

**Risk Pool Peer Review Committee Report**  
**Lakeview Center – Circuit 1**  
**(Escambia, Okaloosa, Santa Rosa and Walton Counties)**  
**Fiscal Year 2018-2019**  
**Round 2 – April 2019**

**Executive Summary:**

Lakeview Center dba Families First Network (FFN) submitted an application for risk pool funding on August 17, 2018. The application was subsequently reviewed by the Northwest Region and with the concurrence of the Regional Managing Director was submitted to the Office of the Deputy Secretary. Based on the analysis of the FFN budget and the information provided, FFN's budget projections did not indicate a current need. A determination on their qualification for risk pool was deferred until additional information was available.

Risk pool applicants who were not funded or who were given a partial distribution in the initial phase were contacted to see if they were interested in being reconsidered for Round 2. FFN responded in the affirmative and provided revised projections and additional information to support the anticipated need for risk pool funds.

The department established a Risk Pool Peer Review Committee pursuant to section 409.990(7), Florida Statutes, for state fiscal year (FY) 2018-2019. The Risk Pool application process was informed by lessons learned from the prior year reviews as well as the availability of extensive additional information from reports developed pursuant to proviso language included in the General Appropriations Act (Specific Appropriation 322) for FY 2017-2018. In compliance with this proviso language, the department completed a comprehensive, multi-year review of the revenues, expenditures and financial position of all Community-Based Care Lead Agencies (CBCs) including a comprehensive system of care analysis. This submission also included a financial viability plan from all lead agencies.

The Risk Pool Protocol provided for priority consideration for any CBC with increased removals based on a 12-month moving average from May 2016 to May 2018. This criterion was based on the experience from prior year reviews that found that significant increases in removals were a key indicator of financial vulnerability for a lead agency. Tier one for priority consideration was lead agencies with an increase in removals of 10 percent or more. FFN was in Tier two for priority consideration with a 2.42 percent increase in removals.

The Risk Pool Peer Review Committee conducted a secondary review on March 8, 2019 with relevant information available from multiple sources to make recommendations. The documents reviewed are as follows:

- Updated Risk Pool Funding Application FY 2018-2019
- Financial Viability Plan (FY 2018-2019)
- Budget Projections provided by the CBC
- CBC Financial Viability Integrated Data Report
- [The Child Welfare Dashboard](#)
- [CBC Contract Monitoring Reports](#)
- CBC Contract Monitoring Survey Data
- CBC Contract Monitoring Data Packets
- [The Child Welfare Key Indicators Monthly Report](#)

- Florida Safe Families Network (FSFN) Aggregate Payment Data
- FFN Status Update on CBC Contract Oversight Unit (COU) monitoring

As a part of the secondary review, the team evaluated all available information from previous on-site visits, current data, and monitoring reports to make a recommendation without an additional on-site visit by this team. To resolve any outstanding questions, additional information was requested by the team from the CBC.

The Risk Pool Peer Review Committee for FFN consisted of:

Lee Kaywork, Team Leader  
 Teri Saunders, CEO, Heartland for Children  
 Naomi Jackson, CFO, Family Support Services of North Florida  
 Catherine Macina, CFO, Community Based Care of Central Florida  
 JoShonda Guerrier, Assistant Secretary for Child Welfare  
 Barney Ray, Office of CBC/ME Financial Accountability  
 Patricia Medlock, Northeast Regional Managing Director  
 April May, Suncoast Region Community Development Director  
 Alissa Cross, CBC Contract Monitoring Team

While the specific areas of review and analysis varied based on the unique needs and circumstances of each region, circuit and CBC, the following framework provided an outline for organizing the work of the Peer Review Committee.

**Application Summary:**

FFN's application for risk pool funding in August 2018 requested \$1.25 million. This projection included a Maintenance Adoption Subsidy (MAS) deficit of \$556,235. Since then, FFN's projected deficit has increased to over \$1.4M excluding MAS deficits.

FFN is projecting an increase of children entering care; risk pool funds will be used to address the deficit incurred from normal operations.

**Findings:**

After review of the information provided, the Peer Review Committee was able to reach the following findings:

**1. Findings related to the need for services and commitment of resources**

- Sources: ([The Child Welfare Key Indicators Monthly Report](#), [The Child Welfare Dashboard](#), [CBC Contract Monitoring Reports](#))
- Summary below; see CBC Contract Monitoring Report, sections 2, 11, and 12 for more details

**1.1. What is the relevant community context within which the child welfare system operates?**

- 1.2. ***This may include incidence of calls to the hotline, child poverty in the area, local factors that influence the need for services, etc.***
- 1.3. ***Factors may also include community resources available to meet the needs of children and families such as Children's Services Councils, local governmental resources, or other unique factors.***

Child protective investigations are conducted by the department in Escambia, Okaloosa, and Santa Rosa Counties; the Walton County Sheriff's Office began conducting child protective investigations in July 2018. Children's Legal Services (CLS) are performed by the department for all of Circuit 1. Pre-service training is outsourced to the University of West Florida. In-service training is collaborative with the department's investigations and region staff. Case management, adoptions, licensing, placement and independent living services are provided by FFN while the majority of family support services are provided by community partners who contract with FFN.

The median household income in Santa Rosa and Okaloosa Counties is above the state average, while in Escambia and Walton Counties the median household income is slightly lower. The percentage of the population living in poverty is lower than the state's in three of the four counties served by FFN. In Escambia County the percentage is slightly higher than the state. With the exception of Walton County, a higher percentage of the population in Circuit 1 has earned a high school diploma. However, only Okaloosa County exceeds the state in the percentage of the population with a college degree. The following chart provides a side-by-side comparison of these elements by county and for the state:

US Census Facts	Florida	Escambia	Okaloosa	Santa Rosa	Walton
Median Household Income	\$48,900	\$46,117	\$57,655	\$60,652	\$46,910
Percent of population living in poverty	14.7%	15.2%	10.7%	10.6%	13.1%
Percent of population over 25 years old with a college degree	27.9%	24.9%	29.4%	26.9%	26.3%
Percent of population over 25 years old with high school diploma	87.2%	89.9%	91.3%	90.2%	84.9%

Table 1. Data Source: census.gov/quickfacts/(2012-2016 v2016)

The number of reports accepted for investigation and the number of children entering out-of-home care has continued to increase in FY 2017-2018. The number of children receiving in-home services has decreased; the number of children receiving out-of-home services, family support services, and the number of young adults receiving services has fluctuated with the most recent FY seeing an increase. The following chart illustrates the changes over the past three fiscal years:

Service Area Data		FY 2015/2016	FY 2016/2017	FY 2017/2018
Child Protective Investigations and Child Removals (Escambia, Santa Rosa, Okaloosa, Walton Counties)	Reports accepted for Investigation by DCF (Initial & Additional Reports)	10,094	10,315	10,299
	Children Entering Out-of-Home Care	900	865	967
Children Served by Families First Network	Children Receiving In-Home Services	1,920	1,570	1,563
	Children Receiving Out of Home Care	2,125	2,104	2,165
	Young Adults Receiving Services	191	203	176
	Children Receiving Family Support Services	2,483	994	1,061

Table 3. Data Sources: Child Protective Investigation Trend Report, Child Welfare Dashboard, PSFN OCWDRU Report 1006

There are no local Children's Services Councils in Circuit 1.

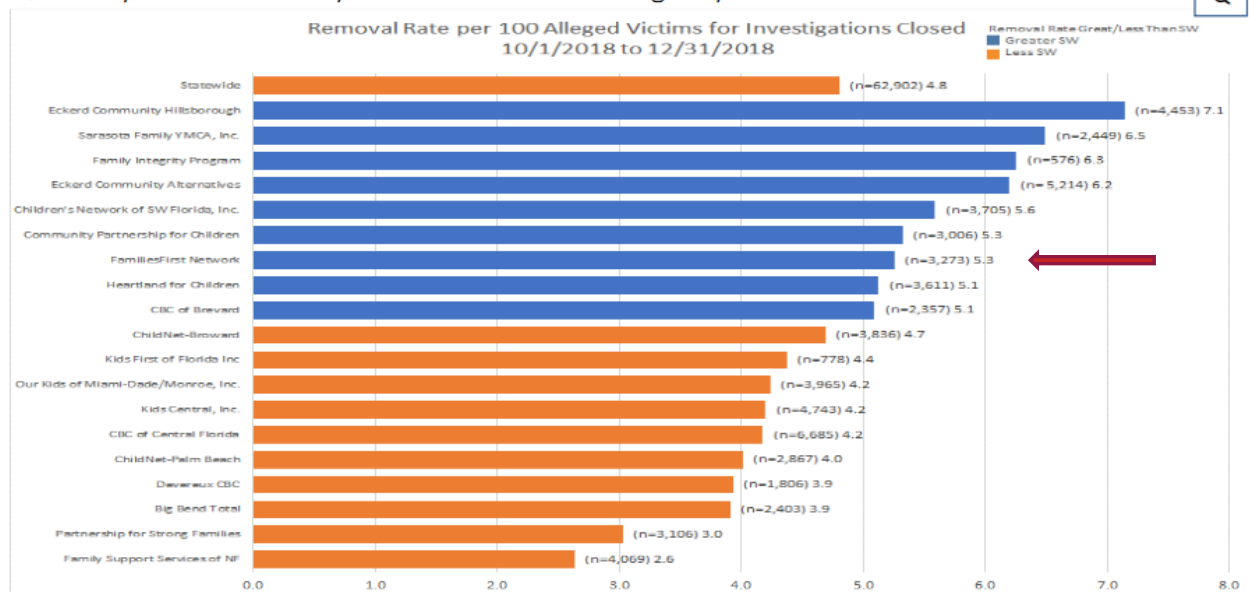
**2. Findings related to protective services including removals, referrals for post-investigative services, activities to protect children without removal, and use of resources focused on prevention and intervention.**

1. Sources: ([The Child Welfare Key Indicators Monthly Report](#), [The Child Welfare Dashboard](#), [CBC Contract Monitoring Report](#))
2. Summary below; see CBC Contract Monitoring Report, sections 5, 9, and 11 for more details
  - 2.1. **What are the rates of removal, rates of verification, and other measures from protective investigations that affect the need for child welfare services? How have these measures changed over time and how do they compare with other areas of the state?**
  - 2.2. **What activities are in place to provide support to protective investigators and families to permit children to remain safely in their homes? What services are provided with funds used for prevention and intervention?**
  - 2.3. **How well integrated are the child protective investigations (CPI), safety management, and intervention services components? Are there case transfer issues that affect performance?**

Circuit 1 maintained a higher rate of removal per 100 alleged victims than the statewide average for the past three quarters.

Quarterly Stratification by Circuit and CBC Lead Agency

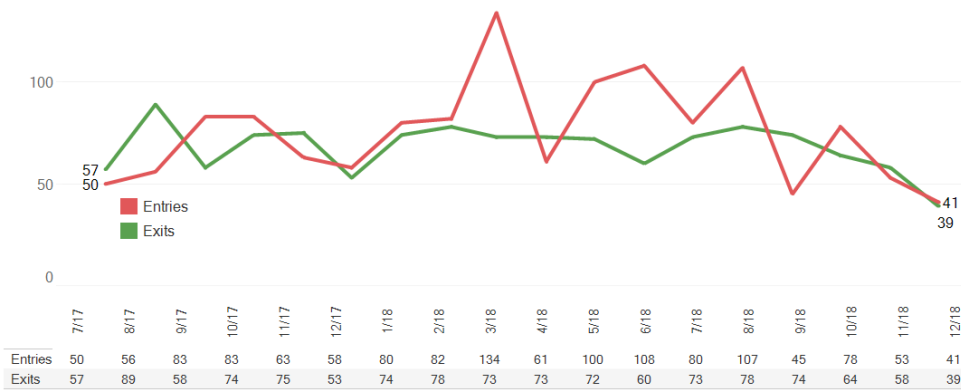
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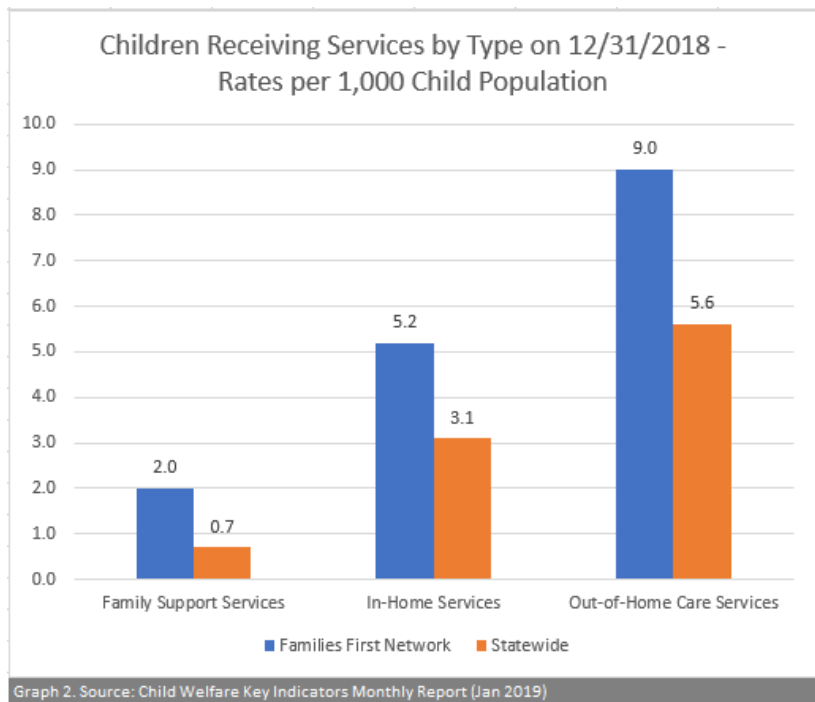
Source: Child Welfare Key Indicators Monthly Report January 2019

There was a spike in removals in March 2018, but removals have since been on the decline. Exits had been relatively flat since January 2018 but began trending down in September 2018.

Monthly Entries and Exits



This graph depicts the rate of children, served by FFN, receiving in-home, out-of-home and family support services compared to the statewide average. In each category, FFN's rate is higher than the statewide average with the most substantial difference being in the number of children receiving out-of-home services.



In July 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 families involved with the child welfare system.

FFN has family support services and safety management services available across the service area. They are currently rated by the Office of Child Welfare as a "4" for safety management services and a "4" for their family support services programs. A "4" indicates that the CBC is providing the services consistently as defined, with no capacity issues. The 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.

FFN is utilizing a Wraparound model for the provision of family support services. This model takes a team based, family driven approach to case coordination. The

assessment process involves asking the family their perspective on the various aspects of their lives and interactions with one another. These conversations would include eliciting information in each of the areas of the six protective factors, parental resilience, social connections, concrete needs, social and emotional competence, and healthy parent-child relationships. In addition, the assessment takes a history of the parent's educational, employment, social/community, medical, financial, housing and service background in relation to family functioning. Wraparound Family Support services are provided in the homes and communities of the families served. FFN has contracted with a single point of access provider in each of the four counties who are responsible for delivering services within their county. Services are available to eligible families regardless of where they live in the circuit.

FFN previously subcontracted their safety management services with four different providers, one for each county. Despite having safety management services that were aligned with the child welfare practice model and were available at a sufficient capacity, FFN was not seeing the outcomes they had hoped with these services. To address these concerns, FFN sent several staff members to collaborate with another community-based care agency, Family Support Services of North Florida, and gathered information to enhance FFN's service array for safety management. As a result of this collaboration, FFN made changes to their safety management services, including bringing them "in-house" to be conducted by a certified child welfare professional. FFN completed a deliberate county-by-county roll out of their new safety management model, beginning in Santa Rosa County.

### **3. Findings related to provision of services for children in care (both in-home and out-of-home)**

- Sources: ([The Child Welfare Key Indicators Monthly Report](#), [The Child Welfare Dashboard](#), [CBC Contract Monitoring Report](#), CBC Financial Viability Report, CBC Financial Viability Integrated Data Report, CBC Budget Projections, and Florida Safe Families Network (FSFN) Aggregate Payment Data)
- Summary below; see CBC Financial Viability Integrated Data Report, CBC Budget Projections, CBC Financial Viability Report, and [CBC Contract Monitoring Report](#) for additional details.

- 3.1. What is the composition of the children in care including age cohorts, placement types, use of specialized higher cost settings, use of congregate care, etc.**
- 3.2. What is the cost of various placement types? To what extent are the rates paid for foster care (including care with various rates of intensity) and congregate care consistent with statewide norms (considering community context)? Have these rates remained relatively consistent over the past few fiscal years?**
- 3.3. What is the cost for dependency case management? Is this consistent with norms for such services? Have these rates remained relatively consistent over the past few fiscal years?**
- 3.4. To what extent is the CBC appropriately utilizing non-child welfare funding for services (such as DCF SAMH Funds, Medicaid, and other non-DCF funding sources).**

3.5. **What evidence exists that case management services are well-managed by the CBC?** (see overall management section for response)

FFN has seen a decrease in children served in-home from 38% in July 2017 to 33% in January 2018; FFN remained in the 33%-32% range until September 2018 when it reached 34% that has been maintained through December 2018. Children in out-of-home care placed with relatives/non-relatives saw a slight dip from the 54% as of July 2017 to 51% in September 2017; FFN returned to 55% in December 2017 and has remained in the 56%-54% range through December 2018.

Source: FSN Payments via Tableau software (OCA Disposition Dates through 2/28/2019)

<b>Lakeview Center dba Families First Network (Contract # AJ495)</b>				
<b>Total \$ of FSN Payments to Licensed Residential Group Care (OCA LCRGE)</b>				
<b>Ages</b>	<b>FY2016-2017</b>	<b>FY2017-2018</b>	<b>FY2018-2019 (as of Jan 2019)</b>	<b>% of Total \$ FY2018-2019 LCRGE</b>
0-5	\$26,750	\$34,194	\$102,368	3%
6-12	\$1,934,807	\$2,147,868	\$1,453,082	42%
13-17	\$3,376,809	\$3,075,241	\$1,874,588	55%

Children Ages 0-5: Historically, FFN has paid for residential placements but the total amount paid through seven (7) months in FY 2018-2019 is already three times more than the total they paid in FY 2017-2018 for this age group. In July 2018, only one child in this age group was paid for residential group care (RGC) (\$140) but in December (\$26,469) and January (\$38,100) there were eight (8) children paid in residential group care. While the total paid for this age group (none were 0-3 years old) only accounts for 3% of all residential group care expenditures, the trend is increasing for the youngest children in care.

Children Ages 6-12: FFN has paid a significant amount the past three years in residential group care. They are currently on a pace to spend more than \$2.4M this year which exceeds the amount paid last year of \$2.1M. It is also a significant portion of their total licensed care expenditures regardless of age accounting for 42% of all residential group care this year. FFN has paid for thirty-nine (39) children every month this fiscal year.

Children Ages 13-17: FFN has paid a significant amount the past three years in residential group care. They are currently on a pace to spend more than \$3.2M this year which exceeds the amount paid last year of \$3.1M. It is also a significant portion of their total licensed care expenditures regardless of age accounting for 55% of all residential group care this year. FFN has paid for twenty-eight (28) children every month this fiscal year.



<b>Lakeview Center dba Families First Network (Contract # AJ495)</b>				
<b>Total Number of Unique Clients in Licensed Residential Group Care (OCA LCRGE)</b>				
<b>Ages</b>	<b>FY2016-2017</b>	<b>FY2017-2018</b>	<b>FY2018-2019</b>	<b>% of Total # FY2018-2019 LCRGE</b>
0-5	4	3	8	3%
6-12	158	177	133	53%
13-17	147	153	111	44%

Over the past three years, FFN has paid for more individual children ages 6 to 12 in licensed group care than children ages 13 to 17. While some utilization in certain individual circumstances may be determined to be in the best interest of the child age 6 to 12, the degree to which it is used for this age group appears much higher than most CBCs.

<b>Lakeview Center dba Families First Network (Contract # AJ495)</b>				
<b>Median Daily Rate \$ in Licensed Residential Group Care (OCA LCRGE)</b>				
<b>Ages</b>	<b>FY2016-2017</b>	<b>FY2017-2018</b>	<b>FY2018-2019</b>	
0-5	\$52.00	\$120.00	\$140.00	
6-12	\$52.00	\$52.00	\$78.00	
13-17	\$127.00	\$125.00	\$140.50	

The Median daily rates paid for licensed group care have increased since FY2016-2017 across all age groups.

<b>Lakeview Center dba Families First Network (Contract # AJ495)</b>				
<b>Total \$ of Payments by FSFN Service Type in Licensed Residential Group Care (OCA LCRGE)</b>				
<b>FSFN Service Type</b>	<b>FY2016-2017</b>	<b>FY2017-2018</b>	<b>FY2018-2019 (as of Jan 2019)</b>	
Group Home	\$4,466,768	\$4,817,080	\$3,292,754	
APD Group Home	\$14,414	\$103,378	\$93,166	
Residential Treatment-CBC Funded	\$557,590	\$143,084	\$9,786	
Shelter Facility (Res)	\$258,466	\$131,100	\$8,976	

FFN has reported paying less for Residential Treatment and Shelter Facility costs this year however the payments for Agency for Persons with Disabilities (APD) Group Homes has increased though still a very small percentage of all residential facility payments.

<b>Lakeview Center dba Families First Network (Contract # AJ495)</b> <b>FY2018-2019 (thru Jan 2019) Licensed Residential Group Care (OCA LCRGE)</b> <b>Top 6 Total \$ by Provider (50% of Total Paid in LCRGE)</b>				
Provider	Age Groups Placed	Number of Clients per Month	Daily Rates Paid	Total Paid
Cabot Heights	13-17	12-14	\$118.50	\$412,755
Arcadia Place	13-17	5-11	\$266.77	\$348,685
Florida Sheriff's Boys Ranch	All age groups (ages 5-17)	(Age 5) 0-1 (Age 6-12) 6-9 (Age 13-17) 3-4	\$120.00	\$275,220
The Haven for Children			\$140.00 \$280.00	\$267,740
Little Debbie's Second Change Home (Kendall)	6-12	(Age 6-12) 1-2	\$190.00	\$206,520
	13-17	(Age 13-17) 3	\$218.00	
Choice, Inc	6-12	(Age 6-12) 3-4	\$166.00	\$155,300
	13-17	(Age 13-17) 1-2	(1 child) \$241.67	
Total				\$1,666,220

According to the Lakeview Center website, Arcadia Place and Cabot Heights are residential facilities owned and operated by Lakeview Center under the Children's Mental Health program.

"Arcadia Place is an eight-bed Foster Group Care home that provides transitional or long-term foster care for adolescent girls age 13 – 17, who may have moderate to severe emotional/behavioral problems and placement is contingent upon court orders and family case plan goals. While at Arcadia Place the children are prepared to be reunited with their families or a more traditional foster home placement."

"Some children are better served in a group home than a traditional or therapeutic foster home. In these instances, [Families First Network \(FFN\)](#) in Circuit 1 refers boys and girls ages 13 to 17 to Cabot Heights where they can receive behavioral health services and have access to a team that encourages their strengths and abilities. These young boys are dependents of the State of Florida Child Welfare Program and are in need of a supportive environment. While with us at Cabot Heights, our team places an emphasis on helping them to achieve goals set by FFN and the court as written in their family case plans. In our transitional or long-term foster care program, we help them prepare for living in a family setting or in an independent environment."

#### 4. Findings related to exits from care including exits to permanence.

- Sources: ([The Child Welfare Key Indicators Monthly Report](#), [The Child Welfare Dashboard](#), [CBC Contract Monitoring Report](#), Financial Viability Integrated Data Report)
- Summary below; see [The Child Welfare Key Indicators Monthly Report](#), [The Child Welfare Dashboard](#), Financial Viability Integrated Data Report, [CBC Contract Monitoring Report](#) – sections 4 and 11, for more details.

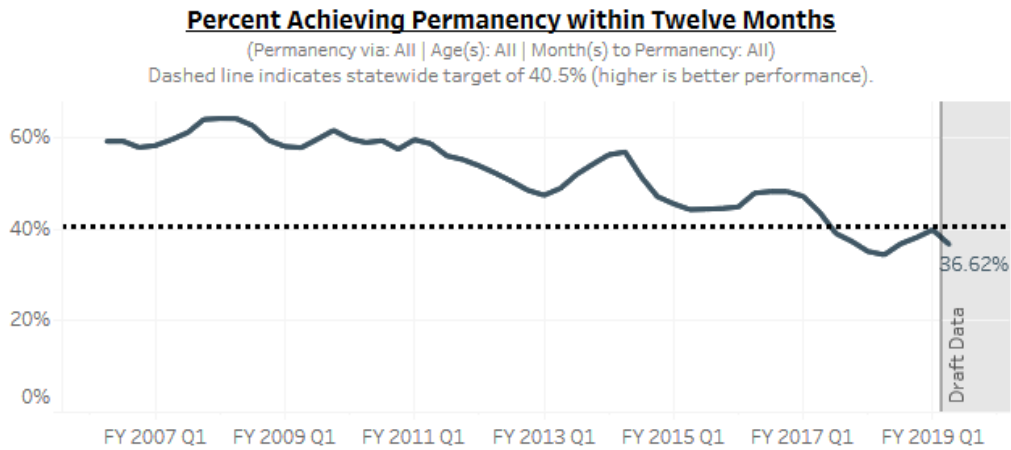
- 4.1. **What is the performance of the CBC in the recognized measures of children achieving permanence? Do these findings indicate that children are not remaining in care for longer than necessary? Are these permanency achievement rates consistent across placement settings?**
- 4.2. **What contextual factors (such as Children's Legal Services, dependency court dynamics, etc.) influence time to permanence for children served by the CBC?**
- 4.3. **Has there been a change in the number of exits or time to exit that is materially influencing the cost of out-of-home care?**

During FY 2017-2018, FFN did not meet the established targets for:

- o M05: Percent of children exiting to a permanent home within 12 months of entering care
- o M07: Percent of children who do not re-enter care within 12 months of moving to a permanent home
- o M08: Placement moves per 1,000 days in foster care

### Children Entering Care Who Achieve Permanency within 12 Months

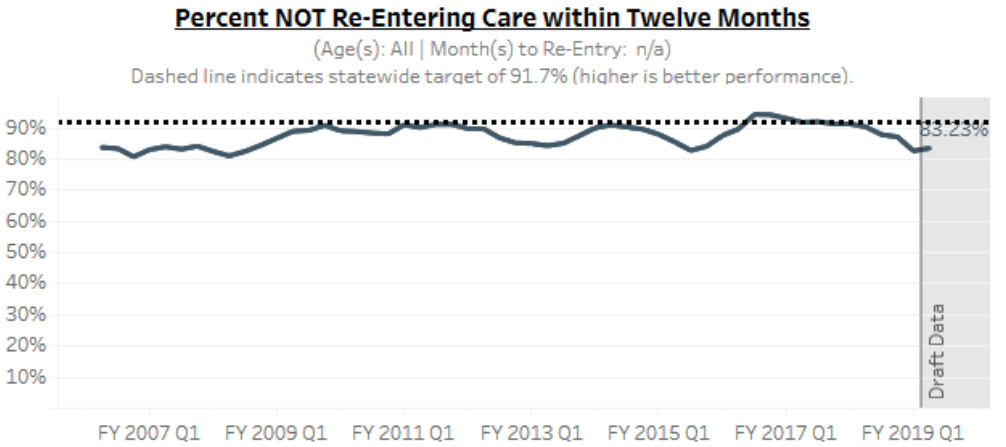
Achieved Permanency:  Select the Report Quarter(s) to Display:



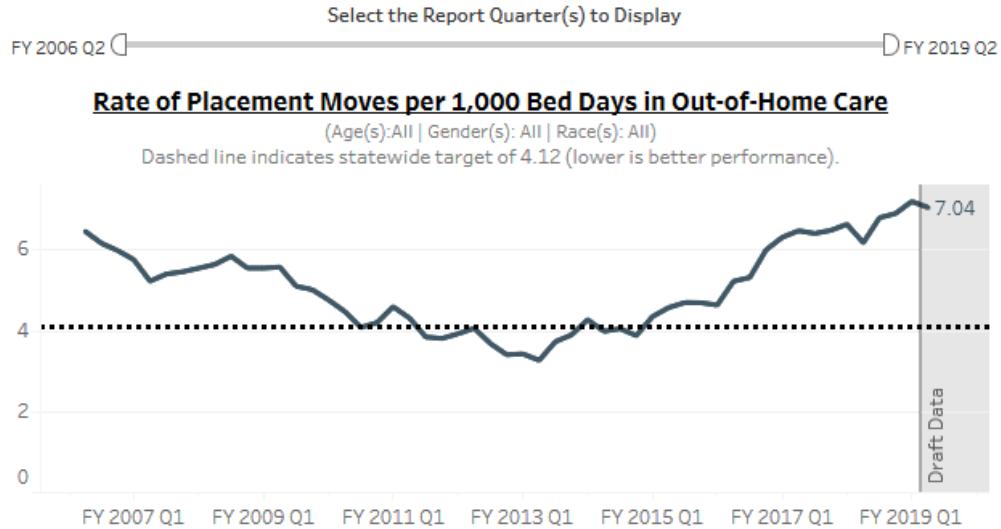
FFN has seen a fairly steady decline in children achieving permanency within 12 months from a high of 64.17% in FY 2007-2008 Q1 to the current rate of 36.62% in FY 2018-2019 Q1.

Re-Entered Care Select the Report Quarter(s) to Display

No FY 2004 Q2 FY 2019 Q2

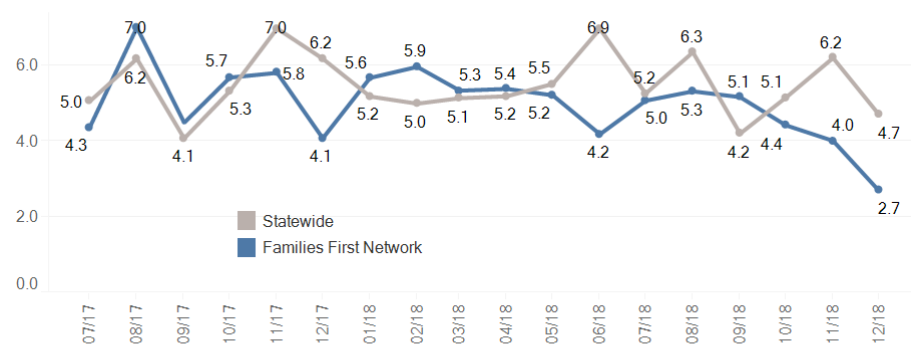


FFN has seen improvements in children achieving permanency and not re-entering care within 12 months; however, FFN has only met or exceeded the statewide target for five quarters, FY 2015-2016 Q3 through FY 2016-2017 Q4, and has mostly been trending down since.



FFN has a high number of placement moves; this speaks to placement stability. The rate of 7.04 far exceeds the target of 4.12 as well as the statewide average of 4.80 for FY 2018-2019 Q2 (and the recent statewide high of 5.15 for FY 2018-2019 Q1).

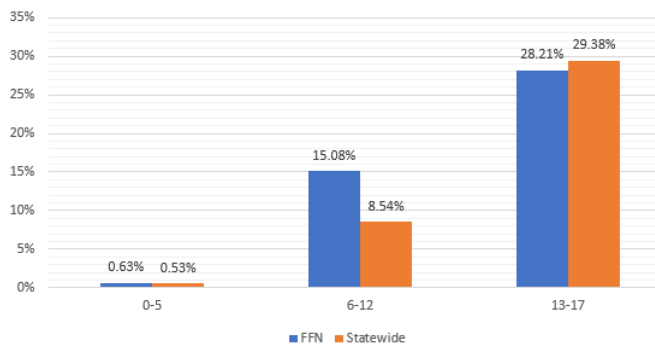
**Discharge Rate per 100 in out-of-home care  
Statewide & Families First Network**



*A higher discharge rate is good if the % not neglected or abused after services remains high (standard is 95% or higher)*

FFN has been below the statewide discharge rate for seven of eight months May 2018 through December 2018 and is trending in the wrong direction.

**Percent of Children in Group Care**



Source: FSN OCWDRU Report #1005

FFN has been trending above the statewide average of the percent of children placed in group care or residential treatment. As of February 28, 2019, FFN exceed the statewide percentage in group care for all three age groups (0-5, 6-12, and 13-17); children age 6-12 was 15.08% - 76% higher than the statewide percentage of 8.54% for the same age group.

In addition to the items noted above, an initiative was started in April 2017 to address the problem of lingering adoption cases due to absent or incomplete home studies. The goal of the initiative was to complete 90 home studies within 90 days. Over six months have passed since the initiative began and numerous home studies remain incomplete, resulting in adoption cases lingering unnecessarily.

FFN has been working with the Casey Family Programs on this issue. In addition, there is a Green Belt project underway that will help identify the reason Circuit 1 has a high number of children not reunified and a high number of Adoptions. FFN is also adding an additional Family Finders Unit to complete adoption home studies. The unit will cover the east side of the circuit. FFN held an accelerated Quality Parenting Training class to bring in more families to meet the needs of children specifically for the purpose of Adoption. Twenty-four people attended the 3-day, 8 hours per day class. Prospective families included single individuals and couples. FFN remains on a corrective action plan for this measure.

**5. Findings related to funding, fiscal trends, and fiscal management.**

- Sources: ([The Child Welfare Key Indicators Monthly Report](#), [The Child Welfare Dashboard](#), CBC Financial Viability Report, CBC Financial Viability Integrated Data Report and CBC Budget Projections)
- Summary below; see CBC Financial Viability Integrated Data Report, CBC Budget Projections and CBC Financial Viability Report for additional details.

- 5.1. **How has core services funding changed over time? (Financial) How has the CBC managed these changes? What adjustments to the available array of services have been made?** (For service array response see section1)
- 5.2. **How has any changes to core services funding contributed to any projected deficits for FY 2018-2019?**
- 5.3. **In what ways are funding dynamics in the CBC unique or atypical of funding in other CBCs?**
- 5.4. **What is the amount of the anticipated deficit for the current year? How reliable and valid are these projections?**
- 5.5. **Are their options other than Risk Pool funding available to reduce the deficit?**
- 5.6. **If the Lead Agency meets the criteria for Risk Pool funding but the amount of funding available is insufficient to cover the projected deficit, what other options are available?**
- 5.7. **Are there fiscal practices that could be completed with greater efficiency in order to reduce the projected deficit?** (None were identified.)
- 5.8. **Has the most recent CPA audit indicated any issues that would affect the financial health of the organization?**

<b>DCF Contract Funds Available at Year End (by Fiscal Year)</b>	<b>FY13-14</b>	<b>FY14-15</b>	<b>FY15-16</b>	<b>FY16-17</b>	<b>FY17-18</b>	<b>FY18-19</b>
Core Services Funding	\$31,359,884	\$31,282,380	\$32,783,970	\$34,221,547	\$34,623,974	\$34,653,459
Risk Pool Funding	\$0	\$0	\$0	\$0	\$0	\$0
CBC Operations "Back of the Bill" Funding	\$0	\$0	\$0	\$1,310,473	\$0	\$0
Other Amendments to Initial Allocations	-\$10,149	\$1,110	\$77,044	\$23,137	\$119,774	\$0
<b>Amended Core Services Funding</b>	<b>\$31,349,735</b>	<b>\$31,283,490</b>	<b>\$32,861,014</b>	<b>\$35,555,157</b>	<b>\$34,743,748</b>	<b>\$34,653,459</b>
<b>Funding not defined as Core Services Funding</b>						
Independent Living (IL and Extended Foster Care)	\$889,196	\$889,196	\$889,196	\$889,196	\$1,365,673	\$1,822,671
Children's Mental Health Services (Cat 100800/100806)	\$290,106	\$290,106	\$290,106	\$290,106	\$290,106	\$290,106
PI Training, Casey Foundation or other non-core svcs	\$0	\$0	\$0	\$0	\$0	\$0
Safety Management Services (Nonrecurring)	\$0	\$0	\$0	\$462,805	\$0	\$462,805
<b>Total at Year End</b>	<b>\$32,529,037</b>	<b>\$32,462,792</b>	<b>\$34,040,316</b>	<b>\$37,197,264</b>	<b>\$36,399,527</b>	<b>\$37,229,041</b>
Maintenance Adoption Subsidy (MAS)	\$8,661,212	\$9,274,087	\$10,090,921	\$11,035,777	\$12,328,714	\$12,269,178
MAS Prior Year Deficit			-\$77,180			
Carry Forward Balance from Previous Years	\$1,512,442	\$3,007,831	\$2,920,860	\$106,138	-\$335,810	\$2,667
<b>Total Funds Available</b>	<b>\$42,702,691</b>	<b>\$44,744,710</b>	<b>\$46,974,917</b>	<b>\$48,339,179</b>	<b>\$48,392,431</b>	<b>\$49,500,886</b>

FFN applied for Risk Pool Funding in FY 2016-17 but did not receive an allocation of funds. FFN did receive "back of the bill" funding for operating deficits related to FY 2016-2017. As shown in the chart above, Core Services funding has increased by approximately \$1.9 million since FY 2015-2016. FFN did receive \$504,610 in non-

recurring funding for Safety Management Services in order to provide them with additional financial resources.

Their allocation for Independent Living (IL) services more than doubled from \$889,196 to \$1,822,671 over the past two years. FFN had a history of significant IL deficits in the range of \$1 million annually in the past, however their allocation for FY 2018-2019 should cover the projected costs for this program or at least come very close to doing so.

### **Projected Deficit**

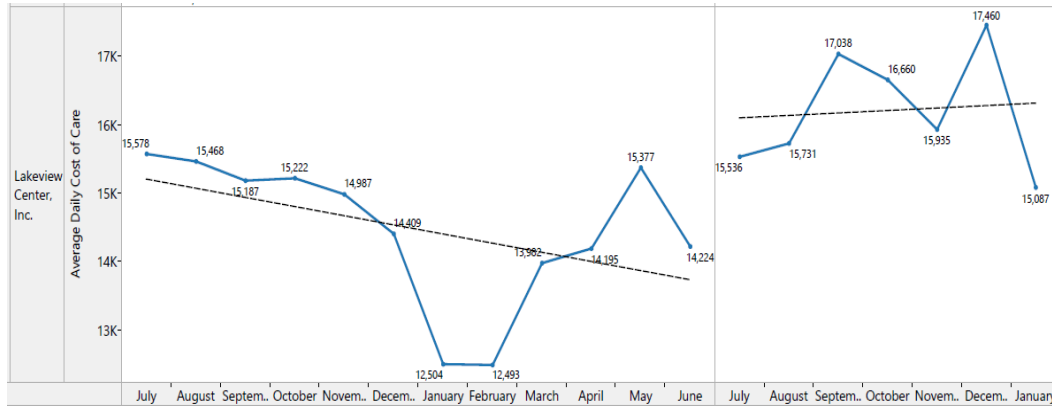
The due date for risk pool applications for FY 2018-2019 from CBCs to the department was mid-August which was before the final FY 2017-2018 expenditures were completed by CBCs and submitted to the department. Therefore, applicant CBCs had to make some assumptions about their FY 2017-2018 carry forward surplus or deficit and any excess federal earnings as part of their revenue projections.

In their risk pool application, FFN requested \$1.25 million. They stated in the application that the any funds received would be "...used to address the deficit incurred from normal operations. The continued underlying cause of the shortfall is a projected increase of children entering care."

A more recent projection received from FFN in February projects a total deficit of \$1,404,596. This projection includes the following assumptions:

1. That the average daily cost in residential group care will decrease by 2% compared with the first six months of the fiscal year. This would result in a total reduction of \$118,000.
2. That the average monthly total for foster care subsidies will increase by 5% compared with the first six months of the fiscal year. This would result in a total increase of \$96,552.
3. That salaries, wages and benefits will increase by 2% or \$192,000. This increase is related to a 2% cost of living adjustment for all FFN employees in beginning in December and adding additional licensing positions in the last quarter for the Guardianship Assistance Program (GAP) implementation for next fiscal year. Additional funding was provided to all CBCs for the fourth quarter for this purpose (GAP implementation).

The chart below shows the trend in average daily residential group care expenditures since July 2017.



### SFY 2018-19 Financial Viability Plan

In the design and instruction for the Financial Viability Plan (FVP) templates, the department requested that CBCs identify their actions to address three primary cost drivers:

1. Factors related to entries into care
2. Factors related to the cost of children while in care
3. Factors related to exits from care

FFN's FVP does contain actions to address the three primary cost drivers affecting their financial position. The actions include:

#### Factors related to entries into care

- o Continue development of Safety Management Service (SMS)/In-Home/Non-Judicial (IHNJ) model as an alternative to removal. Success measured by increasing the percentage of children served in-home from 30.8% to 40% by June 2019. Current percentage is 34%. The measure is on track.
- o Increase utilization of available services for safe but high or very high-risk families. Success measured by reducing the rate of removals per 100 alleged victims from 7.2 removals to 4.3 removals by June 2019. Current rate is 5.3. The measure is on track.

The projected cost savings for these two actions was estimated at \$51,614 which was all in the last quarter.

#### Factors related to the cost of children while in care

- o Implement FFN Caregiver and Resource Entry Support (CARES) Team designed to search for relatives and support caregivers from removal to case transfer. Success measured by increasing the percentage of children in out-of-home care (OHC) in Relative/Non-Relative placements from 55.1% to 60% by June 2019. Current percentage is 55%. The measure is not on track.



- Increase foster home capacity by modernizing the application and licensing process. Success measured by licensing 215 new foster home beds. Current number of 88 however this is offset by loss of 105 beds. The measure is not on track.
- Continue high utilizer staffing process to review high cost placements. Success measured by reducing average daily cost of top 25 high utilizers by 5% from \$5,745/day to \$5,457/day. Current number is \$6,291/day. The measure is not on track.

The projected cost savings for these three actions was estimated at \$352,224 which was mostly in the last quarter.

#### **Factors related to exits from care**

- Redesign FFN case management model from traditional Adoption Unit to a single case manager / secondary Adoption Specialist model.
- Increase adoption finalizations by utilizing the Rapid Permanency Review (NPR) process.

Success measured for both actions reducing the % of children in OHC greater than 18 months from 31% to 25% by June 2019. Current percent is 27.3%. The measure is on track.

The projected cost savings for these three actions was estimated at \$455,479 which was mostly in the last quarter.

The actions in the FVP contain specific measurable performance numbers for the actions. The plan does identify some projected cost savings although it is not clear that these were factored into the projected budget given the overall increase.

No findings were identified in the most recent CPA audit of September 30, 2018.

## **6. Findings related to overall management.**

- Sources: ([CBC Contract Monitoring Report](#), Financial Viability Plan)
- Summary below; see [CBC Contract Monitoring Report](#) – Sections 4 and 11, and the Financial Viability Plan for more details.

- 6.1. To what extent is there clear and effective communication between and among the Region, the CBC, the Sheriff (if applicable), case management organizations, and other key community partners?**
- 6.2. How actively and effectively does the CBC management track programmatic performance and fiscal performance?**
- 6.3. What actions have been taken by the Region and/or the CBC to resolve the fiscal issues without accessing the Risk Pool? What further actions are planned?**

According to CBC monitoring, FFN and DCF region staff work collaboratively to achieve goals and improve outcomes in Circuit 1. In Santa Rosa County, case

management, investigations and Children's Legal Services (CLS) staff work harmoniously toward shared goals. However, overall, greater efforts to improve communication between case management and investigations staff and between case management and CLS staff are warranted with a focus on Walton County (note: CPI activities in Walton County have since transitioned to the sheriff's office, so this may no longer be an issue).

FFN's quality management team is experienced and innovative and a clear strength of FFN's system of care. Monthly Support, Highlight, Improve, Note and Excel (SHINE) focused case reviews provide ongoing feedback to staff regarding performance in critical areas. Abundant data reports are generated by the FFN Data team but are not distributed to front line supervisory staff with a frequency and consistency that would result in impactful change. This is an area that FFN is actively working to enhance. Additionally, data sharing with the Quality Management and Training teams, to identify areas of deficiency supported by data, would result in more proactive training topics and focus SHINE reviews to areas most needing improvement.

Although FFN applied for, and was provided with, Risk Pool funding in FY 2016-2017 and applied but not approved in FY 2017-2018 (due to their low ranking on the prioritization by percent change in removals), Lakeview and Baptist Healthcare provide financial sustainability that is not available to all CBCs. The CEO and Executive Leadership have developed a culture that is committed to staff recognition and retention as well as quality, trauma informed casework. While FFN has developed support mechanisms for foster parents, continued efforts to utilize and support relatives and non-relative caregivers are needed.

The CBC monitoring identified the following items; the response/update from FFN is in the column on the right-hand side:

COU Areas Needing Action	FFN Update 3/1/2019
Placement Practices – Contract AJ495, Standard Contract, 5 specifies that FFN must be aware of and comply with all state and federal laws, rules and regulations, without exception. Information obtained during the monitoring indicates that at least one foster parent refuses to accept children based on race or ethnicity, in violation of the Multiethnic Placement Act of 1994, 42 U.S.C.A. §671 (a)(18), and Florida Administrative Code 65C-28.004.	We have discussed this issue with DCF and are in compliance with MEPA.
Quality and Performance Measures – Several performance measures represent areas in critical need of improvement, as FFN has failed to meet the performance target in	

COU Areas Needing Action	FFN Update 3/1/2019
several, if not all, of the past six quarters. These include:	
a. Placement moves per 1,000 days in foster care – FFN has failed to meet the performance target in this area for the past six quarters. Further, quality case reviews show that improved efforts are needed to ensure placements are stable and any moves are necessary and in the best interest of the child. FFN's current performance does not meet the state, federal or PIP performance expectation.	Placement moves remain a challenge and we continue to fall short of the state and federal target. The newly implemented CARES Team is designed to support initial placements and increase stability.
b. Percentage of children in foster care who receive dental services – FFN has failed to meet the performance target in this area in the past six quarters, thus efforts to ensure children receive regular dental care is needed. Quality case reviews further support that FFN needs to improve efforts to ensure that children's physical health needs are met.	FFN's performance has improved on this measure, though we continue to fall short of the goal. We are working with managed care plans to increase provider capacity and make dental services more accessible.
c. Percentage of children who do not re-enter care within 12 months of moving to a permanent home – In five out of the last six quarters, FFN failed to meet this performance target. Additionally, quality case reviews show that the agency is not meeting the statewide, federal or PIP performance expectation of ensuring that concerted efforts are made to provide services to prevent children's re-entry into foster care or re-entry after reunification.	This continues to be a challenge. FFN has initiated a Six Sigma green belt analysis to identify root causes and countermeasures to improve re-entry rates. Early indications are that a high incidence of substance misuse is impacting removal, reunification, and re-entry rates.
d. Percentage of children exiting to a permanent home within twelve months of entering care - For the past three quarters, FFN has failed to meet the performance expectation of ensuring children reach permanency within twelve months of entering care. Also, quality case reviews show that improved efforts to achieve reunification are warranted.	This continues to be a challenge. FFN has initiated a Six Sigma green belt analysis to identify root causes and countermeasures to improve re-entry rates. Early indications are that a high incidence of substance misuse is impacting removal, reunification, and re-entry rates.

COU Areas Needing Action	FFN Update 3/1/2019
e. Percent of children who are not neglected or abused after receiving services – FFN failed to meet the performance target in three of the past six quarters, failing just shy of the target in FY17/18 Q1. Quality case reviews show a need for improved performance in the quality of visits between the case manager and case participants including the child(ren) and parents.	Quality visits is the primary focus of FFN's Quality Program for 2018-19. Case file reviews have shown an improvement in quality visits.

Opportunities for Enhancement	FFN Update 3/1/2019
<p>Quality and Performance Measures – Several performance measures represent opportunities for local level discussion and monitoring to ensure the upward trend in performance continues. They are:</p> <ul style="list-style-type: none"> <li>• Percent of children who receive a medical service every 12 months – Although performance in three of the past five quarters did not meet the performance target, performance has been trending up in the past three quarters.</li> <li>• Percent of sibling groups where all siblings are placed together – Although FFN's performance in FY17/18 Q1 met the performance target, the preceding four quarters fell short of the target.</li> <li>• Percent of young adults exiting foster care at age 18 who completed or are enrolled in secondary education, vocational education or adult education – FFN's performance has been trending upward but experienced a slight dip during FY17/18 Q1.</li> </ul>	<i>No update</i>
Dissemination of Data – The amount of data available is exceptional but it is not being shared with staff in a meaningful way. The data team reports that they are aware of this and are working on disseminating data that is appropriate for consumption by the various groups	FFN's data program was reorganized in 2017 to increase standardization and improve data sharing. Data management specialists are located at each service center and report to FFN's Data Analysis Manager. Data is shared regularly with staff.

Opportunities for Enhancement	FFN Update 3/1/2019
<ul style="list-style-type: none"> <li>• Training is very responsive to requests for training but data sharing with the training team would allow them to utilize data to hone in on areas of needed improvement that staff may not request (i.e., placement moves).</li> </ul>	
<p>Relative &amp; Non-Relative Caregiver Placements –</p> <ul style="list-style-type: none"> <li>• Identification and screening of relative and non-relative placements through expanded search activities, including but not limited to, the diligent search process, is necessary to reduce placements in out of home care.</li> <li>• Ongoing efforts to support and retain relative and non-relative caregivers are recommended. FFN provides ongoing support to foster parents in a variety of ways including early after placement, to address any issues and/or provide needed supports. A similar process for relative/non-relative caregivers was not evident.</li> </ul>	<p>In recent months, FFN has established CARES Teams to increase relative placement, support, and stability. Two CARES Teams consisting of a supervisor, certified case manager, support worker, and clerical worker support caregivers between removal and case transfer. The teams also continue relative search after the initial placement.</p>
<p>Strategic Communication Process – While new CFOPs and changes to Admin Rule and Statutes are well communicated to staff, staff report that some locally agreed upon protocols or practices are not trickled down timely, or at all.</p>	<p>Communication is a strategic focus for FFN in 2018-19. We have established a monthly update on strategic priorities and projects that goes out to all staff, are have created a “cascade packet” for dissemination of critical information within the organization.</p>
<p>Partner Communications &amp; Relationships - With the exception of Santa Rosa County, both case management and investigations staff described strained relationships and a lack of communication between investigations and case management. Specifically, in Walton County staff report an ‘adversarial’ relationship that is negatively impacting efficient operations.</p>	<p>In both 2018 and 2019, FFN hosted a Circuit One “Mini-Summit”, to include all system partners. At the half-way point between state DCF Summits, we host over 100 system stakeholders to spend an afternoon reviewing data and planning for system improvements. This has helped to build teamwork and a common focus.</p> <p>Additionally, the Walton County Sheriff assumed responsibility for investigations in July of 2018. Thus far we have enjoyed positive relations not only with the SO but among all parties.</p>
<p>Court – A clear process for document tracking was not apparent, including when</p>	<p>It is our practice and expectation that a pre-hearing meeting occur between the</p>

Opportunities for Enhancement	FFN Update 3/1/2019
documents such as JRs, case plans, birth certificates, etc. are provided to CLS for filing. Additionally, staff report that diverging opinions are presented in court, thus a process for pre-court prep and discussion is recommended to ensure recommendations are unified.	CLS attorney and the case manager prior to court.
Need for timely service referrals – Foster parents report issues with obtaining needed services, specifically mental health services, especially in rural areas.	One of the functions of the CARES Teams mentioned above will be to initiate critical service referrals prior to transfer to case management.
Adoptions – An initiative was started in April 2017 to address the problem of lingering adoption cases due to absent or incomplete home studies. The goal of the initiative was to complete ninety home studies within ninety days. Over six months have passed since the initiative began and numerous home studies remain incomplete, resulting in adoption cases lingering unnecessarily.	All home studies are now current. FFN is in the process of re-designing our adoption program so that secondary Adoption Coordinators focus on adoption-specific tasks while a case manager focus on case management tasks. We anticipate this making our adoption process much more timely and efficient.
Incident Reporting – FFN enters critical incidents into Baptist Healthcare's STARs system but not all required incidents are being entered into IRAS. For example, a case involving a near drowning which required resuscitation and another case involving a child who required emergent medical care for a seizure were not entered into IRAS.	We have corrected our incident notification process, and provided training to a new Client Relations specialist.
<p>There are multiple opportunities to improve placement process, including the following:</p> <ul style="list-style-type: none"> <li>• There is not a uniform process for placement. Many tasks are handled on a case-by-case basis. Staff report that a protocol or guidance tool is 'missing' from the FFN handbook.</li> <li>• Guidance and information contained in the CBHA does not appear to be utilized by placement to inform subsequent</li> </ul>	<ul style="list-style-type: none"> <li>• After an extensive search and vetting process, FFN has selected Binti Foster Care software as our information management system for recruitment, licensing, and placement information. The recruitment and licensing module was launched in January 2019, and the placement module is being customized for an anticipated launch in July 2019. This system will modernize FFN's placement process and work flow.</li> <li>• The Binti system will contain critical information about each child, such as the CBHA if completed, that FFN's</li> </ul>

Opportunities for Enhancement	FFN Update 3/1/2019
<p>placement decisions and supports needed.</p> <ul style="list-style-type: none"> <li>• Many manual spreadsheets are being utilized by individual staff, thus a comprehensive and up-to-date placement bed availability snapshot is not available to any placement staff.</li> <li>• There is no evidence of a clear process for placement matching. Placement staff are assigned to specific homes and they know the foster parents assigned to them, but information is not maintained in a manner that allows co-workers to make decisions without first having to consult with the worker assigned to the foster home.</li> <li>• Overnight/Respite placements – Staff report that approximately 85% of initial placements are overnight placements. This was further supported through focus group interviews and placement moves data. While trauma informed care is clearly a part of the overall culture FFN, in this area, there is an opportunity to enhance trauma informed care with staff and foster parents to minimize trauma a child experiences during subsequent placements.</li> </ul>	<p>placement counselors will reference in any placement decisions.</p> <ul style="list-style-type: none"> <li>• The Binti system will replace manual spreadsheets.</li> <li>• The Binti system will include placement matching capability.</li> <li>• <i>No update</i></li> </ul>

Per FFN's March 1, 2019 posting of caseload and turnover as required by s. 409.988, F.S., the agency continues to struggle with high turnover rates:

Average Child Caseload: per Case Manager based on filled positions:	18.13
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FFN Case Managers				FFN Case Management Supervisors			
Period	12 Month Average On-Hand	12 Month Actual Terms	12 Month Rolling Turnover	Period	12 Month Average On-Hand	12 Month Actual Terms	12 Month Rolling Turnover
1/2018	147.25	28.00	19%	1/2018	29.08	5.00	17%
2/2018	146.92	30.00	20%	2/2018	28.83	5.00	17%
3/2018	146.5	37.00	25%	3/2018	28.58	6.00	21%
4/2018	144.92	39.00	27%	4/2018	28.33	7.00	25%
5/2018	143.17	38.00	27%	5/2018	28	6.00	21%
6/2018	142.25	46.00	32%	6/2018	27.83	6.00	22%
7/2018	139.25	54.00	39%	7/2018	27.42	5.00	18%
8/2018	135.75	58.00	43%	8/2018	27.17	5.00	18%
9/2018	132.75	56.00	42%	9/2018	26.67	5.00	19%
10/2018	130.58	59.00	45%	10/2018	26.17	4.00	15%
11/2018	128.92	60.00	47%	11/2018	25.92	4.00	15%
12/2018	127.75	67.00	52%	12/2018	25.67	4.00	16%
1/2019	125.58	70.00	56%	1/2019	25.5	3.00	12%
2/2019	123.42	77.00	62%	2/2019	25.5	3.00	12%

**Summary of Findings:**

Based on the information reviewed the Risk Pool Peer Review Committee was able to affirm the following:

- On the FVP, actions aligned with factors relating to entries into care and factors related to children exiting care (adoptions) are going in the right direction; measures aligned with factors related to children in care are going in the wrong direction.
- There was a spike in removals in March 2018, but removals have since been on the decline. Exits had been relatively flat since January 2018 but began trending down in September 2018.
- Addition of the CARES Team is promising, though too early to see any results.
- FFN continues to struggle with the percentage of children placed in group care; especially those in the age 6-12 group.

**Recommendations:**

Based on the analysis of the FFN budget and the information provided, the Risk Pool Peer Review Committee recommends a full distribution of \$1,404,596. In addition, the following six recommendations are made:



1. Risk Pool funding provides a stopgap (non-recurring) resource intended to mitigate unanticipated changes in the number of clients and/or services needed for clients; it is not designed to annualize expenses. With this being FFN's third risk pool application, the agency should develop a plan to meet existing and trending client needs while reducing costs more in-line with their recurring core services funding allocation in anticipation of being financially viable next fiscal year.
2. Decision Support Team (DST) staffings appear to have reduced entries which spiked when the DSTs were suspended. FFN has implemented the Family Assessment Support Team (FAST) model used by Family Support Services of North Florida. Implementation should be monitored to determine if FAST is effective and CPIs are using the program.
3. FFN should continue efforts to reduce the number of children in RGC, especially those under the age of 13.
4. FFN should analyze the issues surrounding high placement moves as this speaks to placement stability. Questions such as who is initiating the change and drilling down to the root cause of the high rate of placement moves should help develop countermeasures. The COU on-site monitoring report references insights that may be helpful on this item.
5. FFN should place a stronger emphasis on prevention/diversion, decreasing use of RGC, increasing use of relative/non-relatives, foster home recruitment, and use of foster homes.
6. FFN should develop a plan to improve permanency; this should include reunification, adoptions, and exits overall.