

## **Talking Points:**

## Application of the OSRI to Cases Open as Both In-Home Services and Foster Care During the Period Under Review

Reviewers may receive a case that was opened for both in-home (IH) services and foster care (FC) during the period under review (PUR). This uncommon occurrence may present in various ways during the PUR; for example:

- The family received IH services, then that case was closed and the child came into FC.
- The child was reunified and the case stayed opened for IH post-reunification services.
- The family was receiving IH services when the child came into FC.

These types of cases will appear in the sample as FC cases. If any such case appears as IH, please immediately notify the QA Specialist/Site Leader. For these types of cases, reviewers should:

- Consider all children in the home when rating Safety items.
- Consider only the target child when rating Well-Being items.
- When assessing parents in Sub-Item 12B, consider whether the agency assessed their needs related to providing care for all of the children in the home during the IH portion of the case and/or after reunification of a target child.

As with all other FC cases, Permanency outcomes are rated considering the target child only.

Rationale Statements should clearly indicate whether agency efforts that factor into item ratings are connected to the IH or FC portion of the case. However, reviewers should adopt a "big picture" view of the case when considering how to weigh the IH and FC portions of the case, particularly if the practice in one portion is significantly better or worse than the other or if one portion occupies a significantly greater timeframe within the total PUR.

For example: In a case that was open for IH services for only 2 months during a 15-month PUR, reviewers considering Sub-Item 12A (Needs Assessments and Services to Children) might determine that the agency's assessment of the child's needs during the IH portion of the case was, considered by itself, an Area Needing Improvement (ANI). However, following the target child's entry into FC, the reviewers might determine that the agency did conduct appropriate assessments and provide needed services for the child that moved the case in a positive direction and resulted in a positive outcome for the child. The reviewers' resulting conclusion might be that these efforts indicate a positive trend in the case that outweighs the initial performance and thus merits a Strength rating.

In considering this "big picture" view, reviewers should be guided by the following:

- While greater consideration should generally be given to that portion of the case that makes up a longer timeframe within the PUR, there is no predetermined ratio between the IH and FC portions that would automatically designate one as the more relevant period by which to determine ratings.
- Instead of focusing on total duration of IH vs. FC, reviewers should consider the overall trend and direction of the case and the overall impact on child outcomes in determining the effectiveness or non-effectiveness of the agency's efforts.
- In situations where there is incongruence between one portion of the case and another (for example, IH services that are primarily insufficient vs. FC services that are strong), Rationale Statements should include descriptions of the insufficient services as part of the overall rationale, with a detailed explanation of how reviewers determined the final rating (for example, why insufficient IH services were outweighed by those provided during the FC portion of the case, or vice versa).
- In the Safety items (2 and 3), inadequate case practice in either the IH or FC portions of the case may drive an ANI rating, despite the length of time, because of the critical nature of safety practice and the overall impact of this area on all outcomes for the child(ren) (for example, FC placement could have been prevented altogether if appropriate practice occurred in Items 2 and 3).

Reviewers should always involve their QA Specialist in discussions regarding these cases.