#### Massachusetts Court Improvement Program 2015 Annual Self-Assessment Report

The purpose of this report is to create an opportunity to reflect on what the Court Improvement Program in Massachusetts (Mass CIP) is doing, why we are doing it and whether our efforts are having the intended results. Following the format and suggested questions provided by the Children's Bureau, we will try to identify what is working well, areas that need improvement and the type of support that would be most helpful.

The report is made of seven sections with corresponding questions. In Section I we identify two high priority projects and discuss them in-depth from a CQI perspective. Section II focuses on current priority areas and driving forces within Massachusetts that may be affecting our work. Section III provides a concise accounting of projects/activities in specific topical areas. Section IV focuses on collaborative efforts; Section V centers on CQI needs. In Section VI we do a self-assessment of Mass CIP's current capacity. In Section VII Mass CIP reports on our timeliness and other performance measures.

#### I. CQI Analyses of Projects

Our two highest priority CIP projects in some stage of the CQI process in FY15 are 1) development of a guide on confidentiality and information sharing specific to Massachusetts and 2) laying the groundwork and beginning the research project called "Designing Data-Driven Directions for School Success of Children in Care." We will indicate where we were in the process when the fiscal year ended and what plans we have for furthering the work.

#### **Project #1 Confidentiality and Information Sharing Guide**

The purpose of the guide on confidentiality and information sharing (the guide) is to inform a wide range of professionals working with children and families about privilege and confidentiality laws, thus promoting adherence to the law when making decisions about the sharing of information and minimizing any unintended negative consequences for children and their families. Work began on developing the guide in December 2013 at a conference at Georgetown University which included representatives of the Department of Children and Families (DCF), Department of Elementary and Secondary Education (ESE), the Committee for Public Counsel Services, (CPCS which provides attorneys for parents and children), Juvenile Court, Probate and Family Court, and the Court Improvement Program. Subsequent serious consideration by the CIP Steering Committee led to making development of the guide a CIP priority for FY15.

1. *Identify and assess needs*. The unintentional release of protected information about children in care among courts, schools, DCF and other providers may actually result in harm to such children. On the other hand, slow exchange of information or refusal to

provide information can delay provision of needed supports, hamper reaching positive well-being outcomes and delay permanency.

### What are the outcomes you were hoping to achieve?

We hope to provide a better understanding of what and when information can and cannot be shared, become more informed on the impact of information sharing decisions on children, youth and families, and provide a useful tool that will improve positive outcomes for children in care and their families.

#### What evidence (e.g., data) did you have of the need for improvement?

Judges and attorneys alike indicated concern about free flow of information that could be harmful to children in care and possibly influence the increase of children in care crossing over into delinquency. Professionals admitted that misunderstanding what information could and could not be shared often delayed services and decisions that could improve well-being and permanency.

## 2. Develop theory of change. What is your "theory of change" (how do you think your activities/interventions will improve the outcomes)?

Our theory of change is that by bringing together to draft the guide representatives of the agencies and courts who work with children and youth in care, we will be able to provide a guide that can provide basic information on: what must be shared, what can be shared and the importance of having informed, voluntary authorization by the parent or holder of consent unless there is an explicit exception to the consent requirement under applicable federal and state laws. Having this information readily available will improve privacy practices and encourage appropriate timely sharing.

## 3. *Develop/select solution*. How did you select your activities/interventions (e.g., evidence-based, empirically supported, best-practices, etc.)

Our activities were based upon best-practices for information sharing. We convened a multi-disciplinary committee of experts on confidentiality and information-sharing in Massachusetts who represented courts and agencies working with children, youth, and families to serve on the CIP Project Team tasked with developing the confidentiality and information sharing guide. Additionally, we contracted with the Robert F. Kennedy National Resource Center for Juvenile Justice (RFK) which had assisted with the preparation of information sharing guides in other states and were well informed on key federal laws and regulations.

# 4. Describe the implementation of the project. What did the CIP do to implement the project?

CIP contracted with RFK at the beginning of FY15 to facilitate the committee meetings, design the guide, and incorporate revisions to sections. Each project team member drafted 5-7 questions for their courts/agencies section. CIP staff provides administrative support

to the team such as hosting the meetings of the CIP Project Team and the RFK consultants in FY15 and continuing into FY16.

### What did others (e.g. judges, attorneys) do?

Judge Sally Padden and Amy Karp, Esq., Co-Chaired the CIP Project Team during FY 15, until Judge Padden's retirement in June, 2015 when Amy Karp took over as Chair. Attorneys on the Project Team included representatives of the DCF, Youth Advocacy Division of CPCS, the Department of Youth Services, the Administrative Office of the Juvenile Court, the Administrative Office of the Probate and Family Court, the ED Law Project of CPCS and the Children's Law Center of Massachusetts, the Department of Elementary and Secondary Education, the Office of the Commissioner of Probation, the Mental Health Legal Advisors Committee, the District Attorney Offices of Middlesex and Norfolk Counties, and the Executive Office of Health and Human Services. The attorneys drafted their own section of the guide for review by the whole Project Team and evaluated other sections of the guide discussed in detail at our regular meetings.

## Did you do anything to ensure fidelity of the implementation (that is, anything to ensure the program was implemented as it was supposed to be)?

By including representatives from agencies and courts on the team and contracting with nationally recognized experts, CIP hoped to build rapport and understanding that would lay the foundation of making the guide an accepted, useful tool in Massachusetts and perhaps a model for other states to use as well.

a. If the project has not yet been implemented, please briefly describe your intentions/plans for implementation.

The final section drafted by the district attorney representatives is scheduled for discussion at the first January 2016 Project Team meeting. The final draft of the guide should be completed by early 2016 and ready for final review by Commissioners and Secretariats. Printing of the guide and the development of website will need to be determined. We hope to have the guide in print and on the CIP website by spring or summer of 2016. Training on its use will be supported by CIP.

5. Describe any monitoring/evaluations/assessments of your project and how you intend to apply the findings. How are you monitoring implementation and changes?

Questions raised in team meetings have led agencies to revise policies that had not been changed for over thirty years. We may wait to finalize the guide until such time that the new agency policies, that have been drafted and are now circulated for approval, can be included in the final version.

What data collection tools/methods did you (will you) use to assess effectiveness? We can measure distribution of the printed guide by orders that are submitted to CIP. We can count hits on the CIP website of the guide once it is uploaded. Distribution will be organized through training events during FY16. Training will have pre-and post-written

evaluations to determine acquisition of substantive knowledge. The Project Team also plans to develop assessment instrument to distribute to judges and supervising attorneys to evaluate whether the guides are helping to improve practice and ultimately, outcomes for children in care and their families.

#### What evidence is there that the activities/interventions were effective?

Evidence demonstrating the effectiveness of the guide are the number of agencies or courts who update (or plan to) their policies and regulations in the upcoming fiscal year, the number of trainings on confidentiality and information sharing in the planning or implementation stages in the upcoming fiscal year, the number of guides distributed, the number of visits to the guide's website and the number of initiatives that involve multisystems collaborations (e.g. an increase in sites participating in pilot to improve service coordination for dually involved youth).

## What evidence is there that the activities or intervention were implemented with fidelity?

By comparing the Massachusetts guide to those drafted in other jurisdictions, we can evaluate how reliable our guide is. By using national and local experts to draft our guide, we can be assured that the end product, the guide, will be a reliable, useful resource for professionals in Massachusetts.

### Describe how evaluation/assessments were used to inform the project.

Each meeting of the Project Team was used to examine carefully different sections of the guide, often word by word, before the draft was approved.

### Does the intervention need to be adjusted, stopped?

Development of the guide may be delayed to include policy changes made by agencies during the course of drafting the guide.

#### Does the problem still exist?

We have not completed the guide.

#### Was your theory of change supported?

a. If the project has not yet been evaluated/assessed, please briefly describe your intentions/plans for evaluation/assessment.

We will plan trainings around the guide and evaluate them through assessments of information learned during the training. We will further assess use of the Guide r

	by distribution and site visit numbers, requests for training from other agencies o court personnel, and changes to agency or court policies. We will also measure success through data from our due process court performance measures and numbers of sites participating in dually involved youth pilots.
6.	Is this project a priority for you in 2016?    ☐ Yes ☐ No
7.	Would you like a CQI consult around this project? $\square$ Yes $\square$ No

Project # 2 Designing Data-Driven Directions for School Success of Children in Care Briefly describe the project and indicate the approximate date the CIP began working on it.

1. *Identify and assess needs*. The 2007 CFSR indicated that children who receive services should be having their educational needs met, but an evaluation by participants at the 2011 Children Welfare, Education, and the Courts conference indicated that more work on understanding the education characteristics and experiences of this population needed to be done in order to meet their educational needs. The action plan developed at the conference has been the basis for Outcome #7 of the CIP Strategic Plan with a focus on two activities – improving stakeholder knowledge and enhancing data collection and utilization. To achieve the activities set forth in the action plan, a working group of members of an Education Stability and Outcomes Task Force partook in weeklong Information Sharing program (December 2013) to develop two projects that meet the goal of objective of Outcome #7 – one of which was the implementation of multi-systems research study on the education stability and performance of students in care.

Think about why you decided to focus on this issue. What is the need you were trying to address? The need we were trying to address is to identify and understand which students have successful education experiences and outcomes (i.e. meeting their educational needs) and which do not. Identifying the strategies and practices for those who have their educational needs met (and those that do not) will allow us to improve our ability to meet the educational needs for all children in care.

What are the outcomes you were hoping to achieve? What evidence (e.g., data) did you have of the need for improvement? The outcomes we were hoping to achieve were to understand practices associated with successful educational experiences and outcomes and determine how those practices can be adapted for those children whose educational needs are not being met. The data revealed that children in care performed poorly on the state's standardized tests, as compared to the general population. However, we recognized a lack of information on those in that population who were achieving successful educational outcomes (e.g. were they in a kinship placement, involved in extracurricular activities, actively coming to court, etc.).

2. Develop theory of change. Do you have a theory about the causes of the problem? What is your "theory of change" (how do you think your activities/interventions will improve the outcomes)? Based on existing national research, we know that protective risk factors associated with dependency (e.g. placement type, length of stay, number of school changes) strongly affect academic experiences and performance. Our theory for change is that we will have more information about the current practices that meet (or impede) the educational needs for subgroups of the student population. By conducting the study, we can began to examine how to sustain practices that are working, change

practices that are not working, and communicate roles that all systems can play to assist in meeting the educational needs of the child. Subgroups include children with special needs, children in kinship placements, children in independent living placements, crossover children, children in placement for a long duration, and other subgroups with similar demographic or child welfare characteristics.

- 3. *Develop/select solution*. How did you select your activities/interventions (e.g., evidence-based, empirically supported, best-practices, etc.). We selected a research study as our intervention since it is an evidence-based tool to examine populations. Furthermore, we selected a mixed methods research approach which employs quantitative analysis to assess and control for multiple variables and qualitative analysis to exploring the meaning of variables.
- 4. *Describe the implementation of the project.* What did the CIP do to implement the project? To implement the research study, we formed a Project Team to oversee the selection of a researcher and the management of the project (February/March 2015). Through a competitive procurement process, the Project Team selected Boston University School of Social Work to conduct the study based on their extensive research background in quantitative and qualitative analysis on at-risk populations (Contract start date of September 2015).

What did others (e.g. judges, attorneys) do? The Project Team was composed of a juvenile court judge, CIP representatives, and attorneys representing agencies working with children in care (e.g. schools, DCF, DYS, CAFL, etc.).

Did you do anything to ensure fidelity of the implementation (that is, anything to ensure the program was implemented as it was supposed to be)? To ensure that the research study would have the data to conduct an evidence-based research study, members of the Project Team met with their respective agencies and court data teams to discuss the data extraction and analysis process. Furthermore, CIP is considering hiring a former DCF education specialist to ensure fidelity to the study. Lastly, the Research Director of the Massachusetts Trial Court will assist in overseeing the research project.

- a. If the project has not yet been implemented, please briefly describe your intentions/plans for implementation. Project is implemented.
- 5. Describe any monitoring/evaluations/assessments of your project and how you intend to apply the findings. How are you monitoring implementation and changes? What data collection tools/methods did you (will you) use to assess effectiveness? What evidence is there that the activities/intervention were effective? What evidence is there that the activities/intervention were implemented with fidelity? Describe how evaluation/assessments were used to inform the project. Does the intervention need

to be adjusted, stopped? Does the problem still exist? Was your theory of change supported? This project has not been evaluated yet.

**b.** If the project has not yet been evaluated/assessed, please briefly describe your intentions/plans for evaluation/assessment. We intend to assess the findings of the study through meetings with the Project Team and CIP Steering Committee.

6.	Is this project a priority for you in 2016?	$\boxtimes$ Yes	$\square$ No	

7. Would you like a CQI consult around this project?  $\square$  Yes  $\square$  No

## II. Trainings, Projects, and Activities

## 1. Trainings

Topical Area  Data	Did you hold or develop a training on this topic?  □Yes ⊠No	Who was the target audience?	What were the intended training outcomes?	How did you evaluate this training?
Hearing quality	⊠Yes □No	Attorneys Attorney mentors	Increasing trial practice skills Mentor training to facilitate professional growth of newly certified attorneys by helping them learn substantive law, court rules and procedures and improve legal skills through experience, instruction and feedback.	Satisfaction survey post training
Improving timeliness/ permanency	⊠Yes □No	Attorneys	Improve timeliness measures	
Quality legal representation	⊠Yes □No	Attorneys	Representing parents and children in guardianship cases; child development and communicating with child clients	
Engagement & participation of parties	⊠Yes □No	Attorneys		

Well-being	⊠Yes □No	Attorneys and social workers	of tra illnes psyc Med decis	ease knowledge numa, mental ss in children and hotropic meds ical treatment sions for children CF custody	
ICWA	⊠Yes □No	Attorneys, judges, social workers, tribal members, court personnel	Incre of IC	ease knowledge EWA	
Sex Trafficking	⊠Yes □No	Attorneys, judges, social workers		ease knowledge x trafficking	
Other: 1. Representing parents with disabilities 2. Crossover Youth 3. Meeting the legal needs of girls	⊠Yes □No	Attorneys, judges and social workers	in repared disable and l 2.Inco avoid delin 3.pro what and l	ach skills needed presenting ints with collities in Care Protection cases licate ways to d crossing into equency covide training on a girls' needs are now girls' needs r from boys'	
AFCAR case man	S, SACWIS), da	ojects include any work ata dashboards, data repairs, and data sharing effect/activity?	ports, forts.		
Project Descri	iption			How would you categorize this project?	Work Stage (if applicable)
filings (monthl (quarterly);	y); case-flow pe	number of children in c erformance measures	ease	Data dashboards	Implementation
timeliness mea	sures, education	rated annually for CIP a characteristic measure ort cases (annually)	es,	Agency Data Sharing Efforts	Implementation
Do you have <b>data reports</b> that you consistently view? ⊠ Yes □ No  If <b>Yes</b> , around which topics?  ⊠Hearing quality ⊠ Timeliness ⊠Permanency ⊠Well-being ⊠Education □ Engagement of youth □Engagement of Parents □ Other Engagement □ Quality Legal Representation  ⊠ICWA □DCST □Runaway Youth □Other: □ Other: □ Ot					

3. <b>Hearing Quality.</b> Hearing quality projects including the quality of dependency hearings, including a process improvements, specialty/pilot court protitle IV-E determinations, mediation, or appeals	court ob ojects, p	servation/a	ssessm	ent projects,
Do you have a hearing quality project/activity?		es 🗆	No	
Project Description	you c	would ategorize project?	V	Vork Stage (if applicable)
Evaluation of appellate timeliness and identification	Appe	-	Evalu	nation/Assessment
of barriers such as time for transcript preparation.				
4. Improving Timeliness of Hearings or Perma	nencv	Outcomes.		
Do you have a Timeliness or permanency proje	•		es [	□ No
Do you have a Timeliness of permanency proje	ou acti	110).		_ 110
	How	would	V	Vork Stage (if
	you ca	ategorize		applicable)
Project Description		roject?		
Revision of Trial Court Rule on Permanency	(	Other	Sel	ecting Solution
Hearings Collection and sharing of timeliness data	Gono	ral/ASFA	Evolu	nation/Assessment
Distribution of Reasonable Efforts to judges in		ral/ASFA		nplementation
Juvenile Court and judges in Probate and Family	Gene	iai/ASi A	11	пристепции
Court				
5. Quality of Legal Representation.				
Do you have a quality legal representation proj	ect/acti	vity? 🛛 Y	es	□No
		How would	vou	Work Stage (if
		categorize (	•	applicable)
<b>Project Description</b>		project?		
Child Contact Coordinator for CAFL	1	Assessment		Implementation
Clinical Training Consultant for CAFL trainings		Other		Implementation
Child Welfare Training Consultant for CAFL	(	Other		Implementation
6. <b>Engagement &amp; Participation of Parties.</b> Engagement and participation of parties includes any efforts centered around youth, parent, foster family, or caregiver engagement, as well as projects related to notice to relatives, limited English proficiency,				
or other efforts to increase presence and engage				gnan proncioncy,
Do you have an engagement or participation of			_	⊠ Yes □No

Project Description	How would you categorize this project?	Work Stage (if applicable)
DCF legal interns and invitations from Chief Justice	Youth	Evaluation/Assessment
to encourage youth to attend permanency hearings	Engagement	
Triple P parent education program pilot	Parent	Evaluation/Assessment
	Engagement	
Website posting and printing in several languages	Parent	Implementation
of booklets on Juvenile Court for parents	Engagement	
Printed handbook for parents of youth in CRA cases	Parent	Implementation
	Engagement	
Adoption Day celebration	Parent	Implementation
	Engagement	

7.	Well-Being. Well-being projects include any efforts related to improving the well-being
	of youth. Projects could focus on education, early childhood development, psychotropic
	medication, LGBTQ youth, trauma, racial disproportionality/disparity, immigration, or
	other well-being related topics.

Do you have any projects/activities focused on well-being?  $\boxtimes$  Yes  $\square$  No

Project Description	How would you categorize this project?	Work Stage (if applicable)
The Answer Book, Revised 2015: 4,000 copies	Other	Evaluation/Assessment
distributed to youth in care and agencies, court		
personnel		
Designing Data Driven Directions for School	Education	Identifying/Assessing
Success of Students in Child Welfare Proceedings		Needs
study		
Drafting of Confidentiality and Information Sharing	Other	Selecting Solution
Guide		

8.	ICWA. ICWA projects could include any efforts to enhance state and tribal			
	collaboration, state and tribal court agreements, data collection and analysis of ICWA			
	compliance, or ICWA notice projects.			

Do you have any projects/activities focused on ICWA?  $\boxtimes$  Yes  $\square$  No

Project Description	How would you categorize this project?	Work Stage (if applicable)
ICWA Training completed	Other	Evaluation/Assessment
Hiring CIP supported DCF ICWA specialist	ICWA Notice	Implementation

9.	Preventing Sex Trafficking and Strengthening Families Act (PSTFSA). PSTFSA		
	projects could include any work around domestic child sex trafficking, the reasonable and		
	prudent parent standard, a focus on runaway youth, focus on normalcy, collaboration		
	with other agencies around this topic, data collection and analysis, data sharing, or other		
	efforts to fully implement the act into practice.		
	Do you have any projects/activities focused on PSTSFA? ⊠ Yes □No		

Project Description	How would you categorize this project?	Work Stage (if applicable)
CIP supported 8 participants in CIP and White	Sex Trafficking	Evaluation/Assessment
House Conference on Preventing Sexual Trafficking		
Planned fall 2015 training on Preventing Sexual Trafficking Act	Sex Trafficking	Selecting Solution
Revision of Permanency Hearing Rule to comply with PSTFSA	Other	Implementation

III.	Priority	Areas	& CIP	Resources
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•	What would you consider yo	our top <b>two</b> priority areas for FY 2016?
	□ Data projects	☐ Hearing quality
	□ Timeliness/permanency	☐ Quality of legal representation
	☐ Engagement of Parties	⊠ Well-being
	☐ Preventing Sex Trafficking	ng & Strengthening Families
	□ ICWA	□ Other:

b. Are there any outside driving forces that determine your priorities or consume a lot of your time? Several highly publicized child fatalities have led to a significant increase in court activity and need for training more new attorneys for parents and children. State budget plan led to early retirement of key managers and attorneys at DCF which decimated workforce just as need was increasing.

## IV. CIP Collaboration and Participation in Child Welfare Program Planning and Improvement Efforts

- 10. For FY2014, you described how the CIP planned to assist with and participate in round three of the CFSR and program improvement process.
  - a. Has your plan changed? No
  - **b.** How have you moved this plan forward in FY2015? CIP staff and CIP Steering Committee participated in Round 3 of the CFSR in September 2015 by meeting with the federal representatives leading the CFSR through a conference call.

- c. What barriers have you encountered (if any) in increasing your participation with round three of CFSR? Round 3 was completed with our participation.
- d. Have you received any technical assistance on this issue? No
- 11. For FY2014 you described how the CIP will assist with and participate in the CFSP/APSR processes with the child welfare agency in an ongoing fashion. We are interested in your progress or any changes to this plan.
  - a. Has your plan changed? No
  - **b.** How have you moved this plan forward in FY2015? We continue to work with DCF to achieve our mutual goals.
  - c. What barriers have you encountered (if any) to working with the child welfare agency in the CFSP/APSR process in an ongoing fashion?
    DCF reorganization of regions, rewriting of intake policies, and other administrative pressures of increased caseload have presented some challenges in FY 2015.
  - d. Have you received any technical assistance on this issue? No

$\boxtimes$ (	Contr Collal	are you involved, if at all, with the child welfare agency's CQI efforts?  ibuting data ⊠Receiving data ⊠Jointly using data  borative meetings ⊠ Collaborative systems change project(s)  □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
v.	C	QI Current Capacity Assessment
	a.	How is the CIP progressing with CQI overall? Please provide a brief description of how you integrate CQI into your work. We use data to identify significant problems that need policy changes. We support efforts to solve the problems and carefully measure improvement so we can determine whether our efforts are leading to chosen goals.
	<b>b.</b>	Do you have any of the following resources to help you integrate CQI into practice?  □ CIP staff with CQI (e.g., data, evaluation) expertise □ Consultants with CQI expertise □ a University partnership □ Contracts with external agencies to assist with CQI efforts □ Other resources:

c. Describe the largest challenges your CIP faces with implementing CQI into your work. Pressures on the state agency and CPCS regarding increased case load can affect CQI efforts.

d.	Please review the list of capacities below. you would like to increase your knowledg	
	the next fiscal year.	
	□CQI generally	☐Data collection methodologies
	☐ Data analysis	☐Understanding/applying data
	☐ Evaluation design	☐Tool development
	☐Policy change implementation	□CQI commitment (buy-in)
	□Collaboration w/agencies	⊠Data-driven decision-making
	☐ Participation in CFSR process	☐Performance measurement
	☐ Participation in CFSP/APSR process	☐Community partnerships
	☐ Awareness of evidence-based practices	☐Research partnerships
	□Leadership	□Data systems
	☐Currently available data (e.g., AFCARS)	☐ Tracking implementation/changes
	☐Training evaluation	
	Evaluation/CQI efforts specific to:	
	☐ Preventing Trafficking and Streng	thening Families Act
	☐ Quality legal representation	☐ Hearing quality
	⊠Timeliness/Permanency	□Well-being
	☐ Engagement/Presence of Parties	$\square$ ICWA
	⊠Other: Education of children and youth in	care.

#### VI. **Self-Assessment – Capacity**

We have assessed our current capacities related to knowledge, skills, resources, and collaboration by responding to the following 3 sets of questions.

1. Please indicate your level of agreement to	1. Please indicate your level of agreement to the following statements.									
·	Strongly Disagree	Disagree		Neither Agree nor Disagree	Somewhat Agree	Agree	Strongly Agree			
I have a good understanding of CQI.						$\boxtimes$				
I understand how to integrate CQI into all our work.						$\boxtimes$				
I am familiar with the available data relevant to our work.										
I understand how to interpret and apply the available data.							$\boxtimes$			
The CIP and the state child welfare agency have shared goals.										
The CIP and the state child welfare agency collaborate around program planning and improvement efforts.										
We have the resources we need to fully integrate CQI into practice.		$\boxtimes$								
I have staff, consultants, or partners who can answer my CQI questions.										
2. How frequently do you engage in the follow	wing activit	ies?								
			Never	Rarely So	ometimes	Often	Always			
We use data to make decisions about where to fo	cus our effo	rts.					$\boxtimes$			
We meet with representatives of the child welfar in collaborative systems change efforts							$\boxtimes$			
We evaluate newly developed or modified programs/practices.		es.					$\boxtimes$			
We use evaluation/assessment findings to make of programs/practices.	changes to					$\boxtimes$				
CQI is integrated into all our projects.						$\boxtimes$				

3. Please review the descriptions of the different levels of collaboration. Using the scale provided, please indicate the extent to which you currently interact with each other partner identified below.

-	<del>-</del>	Networking	Cooperation	Coordination	Coalition	Collaboration
		1	2	3	4	5
Relationship Characteristics		Aware of	Provide info	Share information	Share ideas	Members belong to
		organization	to each other	and resources	Share resources	one system
		Loosely defined	Somewhat	Defined roles	Frequent and	Frequent
		roles	defined roles	Frequent	prioritized	communication is
		Little	Formal	communication	communication	characterized by
		communication	communication	Some shared	All member have a	mutual trust
		All decisions made	All decisions	decision making	vote in decision-	Consensus is
		independently	made		making	reached on all
			independently			decisions
	No	Networking	Cooperation	Coordination	Coalition	Collaboration
	Interaction					
	at all					
	0	1	2	3	4	5
State Child Welfare Agency						$\boxtimes$
Tribal Child Welfare Agencies				$\boxtimes$		
Tribal Courts		$\boxtimes$				
Department of Education/ School				$\boxtimes$		
Law enforcement			$\boxtimes$			
Juvenile justice agency (e.g.,					$\boxtimes$	
DOJ)						
Behavioral/mental health				$\boxtimes$		
Substance abuse/addictions			$\boxtimes$			
management agency						
Other: Probation				$\boxtimes$		

#### VII. Timeliness Data & Performance Measurement

#### 1. Timeliness.

The source of data for federal fiscal years 2012 – 2014 timeliness measures was DCF's case management system, iFamilyNet. The source of data for federal fiscal year 2015 was the court's case management system, MassCourts, with the exception of the time to TPR petition and time to reunification which still originate from DCF. There are limited concerns with the accuracy of the data but more so with data entry practices that differ by division across the Commonwealth (e.g. defining when a permanency hearing is held vs. when the permanency hearing was completed). Furthermore, the transition from the use of DCF data to court data during federal fiscal year 2015 affects our ability to track improvements from year-to-year.

Time to First Permanency Hearing: For federal fiscal years 2012-2014, the universe of cases was an entry cohort of cases (i.e. children in care for at least 12 months). The start date for the measure was the day the child actually entered foster care and the end date was the date the permanency hearing was held. For federal fiscal year 2015, the universe of cases was an entry cohort (i.e. all first permanency hearings held in the 2015 federal fiscal year). The start date was the date the care and protection petition (case) was filed in the court and the end date was the date the permanency hearing was held.

Time to Subsequent Permanency Hearings: For federal fiscal years 2012-2014, the universe of cases was an entry cohort of cases (i.e. children in care for at least 24 months). The start date for the measure was the date of the second, most recent permanency hearing and the end date was the date of the most recent permanency hearing. For federal fiscal year 2015, the universe of cases was an entry cohort (i.e. all permanency hearings held in the 2015 federal fiscal year where the case had at least two held permanency hearings). The start date for the measure was the date of the second, most recent permanency hearing and the end date was the date of the most recent permanency hearing.

Time to Permanent Placement (includes time to reunification, time to guardianship and time to adoption): For federal fiscal years 2012-2014, the universe of cases was an exit cohort of cases (i.e. children reunified, children adopted, and children in legal guardianship). The start date for the measure was the date the child actually entered foster care and the end date was the date the child: 1) reunified with the parent(s), 2) the adoption was finalized or, 3) the guardianship subsidy was activated. Third party legal custody was not included during this time span. For federal fiscal year 2015, the universe of cases was an exit cohort of cases. The start date for the measure was the date the case was filed in court and the end date was the date: 1) the child reunified with the parent(s), 2) the adoption petition was granted by the court, 3) the guardianship petition was granted by the court, or 4) the third party permanency custody was ordered.

Time to Termination of Parental Rights Petition: For federal fiscal years 2012-2015, the universe of cases was an exit cohort of cases (i.e. children with a goal change from reunification to termination of parental rights). The start date was the date the child actually entered foster care and the end date was the date of DCF's Permanency Planning Conference when the permanency plan changed from reunification to a termination of parental rights. It should be noted that in Massachusetts notice of petition to terminate parental rights is attached to the filing of the care and protection petition.

Time to Termination of Parental Rights: For federal fiscal years 2012-2014, the universe of cases was an exit cohort of cases (i.e. children with a termination of parental rights). The start date is the date the child actually entered foster care and the end date was the date on which termination of parental rights of the last parent was finalized. It is important to note that in Massachusetts notice of petition to terminate parental rights is attached to the filing of the care and protection petition.

	Baseline Measure (FY 2012)	FY 2013	FY 2014	FY 2015	CIP Projects Targeting Measures (if applicable) [If this measure was targeted by an intervention (e.g., efforts made to improve timeliness), please list the project or activity here]
Required Timeliness Mea	sures				
4G. Time to First Permanency Hearing	Median: 364 days %: 55.79% meeting TS <sup>1</sup>	Median: 358 days %: 56.68% meeting TS	Median: 360 days %: 52.10% meeting TS	Median: 363 days %: 54.4% meeting TS	Outcome 4: All activities are designed to improve and monitor quality and timeliness of permanency hearings to achieve timely permanence especially for youth in care
4H. Time to Termination of Parental Rights Petition / Time to Goal of Adoption	Median: 257 days %: 88.95% meeting TS	Median: 267 days %: 88.51% meeting TS	Median: 266 days %: 89.51% meeting TS	Median: 307 days %: 88.47% meeting TS	Outcome #3 Activity #1: Joint training on more timely permanency. Outcome #4 Activity #7: Meet regularly to analyze data for cases to reach permanency earlier
4I. Time to Termination of Parental Rights	Median: 547.5 days %: 50.00% meeting TS	Median: 555 days %: 48.55% meeting TS	Median: 574.5 days %: 44.71% meeting TS	Median: 609 days %: 41.7% meeting TS	Outcome #6, Activity #3: Train judges on TPR cases that should not be continued

<sup>&</sup>lt;sup>1</sup> The time standard (TS) is a percentage of cases that meet the set TS for a measure. The TS measure for first permanency hearing, subsequent permanency hearing, and reunification is 12 months; measure for permanent placement, adoption, guardianship, and third party is 24 months; and measure for termination of parental rights petition and termination of parental rights is 18 months. The source of data for federal fiscal years 2012 – 2014 timeliness measures was DCF's case management system, iFamilyNet. The source of data for federal fiscal year 2015 is the court's case management system, MassCourts, with the exception of the time to TPR petition and time to reunification which still originate from DCF. Federal fiscal year 2015 was the first year introducing the time to third party permanent custody which is a permanent placement alternative commonly used in Massachusetts.

4A. Time to Permanent	Median: 268 days	Median: 251 days	Median: 193 days	Median: 299 days	Outcome #6, Activity #1: Provide judges with
Placement	%: 77.20% meeting	%: 80.50%	%: 83.10% meeting	%: 82.8% meeting	training re impact of DCF, attorney and court
	TS	meeting TS	TS	TS	activities on importance of timely hearings and
					of timely permanent placements.
Optional Measures					
Time to Reunification	Median: 139 days	Median: 145 days	Median: 111 days	Median: 141 days	Outcome 3, Activity 1 Plan training to increase
	%: 77.35% meeting	%: 78.36%	%: 81.45% meeting	%: 78.4% meeting	knowledge of resources and court practices to
	TS	meeting TS	TS	TS	increase placement stability and lead to more
					timely permanence
Time to Adoption	Median: 991 days	Median: 925 days	Median: 988 days	Median: 981 days	Outcome #6, Activity #7: Continue to support
	%: 23.64% meeting	%: 39.97%	%: 30.14% meeting	%: 25.5% meeting	outreach to potential adoptive families and
	TS	meeting TS	TS	TS	National Adoptions Day
Time to Guardianship	Median: 710 days	Median: 712 days	Median: 708 days	Median: 738 days	Outcome 5. Activity 7 Develop and update
	%: 50.89% meeting	%: 51.32%	%: 56.80% meeting	%: 49.3% meeting	written resource material for parents and
	TS	meeting TS	TS	TS	relative caregivers and place on CIP website.
Time to Third Party				Median: 584 days	Outcome 5. Activity 7 Develop and update
Permanency Custody				%: 80.1% meeting	written resource material for parents and
, ,				TS	relative caregivers and place on CIP website.
Time to Emancipation	N/A	N/A	N/A	N/A	N/A
Time to Subsequent	Median: 364 days	Median: 364 days	Median: 364 days	Median: 337 days	Outcome 4: All activities are designed to
Permanency Hearings	%: 53.51% meeting	%: 54.47%	%: 47.31% meeting	%: 78.4% meeting	improve and monitor quality and timeliness of
, 3	TS	meeting TS	TS	TS	permanency hearings to achieve timely
					permanence especially for youth in care
1B. Percentage of Cases that	N/A	N/A	N/A	N/A	N/A
Re-enter within 1 year					

#### 2. Other Measures.

Other data points that we find useful for CQI activities are: timeliness of appeals court cases involving child welfare petitions, number of youth attending permanency hearings and ICWA inquiries; these data points are reviewed annually.

We are in the process of collecting data for toolkit measures 3I and 3J, continuity of advocates for children and continuity of counsel for parents. The courts also collect internal case-flow metrics related to the following topics starting in CY2015 Q3 for the Juvenile Court Department: number of case filings, clearance rate (i.e. ratio of number of cases disposed and number of new filings), percentage of cases disposed within and beyond the time standards, percentage of cases disposed within and beyond two trial date settings.

### Timeliness Measures of Disposed Appeals Cases in Appeals Court and Supreme Judicial Court

	FY2014		FY2015	
Total Cases Decided (Appeals Court)		61		57
Total Cases Decided (Supreme Judicial Court)		1		1
	FY2014	FY2015	FY2014	FY2015
MA Appeals Court Cases	Median (in days)	Median (in days)	90th Percentile (in days)	90th Percentile (in days)
Time to Decision	258	265	449	381
Trial Court Entry to Appeals Court Entry	986	899	1,601	1,610
Trial Court Notice of Appeal to Appeals Court Entry	254	241	471	403
MA Supreme Judicial Court Case				
Time to Decision	274	73	N/A	N/A
Trial Court Entry to SJC Entry	2,063	187	N/A	N/A
Trial Court Notice of Appeal to SJC Entry	257	N/A	N/A	N/A

Source: MA Supreme Judicial Court and Appeals Court Case Disposed in the 2014 federal fiscal year and 2015 federal fiscal year.

**ICWA Inquiries**: There were 125 ICWA inquiries about possible Native American/Alaska heritage during the state fiscal year 2015, an increase of 25 inquiries from last state fiscal year's 100 inquiries. The state fiscal year 2015 begins July 1, 2014 and ends on June 30, 2015.

### **Youth Permanency Hearing Attendance Pilot:**

Percentage of Youth Attending Permanency Hearings from FY2013 – FY2015							
	FY2013		FY2014		FY2015		
West		28.9%		15.2%		10.8%	
South		21.8%		20.1%		14.2%	
North		40.4%		30.4%		26.4%	
Boston		26.9%		14.9%		26.8%	
Statewide		30.4%		20.1%		19.2%	

Footnote: For FY2015, Two months of data for the Boston region was not available for reporting.

Source: MA DCF; reporting period includes state FY2013 (July 1, 2012 to June 30, 2013), FY2014 (July 1,2013 to June 30, 2014) and FY2015 (July 1,2014 to June 30, 2015)

Percentage of Youth Attending Permanency Hearings by Region									
	West	South	North	Boston	Statewide				
Total Permanency Hearings Held	581	541	590	418	2,130				
Total Youth in Attendance by In- Person and Alternative Method	63	77	156	112	408				
Percentage in Attendance (In- Person)	10.8%	14.2%	26.3%	19.4%	17.7%				
Percentage in Attendance by In- Person and Alternative Method	10.8%	14.2%	26.4%	26.8%	19.2%				

For FY2015, Two months of data for the Boston region was not available for reporting. Attendance by alternative method includes videoconference, teleconference, letter, or other means of communications..

Source: MA DCF; reporting period includes state FY2013 (July 1, 2012 to June 30, 2013), FY2014 (July 1,2013 to June 30, 2014) and FY2015 (July 1,2014 to June 30, 2015).

#### APPENDIX A: DEFINITIONS

#### **Definitions of Evidence**

*Evidence-based practice* – evidence-based practices are practice that have been empirically tested in a rigorous way (involving random assignment to groups), have demonstrated effectiveness related to specific outcomes, have been replicated in practice at least one, and have findings published in peer reviewed journal articles.

*Empirically-supported-* less rigorous than evidence-based practices are empirically-supported practices. To be empirically supported, a program must have been evaluated in some way and have demonstrated some relationship to a positive outcome. This may not meet the rigor of evidence-base, but still has some support for effectiveness.

**Best-practices** – best practices are often those widely accepted in the field as good practice. They may or may not have empirical support as to effectiveness, but are often derived from teams of experts in the field.

#### **Definitions for Work Stages**

*Identifying and Assessing Needs* – This phase is the earliest phase in the process, where you are identifying a need to be addressed. The assessing needs phase includes identifying the need, determining if there is available data demonstrating that this a problem, forming teams to address the issue.

**Develop theory of change**—This phase focuses on the theorizing the causes of a problem. In this phase you would identify what you think might be causing the problem and develop a "theory of change". The theory of change is essentially how you think your activities (or intervention) will improve outcomes.

**Develop/select solution**—This phase includes developing or selecting a solution. In this phase, you might be exploring potential best-practices or evidence-based practices that you may want to implement as a solution to the identified need. You might also be developing a specific training, program, or practice that you want to implement.

*Implementation* – the implementation phase of work is when an intervention is being piloted or tested. This includes adapting programs or practices to meet your needs, and developing implementation supports.

**Evaluation/assessment** – the evaluation and assessment phase includes any efforts to collect data about the fidelity (process measures: was it implemented as planned?) or effectiveness (outcome measures: is the intervention making a difference?) of the project. The evaluation assessment phase also includes post-evaluation efforts to apply findings, such as making changes to the program/practice and using the data to inform next steps.