

Corrective Action Process
Practice Handbook



Colorado Department of Human Services
June 2010

Introduction

The State Department of Human Services has a statutory responsibility to provide supervision to the County Departments. This responsibility includes ensuring that the County Departments comply with requirements provided by State Statute, State Board of Human Services, Executive Director Rules, Federal laws and regulations and contract and grant terms. Because of the nature of Colorado's structure of being State Supervised and County operated it is critical that there is a protocol in place to address identified issues with a system of ongoing or recurring corrective actions and progressive sanctions. This handbook provides procedures to assist State staff in implementing the State Department's oversight responsibilities, including the Corrective Action Process (CAP) for County Departments of Human/Social Services so that there is a consistent and timely response to identified issues. The following supervisory protocol enables the State Department to enforce compliance by the County Departments with State Board rules, Executive Director rules, and Federal and State statutes. The Handbook is intended to create a consistent, timely and transparent process/procedure to assure that County and State departments of human/social services bring issues of noncompliance into compliance within specified timeframes, and identify roles and responsibilities for each. Identification of issues of noncompliance can occur through routine monitoring by State staff or through specially scheduled Program or Management Reviews.

Authority

Colorado Revised Statutes, 26-1-111 2 (d) (I) stipulates that the State Department shall "Provide services to County governments including the organization and supervision of County Departments for the effective administration of public assistance and welfare functions as set out in the rules of the executive director and the rules of the State board pursuant to section 26-1-107 as to program scope and content, including assistance payments, food stamps, and social services, and compilation of statistics and necessary information relative to assistance payments, food stamps, social services, child welfare services, including out-of-home placement services, rehabilitation, programs for the aging, and veterans' programs through the State, and obtaining federal reimbursement moneys available under the Title IV-E program created under the federal "Social Security Act", as amended, based on out-of-home placements and alternative care treatment by County Departments of children eligible for Title IV-E federal assistance, which moneys shall be allocated to counties to help defray the costs of performing its functions; except that nothing in this paragraph (d) shall be construed to allow counties to continue to receive an amount equal to the increased funding in the event the said funding is no longer available from the federal government."

In addition, as a result of the Foster Care Services Performance Audit completed in May of 2007, the Report of the State Auditor made two recommendations regarding State supervision of counties.

- Recommendation No. 8: The Department of Human Services should strengthen its oversight of County foster care programs to ensure a high quality foster care services delivery system by:
 - a. Including specific strategies in corrective action plans to address County noncompliance with Federal Foster Care Standards and State and Federal requirements. The strategies should be based on analyses by the counties of reasons for noncompliance. Such analyses could include conducting case-specific reviews to identify the reasons for noncompliance with Federal and State standards and assessing the general strengths and weaknesses of the counties' programs.
 - b. Developing and implementing a system of ongoing or recurring corrective actions and progressive sanctions, up to and including withholding [the State's portion of] reimbursement of County child welfare expenditures, to use when County Departments of Human/Social Services are noncompliant with statutory or regulatory requirements or Federal standards. The Department should seek statutory or regulatory change if necessary to implement this system.
 - c. Improving the monitoring of counties' implementation of corrective action plans to ensure problems are corrected in a timely manner.
 - d. Modifying the procedures followed in periodic reviews of County foster care programs to focus more resources on case file reviews rather than on interviews and policy reviews.

- Recommendation No. 9: The Department of Human Services should improve its oversight of child welfare programs at County Departments of Human/Social Services by:
 - a. Reviewing the statutes and regulations related to the Department's responsibilities for ensuring that counties meet applicable State and Federal requirements.
 - b. Assessing whether these statutes and regulations are sufficiently clear and specific with respect to the Department's authority to oversee counties and compel the counties to review their practices when they are noncompliant, including the use of fiscal sanctions.
 - c. Revising its regulations and/or working with the General Assembly, if necessary, to clarify the Department's supervisory responsibilities over the counties.

In its response to the Report of the State Auditor, the Department of Human Services agreed with these recommendations.

Under the above authority, and in response to the Auditor's Recommendations, Staff Manual Volume 1, in Section 1.000 provides specific rules for the State Department's oversight role and responsibilities. Section 1.100, provides specific rules for the State Department's CAP.

Karen Beye, Executive Director of the Colorado Department of Human Services, authorized this handbook in order to assist State staff in implementing the Staff Manual Volume 1.000 OVERSIGHT AND RESPONSIBILITIES and 1.100 CORRECTIVE ACTION PROCESS, approved by the State Board on July 9, 2010 and effective September 1, 2010. It also helps clarify the process for County Departments of Human/Social Services.

Definitions

Corrective Action

A formal, systemic process employed to correct County Department of Human/Social Services noncompliance with State Department of Human Services Board rules, Executive Director rules, Federal and State statutes, contract terms and grant terms.

Corrective Action Plan (CAP)

A written plan to correct areas of noncompliance that clearly identifies areas needing improvement, action steps to be taken for each area, dates by which action steps are to be implemented, indicators of progress towards compliance, outcome measures for identifying compliance, and a timeframe for achieving compliance.

Disallowance

To prohibit funds paid retrospective to the date the ineligibility or noncompliance occurred.

Noncompliance

Not meeting requirements identified by State Department of Human Services Board rules, Executive Director rules, Federal and State statutes, contract terms and grant terms.

Sanction

An action taken by the State Department to withhold the State's reimbursement for a County Director's salary for each month the County continues to remain in noncompliance, or an action taken by the State Department upon a confirmed finding of a County Department's noncompliance. State Department actions may ultimately result in financial sanctions or State operation of programs as set forth in the Human Services Code 26-1-109 (4)(b), (c), (d) Colorado Revised Statutes, 1973.

Overview of CDHS Supervisory and Oversight Responsibilities

The State Department of Human Services has a statutory responsibility to provide supervision to the County Departments. This responsibility includes ensuring that the County Departments comply with requirements provided by State statute, State Board of Human Services, Executive Director Rules, Federal laws and regulations and contract and grant terms. Because of the nature of Colorado's structure of being State supervised and County operated it is critical that there is a communication protocol in place to address identified issues. CDHS promotes a collaborative and participatory model for engagement throughout the system to enhance accountability and transparency.

CDHS Supervisory Oversight and Responsibilities

- A. For issues identified through a multitude of processes that are brought to the attention of Counties/State for response there is a continuum of CDHS actions dependent upon the county's response to the identified issue. The lowest level of action is informal and consultative in nature, and may include:
 - Consulting
 - Information Sharing
 - Supporting
 - Mentoring
 - Coaching
 - Researching
 - Technical Assistance
 - Training
- B. The next level of action is Technical/Regulatory and may include:
 - Compliance Monitoring
 - Program Reviews
 - Quality Assurance Reviews
 - Performance Improvement Plans
 - Disallowances
- C. The last level of action is Directive Authoritative and may include:
 - Program Intervention
 - Corrective Action Plans
 - Fiscal Sanctions

There are two types of issues:

Case Specific - Issues identified through a review, complaint or grievance regarding an individual child, family or provider as it relates to a child's or adult's, safety, well-being, self sufficiency or permanency.

There are two levels of severity or immediacy.

1. Critical Safety Issue – Rapid Response
2. Policy/Practice Concerns impacts Safety, Well-Being, Self Sufficiency or Permanency.

and

Systemic – Issues that involve practice, policy or procedures that are widespread and impact multiple children, families, adults or providers as it relates to safety, well-being, self sufficiency and/or permanency.

Protocol

Case Specific Issues

Level 1 (Critical Safety Issue) leading to a rapid response.

1. The State Division that identifies the issue, calls the County Hotline. (A link to the list of County Hotlines to be kept on State web site, first page. Add training to this requirement to NEO.)
2. The State Division who identifies the issue makes a courtesy contact with the County Director or designee.
3. An agreement between the State Division that identified the issue and the County Director or designee is reached on a timeline for the County to respond to the issue identified. If an agreement is not reached, then proceed to step 7.
4. Depending on the State Division protocol, the State Division Designee for tracking will be notified of the issue and agreed upon timeline for resolution.
5. The County Response will be sent to the appropriate State Division that identified the issue.
 - The State Divisions will communicate with each other by e-mail.
 - Each State Division will assign a Communication Liaison that aligns to each of the Field Staff Regions to streamline the communication protocol.
6. If the State Division who identified the issue considers the County Response sufficient and timely, no further action is taken and the County will be notified in writing within 5 working days.
7. If the State Division determines the county's response is not timely or sufficient, notification will be given to the appropriate Division(s). If resolution is not achieved, the appropriate State Office Director will be contacted for an immediate decision.
8. Depending on the issue of non-compliance, the Division may institute a fiscal disallowance or other remedies as appropriate.

Level 2 – Policy/Practice Concerns impacts Safety, Well-Being, Self Sufficiency, or Permanency.

1. The State Division who identifies the issue informs the County/Region Director or designee verbally or in writing to discuss the concern, or if the State Division receives a case specific complaint, the Communication Liaison will be notified, and the Communication Liaison will make the courtesy contact with the County Director or designee.
2. The person who identifies the issue will relay the issue to the State Division Designee for further research and problem solving.
3. The State Division Designee will discuss with the County Department for clarification, if needed.
4. If after further discussion, the County resolves the issue or there is no issue, no further action will be taken and the County will be notified in writing within 5 working days.
5. If the issue is not resolved at that level, an internal meeting is held with the appropriate State Divisions within twenty (20) working days to determine next steps and time frames for resolution.
6. The State Division Designee will communicate with the County and negotiates a plan of action within five (5) working days of receiving the response.
7. A County response will be sent to the appropriate State Division within twenty (20) working days of notification.
8. If the County response is considered sufficient and timely, no further action is taken, and the County will be notified in writing within 5 working days.
9. If the county's response is not timely or sufficient, notification will be given to the appropriate State Division(s) Communication Liaisons. (see Attachment 2)
10. Depending on the issue of non-compliance, the Division may institute a Program Improvement Plan, fiscal disallowance or other remedies as appropriate.
11. If unresolved, the attached Corrective Action Process (Attachment 1) may be pursued.

Systemic Compliance Issues

1. The State Division that identifies the issue verifies the accuracy of the issue. (The following steps may occur simultaneously.)
 - a. Discuss the perceived issue with the County.
 - b. Review relevant documents/data/audits/County allocation/etc.
 - c. Hold an internal State teleconference or meeting with the appropriate Division Communication Liaisons (as attached) within twenty (20) working days of the identification of the systemic issue to share information and determine what intervention is needed.
2. The State Division that identifies the issue makes a courtesy contact with the Director or designee of the County/Region or provider prior to any further action. If resolved, no further action.
3. If not immediately resolved, the State Division that identifies the issue brings all of the appropriate State Divisions together within twenty (20) working days

- to discuss the systemic issue, determine responsibilities and develop the CDHS action plan for addressing the issue.
4. A teleconference or meeting is convened with the County/Region or provider to develop an agreed upon action plan and time lines.
 5. Depending on the issue, the State Division may institute a Program Improvement Plan, fiscal disallowance or other remedies as appropriate.
 6. If necessary, the attached Corrective Action Process will be pursued.

Overview of Corrective Action Process

The major components of the CAP include:

1. Schedule the audit/review
2. Entrance conference
3. Audit or review
4. Presentation of Preliminary Findings
5. County Department response
6. Exit Conference
7. Final Report
8. Corrective Action Plan, if necessary, submitted by the County Department of human/social services to the State Department
9. Corrective Action Plan monitoring

Schedule the Audit/Review

As per Volume 1.105.1, the State shall notify the County Director in writing of any scheduled monitoring visit. This written notice should be sent far enough from the actual audit/review date so as to allow the County Department sufficient time to prepare. While this may mean notification is sent earlier, the notice must be sent at least two weeks prior to the audit/review. The written notice shall contain, at a minimum, the following information:

1. Administrative and/or program area to be monitored.
2. The purpose of the audit/review.
3. The date(s) during which the audit/review will occur.
4. A copy of any instruments/tools to be used for the audit/review.
5. The number of staff who will be in the County conducting the audit/review.
6. Name of the State staff who will serve as the lead or contact person for the review.
7. A list of resources that the County Department needs to provide, such as:
 - a. Case files
 - b. Rooms to conduct the audit/review
 - c. Information technology needs

An example of a scheduling letter can be found in Appendix A.

If the County Department has a scheduling conflict that would not allow it to participate in the audit/review, it must immediately notify the State staff coordinating the audit/review. State staff should then work with the County Department and any other participating reviewers to reschedule the audit/review to take place at the first date available for all participants.

Entrance Conference

As per Volume 1.105.2, at the start of each audit/review, State staff will schedule an Entrance Conference to be held with the County Director and/or staff selected by the County Director. [State staff may also choose to invite local officials such as County Commissioners, City Mayors or Council persons, County Administration or others a deemed appropriate.](#) During the Entrance Interview, State staff shall discuss the following areas:

1. Explain the purpose, background, scope and methodology for the audit/review and address any related questions.
2. Review the audit/review schedule and process.
3. Introduce State staff conducting the audit/review.
4. Establish a procedure for gathering additional information/documentation during the audit/review.
5. Request information about County specific practices/policies related to the area being monitored.
6. Review the tool(s) used for the audit/review and answer any questions County Representatives may have about the tool(s).

To facilitate the audit/review and minimize the impact on the County Department, the Entrance Conference may be led by one member of the State staff while the rest start the audit/review. The State staff leading the Entrance Conference will then be responsible for disseminating pertinent information gathered during the Entrance Conference to the rest of the audit/review members. If this model is followed, it is best if the Entrance Conference is held in a different location from the audit/review to minimize disruptions to both.

Audit/Review

Per Volume 1.105.3, to the greatest extent possible, State staff will design and implement audits/reviews to minimize disruption to normal County Department activities, while still meeting the purpose of the review. The specific processes involved for each review should be established to best meet the needs of each individual Administrative or Program function being monitored, and won't be covered here.

Presentation of Preliminary Findings

Upon completion of the on-site audit/review, the State staff in charge of the review and for identifying issues of noncompliance will author and send a preliminary report to the Director of the County Department. As per Volume 1.105.4, this report needs to be sent to the County Department [by certified mail to the County Director](#) within **twenty (20)** working days of the completion of the audit/review and should, at a minimum, include the following information:

1. Name of the County;

2. Date of the audit/review;
3. Date of the report;
4. Field Administrator's name;
5. Administrative/Program Area audited/reviewed;
6. Name of State staff in charge of the audit/review;
7. Name of State staff responsible for determining County compliance with standards, if different from the State staff in charge of the audit/review;
8. Relevant statutes or rules monitored,
9. An appendix containing any tool(s) used during the audit/review;
10. County Department's identified performance in each area monitored, including a final Statement regarding:
 - a. A finding of compliance;
 - b. A finding of noncompliance, but which does not require a CAP
 - i. In instances where a County Department is found to be in noncompliance, but where the amount of noncompliance is so minimal that the CAP process might require more resources than any potential benefit, the State Department may choose to use a less formal monitoring process than that outlined in Volume 1 and in this handbook.
 - ii. For small counties, where noncompliance may be due to a very small number of cases reviewed, the State Department may choose to use a less formal monitoring process than that outlined in Volume 1 and in this handbook.
 - c. A finding of noncompliance requiring a CAP

For each finding of noncompliance requiring a CAP, State staff shall fill out and attach to the Preliminary Report, a Corrective Action Form (located in Appendix B). State staff shall fill in the County Department Name, Title of Audit/Review, Review Dates, the name of the State staff responsible for approving and monitoring the County Department's CAP, Issue Statement, and relevant standards.

State staff responsible for authoring the report will, in addition to sending a copy to the County Department, provide an electronic copy to any other relevant State stakeholders. For example, if Field Administration authors the Preliminary Report, it must copy the State Program or Administrative Unit that formulates the rules reviewed and the Administrative Review Division. If Program or Administrative staff authors the report, it must copy the Field Administrator and the Administrative Review Division. Finally, if the Administrative Review Division authors such a report, it must copy the Field Administration and any Program or Administrative Unit over rules covered in the report.

County Department Response

Volume 1 (1.105.5) provides County Departments an opportunity to respond to the Preliminary Report. Specifically, the County Department must respond in writing to the appropriate State staff within [twenty \(20\) working days](#) of the date the Preliminary Findings were mailed by certified mail or a different negotiated time frame. The response

should include information regarding agreement or disagreement with the findings, any identified areas of non-compliance, requirements for CAP's, or any objection to specific wording. If the County Department has any factual or wording disagreements with the Preliminary Findings, the County Department must send written factual corrections, along with any supporting documentation or data, back to the State staff who authored the report, unless otherwise specified. State staff shall consider this information and consult with any other persons or programs copied on the report. Any response by a County Department must then be addressed during the Exit Conference held with the County Department.

If the County Department does not respond in writing within **twenty (20)** working days of the date the Preliminary Findings were mailed or other negotiated timeframe, the Preliminary Report shall be considered the Final Report.

Exit Conference

State staff should, as soon as possible, coordinate the scheduling of an Exit Interview to discuss all relevant findings from the review. This Conference should be scheduled no sooner than twenty (20) working days from the date the Preliminary Report was **sent by registered mail to the County Director** (in order to allow the full time for a County Response) and as soon as possible after that in order to ensure that findings are timely and relevant to current practice. In coordinating the scheduling of this Conference, the following people, at a minimum, need to be invited by the State staff responsible for the audit/review: the County Director and/or their designees, State Department Program Staff with responsibility for any rules reviewed **and/or their designee**, State staff who conducted the review, and the appropriate Field Administrator. **State staff may also choose** to invite appropriate local officials such as County Commissioners, **City Mayors, City Council Persons, County Administration or others as deemed appropriate**. . One or more people who were part of the review team should be invited and in attendance as well, so that they can speak to any specifics regarding the review itself.

In an effort to better facilitate the Conference, all efforts should be made to hold the Exit Conference in the County Department offices. When this is not possible due to long distances, weather, etc., teleconferences are acceptable.

The purpose of the Exit Conference is to meet with all relevant County Department stakeholders in order to:

- Ensure they understand the following:
 - a. The reason for the audit/review.
 - b. All relevant findings. This should include any areas found to be out of compliance or of concern as well as areas of strong/innovative practice, etc.
- Provide the County Department an opportunity to discuss any disagreements with the findings or wording in the Preliminary Report, as noted in the County Response, and come to an understanding of what will be included in the Final

Report. If the County Department did not provide an official County Response, then the Preliminary Report is considered the final report and new disagreements will not be discussed at the Exit Conference.

- Provide the County Department an opportunity to seek feedback on any CAP that may be required.
- Provide the County Department an opportunity to request technical assistance related to any required CAP.
- If a formal CAP is not being requested, due to reasons outlined in Presentation of Preliminary Findings 10b, but an informal process is being required, then the informal monitoring process should be discussed.

It is the responsibility of State staff to facilitate this meeting and to ensure that the necessary topics are covered.

If, at the conclusion of the Exit Conference and after consulting with affected State Programs/Divisions, the State staff decide not to make any changes requested in an official County Response, the State staff responsible for authoring the report will provide the Director of the County Department of Human/Social Services that was reviewed with a Memorandum outlining any rationale for denying such requests. This Memorandum should be sent within ten (10) working days of the Exit Conference so that it is received prior to the Final Report.

Final Report

Within **twenty (20)** working days of the Exit Conference (1.105.7), State staff that authored the Preliminary Report shall create a final report and provide a copy of the report to the County Department, the County Commissioners, **City Mayors, City Council Persons, County Administration or others as deemed appropriate**. The final report should be based on the Preliminary Report, and contain any factual or wording changes agreed to during the Exit Conference. If the State staff do not agree to make any changes requested in an official County Response, then the County Response shall be included as an addendum to the Final Report along with the Memorandum outlining why the request was denied.

County Department Appeal

Upon receipt of the final report, the County Department may appeal the findings of the final report to the Executive Director of the State Department (1.105.8). Within **twenty (20)** working days of the date the Final Report **was sent by certified mail**, the County Director may request a review of the findings by the Executive Director of the State Department of Human Services. The County's request shall identify the specific findings under dispute and provide data, **statements of evidence or other evidence and the documentation** to support the appeal. The Executive Director of the State Department of Human Services, or their designee, shall respond in writing to the County Department within **thirty (30)** working days of the date the appeal letter was **received**. All decisions by the Executive Director or their designee shall be considered the final decision. If the

Final Report required the County Department to complete a CAP, the timeline for submitting the CAP does not begin until after the appeal has been heard and formal notification of such has been [sent by certified mail](#) to the County Department.

[As applicable, the State would modify the Final Report based on the Executive Director's decision. If the modified Final Report requires the county department to complete a CAP, the timeline for submitting the CAP does not begin until after the appeal has been heard and formal notification of such has been mailed to the County Department.](#)

If an appeal to the Executive Director is upheld, the State staff responsible for authoring the report will add an addendum to the report containing the official notice of appeal made by the County Department as well as the response by the Executive Director or their designee. In addition, for any CAP no longer required as a result of the upheld appeal, the State staff shall create a Memorandum stating such. This Memorandum will be attached to the report and mailed to the County Director and any other persons copied in the original report.

If the appeal to the Executive Director is denied, the State staff responsible for authoring the report will author a Memorandum stating such and include any rationale for the denial. This Memorandum will be sent to the County Director [by certified mail](#) and attached, along with the official County appeal, to the Final Report as an Addendum.

Correction Action Plan

Upon receiving the Final Report, and if the report stipulates a CAP, the County Department shall prepare and return a CAP to the State Department within twenty (20) working days of when the Final Report was mailed. If the County Department filed a formal appeal to the Executive Director of the Department Human Services that was denied, they must submit the CAP within twenty (20) working days of the date the formal notice of denial [was sent by certified mail](#). The written CAP shall be completed on the CAP Form provided by the State Department and shall identify each issue not in compliance, the action steps to correct it, the process to measure and report progress, and a timeframe for completion.

The State Department has [twenty \(20\)](#) working days from the date the County Department mailed the CAP to notify the County Department of acceptance or denial of the CAP and/or request modifications. The State Program or Administrative Unit responsible for formulating rules over the area where issues of noncompliance were found shall review the CAP. In deciding whether or not to accept a CAP, State staff should consider, at a minimum, the following criteria:

1. Has the County Department gathered and analyzed appropriate and adequate data/information to make sound assumptions about what is driving the noncompliance?
2. Are the desired results specific, realistic, and measurable?

3. Are the strategies linked to the desired results? In other words, is it reasonable to expect that, if completed, the strategies listed would lead to the desired results?
4. Has the County Department created specific tasks that outline how the strategies will be implemented and realistic timeframes for the completion of each task?
5. Are the identified indicators sufficient measures that will identify the extent to which each task was completed? In order to know whether strategies were successful in facilitating improvement, it is critical to know which strategies, and to what extent, they were implemented.
6. Have outcomes been identified that directly relate to the desired result?
7. Does the County Department have the capacity to measure and report on their selected indicators and outcomes, or will they require technical assistance?
8. Is the date by which the County Department expects to be in compliance (i.e., achieved their outcome) reasonable?
9. Has the County Department identified a process for regular reporting of progress on relevant indicators and outcomes to the State Department and does the State staff agree with the frequency of reporting?

If the CAP does not sufficiently address these types of criteria, the State staff should provide specific feedback to the County Director and request that a corrected CAP be submitted within **twenty (20)** working days of the date the State staff mailed the feedback and request to the County Director. The State staff should also offer technical assistance in completing any requested changes.

If State staff approves the CAP they shall send official notification of such in a Memorandum to the County Director.

If a County Department chooses not to submit a CAP within the **twenty (20)** working days, the State Department shall impose a sanction.

If the county department needs additional time to meet any of the deadlines provided in this Volume 1, the County Director may submit a request in writing to the Department, providing the reasons that an extension of time is necessary and a proposed date for the submittal of required documents or plan. The Department will respond to the request for an extension with five (5) working days of the date the denial was mailed to the County Department.

If the County Department needs to modify a CAP, the County Director may submit a request in writing to the Department, providing the reasons that a modification is necessary and a proposed date the Department received the request. If the request for a modification is denied, the CAP shall remain as previously approved. If approved, the county will be required to submit a modified CAP Form to the Department by the proposed date. If the county does not submit the revised CAP Form within the timeline approved, the original CAP will continue to be in force.

At the time the State Department accepts the CAP, questioned costs and/or sanctions will be processed in accordance with accounting policy and procedures.

Corrective Action Plan Monitoring

Monitoring of the Corrective Action Plan shall begin within twenty (20) working days following State approval of the plan and continues through the completion of the plan. Monitoring may include, but not be limited to, case and record reviews, onsite conferences, staff interviews, data analysis, and direct observation. At any time during the monitoring process, but no later than the agreed end of the Corrective Action Plan timeframe, the State Department shall notify the county department of the status for final compliance. If compliance has been achieved, written notification shall [be provided to the Executive Director, the Deputy Executive Director, the County Director, Board of County Commissioners and others as deemed appropriate](#). If the County Department remains in noncompliance, sanctions will be imposed.

The confidentiality of records audited or reviewed in the course of a program intervention or in the course of the corrective action process will be maintained as required by the statutes and rules governing the specific program area or areas being audited or reviewed. The confidentiality of a program intervention or corrective action process will be maintained as authorized under Colorado law.

Fiscal Sanctions

[If a County Department does not meet the requirements of this Volume 1 or fails to comply with an approved Corrective Action Plan, the State Department may impose Sanctions as provided below:](#)

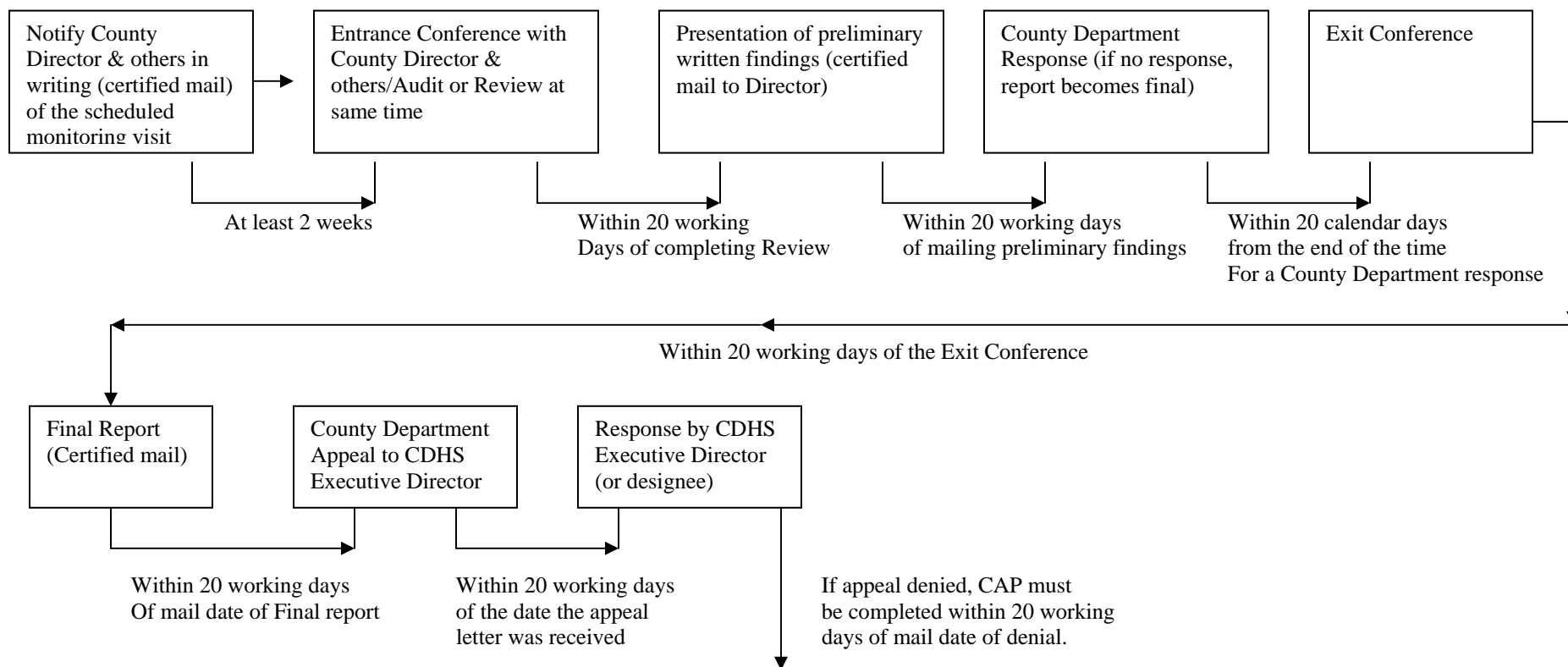
[Disallowance of State funds for reimbursement of the salary of the County Director of Human/Social Services;](#)

[The State Department to undertake the administration of the public assistance or welfare program for which the county department has not met the requirements of a Corrective Action Plan: and/or](#)

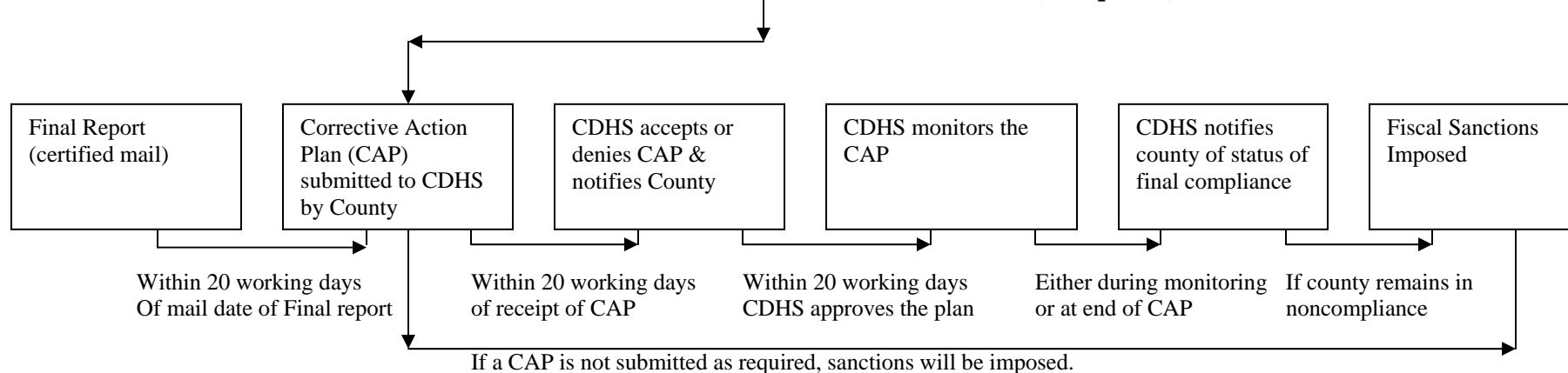
[Any other action which may be necessary or desirable for carrying out the provisions of the Colorado Human Services Code, 26-1-101, et seq., CRS 1973.](#)

[If the circumstances of noncompliance creates or has the potential to create a risk of imminent harm to a person or damage to property, the State Department may take action, as it deems appropriate, consistent with Colorado Human Services Code, 26-1-101, et seq., CRS 1973.](#)

FLOW CHART OF CORRECTIVE ACTION PROCESS



FLOW CHART OF CORRECTIVE ACTION PLAN (if required)



Appendices

Appendix A

May 23, 2007

Bob Smith, Director
Front Range County Department of Social Services
123 Main Street.
Small Town, Colorado 80126

Dear Mr. Smith:

This letter is to notify you of an onsite In-Home Review of Child Welfare cases in your county, scheduled for June 13th and 14th, 2009. I will lead the review team of five reviewers. This review consists of a file read of cases receiving in-home services and brief entrance and exit interviews.

Enclosed are random sample lists for recently opened in-home and ongoing in-home cases based on the most recent Trails data available. The children in the recently opened in-home sample have involvement dates during the six-month review span. The children in the ongoing in-home sample have involvement dates prior to the beginning of the review span. Both samples may include cases with out-of-home placement spans of up to 180 days and the span is ended. The sample lists show the sample group, the client ID, the case ID, the child's name, the household number and the caseworker.

There is a 15% over sample in each list. The over sample cases are to be selected in the order they appear on the list if it is necessary to drop cases from the original sample. Replacing dropped cases helps to assure that the results of the In-Home Review can be projected to the entire caseload.

We would like to begin the review at 8:00 AM on the 13th. We expect to conclude no later than 4:30 PM on the 14th.

Your assistance is requested in arranging the following:

- Time for the entrance conference, with you or your designee at 8:30 AM on the 13th.
- An area in which the reviewers can review the cases with electrical outlets for laptop computers and active TRAILS drops or desktop computers with access to Trails.
- Due to ongoing problems with accessing TRAILS during the In-Home reviews, ARD must consult with the County staff person who will be responsible for assuring access to TRAILS. Please provide me the name, telephone number and e-mail address of that staff person. I may be reached at (XXX) XXX-XXXX or at joe.reviewer@State.co.us.
- Access to a telephone.
- Copies of County specific intake and investigation forms.

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- Time for a brief exit interview in order to provide a summary of issues that arose during the review.
- Please separate the file by sample group.
- Please have any restricted case un-restricted on the first day of the review. If they are clearly identified, we will attempt to review restricted cases the first day of the review. If any case in the sample is a closed restricted case, notify us as soon as possible. Unrestricting a closed case requires an analyst fix. The TRAILS technical team has requested as much notice as possible to un-restrict these cases.

In order to facilitate a concurrent, onsite appeal process, we are requesting that designated County staff who are knowledgeable in case filing and County practices, including the use of Trails, and/or familiar with the specific cases under review, be available during the review process. These staff will be provided an opportunity to review any “No” response. If adequate documentation to support a change in the “No” response is found, the review response will be changed. Our experience is that this concurrent and interactive appeal process is more constructive and less cumbersome than an appeal process carried out after State staff has left the County facility.

Please be aware that some of the responses are qualitative in nature and are based on the judgment of the reviewer. A decision to change a response on these questions is solely at the discretion of the State staff completing the review.

If you have any questions regarding this In-Home Review, please feel free to call me at (XXX) XXX-XXXX.

Sincerely,

Joe Reviewer, Manager
Program Title

Attachment/Enclosure (X)

cc: Field Admin
Program Staff

Appendix B

County Department of Human/Social Services: _____

Title of Audit/Review: _____

Review Date(s): _____

State staff Approval Signature: _____

State Monitoring Staff: _____

X County Improvement Plan						
Collect Data and Information	Review, Analyze, and Interpret Data		Apply Learnings		Adopt Indicators and Outcomes	
<i>Reports and Data Sources</i>	<i>Issue Statement (what is the problem to be addressed)</i>	<i>Desired Results (what end result is desired)</i>	<i>Strategies (based on the prior analysis, what strategies will help achieve the desired results)</i>	<i>Tasks (what specific events must occur to implement the strategies)</i>	<i>Indicators (measurements that indicate tasks achieved their desired results)</i>	<i>Outcomes (measurements that show strategies achieved their desired results and addressed the identified problem)</i>
AFCARS Reports	Children experience too many placement changes in foster care	No more than X% of children in care for fewer than 12 months will experience more than two placements.	Recruit more foster homes to allow for better matching of children with providers.	Run 5 more Public Service Announcements between 7/1/2009 and 12/31/2009	Number of PSA's aired between 7/1/2009 and 12/31/2009	Improved AFCARS data on placement stability