CONTRACT OVERSIGHT DESK REVIEW

Community Based Care of Central Florida

GJL57

As required by section 402.7305 F.S., The Department of Children and Families performed a Desk Review for Community Based Care of Central Florida.

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Executive Summary

Florida Statute 402.7305 requires the Department to conduct an analysis of the performance and compliance of a contracted Community Based Care (CBC) agency by means of on-site monitoring or desk reviews if the external service provider will not be monitored on site during a fiscal year. The Department's Contract Oversight Unit performed a Desk Review for Community Based Care of Central Florida (CBCCF), Contract GJL57 which focused on key performance indicators specific to the CBC agency as compared to the overall statewide average performance. The categories reviewed included: CBC performance, practice model implementation, child safety after termination of services, financial viability, licensed and group care and feedback from the DCF contract manager.

Rank	County	Population
5	Orange County	1,314,367
13	Seminole County	455,479
18	Osceola County	336,015

Source: United States Census Bureau / American FactFinder. "Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2016". 2016 Population Estimates Program. Web. March 2017.   http://factfinder2.census.gov.

CBCCF serves children and families in Orange, Osceola & Seminole counties in circuit eighteen, Central Region. According to the U.S. Census bureau, the annual estimated resident population (from April 1, 2010 to July 1, 2016) in all three counties served by CBCCF was 2,105,861. See chart below for breakdown by county. The removal rate per 100 children Investigated from October thru December 2016 was 3.7 (Orange & Osceola) and 4.9 (Seminole) which was the lowest (Orange & Osceola) and sixth lowest (Seminole) removal rate in the State. All three counties

enjoy removal rates lower than the statewide average of 5.8 (Source: Child Welfare Key Indicators Monthly Report, May 2017).

CBC Performance

A review of CBCCFL's performance shows both strengths and areas where opportunities for improvement exist.

Orange & Osceola Counties

In eight of the scorecard measures, CBCCFL performed at or above the established performance standards and in four of the scorecard measures, CBCCFL performed below the established performance standards for FY 16/17 Quarter 3.

CBCCFL's performance consistently (last six quarters) meets scorecard measures in the following areas:
- M02: % of children who are not abused/neglected during in-home services
- M04: % of children under supervision who are seen every 30 days
- M06: % of children exiting to a permanent home w/in 12 months for those in care 12 to 23 months
- M09: % of children in foster care who received a medical service in last 12 months

CBCCFL's current performance on scorecard measure three (% of children who are not neglected or abused after receiving services) currently meets the established performance standards for FY 16/17, Q3 and has consistently met the measure in five out of the last six quarters.

Performance in three scorecard measures show a positive trend in recent performance but should continue to be monitored:
- M05: % of children exiting to a permanent home within 12 months of entering care
- M07: % of children who do not re-enter care within 12 months of moving to a permanent home
- M11: % of young adults exiting foster care at age 18 who completed/are enrolled in secondary education, vocational education or adult education

Performance in scorecard measure eight (Placement moves per 1, 000 days in foster care), has been trending down for the past four quarters which represents an area for review and discussion.

Three performance measures represent opportunities for improvement, all of which scored below the established performance standards for FY 16/17, Q3. They are:
- M01: Rate of abuse per 100,000 days in foster care
- M10: % of children in foster care who received a dental service in last 7 months
- M12: % of sibling groups where all siblings are placed together

Scorecard Measure	FY 2016 Q2	FY 2016 Q3	FY 2016 Q4	FY 2017 Q1	FY 2017 Q2	FY 2017 Q3
M01: Rate of abuse per 100,000 days in foster care	13.33	10.09	10.53	10.04	8.28	9.90
M02: % of children who are not abused/neglect during in-home services	96.20	97.50	98.30	96.80	96.40	97.50
M03: % of children who are not neglected or abused after receiving services	95.60	92.80	97.60	95.90	95.40	95.60
M04: % of children under supervision who are seen every 30 days	99.90	99.60	99.70	99.80	99.80	99.70
M05: % of children exiting to a permanent home w/in 12 months of entering care	24.60	31.00	33.30	26.60	30.80	46.70
M06: % of children exiting to a permanent home w/in 12 months for those in care 12 to 23 months	54.40	59.20	56.50	56.20	56.80	55.90
M07: % of children who do not re-enter care w/in 12 months of moving to permanent home	81.90	82.10	84.70	89.60	87.50	93.90
M08: Placement moves per 1,000 days in foster care	3.66	4.15	3.49	3.57	3.89	4.13
M09: % of children in foster care who received a medical service in last 12 months	97.60	97.20	97.50	96.80	96.00	96.60
M10: % of children in foster care who received a dental service in last 7 months	96.60	95.10	95.80	94.80	92.60	93.10
M11: % of young adults exiting foster care at age 18 completed/are enrolled in sec. ed., voc. ed, or adult ed.	76.50	76.10	78.40	76.60	85.20	85.00
M12: % of sibling groups where all siblings are placed together	57.50	59.10	59.50	58.20	64.40	63.70

Seminole County

In five of the scorecard measures, CBCCFL performed at or above the established performance standards and in seven of the scorecard measures, CBCCFL performed below the established performance standards for FY 16/17 Quarter 3.

CBCCFL's performance consistently (last six quarters) meets scorecard measures in the following areas:
- M06: % of children exiting to a permanent home w/in 12 months for those in care 12 to 23 months
- M08: Placement moves per 1, 000 days in foster care

CBCCFL's current performance on scorecard measure three (M03: % of children who are not neglected or abused after receiving services) currently meets the established performance standards for FY 16/17, Q3 and has consistently met the measure in four out of the last five quarters.

CBCCFL's current performance on scorecard measures two (M02: % of children who are not abused/neglected during in-home services) and four (M04: % of children under supervision who are seen every 30 days) has consistently met the established performance standards in five out of the last six quarters. Additionally, scorecard measure twelve (M12: % of sibling groups where all siblings are placed together) met the established target in five of the past six quarters but has been trending down for the past three quarters and fell below the target in FY 16/17 Q3.

Performance in the following scorecard measures has been overall trending down which represents an area for review and discussion at the local level to determine efficacy of current practices.
- M07: % of children who do not re-enter care within 12 months of moving to a permanent home
- M09: % of children in foster care who received a medical service in last 12 months
- M10: % of children in foster care who received a dental service in last 7 months

Three performance measures represent opportunities for improvement, all of which scored below the established performance standards for FY 16/17, Q3. They are:
- M01: Rate of abuse per 100,000 days in foster care
- M05: % of children exiting to a permanent home within 12 months of entering care
- M11: % of young adults exiting foster care at age 18 who completed/are enrolled in secondary education, vocational education or adult education
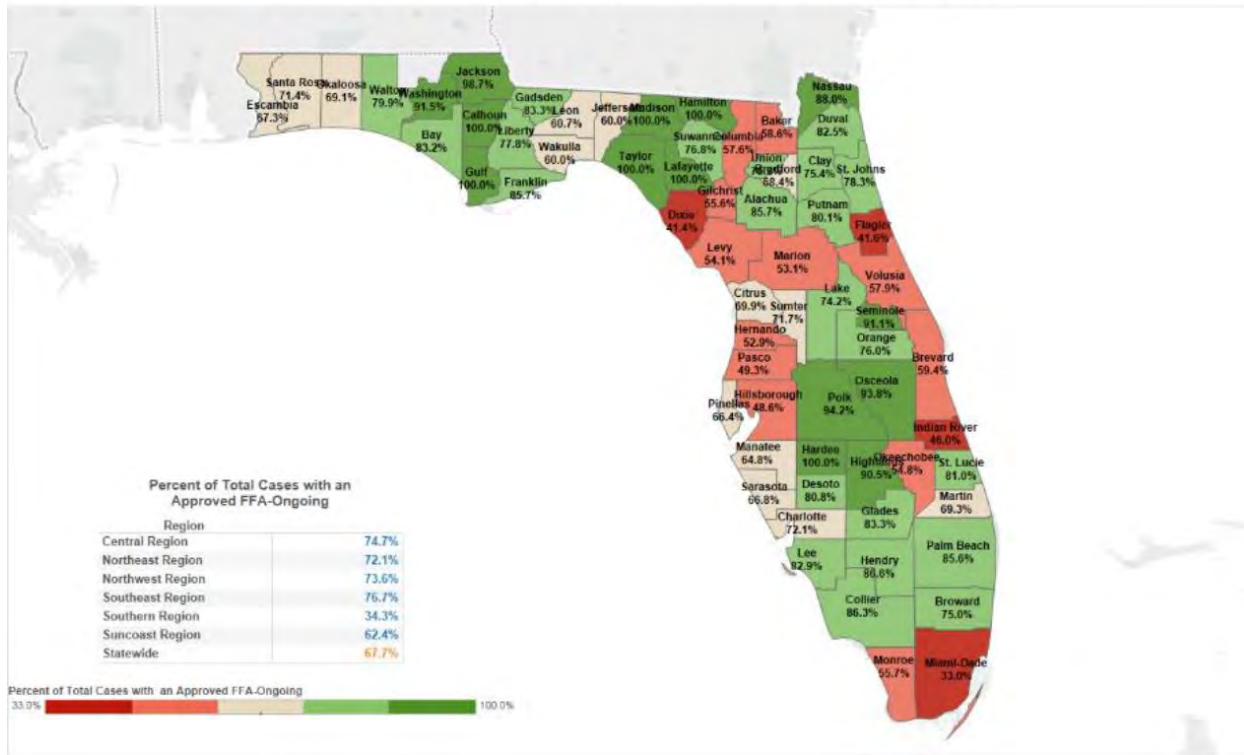
Seminole:

Scorecard Measure	FY 2016 Q2	FY 2016 Q3	FY 2016 Q4	FY 2017 Q1	FY 2017 Q2	FY 2017 Q3
M01: Rate of abuse per 100,000 days in foster care	11.94	11.74	11.65	11.15	11.87	10.20
M02: % of children who are not abused/neglect during in-home services	94.00	97.90	95.40	97.60	98.90	95.60
M03: % of children who are not neglected or abused after receiving services	93.40	96.00	97.70	97.10	85.00	100.00
M04: % of children under supervision who are seen every 30 days	97.90	99.80	99.60	99.80	99.80	99.90
M05: % of children exiting to a permanent home w/in 12 months of entering care	63.30	21.50	24.70	33.80	50.50	31.90
M06: % of children exiting to a permanent home w/in 12 months for those in care 12 to 23 months	69.20	57.90	61.00	54.00	61.60	62.00
M07: % of children who do not re-enter care w/in 12 months of moving to permanent home	80.00	100.00	93.00	93.70	85.30	86.20
M08: Placement moves per 1,000 days in foster care	3.47	3.39	3.63	3.74	3.09	3.41
M09: % of children in foster care who received a medical service in last 12 months	93.80	95.50	96.10	94.30	96.60	94.60
M10: % of children in foster care who received a dental service in last 7 months	94.60	96.90	95.70	94.40	94.50	90.90
M11: % of young adults exiting foster care at age 18 completed/are enrolled in sec. ed., voc. ed, or adult ed.	77.70	66.60	64.20	73.30	68.40	75.00
M12: % of sibling groups where all siblings are placed together	69.60	77.10	69.10	69.40	69.10	63.10

Practice Model Implementation

CBCCFL has made progress toward implementation of the practice model, as shown in the chart below. As of 5/18/17, CBCCFL's implementation status was 91% (Seminole), 76% (Orange) and 93.8% (Osceola) exceeding the statewide average (67.7%), which represents the total percent of active cases with an approved Family Functioning Assessment Ongoing (FFA-O). (Source: Child Welfare Key Indicators Monthly Report, May 2017)
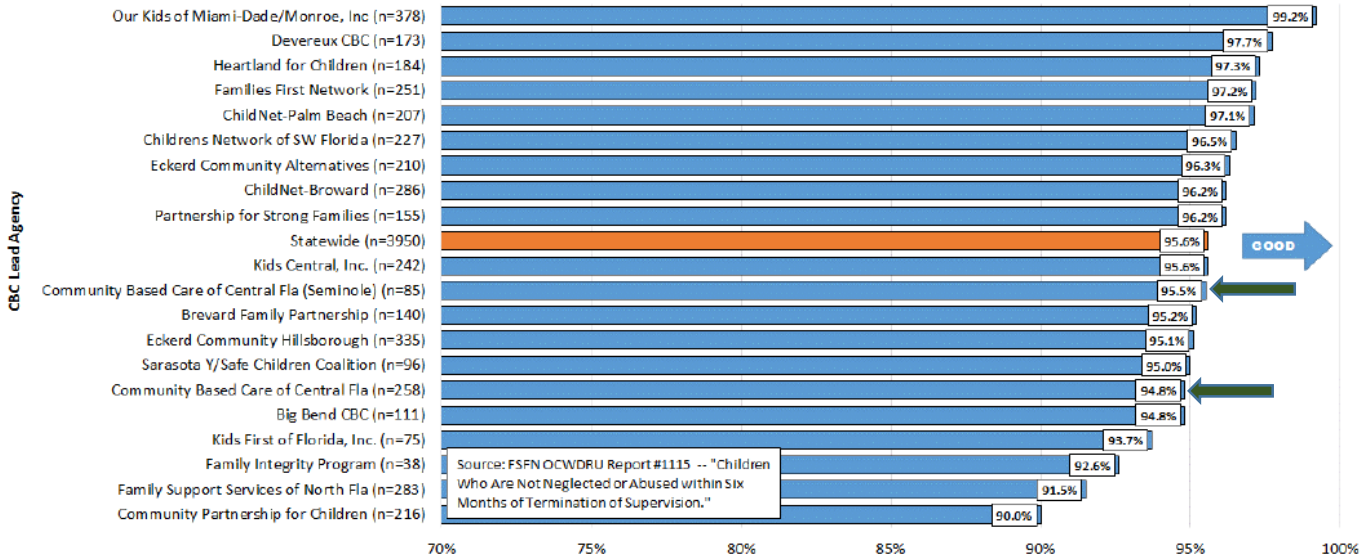
Ongoing Services Safety Methodology Implementation Status as of 5/18/2017

Percent of Total Cases with an Approved FFA-Ongoing

Region	
Central Region	74.7%
Northeast Region	72.1%
Northwest Region	73.6%
Southeast Region	76.7%
Southern Region	34.3%
Suncoast Region	62.4%
Statewide	67.7%

Percent of Total Cases with an Approved FFA-Ongoing
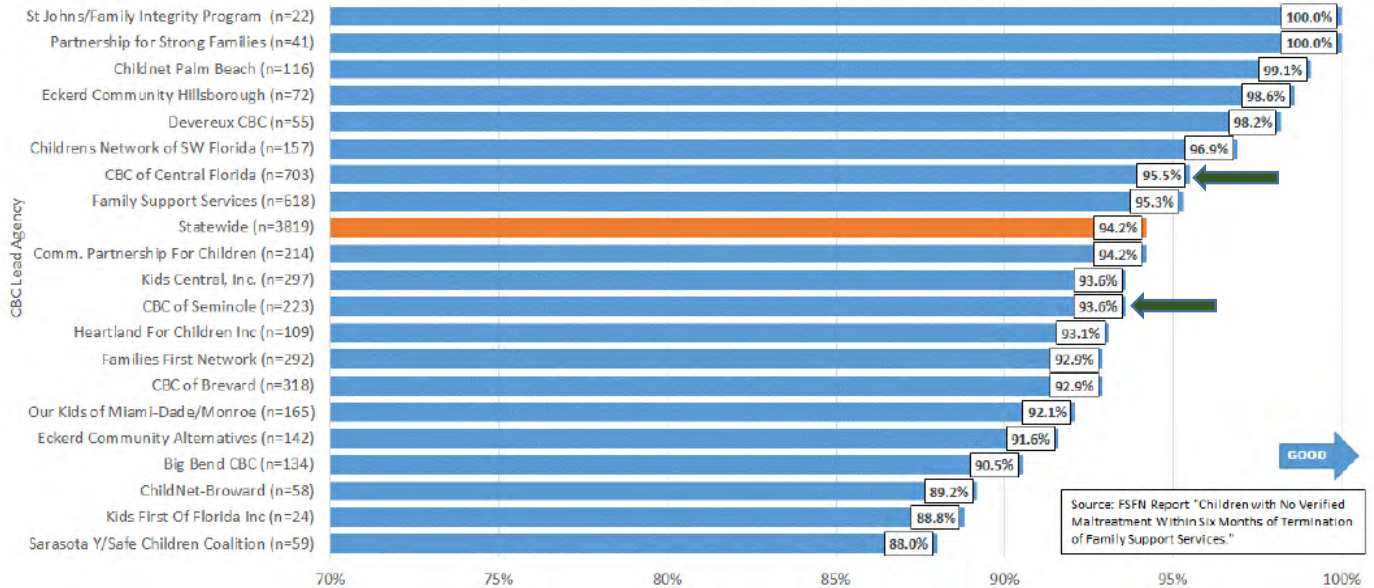33.0%   100.0%

Child Safety After Termination of Services

Ensuring children are safe and protected following case management & family support services service intervention and service delivery is a strong indicator of overall system of care performance. For this reason, post service termination re-abuse episodes are measured to determine the percentage of children in case management and family support services who are not re-abused or maltreated within six months of the termination of services. For the most recent quarter (services terminated between April – June 2016), CBCCFL's performance was below the statewide average (95.6%) for cases with no maltreatment within six months of case management services (Seminole – 95.5% and Orange/Osceola – 94.8%). CBCCFL's performance was also below the statewide average (94.2%) for family support services provided in Seminole county (93.6%) during the same time period. CBCCFL's performance was above the statewide average for family support services provided in Orange & Osceola (95.5%) counties during the same time period. See the charts below. (Source: Child Welfare Key Indicators Monthly Report, May 2017) This data represents an opportunity for CBCCFL to review the quality and effectiveness of family support services in Seminole county and case management services in all three counties to determine which providers are providing the best services to families which result in strong behavioral change and a reduction in recidivism.

Percent of Children Terminated from Case Managed Services in Quarter Who Were Not Maltreated within Six Months, for Children with Services Terminated April-June 2016

CBC Lead Agency	Percent
Our Kids of Miami-Dade/Monroe, Inc (n=378)	99.2%
Devereux CBC (n=173)	97.7%
Heartland for Children (n=184)	97.3%
Families First Network (n=251)	97.2%
ChildNet-Palm Beach (n=207)	97.1%
Childrens Network of SW Florida (n=227)	96.5%
Eckerd Community Alternatives (n=210)	96.3%
ChildNet-Broward (n=286)	96.2%
Partnership for Strong Families (n=155)	96.2%
Statewide (n=3950)	95.6%
Kids Central, Inc. (n=242)	95.6%
Community Based Care of Central Fla (Seminole) (n=85)	95.5%
Brevard Family Partnership (n=140)	95.2%
Eckerd Community Hillsborough (n=335)	95.1%
Sarasota Y/Safe Children Coalition (n=96)	95.0%
Community Based Care of Central Fla (n=258)	94.8%
Big Bend CBC (n=111)	94.8%
Kids First of Florida, Inc. (n=75)	93.7%
Family Integrity Program (n=38)	92.6%
Family Support Services of North Fla (n=283)	91.5%
Community Partnership for Children (n=216)	90.0%

GOOD →

Source: FSFN OCWDRU Report #1115 -- "Children Who Are Not Neglected or Abused within Six Months of Termination of Supervision."

Percent of Children Terminated from Family Support Services in Quarter Who Were Not Maltreated within Six Months, for Children with Services Terminated April-June 2016

CBC Lead Agency	Percent
St Johns/Family Integrity Program (n=22)	100.0%
Partnership for Strong Families (n=41)	100.0%
Childnet Palm Beach (n=116)	99.1%
Eckerd Community Hillsborough (n=72)	98.6%
Devereux CBC (n=55)	98.2%
Childrens Network of SW Florida (n=157)	96.9%
CBC of Central Florida (n=703)	95.5%
Family Support Services (n=618)	95.3%
Statewide (n=3819)	94.2%
Comm. Partnership For Children (n=214)	94.2%
Kids Central, Inc. (n=297)	93.6%
CBC of Seminole (n=223)	93.6%
Heartland For Children Inc (n=109)	93.1%
Families First Network (n=292)	92.9%
CBC of Brevard (n=318)	92.9%
Our Kids of Miami-Dade/Monroe (n=165)	92.1%
Eckerd Community Alternatives (n=142)	91.6%
Big Bend CBC (n=134)	90.5%
ChildNet-Broward (n=58)	89.2%
Kids First Of Florida Inc (n=24)	88.8%
Sarasota Y/Safe Children Coalition (n=59)	88.0%

GOOD →

Source: FSFN Report "Children with No Verified Maltreatment Within Six Months of Termination of Family Support Services."

Financial Viability Report Analysis

The Office of CBC/ME Financial Accountability performed financial monitoring procedures based on the DCF 2016-17 CBC-ME Financial Monitoring Tool for Desk Reviews of CBCCFL and found one area of noncompliance – Noncompliance with federal/state regulatory requirements. The desk review period was from October 1, 2016 through December 31, 2016. The report indicates that CBCCFL incorrectly reported expenses for an in-home dependency client to a prevention cost pool. CBCCFL also expenses were reported to an out-of-home cost pool during a time the child was sheltered. CBCCFL corrected the entries on the expenditure reports and in FSFN. See complete fiscal report for additional details.

Licensed & Group Care Placement

Licensed Care

As of June 11, 2017, 141 Seminole county children are placed in licensed care which represents 35.43% of all children in out of home care in Seminole county. The current statewide average of children placed in licensed care versus other placement settings is lower at 29.54%. As of the same date, 305 Orange and Osceola children were placed in licensed care which represents 22.98% of all children in out of home care in those counties. This is lower than the statewide average of children placed in licensed care versus other placement settings. This data supports a review/discussion at that local level to determine strategies to reduce possible over utilization of licensed placements for Seminole county children.

Group Care

As of May 31, 2017, there were 31 Seminole county children placed in group care, representing 7.79% of all CBC-Seminole placements. This is lower than the current statewide average of children placed in group care versus other placement settings (8.91%). During the same time period, 154 Orange and Osceola children were placed in group care, representing 11.61% of children in the two counties placed in group care versus other placement settings. This is higher than the statewide average (8.91%) and represents an opportunity for local review of Orange and Osceola county group care placements to ensure less restrictive placements are being explored.

Community Based Care of Central Florida - Orange & Osceola		
Licensed & Group Care Placements	CBC	Statewide
Number of Children in Licensed Care	305	7,183
% of Children in Licensed Care	22.98%	29.54%
Number of Children in Group Care	154	2,166
% of Children in Group Care	11.61%	8.91%

Source: Department of Children & Families - Children in Out of Home Care by Lead Agency Report (updated 6/11/17)

Community Based Care of Central Florida - Seminole		
Licensed & Group Care Placements	CBC	Statewide
Number of Children in Licensed Care	141	7,183
% of Children in Licensed Care	35.43%	29.54%
Number of Children in Group Care	31	2,166
% of Children in Group Care	7.79%	8.91%

Source: Department of Children & Families - Children in Out of Home Care by Lead Agency Report (updated 6/11/17)

DCF Contract Manager Feedback

Survey responses were received from Summer Bray, DCF Contract Manager.

Foster Home Recruitment and Retention

CBCCFL set a fiscal year goal of licensing 100 homes with a continual focus on teens and siblings. CBCCFL established their target based on a tri-county approach. This fiscal year's goal is to have 100 families complete pride classes annually.   Out of the 100 homes the goal is to gain 20 homes for sibling groups, 20 homes for cross over youth, 20 homes for teens, and the remaining 40 homes as traditional.   The expectation is to reach this goal by recruiting 25 homes per quarter. CBCCFL exceeded this goal by licensing 104 total homes in FY1617. 44 of the homes will accept sibling groups, 20 of the homes will accept crossover youth and 20 homes will accept teens.

To support retention efforts, CBCCFL has five Foster Family Advocates who give support and assistance to foster families with one advocate who is specifically designed to help foster parents with new placements in the homes.

These advocates are available as support to the foster parents and conduct joint visits with the CPI when an abuse report is generated on the foster home. Children's Home Inc. provides ongoing support for foster parents in Osceola County. The CBC also conducts various staffings to retain foster parent. In addition to match staffings, which are held prior to placement of all children, prevention support staffings are held when a foster parent requests the removal of a child, as well as quality staffings which occur when a foster home has 3 foster care referrals with the same concerns, if a case manager expresses concerns, or when the licensing unit recognizes a pattern of ongoing issues. CBCCFL believes that the entire agency, not just the licensing unit alone, is needed to help retain foster parents and as a result they conduct quarterly child placing agency meetings with the leaders from each case management agency to discuss the expectations and changes in the world of licensing as it pertains to foster parents.

In addition, all homes are interviewed at the time of closure regarding reasons for closure and if there is a possibility that the home can stay open for respite or if they just want to be placed on a temporary hold. As homes can close for various reasons, CBCCFL work with the foster parents to attempt to regain stability before placing children in the home or disrupting children currently placed in the home. For example, CBCCFL has assisted with rent and utilities payments and has advocated with landlords. CBCCFL also utilizes surveys with all foster homes to better identify areas in which improvement is warranted and to prevent home closures. The results of the surveys have brought forth some areas of customer service which CBCCFL plans to address thru the QPI reboot training in the tri-county area.

Placement Process
CBCCFL's placement process initiates when the Intake and Placement (I&P) team is contacted. I&P then contacts the CPA licensing agencies to provide pertinent information regarding the child and placement need. The CPA licensing agencies call the foster parents to identify an appropriate placement. The CBC licensing staff gets involved if there is an over cap needed or difficulty in placing. To ensure child specific needs are met, the I&P Specialists obtains all available information from the Child Protective Investigator (CPI) and/or Dependency Case Management (if it is a subsequent placement). Placing siblings together, in the least restrictive placement, in the home county, is a priority. CBCCFL staff also closely monitors separated siblings and youth in group care to take action when siblings can safely be placed together and/or when step down to a lower level of placement is available. CBCCFL has implemented their S.T.E.P pilot program which allows for select CBCCFL staff to become emergency placements for up to 72 hours, allowing the CBC to provide a more effective matching process for children coming into care.   Four S.T.E.P placements have occurred since implementation. All four placements met criteria and one was able to prevent a child from entering the dependency system as family member came from out of state and the issue was resolved in family court. The other three children were placed in homes appropriate for the children's needs. Additional training began in July to certify 3 more families for a total of 7 homes in the S.T.E.P. program by the end of August.

Group Care
CBCCFL conducts quarterly meetings with group care directors. During these meetings, providers receive trainings as needed and are updated on any policy changes throughout the state. In addition, CBCCFL was chosen to participate as a pilot site for the RCG Quality Assessment Tool. The data will be provided to the Institute at Florida State University and the Office of Child Welfare. There are 3 providers from CBCCF and 7 sites total that are a part of the pilot. The field test rolled out in March and will end on July 15,2017. The KEY Haven, Boys Town and GOV were chosen as test sites. RGC Pilot program- 2 sites at GOV 3 sites at key haven, 2 sites at Boys Town. The Goal of this pilot is to implement the Tool in Admin Code which will be utilized during the relicensing process of group homes.

Caregiver Support & Retention Efforts
CBCCFL is also committed to supporting relative and non-relative caregivers. CBCCF has Kinship Navigators who are available to assist relatives with accessing eligible caregiver funding and other resources. The Nurse Health Coordinators (CBCIH) provide supports for children, including ensuring that the Health Risk Assessment (HRA)s are

completed and helping to navigate intensive health needs for children in foster care. While children remain in out of home care, CBCCF Operation Managers conduct permanency review meetings with case management staff, parents, substitute caregivers, GAL, and CLS (when appropriate) every 90 days. MDT staffings are held as required to approve level of care and step downs and the staffing participants include additional participants based on clinical and health care management requirements. Placement Support staffings/meetings can be requested when supports are needed to preserve placements, coordinate service delivery or to plan placement transitions. Nurse Health Coordinators assist with health care coordination as needed; Foster Parent Advocates and Kinship Navigators support the caregivers with system navigation and access to Medicaid services, school enrollment or eligibility for other programs.

Extended Foster Care

To preserve and develop extended foster care placements, CBCCF considers any Licensed Foster Home as an Extended Foster Care placement. The child has the option to remain in the current placement for transition to EFC. If the child does not want to remain in the current home, CBCCF begins to plan for transition when the child turns 16 and half years of age. CBCCF works with the child to identify any close relationships with family or friends that could be considered as an EFC placement. A home study, to include a background check, is completed on the prospective caregiver(s). The youth and the prospective caregiver sign a shared living agreement which identifies the conditions of the lease and rules within the home. If a relative/non-relative cannot be identified, then the child can choose to participate in transitional housing. CBCCF holds a corporate lease with an apartment complex and the youth can reside in the above said apartment. These arrangements are managed by one entity, the Housing Manager for youth services. CBCCF also provides an Education Manager and Employment Manager to all the youth in order to assist in continuing education and maintaining employment.

Conclusion

Based on the limited review of Community Based Care of Central Florida, Inc., contract GJL57 several strengths and opportunities for improvement were found.

In the past six quarters, CBCCF met the established performance targets 57% of the time which is below the average statewide cumulative scorecard performance. CBCCF's status toward implementation of the child welfare practice model, in all three counties, is above the statewide average. Case management services provided to children and families in Orange, Osceola & Seminole counties and family support services provided to children and families in Seminole county have yielded rates of re-abuse which are higher the statewide average. However, family support services provided to children and families in Orange & Osceola county have yielded re-maltreatment rates which are lower than the statewide average. And, while the percentage of children in licensed care is lower than the statewide average, CBCCF has a higher percentage of children in group care than the statewide average. In Seminole county, the opposite is true. The percentage of children in licensed care is higher than the statewide average while the percentage of children in group care is lower than the statewide average in.

The Department's Contract Oversight Unit recommends the following:

1. Continue to monitor all contract and performance measures and take immediate corrective action by initiating local review and discussion of any measure which falls below the established performance target.
2. Review and discuss current practice related to the following measures and implement immediate actions to monitor and improve performance in these areas.
   a. Placement moves per 1,000 days in foster care (Orange, Osceola)
   b. Rate of abuse per 100,000 days in foster care (Orange, Osceola & Seminole)
   c. Percent of children in foster care who received a dental service in the last seven months (Orange, Osceola & Seminole)
   d. Percent of sibling groups where all siblings are placed together (Orange, Osceola & Seminole)

    e. Percent of children who do not re-enter care within 12 months of moving to a permanent home (Seminole)

    f. Percent of children in foster care who received a medical service in the past 12 months (Seminole)

    g. Percent of children exiting to a permanent home within 12 months of entering care (Seminole)

    h. Percent of young adults exiting foster care at age 18 who completed/are enrolled in secondary, vocational or adult education (Seminole)

3. Continue efforts to fully implement the practice model in all three counties served by CBCCF.

4. Review and discuss re-maltreatment episodes for children with services terminated within six months. Evaluate causality and patterns by identifying referred service providers, length of care and any other common factors that could be addressed & remedied during local level provider contract negotiations.

5. Follow all fiscal and reporting recommendations as outlined in Financial Accountability reports.

6. Review and discuss cases involving children currently placed in group care in Orange and Osceola counties and licensed care in Seminole county for possible step down to a less restrictive placement option.

7. Continue efforts to recruit and license quality foster home caregivers.

CONTRACT OVERSIGHT DESK REVIEW

Community Based Care of Central Florida GJL57

As required by section 402.7305 F.S., The Department of Children and Families performed a Desk Review for Community Based Care of Central Florida.

INTRODUCTION

The Department's Community Based Care Monitoring Team performed a Desk Review for Community Based Care of Central Florida, Contract GJL57. Community Based Care of Central Florida (CBCCF) is the lead agency for foster care and adoption related services in Orange, Osceola and Seminole Counties. Orange and Osceola Counties comprise (judicial) Circuit 9 and, Seminole is one of two counties (the other is Brevard), that comprise (judicial) Circuit 18. CBCCF is one of five lead agencies in the Central Region. CBCCF has held the lead agency contract since 2004 in Seminole County and since 2011 in Orange and Osceola Counties. The contracts were administered separately until October 2016, when they were combined. Seminole, Osceola, and Orange County are all run the same programmatically. Each county has a service center with one Executive Director which includes the same administrative and programmatic structure. Due to size, Orange County has three case management agency (CMA) sub-contracts and Seminole and Osceola each have one. The funding as well as all contractual functions were combined into GJL57 beginning October 1, 2016. CBCCF Seminole data in FSFN remains separate due, however all FSFN data is calculated together as one contract when measuring performance and processing the financial data. The protective investigation function is conducted by the Seminole Sheriff's Office in Seminole County and by DCF in Orange and Osceola Counties. Children's Legal Services (CLS) represents the state in dependency proceedings in both judicial circuits. In Orange County, the Guardian Ad Litem Program is administered by Legal Aid Society of Orange County Florida Bar Association, with pro bono attorneys representing the best interest of the child; in Osceola and Seminole Counties volunteers assist professional staff in the advocacy role.

PERFORMANCE AT-A-GLANCE

The charts and graphs on the following page are provided by Casey Family Programs. Casey Family Programs works in all 50 states, the District of Columbia and two territories and with more than a dozen tribal nations. They actively work with Florida child welfare professionals to improve practice through use of evidence based programs and data analytics. The Casey data on the following page Shows that from 2012 through 2017 CBCCF experienced a lower rate of children in care, and from 2011 through2016 CBCCF had a lower rate of children entering care per 1,000 that the state and national averages.

CBC of Central Florida

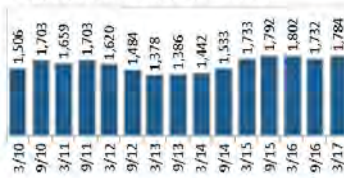NOTE: Due to data source and timeframe presented, numbers may vary slightly from those presented in reports produced by FL DCFS.

Legend: CBC | state | national

of children in care
(< age 18; as of last day of each month)

Values: 1,506 (3/10), 1,703 (9/10), 1,659 (3/11), 1,703 (9/11), 1,620 (3/12), 1,484 (9/12), 1,378 (3/13), 1,386 (9/13), 1,442 (3/14), 1,533 (9/14), 1,733 (3/15), 1,792 (9/15), 1,802 (3/16), 1,732 (9/16), 1,784 (3/17)

year over year change in the # in care

change 3/12-3/13, change 3/13-3/14, change 3/14-3/15, change 3/15-3/16, change 3/16-3/17

rate in care
(per 1,000, < age 18)

2012, 2013, 2014, 2015, 2016, 2017
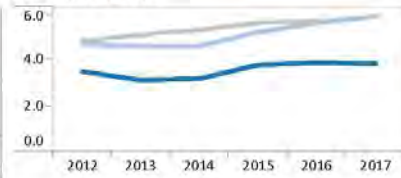
Safety

% children who experience repeat maltreatment within 6 months

2010 2011 2012 2013 2014 2015 2016
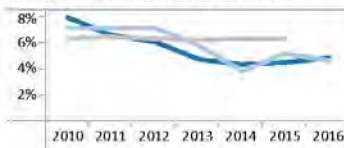
% children who experience repeat maltreatment within 12 months
(note 2013-2014 data masked due to data quality)

2009 2010 2011 2012 2015
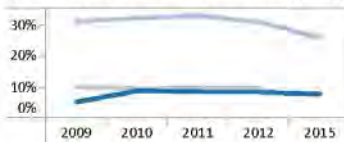
Entries

of children entering & exiting
(6 month entry cohorts ending on each date)

Entries / Exits

3/11 9/11 3/12 9/12 3/13 9/13 3/14 9/14 3/15 9/15 3/16 9/16 3/17

rate of children entering care
(per 1,000)

2011 2012 2013 2014 2015 2016
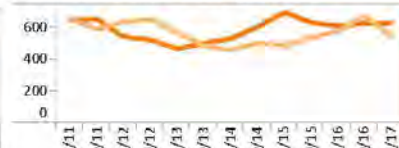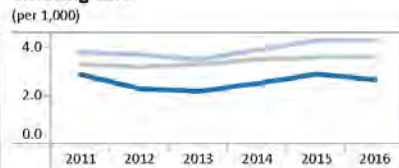
Placement

placement settings for children in care, by age (for all children in care on 3/31/2017)

Legend: Runaway, Congregate care, Foster care, Pre-adoptive home, Kinship care

Values by age group: <1: 50% / 49%; 1-5: 45% / 53%; 6-12: 46% / 47%; 13-17: 46% / 28% / 21%
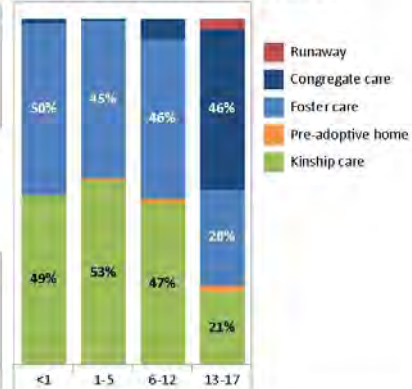
Timely & Stable Permanency

% permanency within 30 days of entering care
(6 month entry cohorts ending on each date)

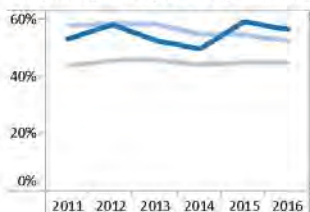3/11 9/11 3/12 9/12 3/13 9/13 3/14 9/14 3/15 9/15 3/16 9/16
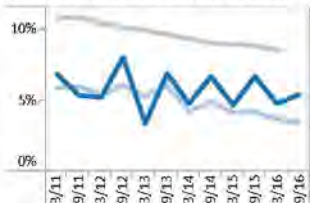
% permanency within 3-12 months of entering care
(6 month entry cohorts ending on each date)

3/11 9/11 3/12 9/12 3/13 9/13 3/14 9/14 3/15 9/15 3/16
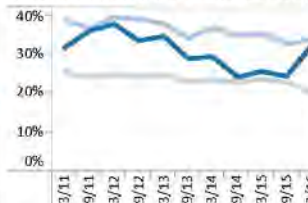
% permanency w/in 12 months for children in care 12-23 months

2011 2012 2013 2014 2015 2016

% re-entering care w/in 12 months of timely permanency

2011 2012 2013 2014 2015
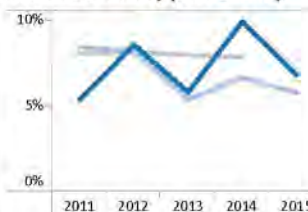
Children In Care 2+ Years (3/31/2017)

in care 2+ years

#	303
%	17%
state	16%
Nat'l (2016)	25%

% in care 2+ years at start of the year who achieve permanency w/in 12 months

2011 2012 2013 2014 2015 2016
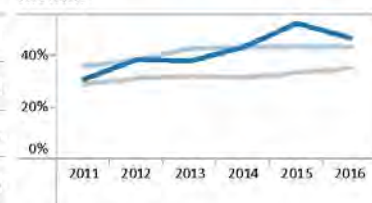
profile of current caseload in care 2+ years
(for groups that represent at least 2% of the total; by age, placement type and case plan goal)

	ages 2-12			ages 13-17	
	Reunif	Adopt	Guard	Adopt	APPLA
Congregate care				7%	4%
Foster care	10%	33%	3%	4%	
Kinship care	4%	16%			
Pre-adoptive home		2%			

SECTION 1: SERVICE AREA DESCRIPTION

This section provides a snapshot of the service area for Community Based Care of Central Florida (CBCCF), including demographic information, a description of the child welfare partners and information about all child fatalities, including those investigated by the Department and those that were not.

CBCCF serves the children and families in Orange and Osceola County in Circuit 9 and in Seminole County of Circuit 18. Based on the US Census Facts Seminole County is education rich with a higher percent of the population having a high school diploma and a college degree than the state average. The county also has an appreciatively higher median household income than the state average, coinciding with a poverty rate lower than the state average by a little over 4%. Orange County follows similar trends to Seminole County with education rates higher than the state average, a slightly higher median household income, and a slightly lower poverty level than the state average. In contrast, Osceola County has lower population rates with high school diplomas and college degrees, lower median household incomes, and higher percent of population living in poverty than the state averages.

US Census Facts	Orange	Osceola	Seminole	Florida
Median Household Income	$47,943	$44,254	$57,010	$47,507
Percent of population living in poverty	15.6%	18.5%	11.5%	15.7%
Percent of population over 25 years old with high school diploma	87.6%	85.2%	93.0%	86.9%
Percent of population over 25 years old with a college degree	31.1%	18.0%	35.3%	27.3%

https://www.census.gov/quickfacts   Table 1

CHILD FATALITIES

INFANT AND CHILD MORTALITY RATES

Over the past five years Orange, Osceola, and Seminole Counties have had very little deviation in birth rates, however there are differences noted between the counties. Seminole County's birth rate has remained below the statewide rate, while the birth rate in Orange and Osceola County have remained higher than the statewide rate. The infant mortality rate has fluctuated in each county. Over the past five years, Orange County and Osceola County saw increases and decreases year to year with an upward trend in 2015 and 2016. Orange County's 2016 infant mortality rate was 7.1, higher than the statewide rate of 6.1. Osceola County's infant mortality rate in 2016 was 6.0, lower than the state rate. Seminole County's infant mortality rate has decreased over the past five years from a high of 6.8 in 2012 to 4.0 in 2016, significantly lower than the statewide rate.

Birth Rate per 1,000 population Statewide Rate: 11.3					
County	2012	2013	2014	2015	2016
Orange	13.4	13.2	13.1	13.2	12.9
Osceola	13.6	13.4	14	13.5	13.3
Seminole	10.3	10.2	10.4	10.3	10.6

Source: http://www.flhealthcharts.com/FLQUERY/Birth/BirthRateRpt.aspx

Table 2

Infant Mortality Rate per 1,000 live births Statewide Rate: 6.1					
County	2012	2013	2014	2015	2016
Orange	6.9	7.5	5.2	6.4	7.1
Osceola	4.4	5.1	4.8	5	6
Seminole	6.8	5.4	4.9	4.8	4

Source: http://www.flhealthcharts.com/FLQUERY/InfantMortality/
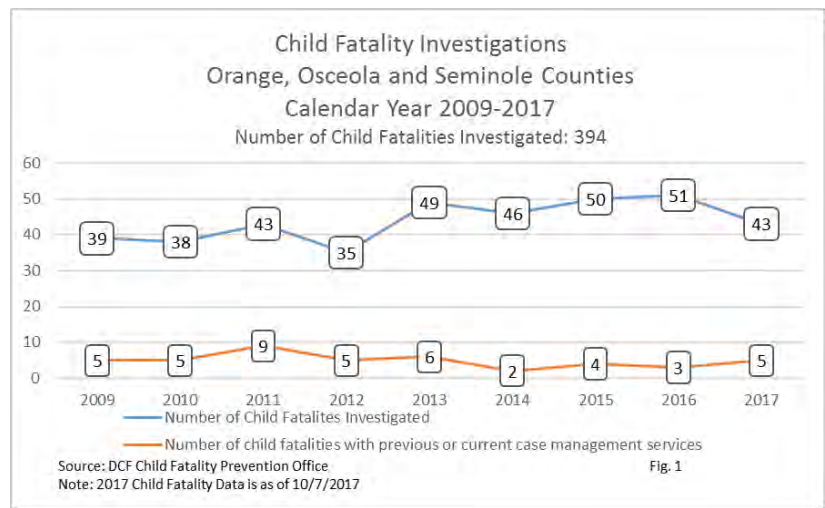InfantMortalityRateRpt.aspx   Table 3

CHILD FATALITY INVESTIGATIONS

Since 2009, the number of child fatality investigations fluctuated slightly over time with a high of 51 in 2016 and a low of 35 in 2012. Fatalities with previous or current case management involvement followed similar trends with an overall rate of 11% (44). Of those 44, 24 were receiving case management services at the time the fatality report was received. From 2009 through 2017, for cases with current or prior case management services, the primary cause of death was:

- natural causes (10)
- other (7)
- SIDS/SUID (6)
- drowning (5),
- sleep related (2)

Since 2015, the Critical Incident Rapid Response Team (CIRRT) has been deployed five times, but only one involved the lead agency. The CIRRT was deployed to Seminole County on August 6, 2017. A 5 ½-month-old infant was pronounced dead six days after she was found unresponsive in her foster home. The report has not been released as the investigation is still ongoing.

Child Fatality Investigations
Orange, Osceola and Seminole Counties
Calendar Year 2009-2017
Number of Child Fatalities Investigated: 394

Number of Child Fatalites Investigated
Number of child fatalities with previous or current case management services
Source: DCF Child Fatality Prevention Office   Fig. 1
Note: 2017 Child Fatality Data is as of 10/7/2017

SECTION 2: AGENCY SUMMARY

CBCCF service locations include 4 county service centers (Seminole, Osceola, East Orange, and West Orange) and a centrally located Administrative Support Center. Case management is subcontracted to community partners in all three counties: Seminole-Children's Home Society; Orange- Children's Home Society, Devereux, and One Hope United; and in Osceola-Gulf Coast Jewish Family and Community Services. Each CMA is also contracted to provide diversion staff, to include staff that are co-located at each CPI service center and assist with referrals to services or resources, and staff to provide care coordination for Family Support cases or to provide an oversight role when care coordination is referred to another program. Each CMA has staff assigned to provide secondary case management support for older foster care youth* and for children with an adoption goal. *A Youth Services Case Manager is assigned to all older youth over the age of thirteen. The Youth Services Case Manager assists with ensuring that life skills are being delivered, and the work on the IL tool kit is occurring in preparation for the youth meeting all of the Special Judicial Review requirements. While the primary Case Manager maintains the cases for youth in Extended

Foster Care, the secondary Youth Services Case Manager works with the youth that are 18+ and not in EFC; in addition to co-chairing Youth Transition Team Meetings for youth beginning when child is 16.5 (or earlier).

NUMBER OF INVESTIGATIONS, REMOVALS AND CHILDREN SERVED

Between FY 14/15, FY 15/16 and FY16/17 the number of reports accepted for investigation by the Department's Child Protective Investigations (CPI) did not significantly fluctuate, though the number of removals decreased overall by 4.4%. Children receiving out of home care services and children receiving in-home services have generally increased over the last three fiscal years, 16.7% and 7.5% respectively. Children receiving family support services decreased 28.5% over the past three fiscal years. This is attributed to aligning their Family Safety Services according to utilization in accord with policy guidance distributed by the Office of Child Welfare which targets prevention efforts to those families deemed at high/very high risk of future maltreatment. The number of young adults receiving services decreased as well by 32.2%. (source: http://www.dcf.state.fl.us/programs/childwelfare/dashboard/)

Child Protective Investigations and Child Removals (Orange, Osceola, Seminole Counties)	FY 2014/2015	FY 2015/2016	FY 2016/2017
Reports accepted for Investigation by DCF (*Initial & Additional Reports*) [1]	21,171	21,653	20,917
Children Entering Out-of-Home Care [2]	1,267	1,131	1,210
Children Served by CBC Central Florida[3]	**FY 2014/2015**	**FY 2015/2016**	**FY 2016/2017**
Children Receiving In-Home Services	2,315	2,713	2,703
Children Receiving Out of Home Care	2,664	2,814	2,866
Young Adults Receiving Services	418	378	283
Children Receiving Family Support Services	5,214	6,952	3,729

Data Sources: Table 4

[1]Child Protective Investigations Trend Report through June 2017 (run date 10/9/17)

[2]Child Welfare Dashboard: Childwelfare Trends/Children Entering Out-of-Home Care/Distinct Removals (run date 10/9/2017)

[3]FSFN OCWDRU Report 1006 Children & Young Adults Receiving Services by CBC Agency (run date 8/14/2017)

FINANCIAL VIABILITY REPORT

The Office of CBC/ME Financial Accountability performed financial monitoring procedures, based on the DCF 2016-17 CBC-ME Financial Monitoring Tool for Desk Reviews, of CBCCF and found one area of noncompliance, one area of observation and one area for technical assistance. CBCCF corrected the errors found during the review.

For further details, please see the completed fiscal report – 16/17 CBC Desk Review Financial Monitoring Report 10.1.16 12.31.16.

Comparison of Funding by Fiscal Year					
CBC of Central Florida					
DCF Contract Funds Available (by Fiscal Year)	**FY13-14**	**FY14-15**	**FY15-16**	**FY16-17**	**FY17-18**
Core Services Funding	$52,911,060	$54,335,501	$53,643,706	$54,505,280	$55,291,962
Other**	$13,609,397	$13,376,751	$13,920,690	$15,131,056	$14,461,074
Total Initial Appropriation	**$66,520,457**	**$67,712,252**	**$67,564,396**	**$69,636,336**	**$69,753,036**
Risk Pool Allocation	$0	$0	$2,418,247	$1,398,745	
CBC Operational Costs from Back of the Bill	$0	$0	$405,130	$1,423,887	
MAS from Back of the Bill	$0	$0	$249,692	$0	
Carry Fwd Balance from Previous Years	-$321,297	$3,296,239	$449,359	-$1,857,244	-$672,385
Total Funds Available	**$66,199,160**	**$71,008,491**	**$71,086,824**	**$70,601,724**	**$69,080,651**
** Includes Maintenance Adoption Subsidy (MAS), Independent Living (IL and Extended Foster Care), Children's Mental Health Services (Cat 100800/100806), PI Training, Casey Foundation or other non-core services					Table 5

Financial Viability Plan

CBCCF applied for and received Risk Pool Funding during FY 15/16 and in FY 16/17, specifically for Seminole County.

According to the Risk Pool Committee Report in March 2016, the primary factors in the FY15/16 were an increase in removals, decreased core funding, and increased number of children in out of home care. Recommendations made by the committee included developing a plan to reduce the use of group home placements, use of the Practice Model in reunification decisions, reporting monthly bank reconciliations, revising the agreement with the holding company, and consideration to restructure the stand-alone entity into a larger entity.

Findings from the Risk Pool Committee Report in May 2017 stated that the information in the March 2016 report largely remained applicable. The key difference was that the prior recommendation to merge the Seminole County contract with the Orange-Osceola contract was implemented effective October 1, 2016. The Risk Pool application was based on the residual effects of the prior separate contract arrangement.

SECTION 3: PERFORMANCE MEASURES AND QUALITY ASSURANCE DATA

This section provides a picture of CBCCF's performance as indicated by data indicators that are used to assess how well CBCCF is performing on contract measures and within the larger program areas of safety, permanency and well-being. The information in the following graphs and tables represent performance as measured through information entered into the Florida Safe Families Network (FSFN) and performance ratings based on the Department's CQI case reviews.

The performance measures outlined in this report are accessible through the Child Welfare Dashboard and include both federal and state measures used to evaluate the lead agencies on 12 key measures to determine how well they are meeting the most critical needs of at-risk children and families.

Federal regulations require title IV-E agencies to monitor and conduct periodic evaluations of activities conducted under the title IV-E program to ensure that children in foster care are provided quality services that protect the safety and health of such children (sections 471(a)(7) and 471(a) (22) of the Act (Social Security Act), respectively. The Department of Children and Families has developed additional methods to evaluate the quality of the services provided by the lead agency, Rapid Safety Feedback (RSF) reviews and Continuous Quality Improvement (CQI).

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Revised May 17, 2018

- Rapid Safety Feedback (RSF) assesses open in-home service cases. The RSF Tool focuses on safety and is used to review active cases that have specified high risk factors.
- CQI reviews are conducted on a random sample of cases that are both in home and out of home. The reviews are conducted by CBC staff and utilize the same review instrument as the Child and Family Services Review (CFSR).

In addition to the state developed quality assurance reviews, section 1123A of the Social Security Act requires the federal Department of Health and Human Services to periodically review state child and family services programs to ensure substantial conformity with the state plan requirements in titles IV-B and IV-E of the Act. This review is known as the CFSR. After receiving the results of the CFSR review, States must enter a Program Improvement Plan (PIP) to address areas that the Children's Bureau determines require improvement (45 CFR 1355.34 and 1355.35).

- CFSR reviews consist of completing a case file review, interviewing case participants, completing the on-line review instrument. In addition, these cases receive 2nd level reviews by the Office of Child Welfare and at times, 3rd level reviews by the Administration for Children and Families to ensure each case was accurately rated.

The results of the CFSR are considered baseline performance and the PIP goal is the level of improvement needed to avoid financial penalties. Therefore, the PIP goal may be lower than the overall federal and state expectation of 95%. The Department expects CBC agencies to strive toward 95% performance expectation on all CQI measures with focused activity around the federal PIP goals.

The quality ratings used throughout this report are based on the Department's CQI case reviews, including CQI/CFSR reviews and Rapid Safety Feedback reviews. The CFSR On Site Review Instrument and Instructions and the Rapid Safety Feedback Case Review Instrument are both available on the Center for Child Welfare website and provide details on how ratings are determined.

As shown in the graphic below, CBCCF is performing well in several areas however, opportunities for improved performance exist in other areas.

CONTRACT AND CBC SCORECARD MEASURES

During FY 16/17, CBCCF has met or exceeded their established contract target, federal standards and statewide performance in 8 of the 13 measures including:
- M02: % of children who are not neglected or abused during in-home services
- M03: % of children who are not neglected or abused after receiving services
- M04: % of children under supervision who are seen every 30 days
- M06: % of children exiting to a permanent home within 12 months for those in care 12 to 23 months
- M08: Children's placement moves per 1,000 days in foster care
- M09: % of children in out-of-home care who received medical service in the last twelve 12 months
- M11: % of young adults in foster care at age 18 that have completed or are enrolled in secondary education
- Adoption Measure: Number of children with finalized adoptions

With the exception of M11, these measures were also successfully met in FY15/16.

In the remaining five (5) measures, CBCCF did not meet the established targets for FY 16/17 for the following measures:
- M01: Rate of abuse or neglect per day while in foster care
- M05: % of children exiting foster care to a permanent home within twelve (12) months of entering care

- M07: % of children who do not re-enter foster care within twelve (12) months of moving to a permanent home
- M10: % of children in out of home care who received dental services in the last seven (7) months
- M12: % of sibling groups where all siblings are placed together

SC #	CBC of Central Florida Performance Measures Contract # GJL57	CBC Contract Measure Targets	Federal National Standard (Performance of Other)	Statewide Performance (FY 2016/2017)	CBC Central Florida FY 2015-2016 July 1, 2015-June 30, 2016		CBC Central Florida FY 2016-2017 July 1, 2016-June 30, 2017	
1	Rate of abuse or neglect per day while in foster care *(Source: CBC Scorecard)*	<8.5	<8.5	10.56	🔴	11.20	🔴	9.70
2	Percent of children who are not neglected or abused during in-home services *(Scorecard)*	>95%		97.20%	🟢	97.08%	🟢	96.96%
3	Percent of children who are not neglected or abused after receiving services *(Scorecard)*	>95%		95.60%	🟢	95.52%	🟢	95.91%
4	Percentage of children under supervision who are seen every thirty (30) days *(CBC Scorecard)*	>99.5%		99.80%	🟢	99.68%	🟢	99.84%
5	Percent of children exiting foster care to a permanent home within twelve (12) months of entering care *(Scorecard)*	>40.5%	>40.5% (16%-61%)	41.60%	🔴	30.08%	🔴	36.94%
6	Percent of children exiting to a permanent home within 12 months for those in care 12 to 23 months *(Scorecard)*	>44%	>43.6% (21%-50%)	53.70%	🟢	57.74%	🟢	57.76%
7	Percent of children who do not re-enter foster care within twelve (12) months of moving to a permanent home *(Scorecard)*	>91.7%	>91.7% (83%-98%)	89%	🔴	86.10%	🔴	90.30%
8	Children's placement moves per 1,000 days in foster care *(Scorecard)*	<4.12	<4.12 (2.6%-8.7%)	4.33	🟢	3.76	🟢	3.93
9	Percentage of children in out-of-home care who received medical service in the last twelve (12) months. *(Scorecard)*	>95%		97.14%	🟢	96.85%	🟢	96.58%
10	Percentage of children in out-of-home care who received dental services within the last seven (7) months. *(Scorecard)*	>95%		92.70%	🟢	96.31%	🔴	94.38%
11	Percentage of young adults in foster care at age 18 that have completed or are enrolled in secondary education *(Scorecard)*	>80%		87.60%	🔴	77.67%	🟢	81.27%
12	Percent of sibling groups where all siblings are placed together *(Scorecard)*	>65%		63.90%	🟢	65.31%	🔴	63.02%
	Number of children with finalized adoptions *(DCF Dashboard run date 10/17/18)*	185/203			🟢	192	🟢	219

Source: CBC Scorecard-All Measures-Run 8/4/2017   Table 6

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CHILD SAFETY

Ensuring children are not exposed to maltreatment is of utmost importance. CBCCF is performing above target or trending positively in most child safety measures. The graphs and tables on the following pages depict CBCCF's performance related to child safety in the following areas:
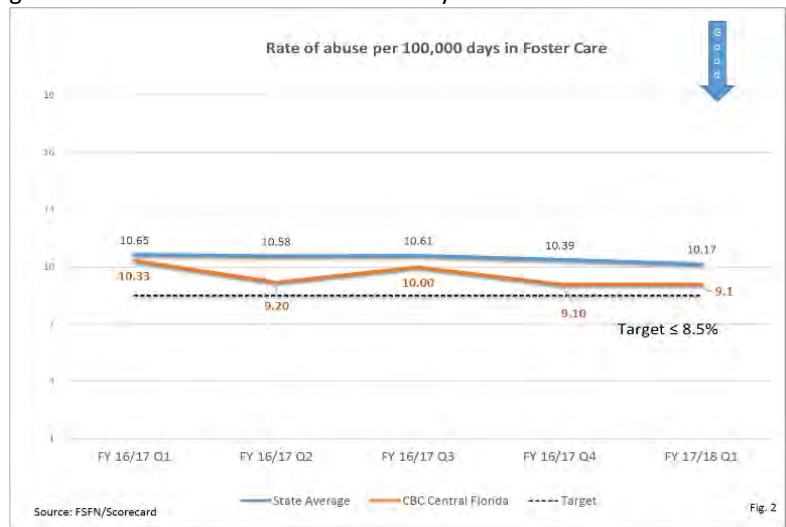
1. Rate of Abuse in Foster Care
2. No maltreatment after Family Support Services
3. No maltreatment during in-home services
4. No maltreatment after receiving services
5. Children seen every 30 days
6. CQI qualitative case review results

RATE OF ABUSE IN FOSTER CARE

Rate of abuse or neglect per day while in foster care (Scorecard Measure M01): The graph below depicts the rate at which children are the victims of abuse or neglect while in foster care (per 100,000 bed days) during the report period. This is a national data indicator that measures whether the state child welfare agency ensures that children do not experience abuse or neglect while in the states foster care system.

The rate of abuse per 100,000 days in foster care has fluctuated slightly over the last five quarters from a high of 10.33 (FY16/17, Q1) to a low of 9.1 (FY 17/185, Q1) but has decreased overall. These rates are slightly above the national target (8.5) and below the statewide average (10.17).

The CQI case review indicators linked to child safety (making concerted efforts to address risk and safety) are above statewide performance. Additionally, CBCCF showed improvement (12%) in CQI Item 3 scoring above the statewide performance and the PIP goal for FY 16/17.

Fig. 2

NO MALTREATMENT AFTER FAMILY SUPPORT SERVICES

Percent of children not abused or neglected within six months of termination of family support services.

The graph depicts the percentage of children who did not have a verified maltreatment during the report period. This is a Florida indicator that measures the CBC's success in keeping children safe after family support services have ended. CBCCF is performing above the statewide average performance of children re-maltreated following the provision of family support services.
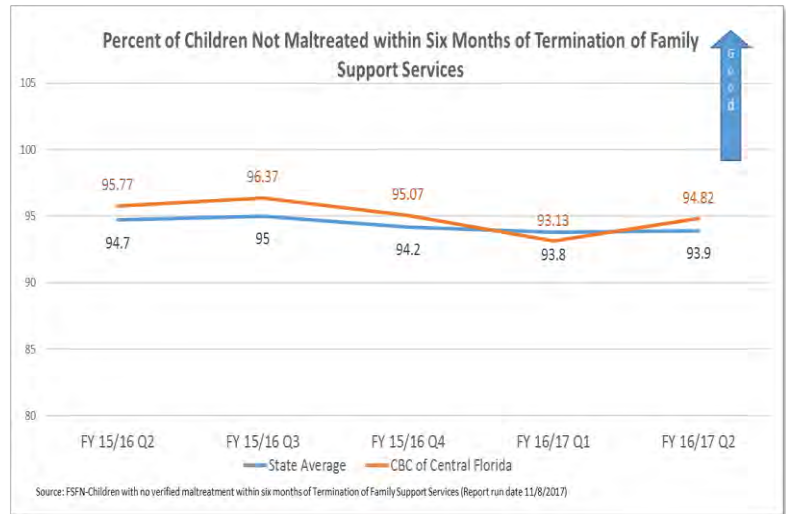
NO MALTREATMENT DURING IN-HOME SERVICES

Percent of children not abused or neglected while receiving in-home services (Scorecard Measure M02):
The graph depicts the percentage of in-home service episodes during the report period where the child did not have a verified maltreatment while receiving services. This indicator measures whether the CBC was successful in preventing subsequent maltreatment of a child while the case is open and the CBC is providing in-home services to the family.

CBCCF's performance in this measure has fluctuated slightly, staying below the statewide average in four of the previous five quarters however was consistently above the target.

Rapid Safety Feedback (RSF) data revealed that CBCCF performed significantly below the statewide average performance in:
- RSF 1.1 ensuring the family assessments are sufficient
- RSF 2.1 ensuring the quality of visits between the case manager and the child(ren) are sufficient to address issues pertaining to safety and evaluate progress towards case plan outcomes
- RSF 4.1 ensuring the safety plan in place was sufficient to control danger threats and protect the child.

CBCCF has shown a positive uptick in performance on CQI Item 3, ensuring concerted efforts are in place to assess and address the risk and safety concerns of children while in their own home or while in foster care, in the past year, surpassing the statewide average.
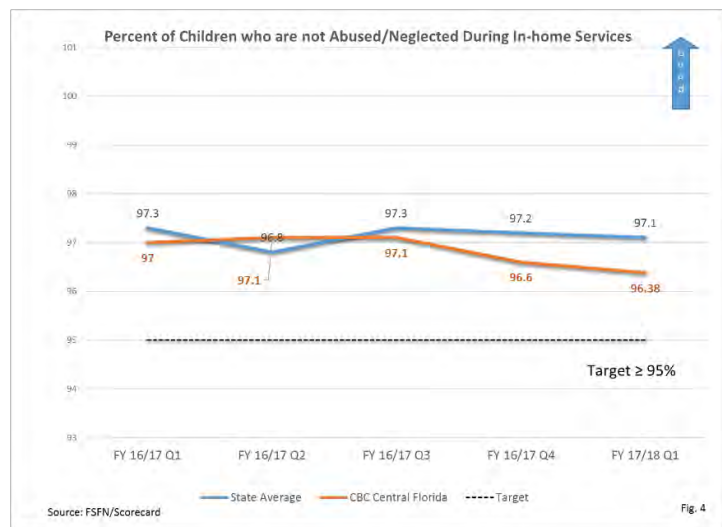
NO MALTREATMENT AFTER RECEIVING SERVICES

Percent of children with no verified maltreatment within six (6) months of termination of supervision (Scorecard Measure M03): The graph depicts the percent of children who were not the victims of abuse or neglect in the six months immediately following termination of supervision.

CBCCF's performance has met or exceeded the target performance in four of the last six quarters, and has exceeded the statewide performance in two of the last six quarters but experienced a slight dip in performance in FY17/18 Q1, falling below the target. Additionally, CBCCF exceeded the target in FY 15/16 and FY 16/17.

Data states that CBCCF scored below the statewide average in RSF items 2.1,2.3 and 2.5 indicating a need for improved quality of visits between the case manager and child and between the case manager and parents to address issues pertaining to safety.

Fig. 5 — Percent of Children who are not Neglected or Abused after Receiving Services. Source: FSFN/Scorecard. Target ≥ 95%.
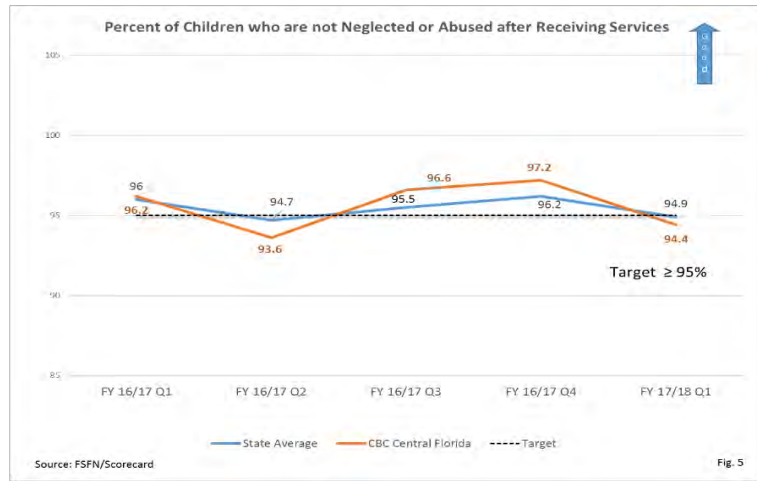
CHILDREN SEEN EVERY 30 DAYS

Children under supervision who are seen every thirty (30) days (Scorecard Measure M04): The graph depicts the rate at which children are seen every thirty (30) days while in foster care or receiving in-home services during the report period.

CBCCF's performance has consistently met or exceeded the statewide performance for the past five quarters and has exceeded the target for the same period.

While CBCCF is completing visits timely, data from RSF 2.1 indicate that the quality of visits between the case manager and child are insufficient to address issues pertaining to safety, permanency and well-being and evaluate/promote progress toward case plan outcomes. Additionally, CBCCF showed improvement (12%) in CQI Item 3 scoring above the statewide performance and the PIP goal for FY 16/17.

Fig. 6 — Percent of Children Under Supervision who are Seen Every 30 Days. Source: FSFN/Scorecard. Target ≥ 95.5%.
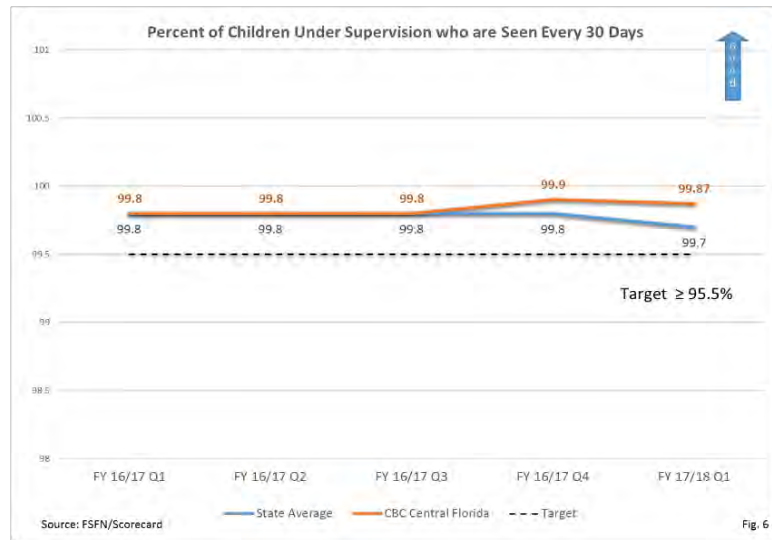
The table below provides CBCCF's performance based on case reviews performed by child welfare professionals. Rapid Safety Feedback (RSF) reviews show that from the period of July 1, 2016 through June 20, 2017, CBCCF case managers were not completing sufficient assessments, not completing quality visits to address issues pertaining to safety and evaluate progress towards case plan outcomes, and not ensuring a sufficient safety plan is in place to control danger threats. However, Florida CQI reviews indicate that CBCCF was making concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after reunification and were making concerted efforts assess and address the risk and safety concerns related to the children in their own homes or while in foster care. Also of note, in both CQI items shown below, an improvement in performance occurred between FY15/16 and FY16/17.

Quality Assurance - Rapid Safety Feedback Item	CBC Central Florida n=130		Statewide RSF Performance [1] n=851
Assessement Based on Case Reviews by Child Welfare Professionals	July 1, 2016-June 30, 2017		
RSF 1.1: Is the most recent family assessment sufficient?	●	15.4%	50.6%
RSF 2.1: Is the quality of visits between the case manager and the child (ren) sufficient to address issues pertaining to safety and evaluate progress towards case plan outcomes?	●	56.9%	62.7%
RSF 4.1: Is a sufficient Safety Plan in place to control danger threats to protect the child?	●	48.5%	60.7%

Green dot denotes performance is above statewide RSF average; red dot denotes performance is below statewide RSF average

Quality Assurance - Florida CQI Item *Assessement Based on Case Reviews by Child Welfare Professionals*	CBC Central Florida FY 2015/2016 n=106	CBC Central Florida FY 2016/2017 n=104		Percent Improvement	Statewide CQI/QA Performance [1] n=1,290	2016 Statewide Federal Child & Family Service Review [2] 4/1/16-9/30/16 n=80	Federal Program Improvement Plan (PIP) Goal [3]	Federal and State Expectation [4]
CQI Item 2: Did the agency make concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after reunification?	94.0%	● 95.0%	⬆	1.0%	93.0%	76.5%	85.2%	95.0%
CQI Item 3: Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child (ren) in their own homes or while in foster care?	74%	● 86%	⬆	12.0%	77%	71.3%	77.7%	95.0%

Source: QA Rapid Safety Feedback; Federal Online Monitoring System   Table 7

[1] This date provides the statewide rating in each case review item for all CBCs

[2] This provides the performance rating for the state in each of the items as approved by the Administration for Children and Families.

[3] The PIP Goal is set by the Children's Bureau and is the expected level of improvement needed to avoid financial penalties.

[4] This is the overall federal and state expectation for performance.

Green dot denotes performance is above the federal PIP Goal; red dot denotes performance is below the federal PIP Goal.

PERMANENCY

When children are placed in out-of-home care it is imperative that child welfare agencies find safe, permanent homes for them as quickly as possible. Helping children achieve permanency in a timely manner is extremely important to children as a year in a child's life is a significant amount of time. CBCCF is performing below target or trending negatively in 3 permanency measures and trending above target or trending positively in 3 permanency measures. Additionally, RSF (Rapid Safety Feedback) and CQI (Continuous Quality Improvement) reviews highlight areas were continued efforts to improve performance are warranted.

The graphs and tables on the follow pages depict CBCCF's performance related to permanency in the following areas:
1. Permanency in 12 months
2. Permanency in 12-23 months
3. Permanency after 24 months
4. Placement stability
5. Percent not re-entering care
6. Siblings placed together
7. QA case practice assessment

PERMANENCY IN 12 MONTHS

Percent of children exiting foster care to a permanent home within twelve (12) months of entering care (Scorecard Measure M05): The graph depicts the percentage of children who entered foster care during the report period where the child achieved permanency within twelve (12) months of entering foster care.

CBCCF has performed below target in four of the five most recent quarters.
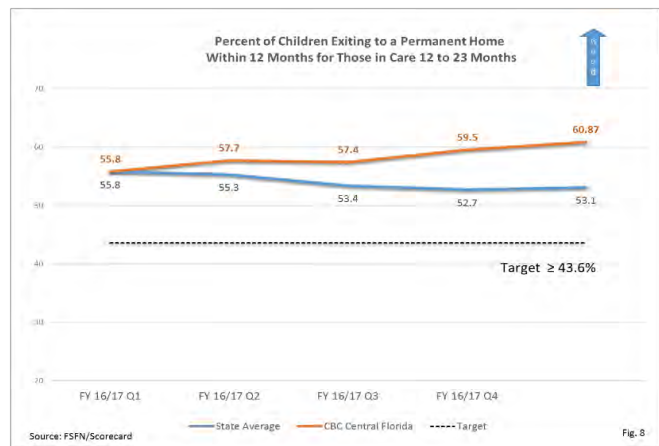
CBCCF has not met this measure for the past two fiscal years, however improvement (7%) was made in FY 16/17 from FY 15/16.

Fig. 7

PERMANENCY IN 12 – 23 MONTHS

Percent of children exiting foster care to a permanent home in twelve (12) months for children in foster care twelve (12) to twenty-three (23) months (Scorecard Measure M06): The graph provides the percentage of children in foster care as of the beginning of the reporting period whose length of stay is between twelve (12) and twenty-three (23) months as of the beginning of the report period who achieved permanency within twelve (12) months of the beginning of the report period.

CBCCF consistently performed above the target and above the statewide performance for the past five quarters, in this measure.

Fig. 8

Percent of children in care 24+ months who achieved permanency within an additional 12 months: The graph provides the percentage of children in foster care whose length of stay is twenty-four (24) months or more as of the report period begin date and those who achieved permanency within twelve (12) months of the beginning of the report period.

CBCCF has consistently performed below the statewide performance in the past five quarters in this measure.
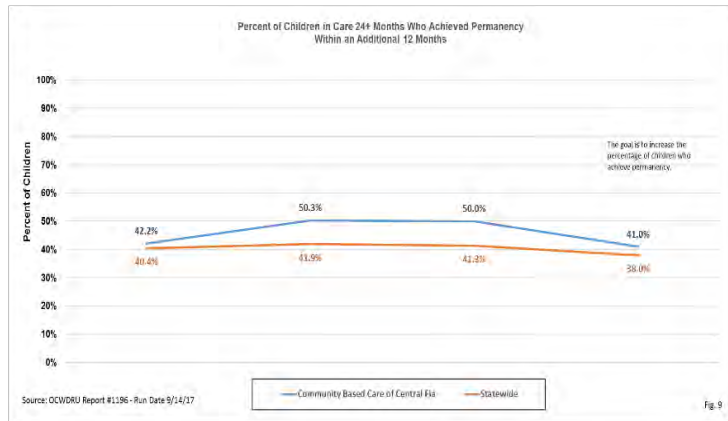
PLACEMENT STABILITY

Placement moves per one-thousand (1,000) days in foster care (Scorecard Measure M08): The graph depicts the rate at which children change placements while in foster care during the report period.

This measure has increased steadily over the past five quarters, surpassing the target rate and the statewide average. Additionally, CQI Item 4 has decreased in quality related to placement stability.
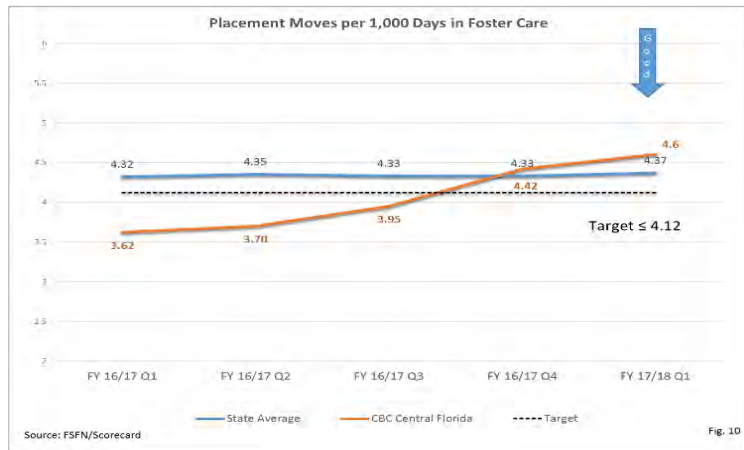
PERCENT NOT RE-ENTERING INTO OUT-OF-HOME CARE

Percent of children who do not re-enter foster care within twelve (12) months of moving to a permanent home Scorecard Measure (Scorecard Measure M07): The graph depicts the percentage of exits from foster care to permanency for a cohort of children who entered foster care during the report period and subsequently did not re-enter foster care within twelve (12) months of their permanency date.

CBCCF has improved their performance and exceeded the target on this measure over the previous three quarters. Improvement was made in FY 16/17 from FY 15/16 and, although the target is still not met, CBCCF scored higher than the statewide performance.
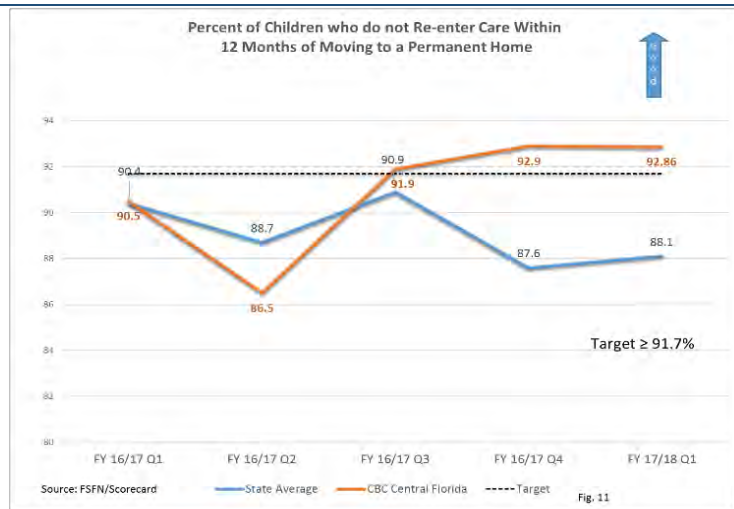
SIBLINGS PLACED TOGETHER

Percent of sibling groups where all siblings are placed together (Scorecard Measure M12): The graph depicts the percentage of sibling groups with two or more children in foster care as of the end of the report period where all siblings are placed together.

CBCCF has consistently been within 1% of the statewide average and within 2%-3%of the target over the previous five quarters. While this measure was met in FY15/16, it was not met in FY16/17. Additionally, CBCCF showed a decline (14%) in CQI Item 7 scoring below the federal and state expectation and slightly above the statewide performance.

Fig. 12
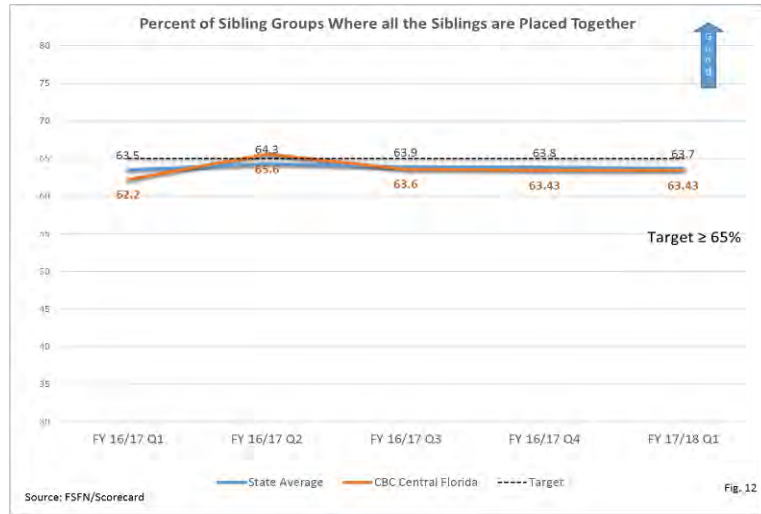
QA CASE REVIEW DATA

The table below provides CBCCF's performance based on case reviews completed by child welfare professionals. Rapid Safety Feedback (RSF) reviews show that from the period of July 1, 2016 through June 20, 2017, CBCCF case managers were completing visits of insufficient quality to address issues pertaining to safety and evaluate progress towards case plan outcomes (see Table 8, RSF 2.1, 2.3 and 2.5). Florida CQI reviews further support that CBCCF's performance in most measures are currently below the Federal PIP goal, statewide average performance and federal and State expectation (see Table 8, CQI Item 4. 5, 6, 8, 9, and 11).

Quality Assurance Item	CBC Central Florida n=130	Statewide RSF Performance n=851
Assessement Based on Case Reviews by Child Welfare Professionals	**Performance for FY 2016/2017**	
RSF 2.1 Is the quality of visits between the case manager and the child(ren) sufficient to address issues pertaining to safety and evaluate progress towards case plan outcomes?	🔴 56.9%	62.7%
RSF 2.3 Is the quality of visits between the case manager and the child's mother sufficient to address issues pertaining to safety and evaluate progress towards case plan outcomes?	🔴 47.7%	67.7%
RSF 2.5 Is the quality of visits between the case manager and the child's father sufficient to address issues pertaining to safety and evaluate progress towards case plan outcomes?	🔴 27.7%	55.1%

Green dot denotes performance is above statewide RSF average; red dot denotes performance is below statewide RSF average

Quality Assurance - Florida CQI Item *Assessement Based on Case Reviews by Child Welfare Professionals*	CBC Central Florida FY 2015/2016 n=106		CBC Central Florida FY 2016/2017 n=104	Percent Improvement	Statewide CQI/QA Performance FY 2016/2017 n=1,290	2016 Statewide Federal Child & Family Service Review[2] 4/1/16-9/30/16 n=80	Federal Program Improvement Plan (PIP) Goal[3]	Federal and State Expectation[4]
CQI Item 4: Is the child in foster care in a stable placement and were any changes in the child's placement in the best interest of the child and consistent with achieving the child's permanency goal(s)?	90.0%	●	77.0%	↓ -13.0%	83.0%	82.0%	88.5%	95.0%
CQI Item 5: Did the agency establish appropriate permanency goals for the child in a timely manner?	59.0%	●	62.0%	⬆ 3.0%	84.0%	81.8%	82.1%	95.0%
CQI Item 6: Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangements for the child?	43.0%	●	55.0%	⬆ 12.0%	81.0%	74.5%	75.4%	95.0%
CQI Item 7: Did the agency make concerted efforts to ensure that siblings in foster care are placed together unless separation was necessary to meet the needs of one of the siblings?	80.0%		66.0%	↓ -14.0%	64.0%	67.3%	None	95.0%
CQI Item 8: Did the agency make concerted efforts to ensure that visitation between a child in foster care and his or her mother, father and siblings was of sufficient frequency and quality to promote continuity in the child's relationships and with these close family members?	50.0%		58.0%	⬆ 8.0%	69.0%	69.0%	None	95.0%
CQI Item 9: Did the agency make concerted efforts to preserve the child's connections to his or her neighborhood, community faith, extended family, Tribe, school and	81.0%		74.0%	↓ -7.0%	79.0%	82.0%	None	95.0%
CQI Item 10: Did the agency make concerted efforts to place the child with relative when appropriate?	76.0%		77.0%	⬆ 1.0%	83.0%	72.0%	None	95.0%
CQI Item 11: Did the agency make concerted efforts to promote, support and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregivers from whom the child had been removed through activities other than just arranging visitation?	37.0%		46.0%	⬆ 9.0%	61.0%	60.0%	None	95.0%

Source: QA Rapid Safety Feedback; Federal Online Monitoring System   Table 8

[1]This date provides the statewide rating in each case review item for all CBCs

[2]This provides the performance rating for the state in each of the items as approved by the Administration for Children and Families.

[3]The PIP Goal is set by the Children's Bureau and is the expected level of improvement needed to avoid financial penalities.

[4]This is the overall federal and state expectation for performance.

Green dot denotes performance is above the federal PIP Goal; red dot denotes performance is below the federal PIP Goal.

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Ensuring that children's physical, development and emotional/behavioral needs are met has a significant lifelong impact on a child's future and is one of the system of care's most important responsibilities.

In the past five quarters, CBCCF consistently met the target for children receiving medical care. They meet the target for children receiving dental care in three out of the past five quarters; they met the target for children enrolled in secondary education in four out of the past five quarters. As of September 30, 2017, 1.7% of children ages 0-5 were placed in group care. Florida CQI reviews further support that CBCCF's performance in most measures are currently meeting or exceeding the Federal PIP goal, statewide average performance and federal and State expectation (see Table 8, CQI Item 4. 5, 6, 8, 9, and 11). The graphs and tables on the follow pages depict CBCCF's performance related to well-being in the following areas:

1. Children receiving dental care
2. Children receiving medical care
3. Young adults enrolled in secondary education
4. Children in ages 0-5 in group care
5. CQI case practice assessment

CHILDREN RECEIVING MEDICAL CARE

Percent of children in foster care who received medical care in the previous 12 months (Scorecard Measure M9): This measure is the percentage of children in foster care as of the end of the report period who have received a medical service in the last twelve (12) months.
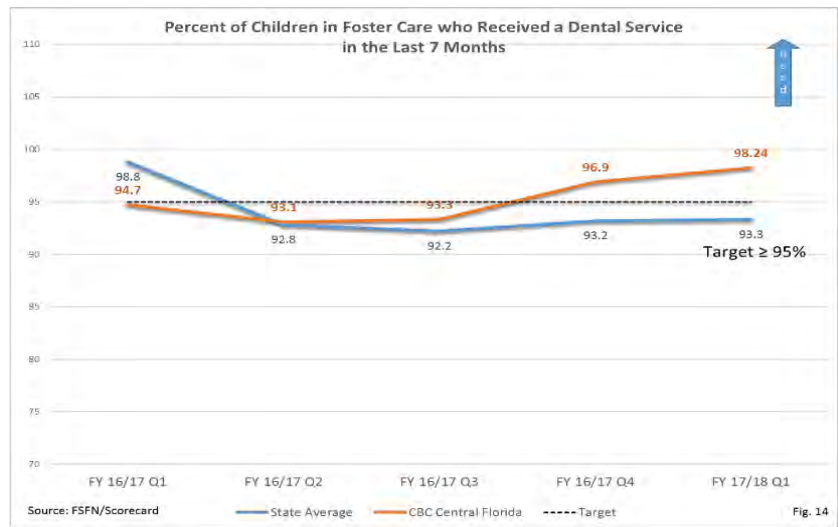
CBCCF has consistently performed above the statewide target in this area over the previous five quarters; however, CQI Item 17 which measures children receiving medical and dental services, shows a 10% decrease from FY 15/16 and is scoring below the statewide performance and federal and state expectations.

Percent of Children in Foster Care who Received a Medical Service in the Last 12 Months

	FY 16/17 Q1	FY 16/17 Q2	FY 16/17 Q3	FY 16/17 Q4	FY 17/18 Q1
State Average	96.6	97	97.2	97.6	97.4
CBC Central Florida	96.2	96.2	96.2	97.7	96.77

Target ≥ 95%

Source: FSFN/Scorecard

Fig. 13
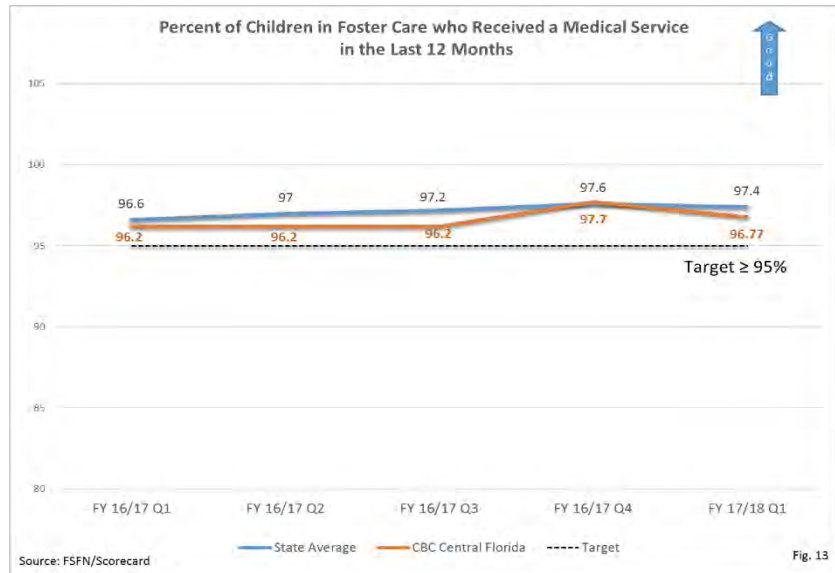
CHILDREN RECEIVING DENTAL CARE

Percent of children in foster care who received a dental service in the last seven months (Scorecard Measure M10): This measure is the percentage of children in foster care as of the end of the report period who have received a dental service in the last seven (7) months.
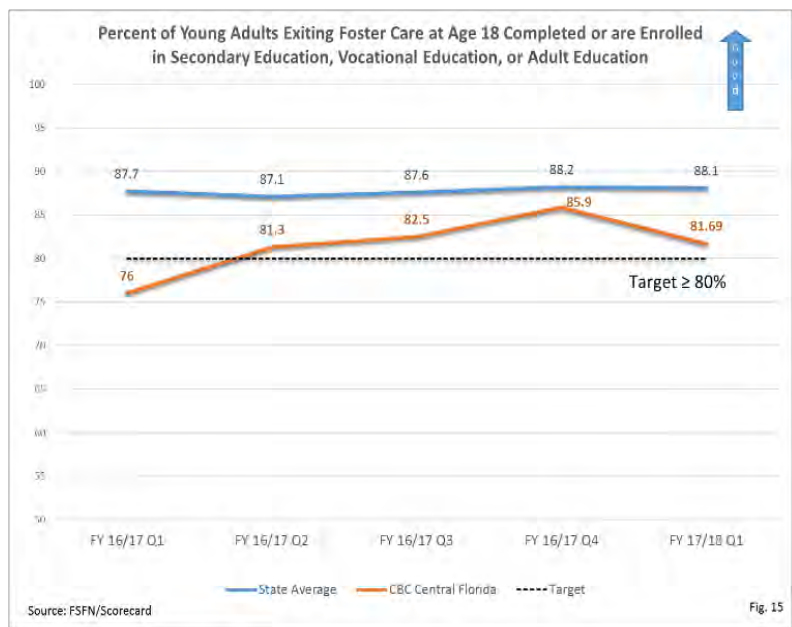
CBCCF's performance has been above the statewide performance for the previous four of five quarters and has been trending positively since FY 16/17 Q2. CBCCF has performed above the target for the most recent two quarters. Although CBCCF has been meeting this target for the most recent two quarters, CQI Item 17 shows a 10% decrease from FY 15/16 and is scoring below the statewide performance and federal and state expectations.

Percent of Children in Foster Care who Received a Dental Service in the Last 7 Months

Source: FSFN/Scorecard — State Average — CBC Central Florida ----- Target — Fig. 14

YOUNG ADULTS ENROLLED IN SECONDARY EDUCATION

Percentage of young adults who have aged out of foster care at age 18 and completed or are enrolled in secondary education, vocational training, or adult education (Scorecard Measure M11): This measure is the percentage of young adults who aged out of foster care who had either completed or were enrolled in secondary education, vocational training, or adult education as of their eighteenth (18) birthday.

CBCCF has performed above the target in the last four of five quarters, however in the last quarter, performance was trending downward. CQI case reviews indicates that CBCCF performance in this area decreased by 5% since FY 15/16 which is currently below the federal and state expectations but slightly above the statewide performance.

Percent of Young Adults Exiting Foster Care at Age 18 Completed or are Enrolled in Secondary Education, Vocational Education, or Adult Education

Source: FSFN/Scorecard — State Average — CBC Central Florida ----- Target — Fig. 15

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The table on the following page provides the current performance in items related to child well-being that are based on qualitative case reviews. Qualitative case reviews provide an opportunity to assess performance based on practice versus quantitative data that is derived from the Florida Safe Families Network (FSFN) The Florida CQI and Florida CFSR assesses in-home and out-of-home cases.

Community Based Care of Central Florida has performed above the statewide average in seven (7) of nine (9) CQI Measures. CBCCF showed improvement in seven (7) of nine (9) measures between FY 15/16 and FY 16/17:

Quality Assurance - Florida CQI Item *Assessement Based on Case Reviews by Child Welfare Professionals*	CBC Central Florida FY 2015/2016 n=106	CBC Central Florida FY 2016/2017 n=104	Percent Improvement	Statewide CQI/QA Performance FY 2016/2017 n=1,290	2016 Statewide Federal Child & Family Service Review[2] 4/1/16-9/30/16 n=80	Federal Program Improvement Plan (PIP) Goal[3]	Federal and State Expectation[4]
CQI Item 12A: Did the agency make concerted efforts to assess the needs of and provide services to <u>children</u> to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?	91.0%	93.0%	2.0%	89%	51.3%	58.4%	95.0%
CQI Item 12B Did the agency make concerted efforts to assess the needs of and provide services to <u>parents</u> to identify the services necessary to achiever case goals and adequately address the issues relevant to the agency's involvement with the family?	70.0%	75.0%	5.0%	73.0%	51.3%	58.4%	95.0%
CQI Item 12C Did the agency make concerted efforts to assess the needs of and provide services to <u>foster parents</u> to identify the services necessary to achiever case goals and adequately address the issues relevant to the agency's involvement with the family?	87.0%	94.0%	7.0%	88.0%	51.3%	58.4%	95.0%

Quality Assurance - Florida CQI Item	CBC Central Florida	CBC Central Florida	Percent Improvement	Statewide CQI/QA Performance FY 2016/2017	2016 Statewide Federal Child & Family Service Review[2] 4/1/16-9/30/16	Federal Program Improvement Plan (PIP) Goal[3]	Federal and State Expectation[4]
Assessement Based on Case Reviews by Child Welfare Professionals	FY 2015/2016 n=106	FY 2016/2017 n=104			n=80		
CQI Item 13 Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?	51.0%	● 71.0%	⬆ 20.0%	66.0%	63.6%	70.7%	95.0%
CQI Item 14: Were the frequency and quality of visits between caseworkers and the child(ren) sufficient to ensure the safety, permanency and well-being of the child(ren) and promote achievement of case goals?	52.0%	● 70.0%	⬆ 18.0%	67%	72.5%	78.9%	95.0%
CQI Item 15 Were the frequency and quality of the visits between the case workers and mothers and fathers sufficient to ensure the safety, permanency and well-being of the children and promote achievement of the case goals?	34.0%	● 45.0%	⬆ 11.0%	48.0%	43.5%	51.1%	95.0%
CQI Item 16: Did the agency make concerted efforts to assess children's educational needs and appropriately address identified needs in case planning and case management activities?	91.0%	86.0%	⬇ -5.0%	84%	92.0%	None	95.0%
CQI Item 17: Did the agency address the physical health needs of children, including dental needs?	82.0%	72.0%	⬇ -10.0%	77%	85%	None	95.0%
CQI Item 18: Did the agency address the mental/behavioral health needs of children?	77.0%	94.0%	⬆ 17.0%	75%	72%	None	95.0%

Source: Federal Online Monitoring System   Table 9

[1]This date provides the statewide rating in each case review item for all CBCs

[2]This provides the performance rating for the state in each of the items as approved by the Administration for Children and Families.

[3]The PIP Goal is set by the Children's Bureau and is the expected level of improvement needed to avoid financial penalities.
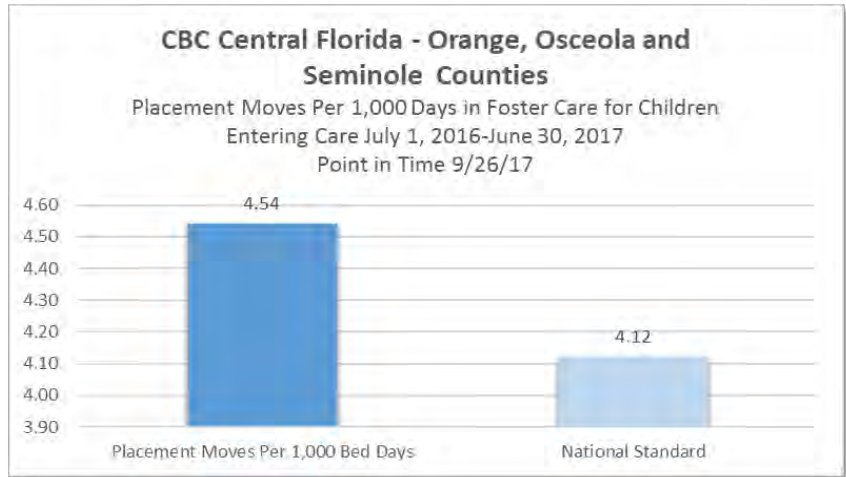
[4]This is the overall federal and state expectation for performance.

Green dot denotes performance is above the federal PIP Goal; red dot denotes performance is below the federal PIP Goal.
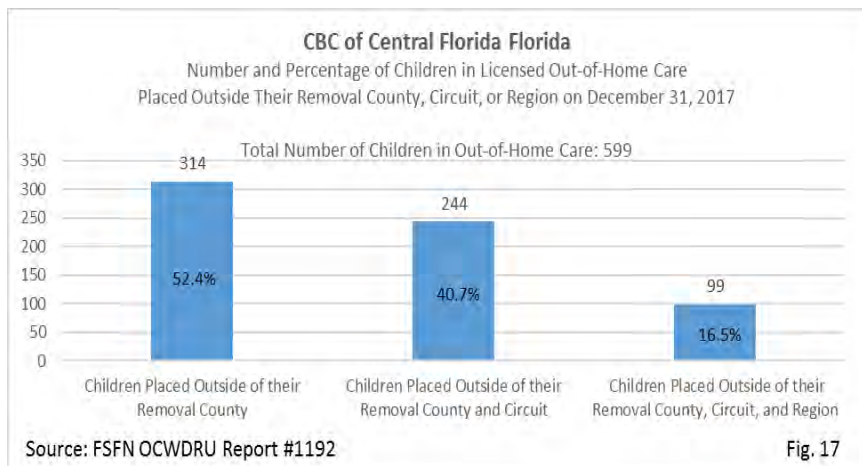
PLACEMENT MOVES

From July 1, 2016 through June 30, 2017, CBCCF moved children at a rate higher than the national average. See Fig.18. As mentioned above, this measure has increased steadily over the past five quarters, surpassing the target rate and the statewide average. Additionally, CBCCF showed a decline (13%) for FY16/17 in CQI Item 4 scoring below the statewide performance, the PIP goal, and the federal and state expectation.

CBC Central Florida - Orange, Osceola and Seminole Counties
Placement Moves Per 1,000 Days in Foster Care for Children Entering Care July 1, 2016-June 30, 2017
Point in Time 9/26/17

Source: FSFN OCWDRU Report #1002   Fig.18

CHILDREN PLACED OUTSIDE THEIR REMOVAL CIRCUIT

As of December 31, 2017, 52.4% of Community Based Care of Central Florida's children were placed outside of their removal county and circuit. This is more than double the statewide average of 19.25% and shows that there is a need to keep kids closer to home.

CBC of Central Florida Florida
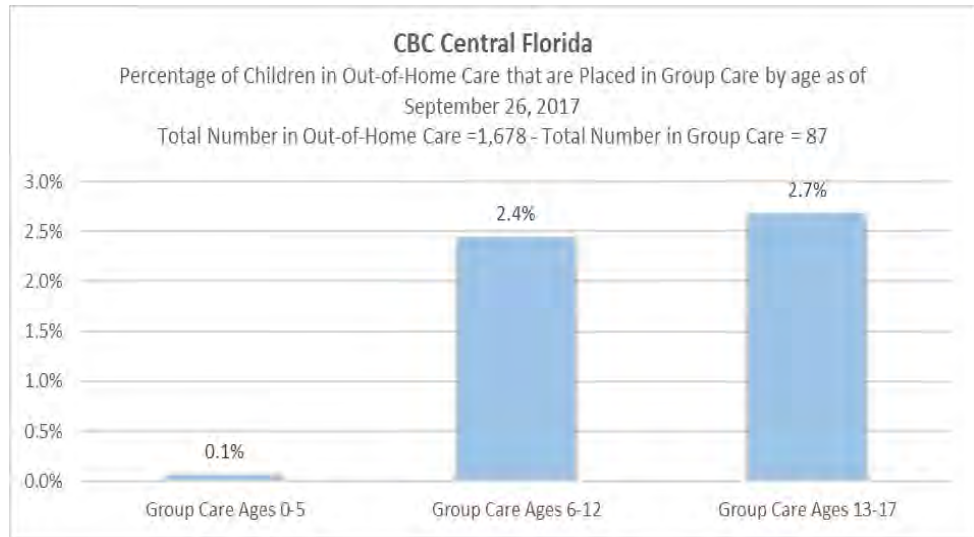Number and Percentage of Children in Licensed Out-of-Home Care
Placed Outside Their Removal County, Circuit, or Region on December 31, 2017

Total Number of Children in Out-of-Home Care: 599

Source: FSFN OCWDRU Report #1192   Fig. 17

Percentage of Children in Out-of-Home Care that are Placed in Group Care by Age: This information reflects the number of children placed in group care by age groups and reflects data as current as September 26, 2017. Currently, there is 0.1% children under the age of five in group care and the total number of children in group care total a little over 5%. CBCCF has focused efforts to ensure there are no children aged 0-5 in group care and data as recent as February 2018 indicates that they have been successful and currently have no children 0-5 in group care.

CBC Central Florida
Percentage of Children in Out-of-Home Care that are Placed in Group Care by age as of September 26, 2017
Total Number in Out-of-Home Care =1,678 - Total Number in Group Care = 87

- Group Care Ages 0-5: 0.1%
- Group Care Ages 6-12: 2.4%
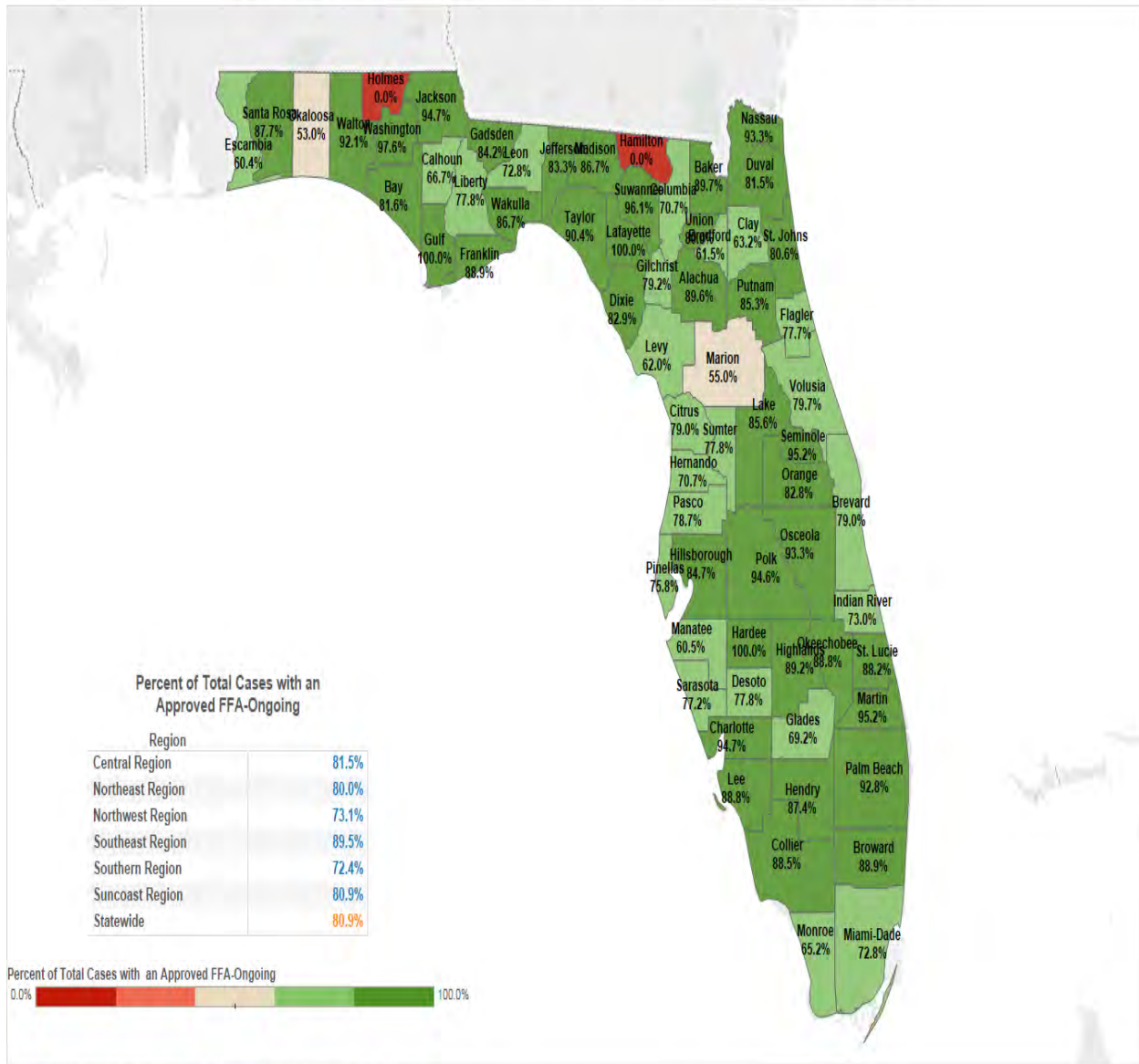- Group Care Ages 13-17: 2.7%

As of August 31, 2017, CBCCF's rate of placement in group care at 12.31% which is above the statewide average of 9.15%. Children under the age of five represent 1.7% of the group care population in CBCCF's service area, well below the statewide average of 3.4%.

SECTION 5: PRACTICE MODEL IMPLEMENTATION

IMPLEMENTATION STATUS

Community Based Care of Central Florida has made progress toward implementation of the practice model, as shown in the chart below. As of 02/15/18, CBCCF implementation status was 82.8% (Orange), 93.3% (Osceola), and 95.2% (Seminole). All three counties are exceeding the statewide level of 80.9%.

Ongoing Services Safety Methodology Implementation Status as of 02/15/2018

Percent of Total Cases with an Approved FFA-Ongoing

Region	
Central Region	81.5%
Northeast Region	80.0%
Northwest Region	73.1%
Southeast Region	89.5%
Southern Region	72.4%
Suncoast Region	80.9%
Statewide	80.9%

Percent of Total Cases with an Approved FFA-Ongoing
0.0% ▬▬▬▬▬▬▬ 100.0%

Source: FSFN report Active Cases with an Approved FFA-Ongoing – OCWRU #1084
Notes: Small number of cases assigned to the county will affect percentages. Based on location of primary worker. Counties with no cases assigned to them will not appear in the map.

CBCCF Orange and Osceola fully implemented the practice model in late 2014 and Seminole was fully operationalized by April 2015. Concerted efforts have continued over the past two years to provide the training support to staff and partners throughout the system of care at all levels that promote fidelity to the practice model; as well as to adjusting staffing patterns and service gaps.

CBCCF participated in the Central Region proficiency pilot in the fall of 2015. Shortly thereafter, CBCCF employed a former DCF Operations Management Consultant who helped develop and implement the pilot and serve as the CBCCF project manager. Training, coaching and skill practice around the practice model continued throughout 2016 and ongoing with CBCCF requiring that all operations staff and case management agency leadership participate in and successfully completed the proficiency process. The proficiency process included the staff being matched with

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a mentor, observations of the candidate conducting three case consultations, a written exam where the concepts are tested; followed by presenting to a panel the feedback that would be provided to a case manager and a final role play where any areas of practice could be further examined by questioning/challenging feedback being provided. The last part of the proficiency requires that the candidate successfully complete mentoring a subsequent candidate. The current proficiency status is 80%. Planning for Proficiency 2 - Demonstration occurred at the end of FY 16/17, with scaled measurement tools in progress. There are 4 elements to a quarterly progress rating which is measured across units, agency, county, and CBCCF.

In October 2017, recognizing that CBC Lead Agency staff required additional support to understand the practice model, the Training Manager developed a 4-part in-service training geared toward a target audience consisting of CEO, COO, CLO, Clinical, Licensing and Network Support staff. The training is an intensive overview of the main concepts of the practice model with sessions addressing:
1. Identifying danger and safety planning,
2. Assessment and case planning,
3. Assessing progress and identifying stage of change and
4. FSFN document review.

CBCCF reinforced the role of the case manager supervisor by providing additional guidance tools and supports during delivery of the Supervisor Model Training 1 and reinforced the practice model during all staff training and creating a "Connecting the Dots Training Series" and through practice support in unit level learning circles facilitated by CBCCF trainers. A second series of the supervisor trainings centered primarily on FSFN and practice model documentation was delivered in late Spring 2017. Consultations were conducted in October-December 2017 with each agency individually, to discuss improvement and support plans, utilizing information from the front-end reviews that CBCCF QA have been completing monthly since February 2017. Front-end reviews focus primarily on the case consultations/supervision that are required in practice for cases received during each month. CBCCF is working to develop more reports to inform practice model fidelity, as well as to automate the frontend QA review.

For newly received cases, the case manager has 30 days from CTS to complete the FFA-O. CBCCF administrations runs the FFA Status Report weekly and distributes it to all five CMA Program Directors, CBCCF Executive Directors, CBCCF Quality Management, and Information and Eligibility staff. CBCCF's weekly target completion goal is 95% or above. The current performance and efforts to increase performance are addressed at the "Healthy Systems" meeting which is held weekly with CBCCF leadership and the CMAs.

SERVICE ARRAY

In July of 2016, the Office of Child Welfare initiated a service array assessment with each CBC across the state. The assessment focuses on evaluating the availability, access and application of services for child welfare involved families. At the time of the on-site review, CBCCFL had submitted information to the Office of Child Welfare about their safety management and family support programs. This information was evaluated as a part of the service array assessment. Based on the information, CBCCFL received a rating of "4", for their family support services programs and a rating of "3" for the safety management services program. The rating system is as follows:

- 0 - CBC has no defined service in this service domain.

- 1 - CBC has defined services in this domain, however they are not fully aligned with service array framework definitions.

- 2 - CBC has services in this domain in accordance with the service array framework definitions.

- 3 - CBC is providing the services consistently as defined, with no capacity issues as demonstrated by no waiting lists and access across all service areas.

- 4 - CBC is providing the services consistently as defined, with no capacity issues. CBC has developed methods to assess the quality and the effectiveness of the service and has processes in place to address issues identified from those assessments.

CBCCF followed the Florida Service Array Framework provided by the Office of Child Welfare to modify the previously existing diversion services provided in Circuit 9 and Circuit 18 Seminole County. CBCCF amended the preexisting contracts to include Safety Management and Family Support Services to safe and unsafe children as identified by the practice model. CBCCF used the Family Preservation Services contract as a model to build from. CBCCF, in partnership with case management agencies, child protective investigations, and provider partners, worked closely together on supporting and strengthening safety management and family support services through the provision of enhanced training and coaching; as well as a realignment of client services and resources.

Safety Management Services (SMS)
CBCCF has contracted with four Safety Management Service providers in the tri-county area. The SMS providers are: Osceola County- Safe At Home (SAH); Orange County- Safe At Home (SAH) and Family Preservation; Seminole County- CARE; All Counties-Boys Town. A minimum of two of these providers are available in each county at all times for present and/or impending danger safety plans. CBCCF provides ongoing training and support to these programs to ensure understanding of Safety Methodology, safety planning process, the difference between risk and safety, and what role they play in Safety Management Services. Quarterly quality reviews are conducted to ensure compliance with CBCCF Policy and monitor timeliness, sufficiency of safety plans, and proper use of Safety Management Services.

In addition to contracting with specific Safety Management service providers, CBCCF has provided extensive training to in-home providers on the Preferred Provider Network. There is an expectation that in-home providers in the Preferred Provider Network will be involved in the Safety Management process, as appropriate. In each county, at least one of the safety management providers is contracted with a CMA which has built additional flexibility in moving resources between counties as needed. This has also allowed continuity in service provision when the safety management service will extend past the 14-day initial safety plan, or when an in-home safety plan is determined to be sufficient in managing the danger threats in a case that is staffed over to on-going case management or when needed at Conditions for Return/Reunification.

In June 2017, OCW increased CBCCF's Safety Management Services Assessment score from a 1 to a 3. CBCCF has made additional revisions and intend to re-submit for evaluation for a higher rating.

Family Support Services (FSS)
In June 2017, CBCCF created a "Diversion Program Development Manager" position to provide ongoing training, job coaching and oversight to support the major operational changes to the Diversion program. CBCCF contracts with the CMA provider to provide staff that serve as the Diversion Coordinators (Resource Specialists) and Diversion Specialists (assigned to provide care coordination or oversight of care coordination) to all cases referred by the CPI. The Diversion Program staff work on-site with the CPI and identifying or linking the family to resources, as well as staff/providers of FSS that provide care coordination for families identified as high or very high risk by the CPI. This has allowed flexibility in assisting the CPI as needed (including after hours, or adjusting during higher volume times), as well as the movement of resources from case management to diversion or vice versa when caseloads shift.

In addition to utilizing all evidence-based assessment tools on FSS cases, the diversion staff attempt to respond to needs identified within the Protective Factor framework by using evidence-based programming delivered by a

provider from the CBCCF Preferred Provider Network. CBCCF collects data (through FSFN and ARGOS) on all cases involved with the diversion program for multiple purposes, including but not limited to trend analysis, identification of gaps in services and resource allocation. For the first quarter of FY 17/18, 99% of children being served by FSS avoided deeper involvement into the System of Care. The number of children served in FY 16/17 by Family Support Services decreased by 28% since FY 14/15. This is attributed to aligning their Family Safety Services according to utilization in accord with policy guidance distributed by the Office of Child Welfare which targets prevention efforts to those families deemed at high/very high risk of future maltreatment

In June 2017, the Office of Child Welfare increased CBCCF's Family Support Services Assessment score from a 1 to a 4.

TRAUMA INFORMED CARE

In general, staff understand the principles of trauma informed care, and this is reinforced continually in training. More intensive skill development sessions on Motivational Interviewing ("Change Talk") and assessing the stage of change are planned for delivery to case management and lead agency staff.

FAMILY CENTERED PRACTICE

CBCCF reinforces family centered practice throughout service delivery. CBCCF requires that case management agencies have staff attend shelter hearings and meet with the parents and caregivers. An MOU has been developed with CPI that includes a pre-case transfer assignment process. Both processes allow for case management to begin engagement with families; initially around meeting or arranging for concrete needs, and/or understanding how to meet their child's needs while in foster care. CBCCF reinforces family involvement through continued emphasis on parent, child and caregiver contact standards; review of efforts at quarterly Family Service Team meetings and emphasis of importance of quality visitation. Youth Transition Meetings begin at age 16, and the youth has decision authority in team membership and in making key decisions around their future.

SERVICES MIX

The graph below provides the rate of children receiving services by type. This illustrates the mix of services between Family Support Services, In-Home Services and Out-of-Home Services.
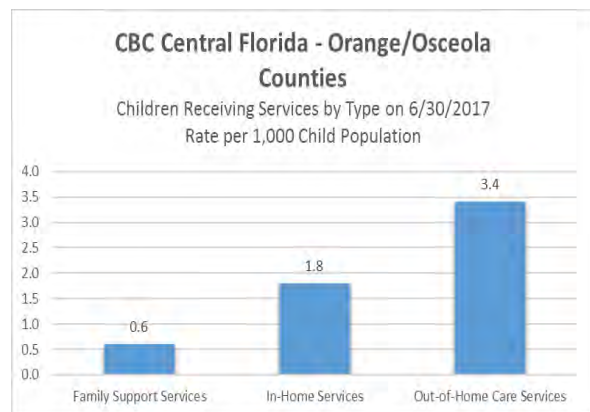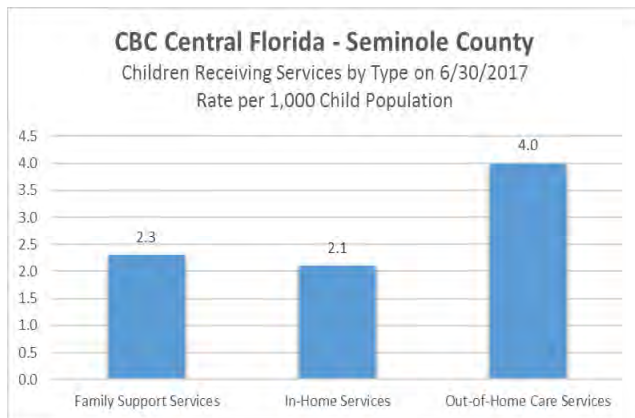
ADOPTIONS

The adoption target for CBCCF in FY 17/18 is 224 adoptions. The adoption target data provided by the Office of Child Welfare (OCW) was sent to CBCCF for review with information providing the formula which derived the group numbers supporting the OCW's proposed target of 226. CBCCF completed their own analysis of the data and submitted the proposed target and methodology supporting 224 finalized adoptions. After review by Contract Management and Regional Leadership, the proposed adoption target of 224 was subsequently approved by the Regional Managing Director and submitted to the OCW for review and final approval.

The Adoption Applicant Review (AARC) is chaired by the CBCCF County Adoption Manager. A DCF regional designee attends and, if applicable, provides information related to national criminal history, or state sealed or expunged criminal history; and a third voting member is selected by the chair. The three voting members of AARC are required to have completed Adoption Competency training. Additional non-voting participants may include: Licensing Manager, Guardian ad Litem/attorney, Foster Parent, child's mentor or therapist. The applicant may invite individuals that they identify as a support.

CBCCF conducts licensed care audits with case management to review factors that will affect well-being and permanency. Discussion includes inquiry regarding any previous TPR/placement of siblings; and siblings separated in out-of-home placement. Continued discussion occurs at the Family Service Team Meeting within 30 days, and then every 90 days thereafter while the child remains in out of home care. The case management agency supervisor ensures visitation is occurring during supervision. Licensing and UM continuously review foster home/group home vacancies/movement for opportunities to move siblings together whenever possible and appropriate, including considering newly licensed homes. For those sibling groups that must be separated, CBCCF has pursued and secured private funding from a corporate partner to create the "Sibling Support Fund." Awarded by cast members through Disney's Wishing Well program, the Fund allows case managers and other operations staff working closely with children to offer fun opportunities for separated siblings to spend time together and reinforce their relationships. The Fund began operating in May 2017 and to date has provided 225 separated siblings with a chance to participate in activities with one another, including birthday celebrations, days at local theme parks, trips to the movies and afternoons at the park. Promotion of the Sibling Support Fund encourages direct service staff to keep the importance of sibling relationships top-of-mind and has also supported activities between sibling groups and prospective adoptive parents. The funder has expressed their intent to continue funding the program in the next year.

In addition, Separated sibling staffings are chaired by the CBCCF Adoptions Manager whenever there is a decision for siblings to remain separated in adoption. The caregivers, licensing staff, guardian ad litem, and children's therapists (where relevant) participate. Attempts are made to reach consensus, however if consensus is not reached the CBCCF County Director will make the final decision. If the decision was affirmed to maintain separation, the prospective adoptive parents are required to be involved in drafting a post finalization visitation plan.

CBCI-Holdings funds a full-time position to ensure that annual outreach to post adoption families occurs and that families have ongoing awareness of the full array of post adoption services available. Services include adoption competent therapists, monthly support groups, insurance navigation and assistance, and nurse care coordinators. Grants are available for braces, durable medical equipment and other non-Medicaid services.

CBCCF subcontracts with Devereux to provide post adoption services. The post adoption support program provides a responsive service delivery system focused on adoptive children and their families' unique and specialized needs. Services include, but are not limited to: short term case management, adoption support groups, training and

educational opportunities, in-home service delivery, facilitation of community referrals, and wrap around services for mental health, behavioral and medical services. The program coordinates 24 hour/7 days a week on-call support and maintain census data on service delivery, customer satisfaction and performance outcomes.

CBCCF's local Preferred Provider Network has 85 approved and active adoption competent therapists to provide services to at-risk diversion, dependent and post adoption children and their families. CBCCF's post adoption support services have trained adoption competency to over 118 therapists since 2012 and two additional trainings are scheduled during FY 17/18.

TRAINING

CBCCF assigns the Training Manager to oversee the CBCCF System of Care Training Plan as well as manages quarterly training committee meetings focused on identifying the training needs of case management staff/system of care. CBCCF staffs one training manager and 5 child welfare trainers; one focused on pre-service training and one focused on practice improvement. The child welfare trainers primarily focus on training support to case management staff through the provision of open labs, learning circles, in-service training and individual consultation. The training manager has oversight of all training and training materials to ensure quality and consistency of information as well as managing CBCCF training priorities. Invitations to attend trainings are extended to all network and stakeholder partners. Training events are published on the CBCCF website.

Pre-Service Training
The DCF mandated CORE and Case Management track pre-service curriculum is delivered by a dedicated CBCCF Pre-Service Classroom Trainer. To obtain perspective on the responsibilities that Dependency Case Managers assume daily, CBCCF requires new hires to complete shadowing activities during pre-service training. Immediately following Pre-Service training, there are small group training sessions delivered by the CBCCF County System of Care trainers.

CBCCF fully transitioned pre-service curriculum to the use of CORE and the Case Management Specialty track at the end of 2016. CBCCF has not delivered the Licensing Specialty track of the curriculum as there has not been a need and existing staff was grandfathered into their roles.

Supervisor Training and Program Specific Training
A proficiency project was piloted in collaboration with DCF's Regional Program Office and then was launched by CBCCF. Since January 2016 staff from QA, Training, and Executive Leadership from the CMAs and CBCCF have completed the process. Learning circles have been held monthly as part of the CMA supervisor's unit meetings. Topics addressed in the learning circles have focused on safety planning, parent engagement and barriers to parent engagement, and psychotropic medication management.

Foster Parent/Adoptive Parent Training
CBCCF has Foster Parent Trainers deliver the PRIDE training curriculum to prospective adoptive/foster parents. CBCCF contracts with CPAs to complete the foster parent licensing process and continue with retention and support services and requires the CPA to ensure each foster parent receives at least 8 in-service training hours per year. Training is to include the recognition of indicators and reporting procedures for child abuse and neglect, behavior management and trauma informed care.

CBCCF continues to participate in the Quality Parenting Initiative (QPI). Policies and procedures regarding normalcy, babysitting and travel have been developed and finalized and training continues across the system of care to endorse and promote the practice of prudent parenting. In 2017, QPI Reboot training was provided across the tri-county area to train and retrain case management staff on the basics of QPI, shared parenting techniques among professionals,

engagement of parents, and the importance of transition plan to reduce trauma to children and build healthy sustainable relationships among caregivers.

Staff Development
Supervisors are responsible for developing a training/development plan as part of developing staff. CBCCF System of Care Trainers and/or CBCCF Quality Assurance staff deliver enhanced training as indicated through quality assurance reviews, contract monitoring reviews, and training committee meetings. Additionally, CBCCF System of Care Trainers provide training sessions several times a month to case managers, supervisors, program directors, and the provider community on a variety of topics. In-service sessions focus on practice areas such as concurrent case planning, child placement agreements and new children in the household.

Training Plan
CBCCF participates in Regional Training Committee meetings, hosts quarterly case management agency/ CBC county level training committee meetings and utilizes information on performance and quality assurance reviews to determine and prioritize training needs. CBCCF is able to make adjustments anytime a new training need is identified utilizing in-house experts, Clinical Utilization Managers, and Youth Services staff, where appropriate. Funding is available for staff to participate in conferences that are relevant to their positions. The annual training plan includes activities to support the practice model and includes both pre-service and in-service courses.

Title IV-E
The System of Care Trainer builds training classes, identifies eligible participants that attend and maintain sign-in sheets. The CBCCF SOC trainer also submits and records any consultations that are delivered to case management. The trainer determines if the training is IV-E eligible and the reimbursement level. CBCCF Supervisors/Managers submit an electronic monthly training report (i CBConnect) to Human Resources which captures all training attended. The Network Director requests that CMA and CPA providers submit a training report monthly capturing any eligible IV-E training staff have attended. Finance receives the information and identifies the appropriate OCA and calculates the costs.

STATEWIDE PERFORMANCE

The State of Florida is currently underperforming in the following three federal measures:
- Rate of Abuse in Foster Care
- % of Children who do not re-enter care within 12 months of moving to a permanent home
- Placement moved per 1,000 days in foster care

CBCCF has implemented specific strategies to address the above Federal measures and has experienced some success. While these strategies (see Regional Feedback Section) are not linked to evidenced based programming or informed practices, CBCCF has shown some improvement in these measures. CBCCF and the Central Region Family Safety Program Office continue efforts to improve outcome goals of safety, permanency, and wellbeing of children within the child welfare system. CBCCF collaborates with the Family Safety Program Office in the casefile reviews to address quality and performance deficiencies of case work regarding identified criteria in the CFSR-PIP. Below are some findings cited in the CBCCF QA Plan for FY 17/18:
- **(SCM1) Rate of abuse per 100,000 days in foster care** –CBCCF has worked with the Family Safety Program Office to review these cases for data correction. Although CBCCF showed great improvement in this measure for in the first quarter of 17-18, they continue to monitor and discuss monthly to identify additional efforts for improvement.
- **(SCM7) Percent of children who do not re-enter foster care within twelve (12) months of moving to a permanent home-** CBCCF has improved their performance and exceeded the target on this measure over the previous three quarters. Improvement was made in FY 16/17 from FY 15/16 and although the target is still not met, CBCCF scored higher than the statewide performance.

- **(SCM8) Placement moves per 1,000 days in**-.
    1. CBCCF is working to reduce disruption of placements with relatives/non-relatives and licensed foster homes through increased support to caregivers through the utilization of Placement Support Staffings and expansion of Kinship Services. The disruption rate for FY 16/17 was 13.83%, CBCCF has set a target to decrease the disruption rate to 7%.
    2. The QAM tracks placement disruptions (completing the QA tool specific to children that are disrupting placements) to determine and isolate the factors and trends in the data/information. Information is discussed during the quarterly county level risk management meeting. CBCCF has implemented numerous strategies (QPI, PRIDE, Training – The Effects of Multiple Placements, Placement Support Staffings) for the purpose of reducing disruptions that also disrupt a child's relationships (connections to friends/family/therapeutic support) and educational setting. The continuing critical analysis of the information provides a foundation for identifying further system improvements that can be implemented.

FSFN DATA ENTRY

FSFN

The data extracted from FSFN/ARGOS is used to alert CBCCF and CMA managers on the success or failure of achieving contractually required outcome performance requirements. FSFN/ARGOS data also provide "the status" of the current situation to CBCCF Management. The use of data enables management to evaluate if a situation/problem is systemic or isolated to an agency, unit or case manager. Corrective action plans and performance improvement plans are developed based on data that has been analyzed and are monitored by using data points.

Data is managed by ensuring the consistency of information between systems and by limiting the persons managing the data for placement location and type, removal, and eligibility information to a few well-trained staff. The CBCCF County Director and CMA Program Director ensure that discrepancies in data are immediately corrected through communication with the CBCCF Information and Eligibility Specialists. Information & Eligibility Specialist (IES) validates and distributes client and case information. The information validated and distributed is tracked on Daily, Weekly, and Monthly Report Checklist.

Title IV-E

The Information & Eligibility team (I&E) manages client revenue maximization activities and federal funding determinations, Medicaid benefits, data services and reporting activities, management of case records, information management and payment processing in the State of Florida's SACWIS system and Florida Safe Families Network (FSFN). Utilizing the I&E team to manage both the data management and entry of placements in FSFN and completing federal funding activities ensures the team has expertise in how data influences eligibility determinations.

CBCCF has a Federal Funding Monitoring Plan that addresses the process and frequency for eligibility review. Eligibility reviews are completed for Title IV-E Foster Care, Title IV-E Adoption Subsidy, and Temporary Assistance for Needy Families (TANF) Adoption Subsidy. The review concentrates on eligibility criteria and documentation. Each CBCCF service center is visited a minimum of one time each Federal Fiscal Year. A 10% random sample is drawn separately for IV-E Foster Care, IV-E Adoption Assistance, TANF Adoption Subsidy and TANF. Once the review is completed, corrective actions are implemented to prevent errors in eligibility determination.

The CBCCF Director of Administration and/or Information and Eligibility Team participates in the Department's conference calls and the Department's Region Meetings specific to federal funding and FSFN to ensure compliance with federal guidelines and requirements. As changes occur, the process and procedures utilized are reviewed for compliance and adjusted accordingly. At a minimum, procedures are reviewed by the team annually.

Quality Assurance (QA) activities are conducted at various intervals of a case and throughout the year generally categorized in daily, weekly, monthly or quarterly activities. Daily eligibility activities are completed by an Information and Eligibility Specialist (IES). All eligibility activities are approved by the Information and Eligibility Manager (IEM). Weekly and Monthly reports are reviewed by both IES and IEMs to complete data validation activities. FSFN and proprietary reports are used to evaluate eligibility data and identify potential errors in data entry (exception reports). Quarterly, IEMs complete eligibility file reviews and provide the IES team with results and feedback.

CBCCF has specific processes in place to determine eligibility through initial reviews, annual reviews, interim reviews, and quarterly file reviews. Quarterly the IEM team provides findings and recommendations to IES and Records Management Specialists (RMS). Applicable guidance related to Federal Funding and training needs identified through the findings are provided to the team at this time. Annually CBCCF submits a Federal Funding Annual Eligibility Report for the previous federal fiscal year to the CBCCF DCF Contract Managers and the Office of Child Welfare.

Gap Analysis
CBCCF was provided a list of FSFN position papers to review. They assigned each FSFN position paper to subject matter experts within the organization. Each subject matter expert represented the functional area within the system of care that they manage or help to facilitate and influence practice. The subject matter experts reviewed the draft position paper and forwarded questions and feedback to the FSFN team. DCF conducted a site visit of CBCCF on August 15th and 16th, 2016 and all subject matter experts participated in the visit. After the visit the FSFN System Adoption Initiative moved forward and a DCF Gap Analysis was provided to CBCCF. The draft set of Gap Analysis Worksheets provided to CBCCF documented gaps in FSFN utilization and identified contributing factors. DCF noted that many of the factors identified on the gap analysis documents represented a need for a statewide, strategic approach. CBCCF participated in follow up questions and subsequent review of the gap analysis documents where gaps were identified.

REGIONALLY IDENTIFIED TOPICS

The CBC Contract and Scorecard Measure Report, Contract Oversight Unit-Corrective Action Plan, the Financial Viability Plan, efforts to reduce Out of Home and Residential Group Care, and the CBC performance trend report are reviewed and discussed with CBCCF monthly by the DCF Contract Manager. There were no other concerns or strengths noted.

SECTION 7: CORRECTIVE ACTION PLAN

The Contract Oversight Unit Corrective Action Plan for the FY14/15 remains open for the category regarding Post Placement Supervision. This was a repeat finding for which -Orange and Osceola were placed on a CAP on 5/8/2014 and remains on a CAP for poor performance with the current scores of June 69%, July 75%, August 65%, September 83%. CBCCF has identified deficiencies in the process relating to this item in two of the five CMAs and is working closely with leadership to improve the process and increase performance. The Corrective Action Plan was closed in November 2017 due to sustained improved performance. CBCCF is currently no longer on a Corrective Action Plan.

SECTION 8: DESK REVIEW FINDINGS

Based on the limited desk review of Community Based Care of Central Florida, Inc., Contract GJL57, the following areas in need for improvement and opportunities for system enhancement were found.

AREAS NEEDING ACTION

These findings represent areas that need prompt attention and action as they impact child safety or are measures where CBCCF has been underperforming.

1. Conduct analysis of the following performance measures to determine potential root causes and develop countermeasures to positively impact performance:
   a. **Rate of abuse or neglect per day while in foster care (SM01)**- This measure has gone unmet for the past five quarters. This measure has not been met for FY15/16 and FY 16/17.
   b. **Percent of children exiting foster care to a permanent home within 12 months of entering care (SM05)**- This measure was not met in four of the past five quarters. This measure has not been met for FY15/16 and FY 16/17.
   c. **Percent of children who do not re-enter foster care within twelve (12) months of moving to a permanent home (SM07)**- This measure has not been met for FY15/16 and FY 16/17.
   d. **Percent of sibling groups where all siblings are placed together (SC12)**- This measure was not met in four of the past five quarters.
2. The following quality measures have either seen a decrease between FY 15/16 and FY 16/17 or are below our federal program improvement plan (PIP) goal, therefore need improvement:
   a. CQI Item 4- Is the child in foster care in a stable placement and were any changes in the child's placement in the best interest of the child and consistent with achieving the child's permanency goal(s)?
   b. CQI Item 5- Did the agency establish appropriate permanency goals for the child in a timely manner?
   c. CQI Item 6- Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangements for the child?

OPPORTUNITIES FOR IMPROVEMENT

These findings represent areas that there is need for analysis and based on those findings, actions to improve should be integrated in an agency improvement plan.

1. Review and discuss cases involving children currently placed in residential care for possible step down to a less restrictive placement option. Currently, CBCCF has a higher percentage of children in residential care than the statewide average.
2. Review and discuss cases involving children placed outside of the county and circuit for possible closer placement. Currently CBCCF has twice as many children placed out of their home county and circuit than the statewide average.

Conduct analysis of the following performance measure to determine potential root causes and develop countermeasures to positively impact performance:

1. **Placement moves per 1,000 days in foster care**- CQI data echoes quarterly data that placement moves are increasing.
2. **Percent of children in foster care who received a dental service in the last seven months** -CQI Item 17 which measures children receiving medical and dental services, shows a 10% decrease from FY 15/16 and is scoring below the statewide performance and federal state expectations.