Reporting Period, and the statistical validity of those results did not need to be calculated. PCG's review of 100 screened-in reports (representing 3.80 percent of the statewide universe) is

concordant with DCYF's findings with a margin of error of ± 9.61 percent at a 95 percent confidence level. As described in the "Monitoring Team Sample Size Recommendations" section, the number of reports reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of CPS reports screened in during the fourth Reporting Period (2,634 reports), the Monitoring Team recommends increasing the number of reports reviewed by PCG from 100 reports per Reporting Period to a sufficient number of reports to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of records. Based on the 2,634 reports evaluated during the fourth Reporting Period, 426 reports would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

DCYF's performance on this measure during the fourth Reporting Period did not meet the baseline established in the Settlement Agreement, and the Monitoring Team does not recommend that reviews be conducted retroactively on this measure to achieve the required level of statistical validity.

Corrective Action Plan Status

As previously noted, Section C(3) of the Settlement Agreement requires DCYF to author a Corrective Action Plan when it does not meet any of the Commitments outlined in the Settlement Agreement for two consecutive Reporting Periods. DCYF has not met the standards described in Section 8, and the Monitoring Team awaits receipt of the CAP from DCYF.

Under the terms of Section 9 of the Settlement Agreement, DCYF is tasked with assessing the base rates for foster care maintenance payments. Should that assessment indicate that a rate adjustment is needed, DCYF is responsible for advocating with the Rhode Island General Assembly for additional appropriations to cover the increase. DCYF is also required to amend the Rhode Island Administrative Code to reflect that this reassessment of foster care maintenance payments must occur every three years.

DCYF has attested to the fact that each of these tasks were completed, and the Monitoring Team recommends that DCYF be permitted to exit Section 9 of the Settlement Agreement.

Corrective Action Plan Status

As described above, the Monitoring Team supports DCYF's exit from Section 9 of the Settlement Agreement based on its fulfillment of the obligations described therein. The Monitoring Team anticipates that no CAP will be required in response to Section 9.

Under the terms of Section 10 of the Settlement Agreement, DCYF is being evaluated on the extent to which DCYF have case plans that meet the timeliness requirements outlined by federal statute, and include the elements that are required under the Adoption Assistance and Child Welfare Act (AACWA) of 1980.⁸

Two outcome measures are described in the Settlement Agreement:

- **Case Planning 10.2:** DCYF must ensure that children in the legal custody of DCYF have case plans that meet the timeliness requirements enumerated in 42 U.S.C. §670 *et seq.* DCYF must achieve a successful outcome in 80 percent of children served in out-of-home care during the Reporting Period.
- **Case Planning 10.3:** Children in out-of-home care during the Reporting Period must have in their case plans the elements required by AACWA. DCYF must draw a random sample of eligible cases to review and must achieve a successful outcome in 80 percent of reviewed cases.

After attaining the goals described above, as well as the goals described under Sections 6.3b and 6.4b, for two consecutive six-month periods, DCYF shall exit from monitoring under Section 10 of the Settlement Agreement.

Case Planning 10.2: Timeliness of Case Plans

Review of Universe Syntax and Statewide Outcome

DCYF identified 1,775 children served in out-of-home care during the fourth Reporting Period. Of those, 153 children were not in care for at least sixty days during the Reporting Period and were excluded from the measure. DCYF reviewed the remaining 1,622 cases and found that in 704 cases (43.40%) the child had a case plan that met the timeliness requirements dictated by statute – specifically, that the initial case plan was completed within 60 days of the child's removal from the home, or had been updated at least every six months following the initial plan. This falls short of the 80 percent threshold described in Section 4.1 of the Settlement Agreement.

Case Reviews

PCG identified a random sample of 100 children served during the period for whom DCYF found that the case plan had been updated in a timely manner (i.e., "successful" cases) and conducted a case review in order to verify that the case plan was created or updated within the timeframe

⁸ 42 U.S.C. §675(1) requires that case plans include a description of the type of setting in which a child will be placed, including a discussion of the safety and appropriateness of the placement; a plan for ensuring that the child receives safe and proper care and that the child, their parents and their foster parents receive appropriate services to facilitate reunification or permanent placement; the health and educational status of the child; a written description of transitional services to be provided to children 14 years of age or older; the steps being taken for children with a goal of adoption or placement in another permanent home to find a permanent living arrangement for the child; the steps taken on behalf of children with a goal of relative placement to determine the unsuitability of a reunification or adoption and why relative placement is in the child's best interest; and a plan for ensuring the educational stability of the child while in out-of-home care.

described by DCYF. In each of the 100 cases reviewed, PCG found that the outcome reported by DCYF was accurate.

Statistical Validity of Samples

DCYF evaluated outcomes for all 1,622 eligible cases statewide, and the statistical validity of those results did not need to be calculated. PCG's case review of 100 case plans rated as a "success" (representing 14.20 percent of the statewide universe of successful cases) is concordant with DCYF's findings with a margin of error of \pm 6.17 percent at a 95 percent confidence level. As described in the "Monitoring Team Sample Size Recommendations" section, the number of cases reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of eligible children served in out-of-home care during the fourth Reporting Period (1,622 children), the Monitoring Team recommends increasing the number of cases reviewed by PCG from 100 cases per Reporting Period to a sufficient number of cases to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of cases. Based on the 1,622 cases evaluated during the fourth Reporting Period, 404 cases would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during each of the first four Reporting Periods did not reach the 80 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these case reviews be retroactively conducted on cases from those Reporting Periods, but that the revised sampling criteria be applied in future Reporting Periods.

Case Planning 10.3: Case Plan Required Elements

Review of Sampling Syntax and Statewide Sample

DCYF pulled a random sample of 359 cases of children in care at any point during the first four months of the period. This random sample was stratified by DCYF Region, and each case was reviewed by a member of the DCYF Quality Review team in order to evaluate whether the case plan included all of the elements required by AACWA. This methodology excluded children entering care during the final sixty days of the period since those children were not in care long enough for a case plan to be developed during the period, the timeframe for developing that case plan is sixty days.

Of the 359 cases, 132 were found to include all elements required by AACWA. This outcome of 36.77 percent falls short of the 80 percent threshold described in Section 6.2 of the Settlement Agreement.

Case Reviews

PCG identified a random sample of 100 children served during the period for whom DCYF found that the case plan included each of the elements required under AACWA (i.e., "successful" cases) and conducted a case review in order to verify that the case plan was created or updated within the timeframe described by DCYF. In each of the 100 cases reviewed, PCG found that the outcome reported by DCYF was accurate.

Statistical Validity of Samples

DCYF evaluated outcomes for 359 of the 1,775 eligible cases statewide (representing 20.23 percent of the statewide universe); this sample is statistically valid at a 95 percent confidence level with a margin of error of \pm 4.62 percent. As described in the "Monitoring Team Sample Size Recommendations" section, the number of cases reviewed were insufficient to achieve the three percent margin of error recommended by the Data Validator.

Monitoring Team Recommendation

Based on the size of the statewide universe of children served in out-of-home care for at least 60 days during the fourth Reporting Period (1,775 children), the Monitoring Team recommends increasing the number of cases reviewed by DCYF from twenty percent (359 cases) to 667 cases in order to achieve 95 percent confidence in the results, with a margin of error of no more than three percent.

Further, the Monitoring Team recommends increasing the size of the sample of cases for which a second-level review is conducted by PCG from 100 cases to a sufficient number of cases to provide a 99 percent chance of identifying any errors in the statewide outcomes, assuming those errors occur in one percent of cases. Based on the 667 cases that the Monitoring Team recommended DCYF review during the fourth Reporting Period, 357 cases would need to be reviewed in order to achieve the recommended level of statistical confidence in the results.

Since DCYF's performance on this measure during each of the first four Reporting Periods did not reach the 80 percent threshold described in the Settlement Agreement, the Monitoring Team does not recommend that these case reviews be retroactively conducted on cases from prior Reporting Periods, but that the revised sampling criteria be applied in future Reporting Periods.

Corrective Action Plan Status

As previously noted, Section C(3) of the Settlement Agreement requires DCYF to author a Corrective Action Plan when it does not meet any of the Commitments outlined in the Settlement Agreement for two consecutive Reporting Periods. DCYF has not met the standards described in Section 10, and the Monitoring Team awaits receipt of the CAP from DCYF.

Under the terms of Section 11 of the Settlement Agreement, DCYF is required to conduct an annual assessment of substantiated reports of abuse or neglect occurring during the preceding twelve (12) months, including those occurring to a child who was placed in an unlicensed kinship setting. The report will identify any systemic factors that may have contributed to the abuse/neglect, and DCYF is required to make this report publicly available, including the results of the assessment of substantiated reports, as well as recommendations for corrective actions recommended to ensure the safety of children in foster care.

DCYF, consistent with its obligations under the terms of Section 11 of the Settlement Agreement, has published on its website⁹ its "Annual Safety Analytic Report" for both Federal Fiscal Years¹⁰ 2018 and 2019; each of those reports has a section entitled "Maltreatment in Foster Care (Outof-Home Placements)" in which data regarding indicated maltreatment data from the three most recent years are presented, including an assessment of the factors impacting each substantiated report, including the type of abuse or neglect, the location of the child's placement and the relationship of the perpetrator to the child victim. In addition, each of those reports outlines the recommendations of the Department intended to reduce incidences of maltreatment in foster care, as well as the length of time each child spent in placement prior to the incident.

Report Status

The Monitoring Team anticipates that DCYF will publish its next report, summarizing the data through 2020, during the first half of calendar year 2021.

DCYF will continue to conduct and publish this annual assessment until it exits from the terms of Sections 1-10 of the Settlement Agreement.

⁹ <u>http://www.dcyf.ri.gov/data-evaluation/safety-data-reports.php</u>

¹⁰ The Federal Fiscal year (FFY) begins October 1 and continues through September 30 of the following year. FFYs are "named" based on the calendar year in which the FFY "ends." For example, FFY 2020 ends September 30, 2020.

Under the terms of Section 12 of the Settlement Agreement, DCYF is required to develop an annual recruitment and retention plan for foster homes. Under the terms of Section 12, this recruitment and retention plan must include specific targets regarding the number of foster homes to be recruited, including sub-targets for specific populations such as adolescents, as well as populations with special needs such as children with disabilities and medically fragile children. It will also include retention strategies geared toward reducing attrition among foster care providers, such as respite homes, enhanced training opportunities for foster parents, and increased visitation with foster parents.

The Settlement Agreement requires that a Foster Care Recruitment and Retention Plan be developed in conjunction with the OCA. This plan should be done annually. First, although a plan has been developed and posted on DCYF's website, this plan was not developed in conjunction with the OCA. The OCA was invited to one meeting in the early stages of DCYF's development of the Foster Care Recruitment and Retention Plan. During this meeting, the OCA was presented with some initial information, however, the OCA was provided no opportunity to review a draft plan or provide meaningful feedback which would constitute the development of this plan together. During this meeting, a single request was made of the OCA to try to get the Director to support their plan for the use of a new software, which would operate as a Customer Relationship Management system to be used by the staff at the Department working on recruitment of foster parents. Therefore, this element of the Settlement Agreement was not satisfied.

Upon receipt of the final Foster Care Recruitment and Retention plan, both the Data Validator and the OCA determined that there were many areas requiring improvement to ensure that the plan was effective. In August 2019, the Monitoring Team provided DCYF with an outline of recommended changes; to date the Monitoring Team has not received a response from DCYF regarding the recommended changes and none of the recommended changes were incorporated into the Department's Foster Care Recruitment and Retention Plan for Reporting Period 1. Additionally, the Settlement Agreement requires that a new plan be provided each year. The Settlement Agreement does not define whether this is calendar year or fiscal year however, for the first Foster Care Recruitment and Retention Plan the Department entitled the report "FY 2019 RI DCYF Resource Family Recruitment & Retention Plan Effective July 1, 2018 – June 30, 2019." Therefore, the Monitoring Team believed that the Department interpreted the Settlement Agreement to mean, fiscal year. Fiscal Year 2020 started on July 1, 2019. Attached to the FY 2019 RI DCYF Resource Family Recruitment Plan Reflection Summary, which is published on DCYF's website, is a recruitment and retention plan for FY 2020. However, this plan does not reflect any of the changes proposed by the Monitoring Team.

The Monitoring Team has enclosed the initial recommendations regarding the first Foster Care Retention and Recruitment Plan in Appendix C. Although the initial recommendations were for the FY 2019 Foster Care Recruitment and Retention Plan, the Monitoring Team is still requesting that these changes be implemented as they are applicable to the current plan as well.

The Settlement Agreement also requires that the Department draft an annual, public report assessing the implementation of the plan over the previous twelve (12) months and identify any

systemic factors that may have contributed to any shortfall in recruitment. The annual report should provide the number of homes recruited and retained by category, the number of homes recruited in each category during the implementation period, and the total number of homes available for child placement in each of the categories at the beginning and end of the 12-month period. The report should also include recommendations for corrective action. This report has been published on the DCYF website. However, this report did not discuss systemic factors that may have contributed to the shortfall in recruitment and did not provide a meaningful plan for corrective action to increase the recruitment and retention of foster families.

Report Status

DCYF will continue to conduct and publish this annual report until it exits from the terms of Sections 1-10 of the Settlement Agreement. The Monitoring Team awaits DCYF's publication of its updated Foster Care Recruitment and Retention Plan for FY 2020.

Section 1: Assessments – The Department appears to have achieved the required threshold for this measure (Assessments to be completed for children entering care or changing placements: Target - 85%, Unvalidated Performance - 91.40%), however, an insufficient number of placements were reviewed as it relates to statistical significance. The Monitoring Team recommends that the number of reviews be expanded in order to allow the Department to claim achievement of the benchmark for this section during the period of review. Without a sufficient number of placements for review, the results cannot be validated.

Section 2: Placement in Assessment and Stabilization Centers (ASC) – During each of the first two Reporting Periods, DCYF met the percent thresholds for this section. Therefore, DCYF may file a Notice of Exit with the Federal Court effective June 30, 2019 (the conclusion of the second Reporting Period).

Section 3: Placement in Congregate Care – During each of the first two Reporting Periods, DCYF met the percent thresholds for this section. Therefore, DCYF may file a Notice of Exit with the Federal Court effective June 30, 2019.

Section 4: Sibling Placements – The Department did not achieve the threshold (Siblings placed together, Target - 80%, Unvalidated Performance – 66.07%). An insufficient number of cases were reviewed as it relates to statistical significance. The Monitoring Team recommends reviewing a statistically valid sample for future review periods. Without a sufficient number of cases for review, the statewide results cannot be validated.

Section 5: Case Management – No additional outcome measures – beyond those described in Sections 6 and 10 – are defined in Section 5 of the Settlement Agreement. As DCYF did not meet the benchmarks described in Section 6 for Reporting Periods 2 and 3, the Department will now be responsible for conducting a workload study in consultation with the Monitoring Team.

Section 6: Visitation – The Department did not achieve the threshold (Monthly caseworker faceto-face visits, Target - 95%, Unvalidated Performance - 96.14%; Quality of face-to-face visits, Target - 85%, Unvalidated Performance - 43.42%; Frequency of sibling visitation, Target - 85%, Unvalidated Performance – 26.71%; Frequency of parent visitation (reunifications), Target - 85%, Unvalidated Performance - 42.52%). Neither the Department nor PCG reviewed a sufficient number of cases as it relates to statistical significance. For the Department this is reflected in measures 6.2, 6.3 and 6.4; and for PCG measure 6.1. The Monitoring Team recommends reviewing a statistically valid sample for future review periods. Without a sufficient number of cases for review, the statewide results cannot be validated.

Section 7: Licensing – The Department did not fully achieve the threshold (Non-kinship placements must be licensed, Target - 100%, Unvalidated Performance - 96.50%; Background checks required for kinship homes, Target - 100%, Unvalidated Performance - 93.37%; Kinship applications completed within six months, Target - 95%, Unvalidated Performance – 64.58% Background checks completed within 30 days of license renewal date, Target - 85%, Unvalidated

Performance - 37.01%). An insufficient number of cases were reviewed for statistical validity. The Monitoring Team recommends reviewing a statistically valid sample for future review periods. Without a sufficient number of cases for review, the statewide results cannot be validated.

Section 8: Child Protective Services – The Department appears to have achieved the required threshold (Timely screening of reports of abuse/neglect, Target - 90%, Unvalidated Performance - 93.68%; Response within designated timeframes, Target - 90%, Unvalidated Performance - 81.78%; Investigations completed within designated timeframes, Target - 85%, Unvalidated Performance - 65.83%). An insufficient number of reports were reviewed as it relates to statistical significance. The Monitoring Team recommends that the number of reviews be expanded in order to allow the Department to claim achievement of the benchmark for this section during the period of review. Without a sufficient number of reports for review, the results cannot be validated.

Section 9: Foster Care Maintenance Payments – No outcome measures are defined in Section 9 of the Settlement Agreement. As part of their commitment under this section of the Settlement Agreement, DCYF will reassess the base rate for foster care maintenance payments, advocate (if necessary) for appropriations to increase that base rate, and amend the Rhode Island Administrative Code to include a regulation requirement such a reassessment every three years. The Monitoring Team has received written notice that this was completed, and DCYF may file a Notice of Exit with the Federal Court seeking exit from this Section of the Settlement Agreement.

Section 10: Case Planning – The Department did not achieve the threshold (Case plans meet timeliness requirements, Target - 80%, Unvalidated Performance - 43.40%; AACWA elements in case plan, Target - 80%, Unvalidated Performance - 36.77%). Neither the Department nor PCG reviewed a sufficient number of cases as it relates to statistical significance. For the Department this is reflected in measures 10.3, and for PCG 10.2. The Monitoring Team recommends reviewing a statistically valid sample for future review periods. Without a sufficient number of cases for review, the statewide results cannot be validated.

Section 11: Maltreatment in Care – DCYF has authored and published on its website its "Annual Safety Analytic Report" for Federal Fiscal Years 2018 and 2019, each of which contains an analysis of the prior three years' worth of data. This commitment has not yet been met for the fourth Reporting Period, which ended June 30, 2020.

Section 12: Foster Home Array – DCYF's report summarizing its findings from State Fiscal Year (FY) 2018–2019 has been published by DCYF on its website as the *FY 2019 Resource Family Recruitment Plan Reflection Summary.* However, this plan does not reflect any of the changes proposed by the Monitoring Team. Additionally, the Settlement Agreement requires the Department to publish a public report assessing the implementation of the plan over the previous twelve (12) months and identify any systemic factors that may have contributed to any shortfall in recruitment. The report, published on the DCYF website, did not discuss systemic factors that may have contributed to the shortfall in recruitment and did not provide a meaningful plan for corrective action to increase the recruitment and retention of foster families. Therefore, this commitment has not been met for Reporting Periods 2, 3 or 4.

The Monitoring Team is presenting this report in compliance with their role and responsibilities outlined in the Settlement Agreement. The Monitoring Team is requesting that the outlined recommendations be implemented forthwith to ensure that past and future reporting periods yield data that is reliable and valid. The Monitoring Team is also requesting that any documentation or information requested in this report be promptly provided to prevent any further delay in the analysis of the data and the authoring of subsequent reports regarding the Monitoring Team's findings. The Monitoring Team also awaits receipt of the Department's Corrective Action Plans addressing the sections of the Settlement Agreement in which the described benchmarks were not met during the first two Reporting Periods.

In five of the twenty measures described in the Settlement Agreement, in order to estimate the overall statewide outcome, DCYF conducts a "quality review" of a random sample of records in order to make an inference about the overall statewide outcome. In order to achieve a sufficiently high level of confidence in the validity of the results, a sufficiently large sample of records must be drawn in order to permit the sample to have a high likelihood of reflecting the composition and outcomes achieved by the full universe of evaluated records. Low sample sizes will result in a low level of confidence in the results, while increasing the sample size will increase the statistical validity of the sample.

The formula used to identify the number of records that must be included in a random sample in order to achieve a certain level of statistical significance of the results at a specified margin of error is:

Sample Size =
$$\frac{\frac{z^2 * p(1-p)}{e^2}}{1 + \frac{z^2 * p(1-p)}{e^2 N}}$$

Where:

- N represents the size of the overall universe of records;
- *e* represents the margin of error as a percentage in decimal form;
- *z* represents the "z-score," representing the number of standard deviations from the mean (average). A z-score of 1.96 standard deviations from the mean represents a 95% confidence level; and
- *p* represents the estimated sample proportion; an estimate of 50 percent (0.5) represents the most conservative value (that is, the one that will most likely result in a sample proportion commensurate with that of the full universe)

Table 4 illustrates for a range of potential universe sizes the sample size necessary to achieve a 95 percent confidence level with a margin of error of three percent – that is, by fixing the values of e and z in the equation above respectively to 0.03 (three percent) and 1.96 (95% confidence level), and scaling the value of N:

N (universe size)	Sample Size Required
50	48
100	92
200	169
300	235
400	292
500	341
1,000	517
2,000	697
3,000	788
4,000	843

N (universe size)	Sample Size Required
5,000	880
Table 4: Sample Size to Estimate Proportion	

Rhode Island Department of Children, Youth & Families Andrew C. v Raimondo Monitoring Team Report January 1, 2020 – June 30, 2020 Reporting Period Page 51 In each of the twenty measures described in the Settlement Agreement, the Data Validator is tasked with verifying the accuracy of the data compiled by DCYF. As described in Appendix A and elsewhere in this report, for five of the measures the Data Validator is verifying the findings from "quality reviews" conducted by DCYF. For the remaining fifteen measures, the Data Validator is verifying outcomes that were calculated programmatically by DCYF via database queries run against RICHIST.

In a scenario such as this one, where the case-level findings have been identified across the full statewide universe, the operative sampling mechanism is not one that will estimate the overall statewide proportion as described in Appendix A, but one that will, to a certain degree of confidence, identify the likelihood that any errors in the original syntax or methodology are identified during a follow-up review.

The formula used to identify the likelihood of identifying an error from a sample of a certain size, known as the hypergeometric distribution, is:

Chance of Finding Error =
$$1 - \frac{\frac{K!}{(K-k)!k!} * \frac{(N-K)!}{((N-K)-(n-k))!(n-k)!}}{\frac{N!}{(N-n)!n!}}$$

Where:

- N represents the size of the overall universe of records;
- *n* represents the number of records in the sample;
- *K* represents the number of records in the universe where a methodological error occurred (assumed to be one percent of the universe of records); and
- k represents the number of methodological errors in the sample (assumed to be zero¹¹).

Table 5 illustrates for a range of potential universe sizes the number of records that must be reviewed – assuming a one percent error rate – in order to be 99 percent confident that at least one record with a methodological error will be included in the sample.

N (universe size)	Sample Size Required
50	50
100	99

¹¹ The hypergeometric distribution, as applied in this scenario, returns the likelihood that a sample of size n will include at least one case with at least k methodological errors. Strictly speaking, the

hypergeometric distribution will indicate in the examples that follow that there is a one percent chance of the sample identifying no erroneous cases (i.e., k=0). The operative calculation, however, is the inverse of that– that there is a 99 percent chance of the sample <u>not</u> identifying no erroneous cases (i.e., at least one erroneous case).

N (universe size)	Sample Size Required
200	180
300	235
400	273
500	300
1,000	368
2,000	410
3,000	425
4,000	433
5,000	438

 Table 5: Sample Size Required to Achieve 99 percent Chance of Finding at Least One Error

It would be very helpful to know more specifics about what steps, goals, and evaluation measures DCYF will be employing as this process unfolds, beyond a total number of homes. How will we know that success has been achieved, and how will we know what to fix if it isn't?

It would also be very helpful to know how the different pieces of this recruitment plan integrate. For example, how will social media be managed, since it will be used in so many contexts? Where do one measure's efforts piggyback on another's, and how can the different measures enhance one another? Who will develop the materials needed, and how will they be disseminated among the various resource families, through the Internet, and at events and meetings?

In the section labeled "About this Recruitment Plan" it is noted that the recruitment plan was developed in consultation with the Office of the Child Advocate; we would disagree with this statement. On April 24, 2018, the Office of the Child Advocate met with several members of the Licensing Staff. During this meeting several members of the licensing staff presented a PowerPoint, which explained some of the ideas/goals they had for a foster care recruitment plan as well as some data they had pulled. At no time was a formal recruitment plan ever presented to the Office of the Child Advocate for our "consultation" or feedback. It was not until February 4, 2019, the Office of the Child Advocate received the "Resource Family Recruitment and Retention Plan" after it was requested to be sent by the Data Validator.

I. RECRUITMENT GOALS AND OUTCOMES

GOAL 1: NON-KINSHIP RESOURCE FAMILY TARGETS

- Include a measure of the bed-child ratio to measure the extent to which there are sufficient homes to care for children.
- Include the number of families that are currently open and available to DCYF, as well as the percentage increase that the targets represent.
- Since this report was written there are new DCYF policies regarding foster homes in response to a recent child fatality. Specifically, foster homes will not consist of more than 5 children without Director approval or the approval of the Director's designee AND the mandate that children who are not related shall not be placed together in the same foster home without Director approval or the approval of the Director's designee. Due to these changes, has DCYF factored the potential increase in licensed foster homes to their targets in response?
- The targets should include homes that are trained specifically to work with children who are members of the LQBTQ community.
- Include detail about specific steps to be taken for recruitment of new foster homes.
- Provide a detailed and specific plan of which staff are responsible for each step of the recruitment plan.

GOAL 2: INFRASTRUCTURE

- Identify the specific means by which DCYF intends to implement the system for tracking prospective resource families progressing toward licensure. In other states, for example, they incorporate the tracking into their case management system (i.e., RICHIST).
- What process is DCYF undertaking to identify a tracking system that will meet the needs to accomplish the goals outlined? Has a funding source already been identified to effectively carry out this initiative?
- What staff are specifically working on the implementation of each of these infrastructure goals and provide the anticipated date of completion?
- Provide specifics on what steps are to be taken each month to achieve these goals in time for the anticipated date of completion (need more specifics).
- Presently there is a backlog of unlicensed kinship foster homes. In some cases, children have been placed in these homes for well over a year without many components of the licensing process being completed, including home studies. In response, the Department has brought in five (5) contract-based employees to focus solely on home studies. Even with this temporary addition to the staff it is being reported that it could take up to seven (7) months to clear this backlog. Recruiting additional foster homes is important to meet the needs of children but properly vetting and reviewing these homes to ensure the safety of the children placed there is vital. Due to this:
 - Are there plans to permanently hire additional staff to prevent a backlog of this magnitude from occurring in the future?
 - Have considerations been made as to what additional front-line staffing may be necessary to license and adequately support the increased number of foster families? If so, specifically what was done to review this need and what determination was made?
 - What measures have been taken to review performance and outcomes of the current licensing staff to determine whether policy and protocol changes are necessary to increase efficiency?
- Recent contract changes have resulted in DCYF taking more of the licensing, recruitment and retention process on internally away from providers previously tasked with this. What measures have been taken to assess the staffing and resource needs of the Department to ensure that this Unit has the capacity to handle these changes when already experiencing a backlog?
- Consider assigning a staff member who is available for foster parents to connect with about the current status of their application.
- Identify specific targets for increasing the web presence of DCYF. Will recruitment videos be created? If so, how many, by when, and how will they be disseminated (YouTube, Social Media, DCYF website)? What social media presence will DCYF have (Twitter, Facebook, . . .)? What changes or additions to DCYF's web presence will be initiated?

GOAL 3: SUPPORT AND RETENTION

- What is the current percentage of non-kinship resource families who close their licenses annually, and what percentage is the retention goal per year? Ideally, this would line up with the recruitment goals so the number of homes that are being recruited replace the number lost.
- Activities and groups for foster parents can be helpful to help them feel supported and increase their sense of pride and community for what they do. Maybe include goals for connecting with local community organizations such as churches and YMCA's to host a "Foster Parent Night Out" where parents can bring their kids who would have supervision while they take a moment to relax and connect with other foster parents.
- Please also include a section on the recruitment and retention of kinship foster homes.
- Provide specifics:
 - Which staff members will be responsible for achieving the two goals set out in this section?
 - What is the timeline for completion? Provide specifics on steps to be taken each month to achieve these goals?

II. RECRUITMENT & RETENTION STRATEGIES AND SUB-STRATEGIES

STRATEGY 1. STRENGTHEN ENGAGEMENT WITH CURRENT RESOURCE PARENTS

A. Develop families into recruitment ambassadors.

- Identify the plan specifics for the resources and specific targets for the number of families and referrals received from recruitment ambassadors. What will be the financial incentives? How frequently, where, and how many meetings and events will be held? What materials will be developed and how will they be disseminated?
 - For example:
 - DCYF will increase the number of families participating as recruitment ambassadors to ##, an increase of ##%, by July 1, 2019. In order to achieve this goal, DCYF will engage the following strategies by [DATE]:
 - A \$### gift card will be offered to any current foster or adoptive parent who refer a prospective resource parent who goes on to attain a home license.
 - ## recruitment events will be held: # in Region 1, # in Region 2, # in Region 3, and # in Region 4, with at least one event happening per month per region. These events will be promoted through social media, mailings, flyers, phone contacts, and on the DCYF Website. ##% of these events will be held in areas that typify the characteristics of the homes from which children in DCYF's care originate.
 - Recruitment efforts will be further enhanced by the creation of educational materials that can be handed out to potential recruitment ambassadors at the meetings, at in-service trainings, during caseworker visits, and through engagement on social media. These materials will be created by DCYF/other agency and will focus on the need for recruitment ambassadors, the importance to children of foster care recruitment, and

the power of current resource parents in communicating the "story" of foster care to potential resource parents. These materials will be completed, and dissemination will begin by March 2019.

B. Soliciting advice from our families around application, licensing, support and matching processes.

- What groups will be created, how many, and where will the groups be located?
- How many surveys will be sent out to families?
- What other methods of feedback will be provided to families?
- How will participation be measured, and how will the results be used to improve the foster care system?
- How will surveys be provided (i.e. via email, mail, calls directly to foster parents?)
- What staff members will be responsible for this "quality assurance" role?
- If negative feedback is provided, what will be the process required to ensure that this feedback initiates positive changes? What is the chain of command this will be reported to? Who will tasked with the responsibility of improving the individual foster parent's experience? Who will be responsible for policy and process review to see if additional changes need to be made?

STRATEGY 2: USE COMMUNITY OUTREACH TO ARTICULATE SPECIFIC NEEDS

A. Design and execute a teen-focused statewide campaign

- What are the specifics surrounding the implementation of the teen-focused statewide campaign? How will storytelling and teen-focused marketing be conducted? Will materials be sent to schools or athletic programs? How will youth involved in The Voice develop and communicate their message?
- What is the target number or percentage increase of families who express interest in fostering teenagers at the time of being licensed?
- What staff members will be tasked with the responsibility of developing the teen-focused campaign, including the written materials?
- What is the anticipated date of initiation of the campaign?
- Are there any additional supports or services that will be provided to families who are taking in teens and will these be part of the resource materials or campaigns as the needs of a teen may be more extensive?
- Consider specific support groups and community connections for foster families with teens.

B. Organize specific community engagement tactics in minority and professional communities

- How will minority and professional communities be engaged?
- Will materials be developed, or events held? How many and where? Has the Department identified the community-based partners they will be partnering with? If so,

who? What is the plan to work with these groups for marketing, events, recruitment, etc.?

- How will success be measured for this outcome a percentage or number increase?
- o Could this include religious organizations as well?
- What staff members will be responsible for the marketing campaign?
- o What is the plan to target the identified groups specifically?

C. "Re-recruit" our current resource parents to identify families in the array who might be ideal for placement of large sibling groups

- What form will this marketing and communication take? Discussions with DCYF staff, dissemination of materials, or some other means?
- What is the expected number/percentage of "re-recruited" families that will be the measure of success on this measure?
- Develop a plan for recruitment, support and retention of kinship foster families who may be willing to take in large sibling groups with additional support and resources.
- Has there been a review of additional services, resources and supports that may be needed to further support families willing to take larger sibling groups?
- Has there been a study of foster families who have taken larger sibling groups in the past to determine what supports/services were the best means of support? What needs may have been unfulfilled? What if anything could have been done differently to better support the family? Was there a disruption due to lack of support?
- What are the number of families needed to meet this need?

STRATEGY 3. BROADEN DEVELOPMENT AND SUPPORT PROGRAMMING

A. Support services available to all families.

- How will the "connection" of all families to support organizations, respite, and wraparound services be measured (i.e., will this be the dissemination of flyers at intake, ongoing engagement at trainings and caseworker visits, outreach, etc.)?
- Rather than measuring service utilization after connection to the support services, consider measuring family satisfaction with the supports they receive (for example, through the survey process included in the recruitment and retention strategies section).
- If the Department planning to utilize outside providers to assist with support and retention what is the specific timeline for RFPs and the awarding of contracts?
 - If planning to use providers, which providers will be used and how will they assist with the support and retention of foster parents?
 - Will providers received increased funding to be able to meet the increased capacity of foster families and provide resources and services necessary to support and retain foster families?
- There is a need for an increase in intensive community-based services to support children in foster homes opposed to having to resort to group care. What has been done to assess the additional need for services to support the increase in foster families?
- Has an in-depth review been completed of the gaps in services?
 - o What are the needs for increased services?

- How is this review being completed? Is the Department obtaining feedback from the provider community and foster families to determine what services may be necessary?
- Has the Department looked to see what other states are doing in this area? If so, are there supports and services that we may need to develop here?
- Develop a plan/process/protocol to ensure a smoother transition for kids into a foster home. Ensure that all necessary information is provided right up front (where does the child go to school, logistics of transportation to school, have they been appropriately registered-this should all be done in advance of moving the child). Does the child have allergies? Medical needs? Are there past behaviors, fears, issues, concerns, that the foster parent should be aware of to assist them in better caring for the child? What are the child's service needs? Where/when will they have to go each day? Who is the child's doctor? Etc. Does the foster parent have the necessary authorizations to care for the child? Feedback often received is that many times a foster parent is receiving a child, but they do not get all necessary information right away!

B. Implement in-service training opportunities

- What is the target for the number/percent of families taking advantage of in-service training opportunities?
- There were additional topics identified (i.e. self-care, connections to birth families, grief process). Are these topics that DCYF staff will need to be trained on in order to provide appropriate training?

C. Promote to private sector ways they can support RI resource families

- What specific materials will be developed to solicit businesses and community groups and how will they be disseminated?
- What specific number/percentage increase will be considered a success on this measure?
- What staff members will be responsible for managing and maintaining this campaign?
- What is the specific plan to recruit community supports?
- How will this information then be disseminated to foster families to make them aware of these resources?
- Consider adding an item D. that focuses on better matching families to the needs of youth.
 - Develop a better assessment tool to better determine the needs of the child, match the child with a family who is well-equipped to meet the needs of the child and to identify right up front the potential supports and services needed to provide ensure the child's stability in the placement and ensure those needs are met upon the child's transition in to the home.

STRATEGY 4. LEVERAGE TECHNOLOGIES TO IMPROVE EFFICIENCY AND REACH

A. An application and tracking system to support prospective resource families as they progress toward licensure

- What is the target date by which the CRM tool will be implemented? How will it be introduced, and when will measurement begin? What is the goal for the percentage and number of prospective families utilizing the system?
- How is the CRM being identified? Has the system been identified? How long will it take to implement the system? What type of staff training will be provided to achieve the most effective results from the use of the CRM? Who will be providing this training? Has the Department looked to the use of a CRM by other states to better understand their success or failures with the use of the system to better inform our state's use?
- What staff member will be tasked with monitoring the CRM?

B. A Web presence that allows families to get more information and easier access to application materials

- Provide specifics regarding by whom, by when, and what types of material are being developed. What will be done to utilize and engage families in social media?
- What is the target for the number of inquiries received via the DCYF website?
- What staff members will be responsible for all of this and responsible for the continuous update of these materials?
- What is the anticipated date of completion for these goals? What is the timeline/plan for completion?

Several factors impact the workload of DCYF staff, including the complexity and the intensity of the work. Time is the basic unit of measurement for any workload study – both in terms of the amount of time <u>currently being spent</u> on case-specific activities, as well as the amount of time that <u>must be spent</u> by caseworkers each month/quarter in order to meet the requirements of the case.

Each staff person has only a certain amount of time available to devote to casework. The question of whether additional staffing resources are needed becomes a mathematical one: Is the amount of time required by the existing caseload greater than the time staff have available to handle those cases? Answering this question also offers agencies the opportunity to measure the average number of cases any one caseworker can handle, depending on the types of cases with which he or she is involved.

The workload study should, at a minimum:

- measure the time that caseworkers have available to work on cases;
- measure the time workers spend on different types of cases, taking into account the type of work conducted on different types of cases (e.g., a child abuse investigation will require more frequent in-person visitation than an ongoing placement case);
- measure the quality of service provision by assessing compliance with specific policy requirements;
- include the intensity and complexity of cases through a classification structure which examines differences among case types and their activities, and the varying levels of effort needed based on case variations, e.g., allegations or reasons for involvement in the child protection system, sibling group size, etc.; and
- calculate the maximum workload workers can be expected to handle by comparing the time required for cases to the time workers have available for casework.

The first step is to determine how much time DCYF staff spend on casework as opposed to other parts of their job. The two most common methods for measuring time that is available for casework are a random moment time study (RMTS) or a 100 percent time study. In a RMTS, workers are contacted at a random point in time and asked about the activity they were engaged at that moment. By aggregating the responses over the statewide eligible workforce received over a period of time, e.g., four to six weeks, the proportion of time spent on those activities may be calculated. To illustrate, if 70 percent of the survey responses indicate caseworkers were engaged in a case-specific activity, DCYF may reasonably infer that caseworkers have on average of 26 hours per week (37.5 hours x 70%) to spend on case-related activities.

In addition, the workload study should evaluate the amount of time it takes to complete casework, measuring the time needed to complete activities required in policy on a monthly basis for ongoing services or to make a determination for an assessment case. Required activities often include engaging in face-to-face visitation, traveling to complete that visitation and documenting case activity in RICHIST for ongoing cases and reviewing documentation to determine the investigative

¹² This Appendix was originally published in the third report of the Monitoring Team, summarizing Department performance during the July 1, 2019 – December 31, 2019 reporting period.

finding for an assessment case. A "time standard" is then calculated of the amount of time such activities take as well as the amount of time spent on all other activities that are key to best practice, e.g., arranging for services, completing case planning. This can be accomplished through a number of mechanisms, including a desk audit, "shadowing" of workers, a time study of a sample of cases over a four to six week period or a 100 percent time study, during which staff are asked to record in short increments (typically 10 or 15 minutes) what activities they were engaged in, and on what case. The amount of time spent on specific cases can be cross-referenced against administrative data, such as what is housed in RICHIST, to evaluate the amount of time required in order to achieve positive outcomes, and to meet the requirements of Department policy.

DCYF would then be able to derive through the workload study the amount of time caseworkers have available to spend on case-specific activities, and the amount of time that is required in an average month or quarter to complete those activities. This will permit DCYF to identify the extent to which caseworkers have sufficient "hours in the day" to engage in the various types of activities tracked via the workload study. Where "gaps" exist, the workload study can also help inform the magnitude of the shortfall (which has staffing implications), and identify where efficiencies can be gained.