FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES

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Contract Monitoring Report

ChildNet, Inc. – Palm Beach

As required by section 402.7305 F.S., The Department of Children and Families completed an On-Site Contract monitoring of ChildNet, Inc. – Palm Beach. The purpose of this monitoring is to report on the agency's system of care and whether the agency is meeting the terms and conditions of the contract.

Contract IJ706

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This report provides findings for the contract monitoring of the ChildNet, Inc. – Palm Beach (ChildNet). The monitoring was conducted April 9 – 13, 2018 and focused on ChildNet's child welfare system of care. The monitoring process included a review of ChildNet's programmatic and administrative operations. In addition, the Contract Oversight Unit (COU) monitoring team reviewed fiscal monitoring reports. Findings are based on an analysis of child welfare performance indicators, quality assurance data and other information obtained through supporting documents, surveys, interviews and focus groups. The monitoring process included an in-depth assessment of the system of care in seven critical areas of operation: (1) leadership and governance; (2) workforce management; (3) quality management and performance improvement; (4) placement resources and processes; (5) child welfare practice; (6) partner relationships and (7) community relations. Additionally, HIPPA Data Security, Information Security, Subcontracts, and Incident Reporting were administratively reviewed.

Significant findings of each category are below:

Leadership and Governance:

- ChildNet's mission, vision and values are aligned with the Department's and are communicated to staff and reinforced on a continual basis.

- Collaborative community partnerships strengthen ChildNet's ability to provide quality child welfare services in Circuit Fifteen.

- ChildNet is governed by a Board of Directors who are knowledgeable and engaged.

- At the time of monitoring, the Board was in the process of evaluating applicants for ChildNet's permanent CEO position. At the time of monitoring, Larry Rein was the Interim CEO of ChildNet, he is now the named CEO and President of ChildNet, Inc. There is an opportunity for the Board to enhance and formalize a more structured annual evaluation process for the CEO.

- It is clear that ChildNet values input from staff and the community. The CEO selection process involved communication and input from the community. ChildNet's website contains a link which enables anyone from the community to send a grievance or comment and this data is distributed to leadership staff for analysis and action when necessary.

- The Board is provided with data analytics pertaining to performance and finances at each Board meeting. There are many subcommittees which meet monthly and report to the larger Board of Directors on a regular basis.

Workforce Management:

- ChildNet has a process which tracks and evaluates caseload ratios and staffing needs on an ongoing basis. A caseload capacity report is distributed to leadership staff to ensure equitable distribution of cases and to assist in identifying staffing needs. Five pre-service classes are held annually and new case managers enjoy a structured mentoring process, which promotes transfer of learning and worker retention. Investigations staff are able to attend CORE training with case management.

- ChildNet's training team works collaboratively with quality management staff to identify training opportunities and embrace various modalities for transfer of learning. For example, interactive web-based scenarios engage trainees in a simulated environment to identify potential hazards in a home environment.

Quality Management and Performance Improvement

- ChildNet's Quality Management team is experienced and fully integrated into the system of care. The QM team produces numerous quality and data reports which are shared with all levels of staff. It is clear that staff are well-versed on performance indicators and the drivers behind the measures which ensure child safety, permanency and well-being.

- ChildNet's Revenue Maximization staff work closely with all parties to accurately track eligibility for TANF, and Medicaid and ensure fiscally responsible management of Social Security dollars.

- ChildNet continues to improve family support and safety management services to enhance services provided to children and families.

Placement Resources and Process:

- ChildNet contracts with thirteen Child Placing Agencies (CPAs) which provide support to licensed foster parents. ChildNet has effectively leveraged community support to augment financial support to caregivers. ChildNet maintains monthly contact with providers to address issues and relay information to the child placing agencies.

- There is not a process for comprehensive and real-time knowledge of current licensed caregivers and foster home capacity due to manual spreadsheets that are distributed weekly to all staff and maintained individually, thereby prohibiting up-to-date provider capacity knowledge across all Intake and Placement specialists.

- ChildNet provides support to relative and non-relative caregivers through a contracted provider, Friends of Foster Children. ChildNet partners with this and other agencies, regularly cost sharing supports, services and goods.

- Foster parents expressed communication and collaborative issues regarding initial and subsequent placement of children. Based on the placement process described, there is a disconnect between the information provided to the child placing agencies and the information received by the foster parents.

- ChildNet uses a robust analytical process to determine annual CPA recruitment goals and retention efforts.

Child Welfare Practice:

- ChildNet has embraced the core tenets of the practice model and is focused on increasing the knowledge level among staff by using various training resources.

- Updates to CFOPs, Florida Administrative Code and Florida Statutes are disseminated in a number of ways including computer based learning, e-mail distribution, and classroom training.

- There is an understanding of trauma-informed care and family centered practice, including ongoing training to reinforce awareness and use of the concepts. ChildNet, along with its subcontracted agencies, are continuing to implement this within their daily practices.

Partnerships Relationships

- ChildNet leadership works closely with the Department's Region staff. Joint meetings are held, and discussions are transparent and collaborative.

- CLS and Legal Aid Society staff report quality working relationships with ChildNet staff, including the case management provider, CHS.

Community Relations

- ChildNet is clearly committed to supportive relationships within the community. ChildNet effectively works with local media outlets, community businesses, and partner agencies to advocate for needed goods and services for families and children.

- Community Alliance meetings are held on a regular basis and ChildNet staff participate to inform and solicit support and feedback from the community.

- ChildNet has partnered well with faith-based organizations to assist with foster parent recruitment efforts.

Administrative Findings

1. Subcontractor Requirements – 8 subcontract files were reviewed and found to be in compliance
2. Incident Reporting - During on-site review of 10 critical incidents one was found reported late into IRAS.
3. HIPPA Data Security–No findings identified
4. Information Security - During on-site review 14 employee files were reviewed for the latest security awareness training and signed security agreements forms, all were completed timely. Also reviewed was the provider's policy for information security standards which states the information security manager shall conduct annual internal security audits and evaluations to ensure appropriate users' rights and permissions which had not been completed as stated.

PERFORMANCE AT A GLANCE

The graphs on the following page are provided by Casey Family Programs. Casey Family Programs works in all 50 states, the District of Columbia, 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 most up-to-date ChildNet's performance is depicted later in this report.

Data Basics

ChildNet Palm Beach

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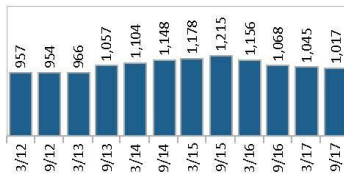
Legend: CBC | state | national

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

3/12	9/12	3/13	9/13	3/14	9/14	3/15	9/15	3/16	9/16	3/17	9/17
957	954	966	1,057	1,104	1,148	1,178	1,215	1,156	1,068	1,045	1,017

year over year change in the # in care

change 9/12-9/13, change 9/13-9/14, change 9/14-9/15, change 9/15-9/16, change 9/16-9/17
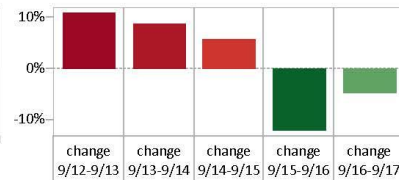
rate in care
(per 1,000, < age 18)
2012–2017
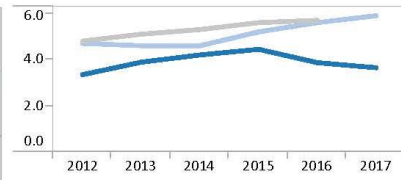
Safety

% children who experience repeat maltreatment within 6 months
2010–2016

% children who experience repeat maltreatment within 12 months
(note 2013-2014 data masked due to data quality)
2009–2015

Entries

# of children entering & exiting
(6 month entry cohorts ending on each date)
Entries / Exits
3/12–9/17

rate of children entering care
(per 1,000)
2012–2017
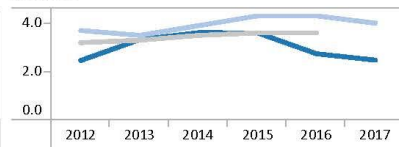
Placement

placement settings for children in care, by age (for all children in care on 9/30/2017)

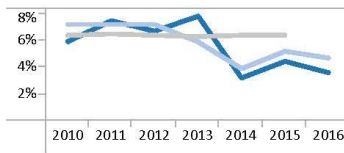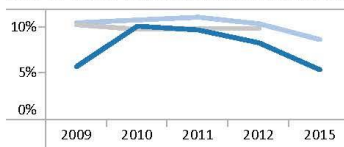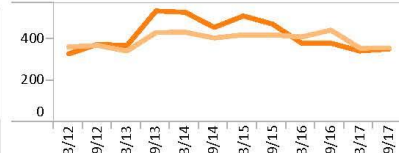Legend: Runaway, Congregate care, Foster care, Pre-adoptive home, Kinship care

Age	<1	1-5	6-12	13-17
Foster care (top)	66%	49%	49%	58%
			7%	22%
Kinship care	31%	48%	42%	17%
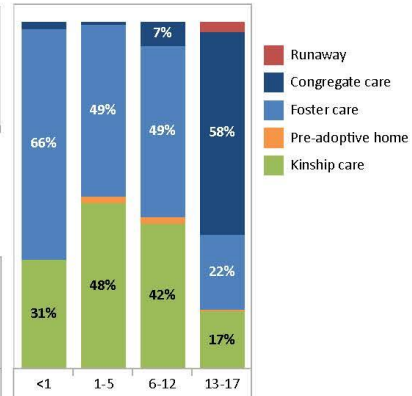
Timely & Stable Permanency

% permanency within 30 days of entering care
(6 month entry cohorts ending on each date)
3/12–3/17
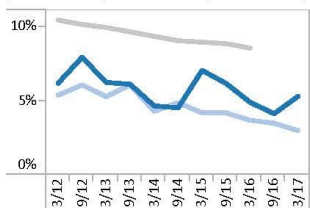
% permanency within 3-12 months of entering care
(6 month entry cohorts ending on each date)
3/12–9/16
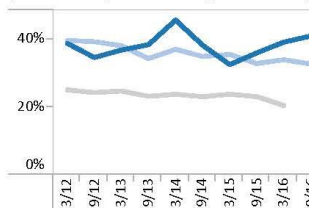
% permanency w/in 12 months for children in care 12-23 months
2012–2017
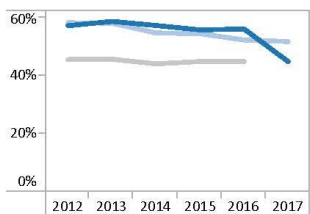
% re-entering care w/in 12 months of timely permanency
2011–2015
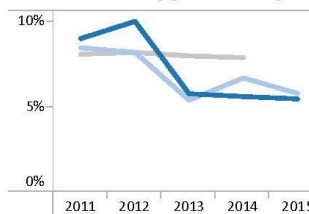
Children In Care 2+ Years (9/30/2017)

in care 2+ years

#	235
%	23%
state	17%
Nat'l (2016)	25%

% in care 2+ years at start of the year who achieve permanency w/in 12 months
2012–2017
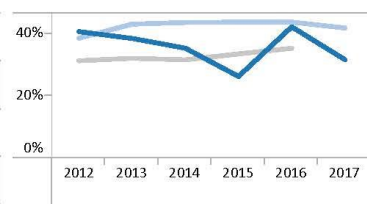
profile of current caseload in care 2+ years
(for groups that represent at least 2% of the total; by age, placement type and case plan goal)

	ages 2-12		ages 13-17	
	Reunif	Adopt	Adopt	APPLA
Congregate care		3%	15%	8%
Foster care	11%	27%	5%	3%
Kinship care		14%		
Pre-adoptive home		3%		

The monitoring process included a review of ChildNet's programmatic and administrative operations. In addition, the Contract Oversight Unit (COU) monitoring team reviewed fiscal monitoring reports to assess potential impacts on programmatic activities. The review process included a review and analysis of child welfare performance indicators and quality assurance data and other information obtained through supporting documents, interviews, surveys and focus groups. The monitoring process included an in-depth assessment of the system of care in seven critical areas of operation: (1) leadership and governance; (2) workforce management; (3) quality management and performance improvement; (4) placement resources and processes; (5) child welfare practice; (6) partnerships and (7) community relations. Additionally, HIPPA Data Security, Information Security, Subcontracts, and Incident Reporting were administratively reviewed.

The Department's Office of Revenue Management, Office of Community-Based Care (CBC)/Managing Entity (ME) Financial Accountability, Office of Child Welfare, and Southeast Region contract manager provided supplementary information. Documents reviewed and analyzed included: "A Comprehensive, Multi-Year Review of the Revenues, Expenditures, and Financial Position of All Community-Based Care Lead Agencies with System of Care Analysis", quarterly financial viability reports, system adoption initiative, service array assessment, and survey results. Additional information was gathered through interviews with ChildNet and DCF staff including leadership from the DCF Southeast Region, ChildNet management level and specialist level staff, case managers, case manager supervisors and the mangers/directors who supervise case management supervisors. Focus groups were held to obtain information from DCF child protective investigators, Children's Legal Services, Legal Aid Society, and foster parents.

The monitoring team consisted of Department of Children and Families CBC monitoring staff - Jessica Manfresca, Renee Gill and Brandon Atkins; Department of Children and Families staff from the Northwest Region – Necia Little and from the Suncoast Region – Kimberly Williams; and a representative from Community Based Care (CBC) organization – Gordy Piper (Big Bend CBC).

SECTION 2: SERVICE AREA DESCRIPTION

This section provides a snapshot of the community ChildNet serves, including demographic information, a description of the child welfare partners and information about all child fatalities, including those alleged to be the results of abuse and/or neglect and therefore investigated by the Department. ChildNet operates in Circuit Fifteen which is in the southeast part of Florida covering Palm Beach County.

Palm Beach County has traditionally been considered a wealthy county and as shown on Table 1, the median household income is $6,377 more that the state median. The county is the statewide percentage in adults obtaining their high school diploma as well as those with college degrees.

US Census Facts	Palm Beach	Florida
Median Household Income	$55,277	$48,900
Percent of population living in poverty	12.6%	14.7%
Percent of population over 25 years old with high school diploma	87.9%	87.2%
Percent of population over 25 years old with a college degree	34.2%	27.9%

https://www.census.gov/quickfacts/ (2012-2016 v2016)   Table 1

Palm Beach County is ranked #27 on the Florida Child Well-being Index. This ranking is based on a scale containing 16 indicators of child well-being and is completed annually by Casey Family Programs through Kid Count. See Appendix 1.

CHILD WELFARE PARTNERS

Child Protective Investigations and Children's Legal Services are conducted by the Department of Children and Families in Circuit Fifteen. Placement, Independent Living and Licensing operations are conducted by ChildNet. ChildNet subcontracts case management and adoption services with Children's Home Society of Florida (CHS) in Palm Beach County. Other subcontracted providers include:

- 4Kids of South Florida, Inc.
- Camelot Community Care, Inc.
- Cayuga Centers
- Henderson Behavioral Health
- JAFCO, Inc.
- Place of Hope, Inc.
- Vita Nova, Inc.
- Vision Quest National
- The Children's Place
- SOS Children's Village of South Florida, Inc.
- Mount Bethel Human Services, Inc.
- National Youth Advocate Program
- Pinnacle Family Services of Florida, LLC
- Kids In Distress
- Chrysalis Health, Inc.
- Children's Home Society of Florida (foster homes)
- Father Flanagan's Boys Town Florida, Inc.

There is one foster parent association in Circuit Fifteen, the Foster & Adoptive Parents Association – Palm Beach County. ChildNet also partners with the Children's Services Counsel (CSC) who provides supportive services to children and families in need of in-home parenting classes. The CSC funds the Legal Aid Society in its totality to provide Attorney Ad Litems to children in foster care. Unique to Circuit 15, the Legal Aid Society appoints an Attorney Ad Litem and a case manager staff to each child in the foster care system from birth to age twelve.

CHILD FATALITIES

INFANT AND CHILD MORTALITY RATES

Since 2012, the birth rate per 1,000 population has incrementally increased each year except 2016, while remaining under the statewide rate. The infant mortality rate per 1,000 live births increased from 2012 to 2015, then dropped by .6 to 4.3, lower than the rate noted in 2012. The infant mortality rate has consistently remained below the statewide rate.

Year	Birth Rate per 1,000 population Statewide Rate: 11.1	Infant Mortality Rate per 1,000 live births Statewide Rate: 6.1
2012	10.4	4.5
2013	10.5	4.6
2014	10.6	4.8
2015	10.8	4.9
2016	10.7	4.3

Source: http://www.flhealthcharts.com/FLQUERY/Birth/BirthRateRpt.aspx (Run date 12-19-17)   Table 2
and http://www.flhealthcharts.com/FLQUERY/InfantMortality/InfantMortalityRateRpt.aspx

CHILD FATALITY INVESTIGATIONS

Since 2009 to February 2018, there were a total of 221 child fatality investigations in Circuit 15, 24 of which had previous and/or current case management services at the time of the fatality investigation. Of the fatality investigations with prior or current case management history, the most common primary causes of death were:

- sleep related deaths (10)
- natural causes (3)
- other (3)
- inflicted trauma (2)
- accidental trauma (2)
- drowning (1)
- undetermined/investigation pending (3)

Child Fatality Investigations
Palm Beach County
Calendar Year 2009-2018
Number of Child Fatalities Investigated: 221

Number of Child Fatalites Investigated

Number of child fatalities with previous or current case management services at the time of death

Source: DCF Child Fatality Prevention Office
Note: 2017 Child Fatality Data is as of February 12, 2018 and includes partial data for CY 2018
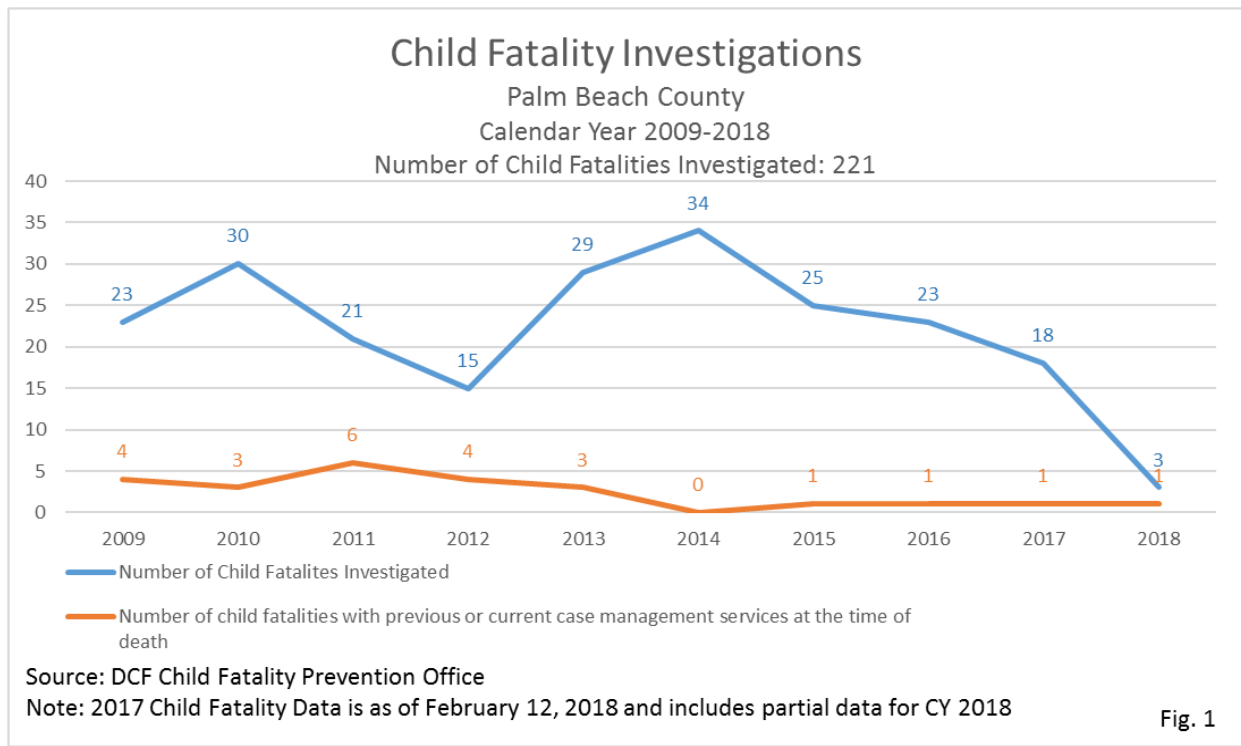
Fig. 1

There has been one fatality investigation of a child under the supervision of ChildNet since they became the lead agency in 2012. The child was prematurely born into an open case and passed the day after birth. The mother had a history of substance abuse issues and tested positive for cocaine and alcohol at delivery. All other child fatalities had prior CBC involvement, but no open case at the time of the fatality.

CIRRT teams were deployed to Palm Beach County on a total of four occasions, however, none of these CIRRTs involved children who were currently or historically received ChildNet services.

SECTION 3: AGENCY SUMMARY

ChildNet has been the Community Based Care Lead Agency for Palm Beach County since 2012 through an emergency procurement process, expanding their service area from Broward to include Palm Beach County. In 2014, a competitive procurement was conducted in which ChildNet was the only respondent. At that time, the invitation to negotiate by the DCF was withdrawn and through an exceptional purchase ChildNet remained the Community Based Care Lead Agency. Child and Family Connections, Inc. was the previous contracted provider responsible for child welfare services in Circuit 15. ChildNet is accredited by the Council on Accreditation (COA), an international, independent, nonprofit, human service accrediting organization that accredits the full continuum of child welfare, behavioral health, and community-based social services. ChildNet is COA accredited through February 28, 2019, in the following service areas:

- Adoption Services (AS)
- Family Foster Care and Kinship Care (FKC)
- Network Administration (NET)

NUMBER OF INVESTIGATIONS, REMOVALS AND CHILDREN SERVED

The number of reports accepted for investigation in Circuit Fifteen has increased over the past three years while the number of removals has decreased. The number of children receiving in-home services, out-of-home care services and young adult receiving services has decreased over the past three fiscal years. Children receiving Family Support Services has increased overall, but did decrease slightly from FY 15/16 to FY 16/17. The table below provides key data for investigations and services in Palm Beach County for FY 14/15, FY 15/16 and FY 16/17.

Child Protective Investigations and Child Removals (Palm Beach County)	FY 2014/2015	FY 2015/2016	FY 2016/2017
Reports accepted for Investigation by DCF *(Initial & Additional Reports)* [1]	10,427	10,469	10,778
Children Entering Out-of-Home Care [2]	1,024	809	682
Children Served by ChildNet Palm Beach[3]	**FY 2014/2015**	**FY 2015/2016**	**FY 2016/2017**
Children Receiving In-Home Services	1,612	1,389	1,194
Children Receiving Out of Home Care	2,074	1,965	1,791
Young Adults Receiving Services	330	313	309
Children Receiving Family Support Services	323	482	455

Data Sources: Table 3

[1] Child Protective Investigations Trend Report through June 2017 (run date 1-2-2018)
[2] Child Welfare Dashboard: Child Welfare Trends/Children Entering Out-of-Home Care (run date 1-3-2018)
[3] FSFN OCWDRU Report 1006 Children & Young Adults Receiving Services by CBC Agency (run date 1-2-2018)

FINANCIAL VIABILITY REPORT SUMMARY

The Office of CBC/ME Financial Accountability performed financial monitoring procedures, based on the DCF 2017-18 CBC-ME Financial Monitoring Tool for Desk Reviews, of ChildNet, Inc. – Palm Beach. The desk review period was for the period of July 1, 2017 through September 30, 2017.

Based on the summarized results, there were five findings and three observations made during the review. The findings included non-payroll related disbursement testing and FSFN Review. Recommendations were made for each finding as defined in the desk review. Three observations were made pertaining to non-payroll related disbursement testing and additional financial requirements. Further recommendations were made for each observation as defined in the desk review.

For further details, please see the complete fiscal report – 2017-18 Desk Review Financial Monitoring Report ChildNet, Inc. - Palm Beach

Since FY14-15, ChildNet has carried forward a deficit as indicate below. This deficit is largely attributed to "Other" expenditures. For ChildNet's core services, they operated with a deficit in FY 14/15 and FY 15/16, however, for FY 16/17 ChildNet operated with a small surplus and this is anticipated to continue with their core services for FY 17/18. Overall, ChildNet is maintaining an operational deficit despite allocation of Risk Pool and Back of the Bill funding in FY 15/16 and Back of the Bill funding in FY 16/17 (see Table 5).

Comparison of Funding & Actual Expenditures by Fiscal Year					
ChildNet Palm Beach					
DCF Contract Funds Available (by Fiscal Year)	**FY13-14**	**FY14-15**	**FY15-16**	**FY16-17**	**FY17-18**
Core Services Funding	$29,307,301	$30,337,296	$32,139,626	$32,287,036	$32,432,855
Other**	$10,677,193	$15,878,945	$11,149,905	$12,016,449	$12,481,424
Total Initial Appropriation	**$39,984,494**	**$46,216,241**	**$43,289,531**	**$44,303,485**	**$44,914,279**
Risk Pool Allocation			$3,900,000		
CBC Operational Costs from Back of the Bill			$1,838,032	$1,350,000	
MAS from Back of the Bill			$120,897		
Carry Fwd Balance from Previous Years	$536,474	-$3,101,614	-$1,838,032	-$2,052,518	-$1,602,026
Total at Year End	**$40,520,968**	**$43,114,627**	**$47,310,428**	**$43,600,967**	**$43,312,253**
** 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 4

SECTION 4: PERFORMANCE INDICATORS AND QUALITY ASSURANCE DATA

This section provides a picture of ChildNet's performance as indicated by data indicators that are used to assess how well ChildNet 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 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).

- 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 use the same review instrument as the Child and Family Services Review (CFSR) tool.

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, ChildNet is performing well in most areas, but opportunities for improved performance exist. During FY 2016/2017, ChildNet has met or exceeded their established contract target, federal standards and statewide performance in eight of the thirteen measures including:

- M02: % of children who are not abused/neglect 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
- M05: % of children exiting to a permanent home w/in 12 months
- 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
- M09: % of children in foster care who receive a medical service in the last 12 months
- M11: % of young adults exiting foster care at age 18 completed/ are enrolled in secondary education

All of these measures were also successfully met by ChildNet in FY 15/16. The adoption goals for the past two fiscal years were not met by five and twenty-seven adoptions respectively. In the remaining four measures, ChildNet did not meet established targets for FY 16/17. ChildNet Inc. is trending positively on the following measures:

- M01: Rate of abuse or neglect per day while in foster care
- M07: % of children who do not re-enter care w/in 12 months of moving to a permanent home

The remaining measures include children receiving dental services within the last seven months (M10) and percent of sibling groups where all siblings are placed together (M12). These measures have trended negatively between the past two fiscal years. Children receiving dental services decline by .7% over the past two fiscal years. However, the individual quarters indicate that this percentage has improved and is now at 95% in the third quarter of the FY 17/18 (Fig. 13). In contrast, sibling groups remaining together has continued to trouble ChildNet and has remained below the goal of 65% or higher for the majority of the past two fiscal years. See Figure 12 for details.

CBC SCORECARD

SC	ChildNet Palm Beach Performance Measures Contract IJ706	CBC Contract Measure Targets	Federal National Standard (Performance of Other States)[1]	Statewide Performance (FY 2016/2017)	ChildNet Palm Beach	
					FY 2015-2016 July 1, 2015-June 30,2016	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	🔴 9.96	🔴 10.79
2	Percent of children who are not neglected or abused during in-home services *(Scorecard)*	>95%		97.20%	🟢 98.70%	🟢 97.70%
3	Percent of children who are not neglected or abused after receiving services *(Scorecard)*	>95%		95.60%	🟢 96.30%	🟢 95.10%
4	Percentage of children under supervision who are seen every thirty (30) days *(CBC Scorecard)*	>99.5%		99.80%	🟢 99.90%	🟢 99.90%
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%	🟢 46.60%	🟢 47.20%
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%	🟢 59.10%	🟢 53.80%
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%	🔴 87.70%	🔴 88.30%
8	Children's placement moves per 1,000 days in foster care *(Scorecard)*	<4.12	<4.12 (2.6%-8.7%)	4.33	🟢 3.05	🟢 3.53
9	Percentage of children in out-of-home care who received medical service in the last twelve (12) months. *(Scorecard)*	>95%		97.14%	🟢 98.61%	🟢 97.38%
10	Percentage of children in out-of-home care who received dental services within the last seven (7) months. *(Scorecard)*	>95%		92.70%	🟢 95.40%	🔴 94.70%
11	Percentage of young adults in foster care at age 18 that have completed or are enrolled in secondary education *(Scorecard)*	>80%		87.60%	🟢 95.90%	🟢 93.10%
12	Percent of sibling groups where all siblings are placed together *(Scorecard)*	>65%		63.90%	🔴 58.00%	🔴 57.50%
	Number of children with finalized adoptions *(DCF Dashboard run date 10/17/18)*	183/201			178	174

Source: CBC Scorecard-All Measures-Run 8/4/2017   Table 5

CHILD SAFETY

The graphs and tables on the follow pages depict ChildNet's performance related to 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 case practice assessment

RATE OF ABUSE IN FOSTER CARE

Rate of abuse or neglect per day while in foster care (Scorecard Measure M01): The graph (Fig. 2) 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.

From FY 15/16 to FY 16/17 Q3 ChildNet experienced an increase in the rate of abuse per 100,000 days in foster care. Since the third quarter of FY 16/17 ChildNet has improved in performance and Fig. 2 illustrates a positive trend in performance on this measure. ChildNet has exceeded the target and statewide average in quarters two and three of FY 17/18.

Rate of abuse per 100,000 days in Foster Care

Source: FSFN/Scorecard — State Average — Childnet Palm Beach ----- Target — Fig. 2
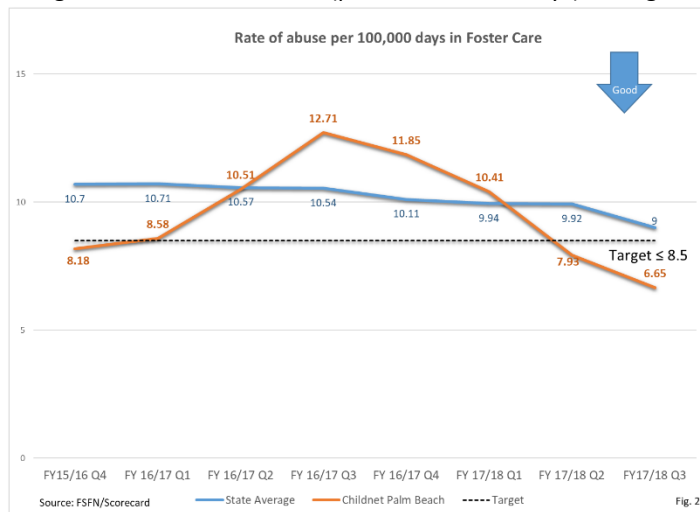
Additionally, ChildNet has shown improvement from FY15/16 to FY16/17 in CQI measure three (Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care?) with 94.81% of cases reviewed showing this as a strength. Performance in this measure is also above the Federal Program Improvement Plan (PIP) Goal of 77.7%. See table 6.

NO MALTREATMENT AFTER FAMILY SUPPORT SERVICES

Percent of children not abused or neglected within six months of termination of family support services.
The graph to the right (Fig. 3) represents the percentage of children who did not have a verified maltreatment during the report period. Since the second quarter of FY 16/17, this measure as steadily increased and has surpassed the statewide average in the last quarter.
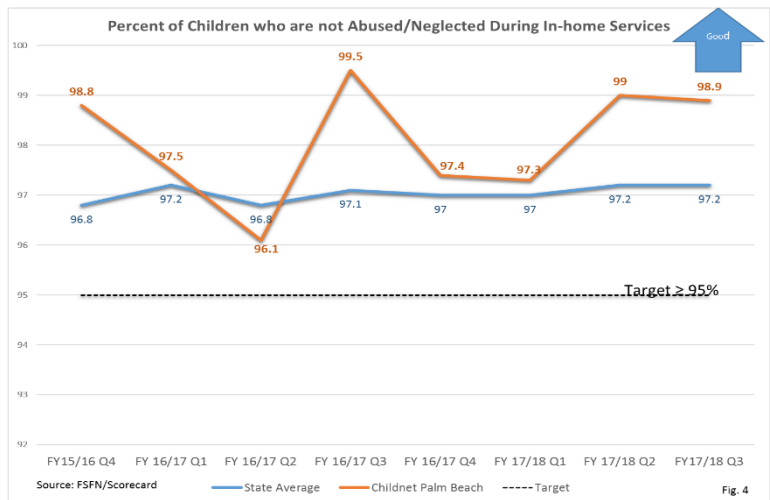

Percent of Children Not Maltreated within Six Months of Termination of Family Support Services

Source: FSFN-Children with no verified maltreatment within six months of Termination of Family Support Services (Data load 3/9/2018)

Fig. 3
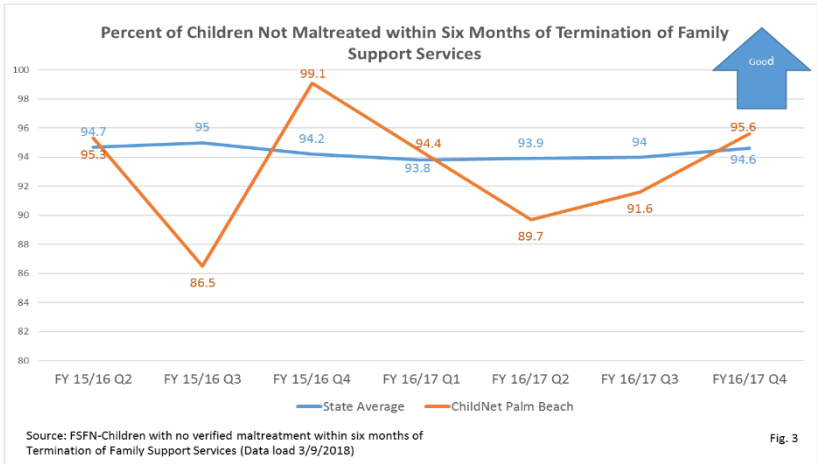
NO MALTREATMENT DURING IN-HOME SERVICES

Percent of children not abused or neglected while receiving in-home services (Scorecard Measure M02): The percentage of in-home service episodes during the report period where the child did not have a verified maltreatment while receiving the services is depicted in Fig. 4. This indicator measures whether the CBC was successful in preventing subsequent maltreatment of a child while the case was open, and the CBC was providing in-home services to the family.

ChildNet's performance has consistently exceeded the target in this measure for the past eight quarters.

Rapid Safety Feedback (RSF) data revealed that ChildNet performed above the statewide average performance in RSF 4.1 by ensuring the safety plan in place was sufficient to control danger threats and protect the child. ChildNet has shown a positive upward trend in performance on CQI Item 3 in the past year. ChildNet's performance has surpassed the federal PIP goal and is only .19% shy of reaching federal and state expectations in this area, which is related to making concerted efforts to address risk and safety concerns.

Percent of Children who are not Abused/Neglected During In-home Services

Source: FSFN/Scorecard

Fig. 4

NO MALTREATMENT AFTER RECEIVING SERVICES

Percent of children with no verified maltreatment within six months of termination of supervision (Scorecard Measure M03): Ensuring children are not re-maltreated following termination of supervision is a good

measure of the effectiveness of the services provided. Over the past eight quarters, ChildNet has fluctuated around the target and the statewide average, exceeding both in two of the most recent three quarters. See Fig. 5. ChildNet has consistently performed well on CQI Item 2 (Did the agency make concerted efforts to provide services to the family to prevent children's reentry into foster care or re-entry after reunification?), remaining at 100% for the past two fiscal years, surpassing the Federal PIP and Federal and State Expectation.

Percent of Children who are not Neglected or Abused after Receiving Services

Source: FSFN/Scorecard — State Average — Childnet Palm Beach ----- Target   Fig. 5
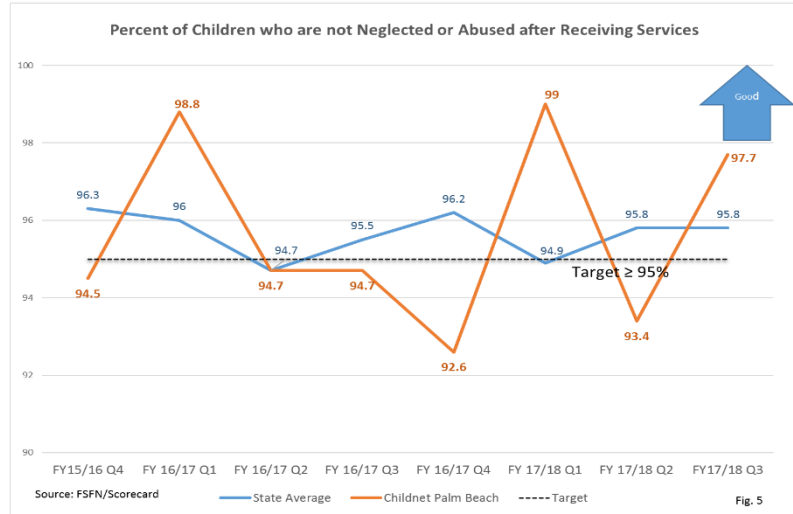
CHILDREN SEEN EVERY 30 DAYS

Children under supervision who are seen every thirty days (Scorecard Measure M04): Fig. 6 depicts the rate at which children are seen every thirty days while in foster care or receiving in-home services during the report

period. ChildNet has consistently maintained performance above the target and at or above the statewide average for the past six quarters. Data from RSF 2.1 (100%) and CQI Item 14 (96.10%) indicates that the frequency and quality of visits between the case manager and child are sufficient to address issues pertaining to safety, permanency and well-being and evaluate/promote progress toward case plan outcomes. See Tables 7 and 8.

Percent of Children Under Supervision who are Seen Every 30 Days

Source: FSFN/Scorecard — State Average — Childnet Palm Beach ----- Target   Fig. 6
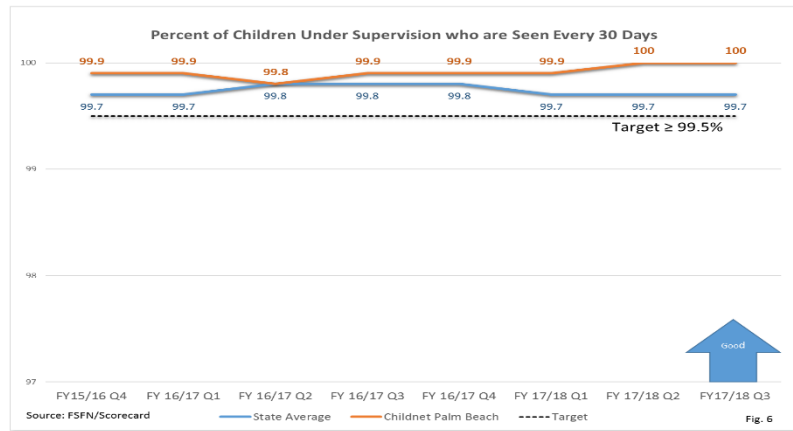
QA CASE REVIEW DATA

The table below provides the current performance in items related to child safety that are based on qualitative case reviews completed. All five items included in this report are above the statewide average.

Quality Assurance - Rapid Safety Feedback Item	ChildNet Palm Beach n=40	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?	● 62.5%	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?	● 100.0%	62.7%
RSF 4.1: Is a sufficient Safety Plan in place to control danger threats to protect the child?	● 91.7%	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	ChildNet Palm Beach	ChildNet Palm Beach	Percent Improvement	Statewide CQI/QA Performance [1]	2016 Statewide Federal Child & Family Service Review[2]	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=65	FY 2016/2017 n=77		n=1,290	4/1/16-9/30/16 n=80		
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?	100.00%	● 100.00%	⬆ 0.0%	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?	84.62%	● 94.81%	⬆ 10.2%	77%	71.3%	77.7%	95.0%

Source: QA Rapid Safety Feedback; Federal Online Monitoring System   Table 6

[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.

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. When helping children and families achieve permanency, child welfare professionals must balance an array of issues, including needs of the child and the family, as well as legal requirements. Helping children achieve permanency in a timely manner is extremely important to children as one year in a child's life is a significant amount of time with lasting implications. The graphs and tables on the follow pages depict ChildNet's performance related to permanency in the following areas:
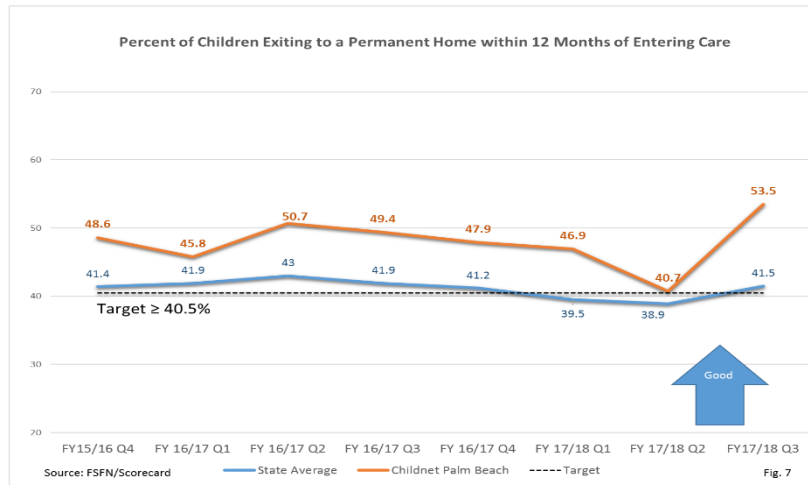
1. Permanency in 12 months
2. Permanency in 12-23 months
3. Permanency after 24 months
4. Placement stability
5. Percent not re-entering care

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 months of entering care (Scorecard Measure M05): Ensuring children safely achieve permanency within twelve months of entering foster care is of utmost importance. ChildNet performed above the statewide average and target for the past eight quarters in the percentage of children exiting foster care to a permanent home within twelve months of entering care. In the second quarter of FY 17/18 ChildNet experienced a 6.2% decline, with a rebound in the following quarter of 12.8%, standing at 53.5% in Quarter Three, which is 13.5% above the statewide target.

While there are many quality factors that impact permanency, ChildNet saw a drop in ratings associated with establishing appropriate permanency goals in a timely manner (CQI Item 5), falling from 92.68% to 89.58%, though still above the established PIP goal of 82.1%. ChildNet also saw a drop in ratings associated with concerted efforts to achieving permanency (CQI Item 6), falling from 92.68% to 85.42%, though again, still above the established PIP goal of 75.4%.

Fig. 7

PERMANENCY IN 12 – 23 MONTHS

Percent of children exiting foster care to a permanent home in twelve months for children in foster care twelve to twenty-three months (Scorecard Measure M06): Fig. 8 provides the percentage of children in foster care, as of the beginning of the report period, whose length of stay is between twelve and twenty-three months who achieved permanency within twelve months. ChildNet's performance in this area has remained above the statewide target, but fluctuated around the statewide average. In the past eight quarters, ChildNet has exceeded both target and average 50% of the time. In the most recent three quarters, ChildNet has improved steadily, ending at 56.6% for the most recent quarter.

Fig. 8
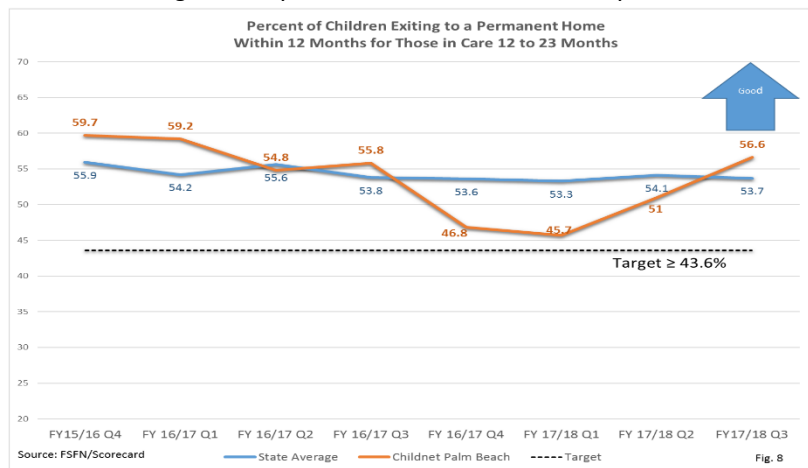
PERMANENCY AFTER 24 MONTHS

For children in care twenty-four or more months, ChildNet is able to achieve permanency within an additional twelve months at a lower rate than the statewide average. From June 2016 through the end of the third quarter of FY16/17, ChildNet achieved permanency at a lower rate than the statewide average.

Percent of Children in Care 24+ Months Who Achieved Permanency Within an Additional 12 Months

Source: OCWDRU Report 1196 - Run date: 3/19/2018

Fig. 9
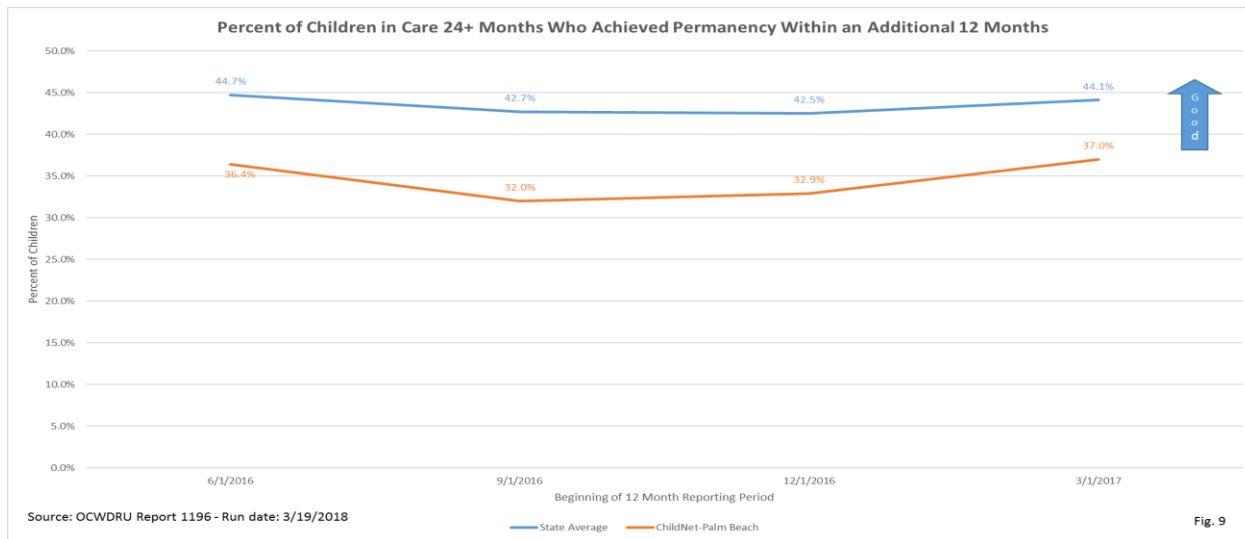
PLACEMENT STABILITY

Placement moves per one-thousand (1,000) days in foster care (Scorecard Measure M08): Fig. 10 depicts the rate at which children change placements while in foster care during the report period. ChildNet has remained under the target and statewide averaged for six of the past eight quarters, though the most recent two quarters showed performance exceeding the target and statewide average with a negative trend. CQI Item 4 evaluates the stability of placements and the quality of decisions made around placement moves. There has been improvement in this measure. See Table 7. Section Nine contains additional information related to placement moves and trends being addressed through scorecard Champions.

Placement Moves per 1,000 Days in Foster Care

Source: FSFN/Scorecard

Fig. 10
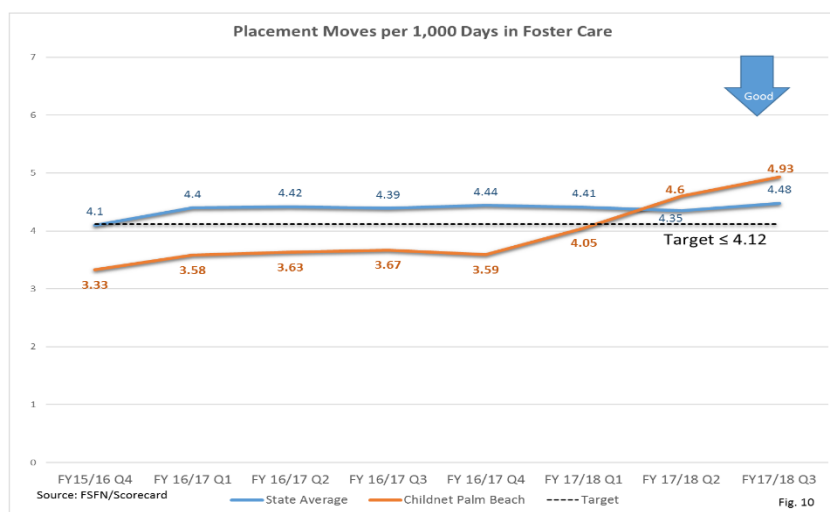
PERCENT NOT RE-ENTERING INTO CARE

Percent of children who do not re-enter foster care within twelve months of moving to a permanent home Scorecard Measure (Scorecard Measure M07): For a specific cohort of children who exited care within twelve months of entering care, Fig 11 shows the percentage who did not re-enter care during the subsequent twelve- month period. Over the past eight quarters, ChildNet's performance has fluctuated, though showing more consistency in the last three quarters. ChildNet has exceeded the national target and statewide average for the past three quarters. Performance in related CQI Items 2 & 3 are above the federal PIP goal. See Table 6.
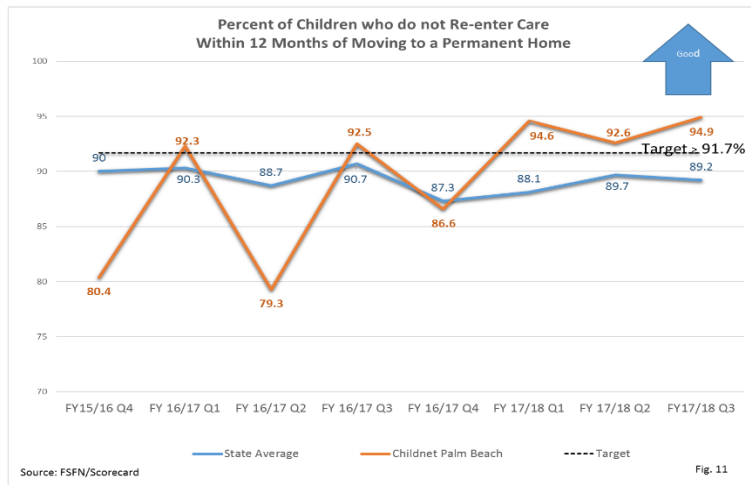
Percent of Children who do not Re-enter Care Within 12 Months of Moving to a Permanent Home

Source: FSFN/Scorecard

State Average — Childnet Palm Beach — Target

Fig. 11

SIBLINGS PLACED TOGETHER

Percent of sibling groups where all siblings are placed together (Scorecard Measure M12): 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 is represented in Fig. 12. As the graphic shows, ChildNet continues to experience difficulty in achieving adequate performance on this measure, not meeting the target or statewide average for the past eight consecutive quarters. However, ChildNet's performance in cases included in the most recent sample for CQI Item 7 shows that ChildNet has

Percent of Sibling Groups Where all the Siblings are Placed Together

Source: FSFN/Scorecard

State Average — Childnet Palm Beach — Target

Fig. 12
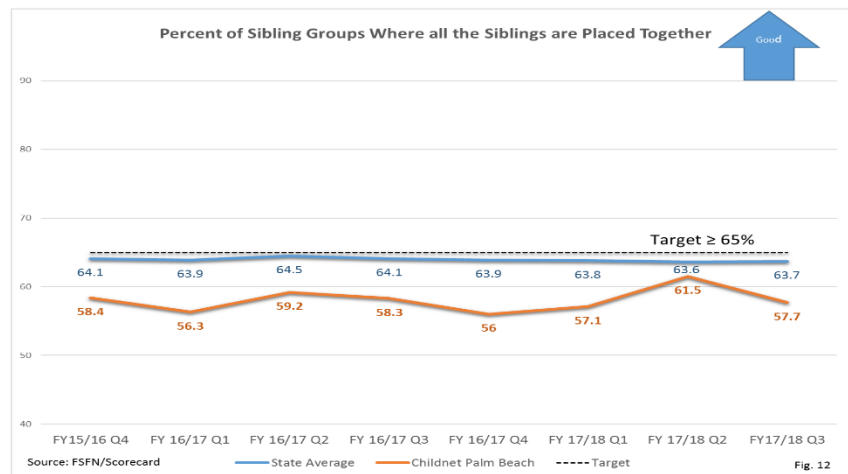
been making concerted efforts to keep siblings placed together. Performance on CQI Item 7 was above the statewide average performance for the past two fiscal years.

QA CASE REVIEW DATA

The table below provides ChildNet's current performance based on RSF/CQI case reviews related to permanency. Of the eleven permanency items included in this report, three have a PIP target goal. ChildNet's performance is above the PIP goal in all three measures (CQI Item 4, 5 & 6). FY16/17 performance in the remaining eight measures is above the average statewide performance. There are two items in which ChildNet declined in performance (CQI Item 5 and 6) from FY 15/16 to FY 16/17. See Table 7.

Quality Assurance Item	ChildNet Palm Beach n=40	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?	🟢 100.0%	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?	🟢 83.8%	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?	🟢 71.9%	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	ChildNet Palm Beach	ChildNet Palm Beach	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]
Assessment Based on Case Reviews by Child Welfare Professionals	**FY 2015/2016 n=65**	**FY 2016/2017 n=77**					
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)?	85.37%	🟢 93.75%	⬆ 8.4%	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?	92.68%	🟢 89.58%	⬇ -3.1%	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?	92.68%	🟢 85.42%	⬇ -7.3%	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?	82.61%	86.36%	⬆ 3.8%	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?	80.65%	88.57%	⬆ 7.9%	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 friends?	95.12%	95.65%	⬆ 0.5%	79.0%	82.0%	None	95.0%
CQI Item 10: Did the agency make concerted efforts to place the child with relative when appropriate?	86.84%	100.00%	⬆ 13.2%	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?	65.63%	86.11%	⬆ 20.5%	61.0%	60.0%	None	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 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.

WELL-BEING

Ensuring that children's physical, developmental, 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. The graphs and tables on the follow pages depict FFN'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. CQI case practice assessment

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 months. ChildNet has performed above the statewide average, but below the target for five of the past eight quarters. After taking a 4.6 % dip from the first to the second quarter of FY 17/18, they have rebounded to meet the target at 95% for the most recent quarter. Data gathered from the most recent CQI reviews for Item 17 shows a little over 17% increase in performance in this area. Foster Parent survey responses further support ChildNet is ensuring children are getting needed dental care as 80.88% of respondents report that the children placed in their homes receive dental services, including preventative care, every time. Continued improvement in this measure is necessary to achieve the goal of ensuring children in care receive a dental service at least once in the previous seven months.

Fig. 13
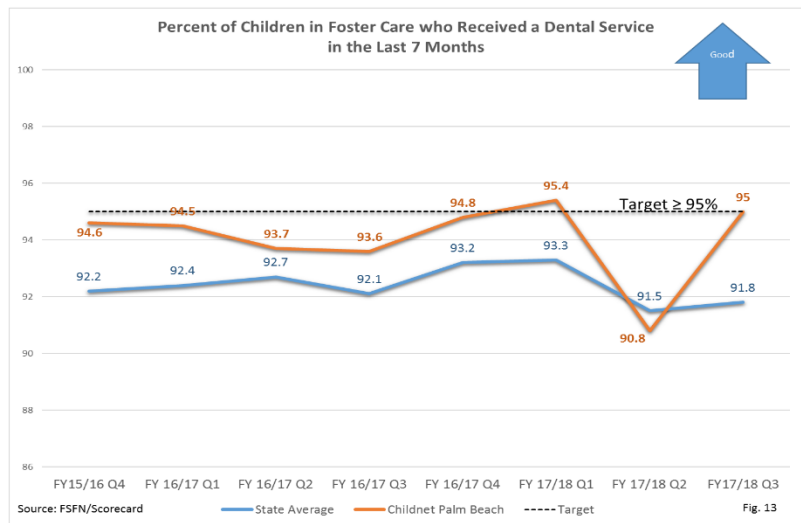
CHILDREN RECEIVING MEDICAL CARE

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 months. ChildNet has exceeded the target of 95% in all of the past eight quarters. ChildNet has also remained above the statewide average with the exception of Q1 of FY 16/17, when performance fell below the statewide average by .6%. CQI Item 17 shows a little over 17% increase in performance in this area. See Table 8. Foster Parent survey responses further support ChildNet's performance in

this area as 75.4% of respondents report that the children placed in their homes receive medical services, including preventative care, every time.

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

Source: FSFN/Scorecard — State Average — Childnet Palm Beach -----Target   Fig. 14
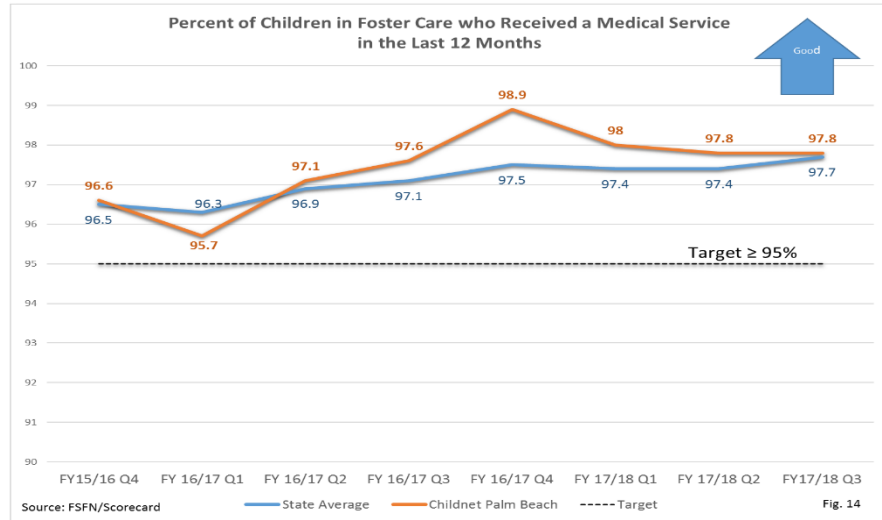
YOUNG ADULTS ENROLLED IN SECONDARY EDUCATION

Percentage of young adults who have aged out 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 birthday. ChildNet's performance in this measure has improved from below the statewide average to surpassing it over the last eight quarters. ChildNet has consistently remained above the target of 80%. Currently, 100% of ChildNet's young adults are enrolled in secondary education, vocational training, or adult education as they reach age of majority.
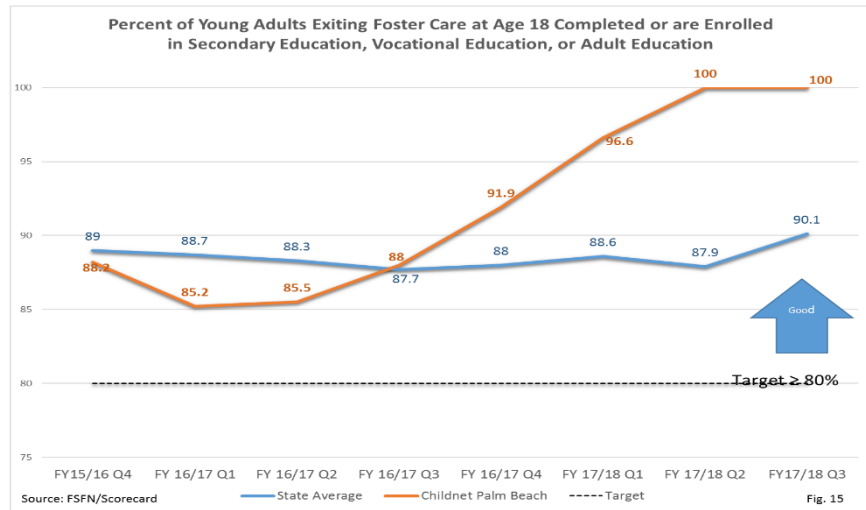
Percent of Young Adults Exiting Foster Care at Age 18 Completed or are Enrolled in Secondary Education, Vocational Education, or Adult Education

Source: FSFN/Scorecard — State Average — Childnet Palm Beach -----Target   Fig. 15

QA CASE REVIEW DATA

The table below provides ChildNet's current performance based on RSF/CQI case reviews related to well-being. Of the nine well-being items included in this report, six have a PIP target goal. ChildNet is exceeding the PIP goal for all six measures. ChildNet is performing above the statewide average in the remaining three measures. See Table 8.

Quality Assurance - Florida CQI Item *Assessement Based on Case Reviews by Child Welfare Professionals*	ChildNet Palm Beach FY 2015/2016 n=65	ChildNet Palm Beach FY 2016/2017 n=77	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 children to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?	92.31%	98.70%	⬆ 6.4%	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 parents to identify the services necessary to achiever case goals and adequately address the issues relevant to the agency's involvement with the family?	85.96%	95.16%	⬆ 9.2%	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 foster parents to identify the services necessary to achiever case goals and adequately address the issues relevant to the agency's involvement with the family?	94.44%	100.00%	⬆ 5.6%	88.0%	51.3%	58.4%	95.0%
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?	89.06%	100.00%	⬆ 10.9%	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?	86.15%	96.10%	⬆ 9.9%	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?	43.86%	80.65%	⬆ 36.8%	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?	85.71%	90.91%	⬆ 5.2%	84%	92.0%	None	95.0%
CQI Item 17: Did the agency address the physical health needs of children, including dental needs?	62.79%	80.00%	⬆ 17.2%	77%	85%	None	95.0%
CQI Item 18: Did the agency address the mental/behavioral health needs of children?	79.49%	86.36%	⬆ 6.9%	75%	72%	None	95.0%

Source: 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.

SUMMARY

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. CBCs have the flexibility to create programs and services that meet the needs of children and families. CBCs should continuously monitor and analyze the success of programs they purchase or develop. This analysis should go beyond monitoring contract outcomes to also include analysis of outcomes for children and families related to safety, permanency and well-being. Prior to modifying, implementing or purchasing a program the CBC should ensure there is research supporting the use of this program for the child welfare population. Currently ChildNet – Palm Beach has a rating of "3" in Family Support Services and a rating of "2" in Safety Management Services. 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.
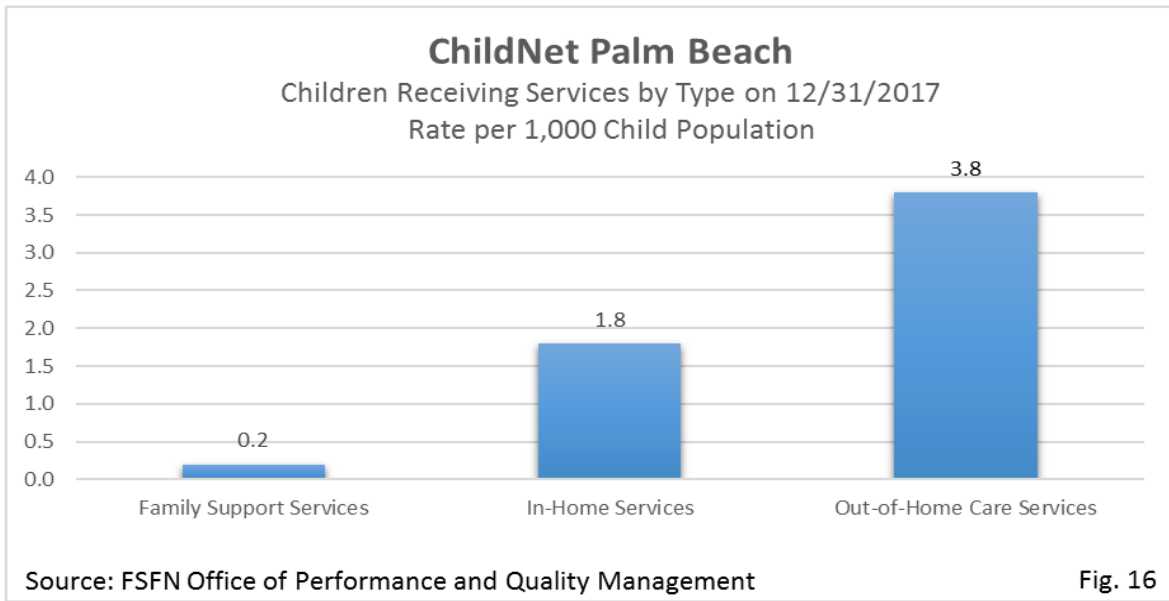
Family Support Services

ChildNet partnered with the Department of Children and Families in assessing what program would best suit the needs of the child protective investigators in ensuring children and families received adequate and appropriate care to supplement parental capacities and enhance usage of community resources. Through this assessment, Boys Town was subcontracted to provide two tracks of services to families involved. Both tracks provide for engagement and supports through intensive case management, but one includes behavioral therapy. Boys town uses the Boys Town Model involving teaching life-changing skills, building healthy familial relationships, empowering children and families to make good decisions for success, caring for children in a family-style environment, and supporting families in practicing a faith to give them stability and guidance. ChildNet and child protective investigations continue collaborative efforts to develop and enhance these services as changes or needs arise. The Children's Services Counsel also provides for a wide array of community prevention services which are available to families that are not under Childnet's supervision. These services can be located on the Children's Services Counsel website.

Safety Management Services

ChildNet primarily subcontracts through Henderson Behavioral Health for the provision of Safety Management Action Response Teams or SMART. SMART is designed to provide intensive in-home supports, management of the

safety plan, linkage to community resources, and peer supports. ChildNet also subcontracts with Camelot Community Care to provide Functional Family Therapy and Family Intervention Teaming. These services address prevention of out-of-home care placement, therapeutic needs of children and families in which the family's protective capacities need enhancements, and therapeutic interventions for teens. SMART has resulted in a lower number of removals once assigned. Further expansion of this program is anticipated as the substance abuse rate continues to rise and the need for specialized intervention becomes greater.

ChildNet Palm Beach
Children Receiving Services by Type on 12/31/2017
Rate per 1,000 Child Population

Source: FSFN Office of Performance and Quality Management   Fig. 16

While the number of reports for investigations continues to rise in Circuit 15, removals have declined over the past three fiscal years. ChildNet's continued collaborative efforts with both the consumers and providers of these respective services will ultimately have a positive impact on further reducing the number of removals and overall number of children in out-of-home care.

ANALYSIS

ChildNet continues to develop and modify existing programs to meet the needs of the community for family support and safety management services. Collaborative efforts with the Department's Child Protective Investigations and community providers subcontracted to provide these services have diminished the number of children entering out-of-home care. ChildNet may seek re-evaluation of their current SMS rating based on quantitative data regarding entry from the SMART program. Re-evaluation of Family Support Services may also be warranted.

SECTION 6: LEADERSHIP AND GOVERNANCE

SUMMARY

This category focuses on alignment of the Department's Mission/Vision/Values to those of ChildNet and includes an assessment of resource and risk management, evaluation of the Chief Executive Officer, and leadership development.

ChildNet is committed to protecting children, providing services and using family centered, strength based and needs driven approaches within the communities served. While the Mission/Vision/Values are reflective of the

Department's own, ChildNet in Palm Beach County has faced some challenges in drawing in the community, as a whole, to be a part of these goals. ChildNet continually strives to get the message out to their own staff, subcontracted providers, and the entire community. Ensuring the most vulnerable are cared for requires the community's acceptance, inclusion, participation and continued support for the system of care. Paramount for ChildNet has been filling the vacant CEO position through an extensive and community inclusive process. An Interim CEO has filled this position for approximately the past six months. ChildNet included the community in the new CEO selection to ensure the selection of the best applicant for the position and community backing for the agency as a whole. Finalists were interviewed on April 27, 2018 during the Board Meeting, as noted on ChildNet's website with time, location and conference call in line for the community to attend. The CEO chosen was the prior Interim CEO. It was evident throughout the interview process that those associated with ChildNet and the contracted providers message mission/vision/values throughout. However, further communication between ChildNet, the child placing agencies, and foster parents is needed to ensure the full system of care is supported and addressed.

Upon employment, the CEO will be formally evaluated on an annual basis. This evaluation consists of a self-evaluation, followed by the Board of Directors' evaluation. The Governance committee vets the evaluations and produces the final evaluation. The CEO will be ranked on a scale of 1-4 for criteria in twenty categories. These categories may be modified based on the CEO's annual goals, but may include finance management, children in care, performance measures, quality measures and communication with the legislature. The CEO is a long-standing figure within ChildNet. Much of the staff at ChildNet is seasoned and tenured and while there has been a lack of formal succession planning, there have been initiatives for executive leadership development. Staff are encouraged to train with other specialties and there are informal "acting" efforts in which agencies have encouraged growth from within.

The Board of Directors is made up of several community leaders from a broad spectrum of agencies. Members are welcomed to join a very active and involved Board and are required to go through an orientation to the system of care, a Board orientation, and job shadowing. The Board of Directors has pushed and succeeded in accomplishing the accreditation process through COA and have used COA as the platform for shaping their governance model. The Board is further supported through several committees in which information is gathered, processed and subsequently presented to the Board of Directors on a monthly basis. Currently, the Board meeting agendas cover finances, all committee reports, and a public comment section.

One of ChildNet's difficulties has been aligning their financial matters to operational needs. This was recognized by the Board of Directors as one of the key objectives for improved performance. The agency received Back of the Bill funding as well as Risk Pool funds in FY 15/16 and though it helped, the allocation of funds was not enough to correct the full deficiency. ChildNet has been proactive in addressing the financial deficit and the Board is informed on a monthly basis as to the progress being made. Along with several other committees, the finance committee produces a report each month scaled for ease and usefulness. ChildNet reports that within the last year sufficient progress has been made to address a significant deficit to something more manageable.

The Quality committee addresses all performance and qualitative review processes, review of policies and procedures, and incident reports when there is a risk potential. When there is a potential risk noted all Board members are notified immediately. A complete and comprehensive roll-up of all risk related matters, events, and incidents are provided to the Board. The Board recently added a Legal committee to look at risk incidents, lawsuits, or other potential risk factors for further analysis.

ChildNet has leveraged their relationships with local foundations, individuals within the community, and the application of grants to subsidize their need for and provision of services to all families involved in the child welfare system. Fundraising activities include annual giving solicitations, corporate fundraising, and personal fundraising with a focused target audience. Further, ChildNet facilitates an annual luncheon designed to raise unrestricted funds. ChildNet has been awarded several grants including:

- Ballen Isles Charities Foundation
- Lost Tree Village Charity Foundation
- Department of Children and Families
- AT&T Aspire – This is two separate grants, one for FY 16/17 and one for FY 18/19.
- Pediatric Associates

ANALYSIS

ChildNet has succinct and aligned mission/vision/values with the Department and is continually messaging it through all contacts, meetings, and discussions. They have developed financial resources to supplement current service needs and continue to involve the community through fundraising, advertisements, and grant applications. There is a formal process to evaluate the CEO's efficacy on an annual basis, with an opportunity to structure the process in a more formal fashion. This would also enable the board to proactively engage partnerships for feedback on the efficacy and partnership relations of the CEO. ChildNet maintains an active and integrated Board of Directors. Although there is a lack of formalized executive level succession planning, there are clear actions being taken for frontline leadership development. Quality performance and financial sustainability are at the forefront and there is a comprehensive plan to process and mitigate risk in all formats.

SECTION 7: WORKFORCE MANAGEMENT

SUMMARY

This category focuses on workforce management, training, and development of case management supervisors.

ChildNet subcontracts with Children's Home Society CHS to provide case management services in Palm Beach County with 79 case managers and a five to one supervisory ratio. At the time of this monitoring, CHS had no vacancies. The ChildNet Board recently hired a consultant who completed a ChildNet Workforce and Workplace Analysis Action Summary which evaluated the workforce and found that the common workforce grievances surrounded communication, fairness, leadership training, and a disconnect between the two counties (Broward and Palm Beach). The consultant garnered feedback via surveys and focus groups. The survey will be repeated six months from the initial survey dissemination. Based on this feedback, ChildNet leadership has become more engaged with the workforce by being more present and 'walking the floor,' interacting with front line staff, and attending staff meetings in both counties. ChildNet Leadership acknowledge that the financial strain felt by the agency and staff due to a 2014 1% salary cut to all ChildNet and CHS staff. Based on greater fiscal sustainability, ChildNet was recently able to offer a slight increase in staff salaries. ChildNet regularly monitors CHS turnover rate, which was 12.10% for case managers and 4.5% for supervisors as of March 2018 which is considered a relatively low turnover rate comparatively.

One of the potential factors contributing to the positive retention rate is the tasks assigned to the placement unit. This structure alleviates many stressful and frustrating activities that would normally fall to case management

staff. Please see Section 9 for additional information on the placement process and the placement unit's integration when a removal occurs.

In accordance with F.S. 409.988, ChildNet posts organizational information including performance, workforce and fiscal compliance on their website.

ChildNet monitors caseload size on a regular basis. Reports, such as the ChildNet Vacancies/Caseloads report, are generated and distributed to ChildNet leadership to analyze staffing needs. The current average caseload size is 21.54 children as of March 2018, which is higher than twelve to fifteen recommended by the Child Welfare League of America. Prospective case managers are interviewed by supervisory staff using a behavioral based interview tool. CHS leadership identifies mentors to guide and educate new case managers, and to foster leadership skills with the mentors. Mentors are also provided compensation, $150 gift card, for each mentee and stay assigned until an in-depth scavenger hunt lasting about five months is complete. Several initiatives are in place or in development to recognize exceptional casework. For example, the Super Scorecard is a quarterly appreciation award which recognizes staff such as rising stars or staff who have gone above and beyond. Tokens of Appreciation are given to staff to recognize great performance. Additional efforts to support and retain staff are innovative, show a deep understanding of the reasons front line staff choose to leave case management, and illustrate ChildNet's willingness to delve deeper into systemic problems. For example, in response to concerns expressed by case managers, ChildNet engaged the judiciary to provide education regarding the unique challenges that case managers face and to broach the subject of staff being treated respectfully in court. To reduce the time case managers, spend supervising visitations, ChildNet engaged the community for donations for activities that would enhance and structure visitation episodes, allowing relative and nonrelative caregivers to feel more comfortable supervising the visits at public locations such as the zoo.

An annual training plan is devised and all training available is reviewed annually to ensure relevance and up-to-date content. The annual training plan is informed by quality staff, accordance with COA standards, new or modified operating procedures or policies, identified gaps from case management leadership, and specialized requests for focused subjects for in-service need. There are five pre-service classes held annually and over hiring is practiced based on anticipated vacancies and turnover. In four of the five pre-service sessions offered, Child protective investigations can co-train with case management. Case management also completes a specialty track that is separate from the investigations specialty track. Subject matter experts are used for specialty training during pre-service and in-service trainings. ChildNet trainers are available to case management staff from pre-service to in-service and beyond through practice model support sessions. Supervisors also use the support sessions to assist with consultative supervision through enhancing their logical and critical thinking skills. Requests for the support sessions have a formalized process, but based on interviews, the sessions often occur at the time of need. ChildNet trainers are available to staff at all times for consultations or other needed supports. Trainings occur in a number of formats including webinars, web-based modular platform through Relias, emailed tips of the week, "live" or face-to-face trainings, as well as the production of interactive and upcoming virtual reality training exercises. There are minimal occasions to assess whether trainers are evaluated on their efficacy.

Trainers are encouraged to pursue enhancement of subject specific skills, such as human trafficking, and continued self-improvement. ChildNet trainers are certified in many complementing subject areas in order to provide the highest quality training to case management staff. Training dollars are maximized to the fullest extent possible. Action for Children has been contracted to provide further assistance with practice model fidelity for all staff. Case management staff interviewed spoke highly of the Paul Vincent Foundation mentor/training activity in which leadership and staff were mentored, both separate and as a team, for a period of time. All CHS staff found this

activity very beneficial in opening lines of communication and understanding roles and responsibilities from a different perspective.

ANALYSIS

ChildNet and CHS work in tandem to create a supportive environment conducive to job satisfaction, skill enhancement, and collaborative efforts to engage families. Supervisors are encouraged to self-develop through training, however, the training appears to be more hands off through web-based modalities. Despite a comparatively low turnover rate, perceptions among focus groups within ChildNet's partnerships appears to indicate struggle with excessive turnover among case management staff. Trainers maintain several certifications and annual training plans are derived to meet the expected and perspective needs, using funding dollars appropriately. A solid feedback loop to measure and address trainer efficacy or deficiency may bolster trainers' skills and abilities.

SECTION 8: QUALITY MANAGEMENT AND PERFORMANCE IMPROVEMENT

SUMMARY

This category focuses of data analysis, performance improvement strategies and quality of eligibility determination.

The quality management team is comprised of a manager and two certified specialists assigned to Circuit 15. Circuit 15 shares a data unit with Circuit 17 (Broward County) in which there are operational processes to ensure data integrity. The quality management team generates and uses data to inform all parties, from leadership to frontline staff. Quality interfaces on a biweekly basis to discuss scorecard measures, providing data to the scorecard "Champions", and on a monthly basis to address performance reviews and trends. Frontline staff as well as supervisors are engaged in and take responsibility for "Champion" activities for within the monthly workgroups. ChildNet's quality staff are also involved in a monthly workgroup in which policies and procedures are reviewed, discussed and updated as needed. Projects are identified where performance is lacking and is assessed using a Six Sigma format for root cause and ultimate resolution options. For example, ChildNet identified a trend with the child resource record lacking documentation about the child. In May 2017, a project was completed and the determination was made to ensure case management received weekly "tips" emailed along with links to help case management understand the who, what, when, where, why and how. The quality team tracks this information to ensure improvement or to re-address through further training or other educational methods. During the on-site interviews, foster parents also addressed this as a continued concern in which the initial placement, as well as subsequent placements lacked necessary documentation in the child resource record.

Quality Management ensures that all providers are monitored at least every three years, however, the subcontracted case management organization, Children's Home Society (CHS), is reviewed annually. Quality staff complete an annual risk assessment to drive the necessary reviews for the following year. For FY 17/18, the quality staff will review a total of nine providers. Quality staff will often accompany the contract manager or their team to child placing agencies for provider monitoring. Information from the monitoring is shared with the licensing department to ensure a full circle feedback loop. Integration of quality management and continued quality improvement is noted to have strong, frequent and purposeful collaboration with the training department to ensure focus on performance deficiencies. Quality staff work with training staff to provide information through several learning platforms including the emailed weekly tips, online training, mass training, support sessions, and one-on-one training as needed.

ChildNet in Circuit 15 will complete fourteen CQI reviews, including two CFSR cases, and ten RSF reviews on a quarterly basis. These reviews are completed with a feedback form and are shared with case management staff, supervisors, and program directors with a request for a debrief meeting. The debrief is held to address the strengths, trouble shoot, and provide further guidance on those items needing some improvement. Concerns related to these reviews are discussed as necessary with case management staff at the time of the review. Follow up is required within 48 hours for issues related to safety and one week for administrative issues. Quality staff use educational moments within these reviews to provide case management with additional guidance around family centered practice, trauma informed care, and practice model integration. Quality staff felt that case management was responsive to these reviews and appreciated the feedback and continued learning opportunity. Case management staff felt they benefitted from the quality feedback provided during the interview process and were able to express information that could be applied in other cases. Quality staff attend unit meetings to provide updates regarding performance, operating procedures, and/or policies.

Surveys are used to request customer, provider, and parent feedback. Currently ChildNet provides links on their website for the respective parties to take the satisfaction survey and provide feedback about their experience with ChildNet. Unfortunately, ChildNet reports that participation in these surveys has been minimal and they would like to see the number of responses increase. Reminders are sent to providers, however, it is more difficult to engage parents, caregivers and children to respond. ChildNet also requires within provider contracts that the provider collect feedback from their customers and share that information.

ChildNet has used the FSFN Gap analysis outcomes to better ensure data integrity. The data unit generates an exception report and will follow up on those items that need to be updated in FSFN through case management or the noted area responsible. Specifically, the data unit has seen an increased and appropriate usage of the EFC/IL tab and the Adoptions tab, and better functionality in Revenue Maximization.

ChildNet has a process to track eligibility to ensure state and federal funds, such as Social Security, Title IV-E, and Medicaid are managed appropriately. Revenue Maximization (Rev Max) staff receive notification of all children coming into care via the electronic distribution of the shelter packets. ChildNet also employs a Court Liaison who can collect further information upon the shelter hearing and confirm information with the family to ensure appropriate determinations are made. Upon notification of a child coming into care, ChildNet eligibility staff initiate the eligibility process. ChildNet Rev Max staff are copied on e-mails regarding placement changes to support ongoing management. Field staff reported knowledge of the eligibility process and indicated that the ChildNet Rev Max staff have everything "under control". When there are questions or further need for clarification, the Rev Max staff have over twenty years of combined experience to address them. They also maintain close working relationships with Economic Self Sufficiency and Child-In-Care staff to resolve any issues. Appropriate checks and balances are in place to continually review and address errors, if they occur. The penetration rate is tracked twice a year and though the penetration rate has decrease, the Rev Max team indicated this is due to intact families and the working poor.

ANALYSIS

Quality management is embedded in the operational flow of day-to-day frontline work, as well as focused on project specific issues. Quality staff are involved in risk management and appreciate a strong integration into training, contracts, and eligibility. There is a continuous and robust feedback loop between quality, leadership, frontline staff, and providers. Further development of customer service surveys and strategies to engage parents, caregivers and children may enhance the overall system of care delivery. Rev Max enjoys a significant historical and present day

knowledge of eligibility requirements, with checks and balances in place to ensure appropriate designation. Data integrity is safeguarded by both the data unit and continuous quality review.

SECTION 9: PLACEMENT RESOURCES AND PROCESS

SUMMARY

This category focuses on available placement resources by reviewing family foster home recruitment and retention efforts, the placement process, group home quality, supports for relative and non-relative and placements available in the extended foster care system.

<u>Recruitment and Retention</u>

ChildNet's efforts to recruit new foster families includes integrating marketing, data analysis and contracting. The Recruitment and Licensing Director uses an algorythm based on specific key drivers to develop and adjust projections for each child placing agency. These drivers include attrition, utilization rates and capacity. From there the Recruitment and Licensing Director is able to adjust projections for each child placing agency (CPA) to match their particular recruitment strengths, focal points and efforts. Monthly spreadsheets provided to each CPA clearly define the foster homes needed and projections each month, forcing the CPA to self-evaluate their ability to grow with realistic goals and expectations. ChildNet has seen a growth in the number of homes since inception of their contact in Palm Beach in 2012 by 108 foster homes. During this past year, they have licensed 52 new foster homes. ChildNet uses a for-profit approach in recruitment efforts, such as awareness and recruitment campaigns. These efforts target repetition of a brand, like the ChildNet logo, and associate what the brand needs, like foster homes. Through billboards, radio, television, social media, and printed material, ChildNet is able to collaboratively assist the CPA's in targeting their recruitment efforts to where foster families are needed within the community and hone the type of recruitment for specific population characteristics, such as teen homes or homes for children under six months of age. ChildNet ensures that each CPA is engaging the community in the most productive areas and those areas with the most need on a regular basis.

Once foster parents begin training to become licensed, it is usually around a four-month process from start to licensure. The foster parent training is done by CPA staff with a MAPP based curriculum. Foster parent surveys indicated that all respondents felt the initial training for their licensure was accommodating; a little over half of the respondents felt that the initial training was sufficient to prepare the family to be foster parents. During several of the interviews, it was noted that one could identify the licensing CPA of foster parents based on the foster parent's interactions and philosophy. While there was indication that some CPA's were very well received, meaning family centered and trauma informed, it is apparent that some of the CPA's may not be messaging the integration of these practices into day-to-day life as a foster parent agency. There appears to be a disconnect between what is actually being taught and the expectation of practice. For example, in discussing transition planning, foster parents indicated that they do not exist or that they are circumvented many times with an abrupt movement. This is contrary to many other interviews in which transition planning is stated to be utilized regularly and with foster parents input and ultimate ownership of the transition process. Foster parents are provided with sufficient on-going training as indicated on the surveys a little over 84% of the time. ChildNet hosts a Super Saturday training, each quarter, in which foster parents receive five (5) hours of training while child care is provided and fellowship during a potluck lunch is available.

While the Super Saturday is all about training, it is also a retention activity. There is an annual luncheon during foster parent appreciation month, regularly scheduled fun afternoons, picnics and Christmas parties. ChildNet partners with Friends of Foster Children (FFC) to provide supports, goods and services to foster parents. FFC is heavily involved in strategic planning on an annual basis with a focus for retention activities. FFC is a unique partnership, though contracted with ChildNet, solicits and cost shares with several agencies such as the GAL, Speak Up for Kids, program to ensure needs of foster children and their caregivers are met. FFC will attempt to fill the gaps in services while working with several community agencies to do so. FFC provides welcome baskets for new foster parents as well as back to school clothing vouchers and supplies. They have also initiated fundraising activities to provide for school uniforms, have a clothing closet available for children entering care and act as a connective resource for caregivers including ensuring foster parents are aware of and have access to the local Foster and Adoptive Parent Association (FAPA) for support.

During the foster parent focus group, there were several concerns raised as to the willingness of ChildNet to support and communicate with them. There was no differentiation between ChildNet and Children's Home Society. Foster parents further indicated that there is a lack of responsiveness, they are not included in the decision making process for the children in their home, are discouraged from interactions with biological parents and indicate not wanting to continue fostering based on these issues. The survey however, does not completely validate these claims and provides some indication to the contrary. The information was also contraindicated in some of the other focus groups as well. For example, foster parents feel they are encouraged, when appropriate, to maintain a relationship with the children's family members through visits and other activities over 65% of the time. A little over 24% of foster parents disagreed with this and 10% were not sure. Foster parents have been encouraged to seek support, assistance and resolution through their CPA's. When necessary, the CPA does reach out to the Recruitment and Licensure Director for assistance and/or mediation of the issue. Foster parents have created their own Facebook page for internal supports. The CPA's are completing exit interviews and ultimately, ChildNet maintains a link on their website to express concerns to ChildNet. It is evident that foster parents do not feel integrated into the system of care. Further analysis of exit interviews to data notating actual reasons foster parents are declining licensure or re-licensure may be warranted as well as continued communication efforts with CPA's and foster parents on who, how and when to contact individuals for conflict resolution may be warranted.

Placement Process

When a child comes into licensed foster care, ChildNet contacts the CPAs via email to begin locating placement. Included in the emailed is a picture of the child and siblings, further information collected about the child's likes, dislikes, school involvement, hobbies and life circumstances is added to create a child profile. If the child(ren) have special needs associated with behavior, need for child placing agreements or mental health concerns, the child is also referred to clinical service coordination through ChildNet's Service Coordination Unit. At the time of a placement request, either initial or subsequent, an email is sent to all the CPA's to locate potential placements. The placement specialist works closely with the CPA to identify the best match to minimize further trauma while meeting the child's needs as presented. In the event that locating a placement takes longer than four hours, the child is brought to Safe Place, an emergency shelter licensed for eight (8) beds through 4KIDS, Inc. to provide food, an opportunity to address hygiene, fun activities alleviating further trauma and a chance for placement staff to speak with the child to get to know him/her a little better. Whether the child comes to Safe Place or goes straight to a foster home, ChildNet provides for an assessment of all children five (5) years of age and older to address further therapeutic needs. The type of assessment is based on the child's type of placement, for licensed care the assessment is a Brief Behavioral Health Status Exam, for those children going to relative/non-relative placements, a Biopsychosocial assessment is completed. Results are received within 72 hours of the assessment and referrals or recommendation for referrals are made, based on whether the child is in county or not. When there are no matches or the child cannot be placed in the county, further exploration with surrounding counties to search for an appropriate placement are conducted. ChildNet has successfully maintained the majority of children in county as noted in Fig. 17 with 15.9% outside of county, well under the statewide average of 36% of children placed outside of their removal county. ChildNet remains below the statewide average on all three categories noted in Figure 17. Family Foster Match Meetings occur every two weeks to bring children into county, move children out of group home placements, provide for siblings' reconnection and placement together and discuss better matches with

Childnet Palm Beach
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: 454

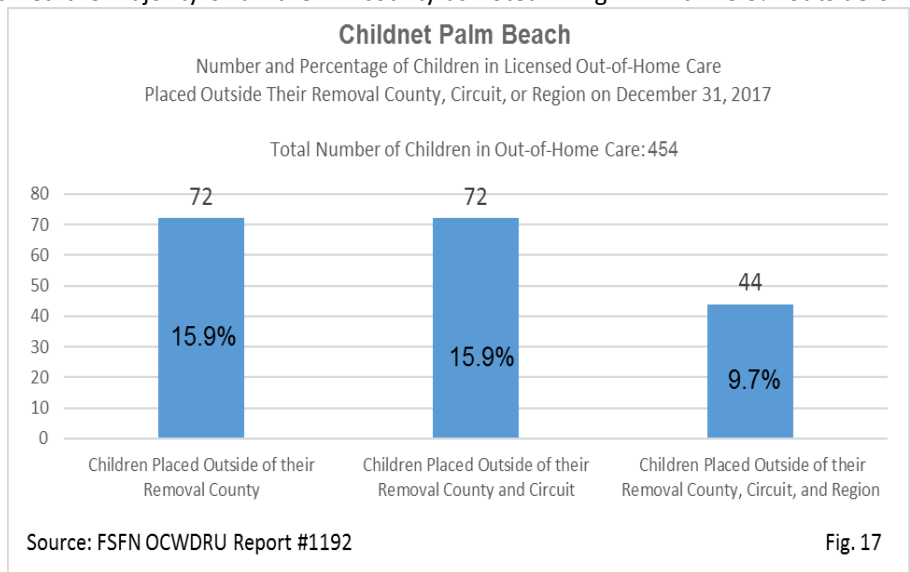Source: FSFN OCWDRU Report #1192   Fig. 17

foster home availability. Upon receipt of the Child Behavioral Health Assessment (CBHA), re-assessment of the child's placement may be warranted or further supports to the current placement may be required. Should more supports be necessary, a Service Provider Staffing is convened to discuss those needs, supports to foster home and possible enhancement of board rate.

Documentation of stays at SafePlace are entered into FSFN once the child has been at the facility for a minimum of 23 hours. However, late night entries into SafePlace are immediately transitioned into an overnight stay with little or no middle of the night placement efforts. During focus groups and interviews, staff clearly communicated their opinion that the decision to allow the child to sleep at SafePlace and not seeking foster care placement, thereby necessitating a move in the middle of the night, is in the best interest of the child. While this posture has some merit, the practice of not entering the overnight stay into FSFN is incongruent with the State's need to accurately

document the physical location of all children entrusted to the State's care. The Office of Child Welfare has been notified and will follow up with ChildNet and the Region.

ChildNet has, over the past three fiscal years, maintained children in their placement with fewer placement moves than the national standard. Over the past two quarters however, the placement moves have trended negatively and is now above the standard at 4.93 moves per 1000 days in foster care. Both ChildNet and Children's Home Society have a "Champion" assigned to this scorecard measure and collaborative efforts are being

ChildNet Palm Beach
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
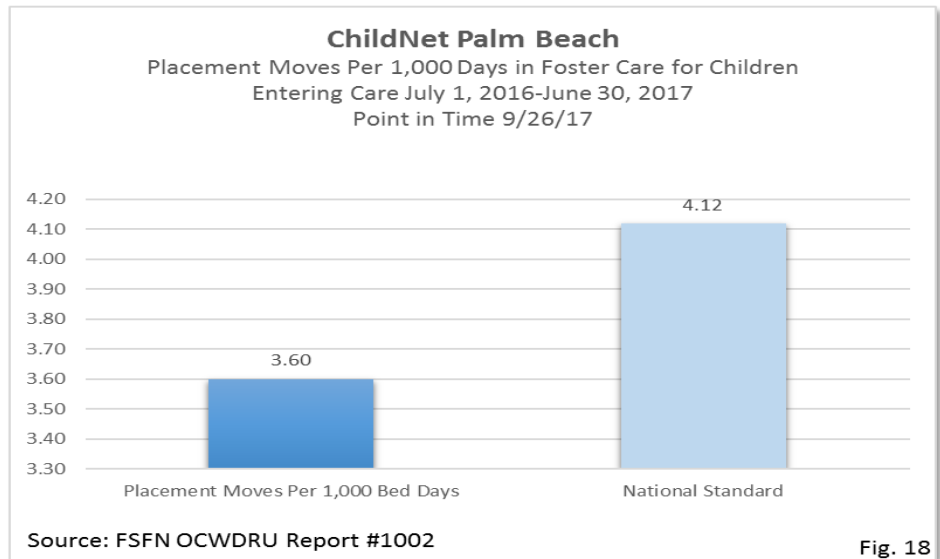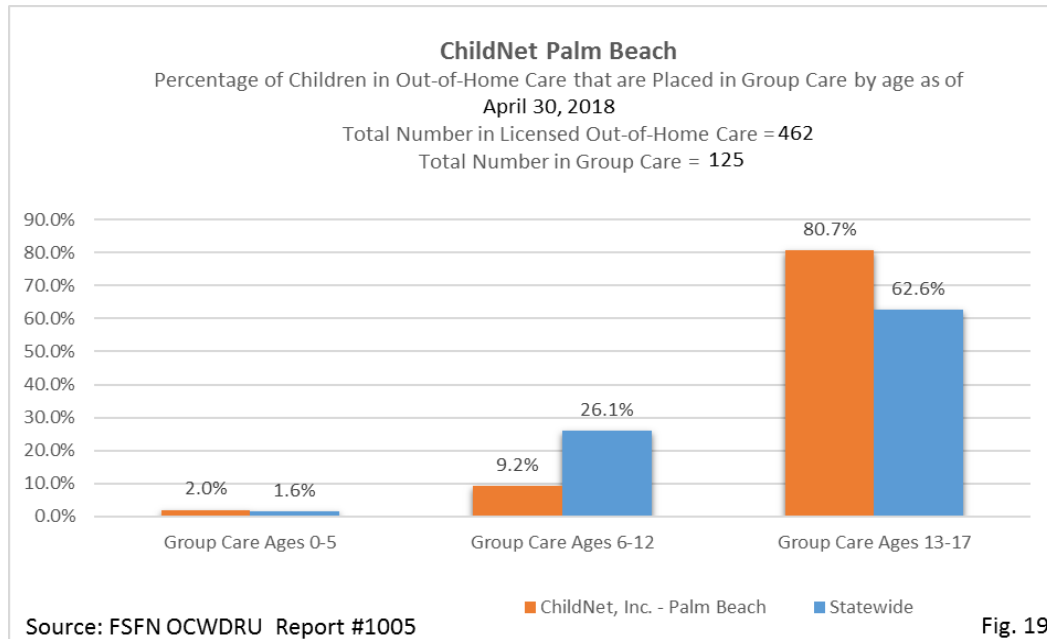
Source: FSFN OCWDRU Report #1002

Fig. 18

made to address the trend. Potential placement disruptions and 30-day placement disruption staffings are held within 24-48 hours to address behavioral or mental health concerns noted for the child(ren) and the foster or relative/non-relative caregiver. These staffings are based on the individual needs of the children and families involved, service coordination is included and follow up of action steps by those responsible are addressed. If additional supports and services are not successful in maintaining the child's placement, transition planning is then headed by placement staff coordinating with input from all parties. The move may be within the same CPA, and the foster parents and the CPA involved will transition the child. If the child is moving toward placement with a relative/nonrelative, case management assumes coordination efforts.

The Placement Unit within ChildNet is one that is quite unique. ChildNet placement personnel provide several services that are normally incumbent on the case manager to complete when a child enters out-of-home care. The Court Liaison within the unit is tasked with gathering as much additional information from the biological family to ensure that all the processes with placement and possible relative/nonrelative options, Rev Max and services are implemented expeditiously. The court liaison also assists with getting documentation from the court or the family as needed and scheduling the first visit with the parents. They also employ Family Support Workers who will transport the child(ren) to school for five days upon entering care until the school liaison is able to coordinate bus transportation for the child(ren). Further, the Medical Unit will set up the initial EPSDT and dental screening with the Family Support Workers transporting the child(ren) for those appointments. The placement unit staff will also supervise the first visit and enter the note into FSFN within 24 hours. Assignment to a case manager is completed within 24 hours and the case manager assigned is tasked with making contact with the family and child within 48 hours. Recently, ChildNet implemented Family Team Meetings ten (10) days after assignment, facilitated by specialized practice model staff to introduce the parents to the team they will be working with, discuss strengths of the family, relative/nonrelative placement options and conditions for return. The parents are encouraged to bring their supports and all other parties associated with the case, including CPA, GAL, foster parents are invited. This meeting is also a natural break to signal the parents engagement with case management rather than the child protective investigator.

Group Home Care

While ChildNet understands the need for specialized care and the need for group homes to ultimately meet the quality standards as set forth by the State of Florida, they continue to strive in getting children placed in the most family like setting possible. ChildNet was set with the task of reducing the number of children in group care since the inception of the Palm Beach County contract. As part of their Risk Pool Peer Review findings, ChildNet's finances were suffering significantly due to the number of children in residential care. Since that time, ChildNet has prioritized the movement of children out of group care and has since reduced that numebr by 50% as indicated in the on-site interviews however, as noted in Figure 19 below, ChildNet is still 18.1% above the statewide average for those children 13-17 years old in group care. ChildNet continues to address these movements through biweekly match staffings, some of which include the child participating during the meetings.

ChildNet Palm Beach
Percentage of Children in Out-of-Home Care that are Placed in Group Care by age as of April 30, 2018
Total Number in Licensed Out-of-Home Care = 462
Total Number in Group Care = 125

Source: FSFN OCWDRU Report #1005

Fig. 19

Relative/Non-relative and Extended Foster Care Supports

Relatives and non-relatives have the same supports available to them as foster parents through ChildNet's partnership with Friends of Foster Children. Upon receipt of shelter order indicating relative/non-relative placement, Kinship Connection will reach out to the relatives via phone, email and letter. The letter provides an overview of the process and provides caregivers with someone to connect with for assistance. Background checks through fingerprinting are completed in the same physical location within another program of the FCC, so caregivers will be introduced to these services and supports very early in the case. Kinship Connections assists with signing caregivers up for access to State benefits, child support, resources, clothing vouchers, emergency bags, beds, etc. Currently, Friends of Foster Children employ a young adult familiar with the foster care system to complete the fingerprinting in their agency.

Extended Foster Care supports have been built into the system of care through several venues by ChildNet. There are three agencies that provide housing supports through programs partnered with ChildNet including Vita Nova, Place of Hope and Home Safe in which transitional housing can be explored for the youth. These programs offer more than just placement, many include wraparound services, life skills training and mental health services. There are also efforts to work with foster parents to allow teens to remain in their homes to ensure stability. On the

heels of Family Finder training, staff are committed to ensuring teens have lifelong connections. Searching for and engaging relative/nonrelative not only for placement, but for real world application of supports. Youth are attending transitional staffings every six months to address their progress and any emerging needs. Prior to their 18th birthday, the Clinical Director will begin addressing targeted case management services, and therapeutic needs and how those can transition smoothly once the child is 18. ChildNet and CHS staff enjoy a close relationship with Career Source and the school liaisons. These connections are used to keep the youth on track and to address the young adult when thing begin to unravel, such as a young adult failing to attend school or show up to on the job training activities.

A limited number of counties throughout the United States were chosen to participate in the 100 Day Homeless Challenge, Palm Beach County being one of them. Through the Palm Beach Initiative and supported by Away Home America, ChildNet took on the challenge of housing young adults and creating a centralized model to assist young adults with housing them initially, but providing further services as needed. And while this initiative is a work in progress, they have housed 120 young adults, created contacts with the Lewis Center to assist with immediate shelter needs and created intake hubs for young adults for assistance with housing. So far, ChildNet reports about a 67% success rate with hopes of reaching beyond that upon the years end in October 2018.

ANALYSIS

ChildNet is successfully monitoring and assisting CPA's with thoughtful, well managed recruitment and retention plans. ChildNet has partnered with Friend of Foster Children to provide goods, services and supports to foster parents, relatives and non-relatives alike. However, further efforts to ensure transparent communication with foster parents and a solid feedback loop may be needed to address their integration into the system of care. ChildNet continues efforts to address placement moves that are on the rise, while ensuring children are also moved out of group care and reuniting siblings. Champions from both agencies are teaming to address deficiencies of scorecard measures through root cause analysis. The placement unit is a unique asset to ChildNet with the extra activities that are engaged upon a removal episode. Overnight stays at Safeplace are not being documented in FSFN unless they exceed 23 hours and efforts to secure placement in the middle of the night are limited or non-existent. Instead, a child is allowed to sleep at Safeplace overnight and placement efforts resume the following morning.

SECTION 10: PRACTICE

SUMMARY

This category focuses on implementation of the Department's child welfare operating procedures, theory comprehension and practice competency.

ChildNet has fully adopted the Practice Model in all open cases and has transitioned legacy cases into the practice model. Staff are trained on the Practice Model during pre-service and in-service opportunities. In addition to Practice Model education during pre-service training, the ChildNet training team support the transfer of learning process by reinforcing Practice Model concepts in field observations. The training team and the quality management staff work collaboratively to provide in-service trainings, one on one consults and fun "Tip of the Week" and "Hot Flash Reminder" emails to further boost educational moments. Additionally, ChildNet's Quality Management staff support adherence to the Practice Model through multiple staffings, review feedback and are available for consultation when staff need further assistance with application.

Based on interviews from all levels of staff at ChildNet, there is evidence that solid implementation of Children and Families Operating Procedures (CFOPs) is occurring and that the information is trickling down to front line staff. Pre-service classroom training includes family centered practice and trauma informed care principles and, in several areas of ChildNet operations, these philosophies are further reinforced. For example, ChildNet's creation of scorecard "Champions" and the collaboration between ChildNet and CHS in ensuring root cause analysis, problem solving and ultimately solution focused endeavor in addressing substandard performance and quality measures. ChildNet has begun utilizing family team conferencing to engage the family in decisions at case inception. Throughout the life of the case, ChildNet fosters family centered practices. However, further family team conferencing prior to reunification may be beneficial as a continued expansion of practice application. During the foster parent focus group, attendees advised that they were not invited to participate in family team conferences and transition planning meetings. The foster parents were not well versed in Practice Model terminology and practice. ChildNet has made a commitment to educating community partners regarding the Practice Model, but further reiteration and messaging is necessary.

ChildNet's placement moves have escalated over the past year and maintenance of sibling groups have continued to be a difficulty. While ChildNet continues to build capacity and integrate trauma informed care within their system, these measures indicate further need to strengthen family centered and trauma informed principles during placement decisions. Interviews with the Legal Aid Society indicate that ChildNet has improved and is more creative in addressing placement deficiencies. ChildNet is also trying to address relative placement sooner and has recently had a Family Finder training in which the Legal Aid Society participated in, both improving the working relationship between the different agency case managers and providing the knowledge base to assist with relative placements earlier in the case.

ANALYSIS

ChildNet disseminates information related to new or revised CFOPs and legal updates in a manner that ensures all levels of staff are receiving the information. Staff are trained on the Practice Model, family centered practices and trauma informed care principles during pre-service training and additional support is provided to staff following pre-service training. ChildNet is utilizing staff who are skilled in the Practice Model and support the practice at case inception. Opportunities exist to enhance the system of care and further practice model expertise at the frontline level so that family centered and trauma informed care principles are more robustly integrated throughout the life of the case.

SECTION 11: PARTNER RELATIONSHIPS

SUMMARY

This category focuses on established relationships with child protective investigations staff, Children's Legal Services (CLS), the Judiciary, Guardian ad Litem (GAL), other governmental agencies, domestic violence providers, coordination of educational services and other area partnerships.

ChildNet has partnered quite closely with child protective investigations (CPI) staff to ensure that safety management and family support services are what is needed to address families that are being touched by investigations. A collaborative effort within leadership to create the safety management and family support services was noted in several interviews. It was also acknowledged that while leadership maintains open lines of communication and professionally sound relationships, there are some tensions that exist within the frontline staff that require further attention. Staff are co-trained in preservice training and investigations staff are invited to all

trainings that ChildNet offers. During the interview process, there were instances in which CPI staff expressed frustration regarding communication and responsiveness. Specifically, case transfer and subsequent hotline calls when there is an open case. This seemed to be the exception rather than the rule, as it was also expressed that relationships are built quite readily and there is mutual support and assistance, especially in the Bell Glade area where investigations and case management are co-located. CPI and case management staff are not co-located throughout Palm Beach County. Beyond the collaboration for family support and safety management services, CPI staff and ChildNet maintain regularly held meetings to include a monthly operations meeting and performance review meetings in which performance measures, quality measures, operational processes and barriers are discussed and action plans or resolutions are addressed with responsible parties assigned. ChildNet also holds a quarterly 'Saferr' meeting in which community providers and partnerships come together to address quality of services, gaps in services or barriers to obtaining services. Various work groups, training, and process revisions come out of these meetings for continual review and assessment of needs.

Partnership with Children's Legal Services (CLS) is also strong with a good working relationship and collaborative efforts with both ChildNet and the subcontracted agency. There are five established divisions of assignment that support the formation of a relationship between the assigned attorneys and their respective case management units. When conflicts arise, there is a clear chain of command to promote resolution. Interviews with CLS and case management staff suggest that all parties are invited to all staffings, though this information is contrary to the foster parent and Guardian Ad Litem survey results. During the CLS interview, there was some expression of concern for the amount of turnover in case management, however this may be perceived rather than actual. Please see Section 7: Workforce Management for further details. Further discussion with CLS indicated that there is a lack of shared training opportunities and shared performance data on a regular basis.

ChildNet feels that there is a positive relationship with the Guardian Ad Litem leadership and is able to problem solve, resolve, or understand differences in their respective roles. As stated previously, it was noted that in all the interviews of frontline staff, there was suggestion that the GAL are invited to staffings, though survey results indicate otherwise. Of the 222 responses to the survey, 93 GAL staff felt that they have the opportunity and are given sufficient notice to participate in staffings or service planning for their assigned children about 50% of the time or less. It was noted in several interviews that the GAL program has an extraordinary effect on case outcomes while in court.

Strong relationships with other entities have been built and ChildNet enjoys the benefit of working with points of contact for many other agencies including the Department of Juvenile Justice, Agency for Persons with Disabilities, the Managing Entity, the local school system, and the Legal Aid Society. The Legal Aid Society's impact in Circuit 15 is unique. At shelter, each child 0-12 years of age, including all siblings, are appointed an Attorney Ad Litem (AAL). The AAL follows all siblings of the family group until case closure and/or reaching age of majority in licensed care. The AAL works in tandem with a case manager to ensure the children assigned reach permanency within the twelve-month timeframe recognized in Florida Statute. Relationships between ChildNet, CLS, Children's Home Society, and the Legal Aid Society, though seemingly daunting, are incredibly beneficial, and case management appreciates the assistance that the Legal Aid case managers and AAL's are able to provide. There is a cohesive messaging, as indicated in the interviews with the Legal Aid Society, in which these parties are working towards the ultimate goal of permanency for the children.

ANALYSIS

ChildNet has worked to build relationships with their system of care partners to ensure open lines of communication, collaboration, and cohesion of outcomes. While leadership in all agencies appear to have solid,

professional relationships, further attention and opportunities to solidify relationships between frontline staff are warranted. This would specifically impact the frontline child protective investigations staff and GAL staff. Further, continued communication and reiteration of stability regarding case management staffing may also be necessary. As touched on in other sections some of the interviews suggest the perception of continued turnover in case management is part of the prevention of strong working relationships at the frontline level.

SECTION 12: COMMUNITY RELATIONSHIPS

SUMMARY

This category focuses on relationships within the faith-based community, business community, local media, and the Community Alliances and/or Children's Service Council.

In collaboration with the faith-based community, ChildNet has received concrete supports and recruitment opportunities. Place of Hope and Florida United Methodist Children's Home are faith-based organizations that are licensed as child placing agencies and provide single-family foster homes, group care, and robust supports for their caregivers. 4KIDS of South Florida provide foster homes, engages in recruitment efforts and provides for children by donations and sponsorships. ChildNet works closely with Mount Bethel and One Church One Child to engage other community churches, invigorate recruitment efforts, and to solicit one-time and continued concrete supports.

ChildNet is fortunate to maintain community relations staff members who capitalize on the media and bring in both individual and business relationships that also provide for recruitment efforts, concrete supports, and services. ChildNet solicits the media and business community with ads in a for-profit approach. As stated by ChildNet's Community Relations staff, this approach is like "setting the seed that may later bloom into encompassing supports". This is accomplished by strategically hosting awareness campaigns with organizations who can further recruitment agendas and provide monetary supports. Further marketing using social media and sensory marketing through luncheons, billboards, pamphlets, radio, and television (Forever Families Segment) to ensure name recognition will hopefully equate to new foster homes. Businesses such as Florida Power & Light, Memorial Healthcare, Quantum Foundation, Bellan Isle, Lost Tree Village, The Breakers, AT&T, and others have or are currently partnered with ChildNet to inform and embrace the community based care system, continue recruitment efforts, and continue to build positive working relationships with the media and business community.

Lastly, the Children Services Counsel (CSC) is very active in Circuit 15. While CSC was initially hesitant to embrace child welfare community based care, there was a common goal, reaching permanency for children in an effective manner. ChildNet's CEO was instrumental in reaching out to the Children's Services Counsel to form and secure a working relationship that was mutually beneficial. Since building and maintaining that relationship ChildNet has partnered with the CSC to cost share parent education training. This training is available to all families who are adjudicated dependent and in need of intensive in-home parent education. The Children's Services Counsel fully funds the Legal Aid Society discussed in Section 11 as well.

ANALYSIS

Integration into the community has been a challenge for ChildNet in Palm Beach County. However, ChildNet has used their resources to maximize their outreach through the media and faith-based and business communities. This includes the concerted efforts made to embrace the CSC when there was clear uncertainty around their lack of involvement in the community based system of care. Relationships to better the outcomes for children and

families are always an ongoing need and ChildNet is continuing efforts to educate, inform, enhance, and protect the community and its most vulnerable population.

SECTION 13: COU MONITORING SUMMARY

SUMMARY

ChildNet is a robust child welfare community based care agency in Circuit Fifteen with a strong leadership team that is committed to be a trusted community educator and partner serving the community.

Opportunities for system of care enhancement are inherent in all community based care organizations. ChildNet is engaged in continuous quality improvement activities such as various workgroups to streamline staff performance and augment operations. ChildNet's leadership, QM, and Training teams are an asset to the organization and will serve them well as they endeavor to address the issues noted below.

AREAS NEEDING ACTION:

These findings represent areas that need attention and action as they impact child safety or permanency.

1. Conduct analysis of the following performance measure to determine potential root causes and develop countermeasures to positively impact performance:
    a. Percent of sibling groups where all siblings are placed together (M12) – ChildNet has remained below the target rate for the past two fiscal years, currently at 57.7%. Qualitative data shows that there was an improvement in performance with this measure by 3.8%, and that performance is above the statewide average, but below the statewide and federal expectation.
2. Documentation of stays at SafePlace – When a decision has been made to cease placement efforts and authorize a child to remain at SafePlace for the remainder of the day/night, the placement episode must be entered as a placement in FSFN to ensure accountability and real time knowledge of the child(ren)'s physical location and placement history.

OPPORTUNITIES FOR IMPROVEMENT:

3. Performance Measures – Several performance measures represent opportunities for local level discussion and monitoring to ensure the upward trend in performance continues. They are:
    a. Rate of abuse per 100,000 days in foster care (M01) – Since the third quarter of FY 16/17, ChildNet has shown improvement with a current rate of 6.65.
    b. Percent of children who do not re-enter care within 12 months of moving to a permanent home (M07) – This measure has not been met over the past two fiscal years in totality, however, over the past eight quarters, ChildNet has met this measure in five of those quarters; three of the most recent quarters were met consecutively.
    c. Placement moves per 1,000 days in foster care (M08) – While ChildNet has met this performance measure for a significant amount of time, recent quarters have shown an uptick in a negative direction. ChildNet is currently at 4.93, the highest in the past two fiscal years. However, quality case reviews show that placements are stable and any moves are necessary and in the best interest of the child increased to 93.75% of the time.

d. CQI Item 5 – Did the agency establish appropriate permanency goals for the child in a timely manner? ChildNet declined in performance by 3.1% to 89.58%. This is above the Federal PIP goal of 82.1%, yet below state and federal expectations.
   e. CQI Item 6 – Did the agency make concerted efforts to achieve reunification, guardianship, adoption or other planned permanent living arrangements for the child? ChildNet declined in performance by 7.3% to 85.42%. This is above the Federal PIP goal of 75.4%, yet below state and federal expectations.

4. Leadership Evaluation – There is an opportunity for the Board to enhance and formalize a more structured annual evaluation process for the CEO. The Board should incorporate formalized outreach to close partnerships for CEO relations and efficacy within the community.
5. Continuous Quality Improvement – Continued assessment of the feedback loop used for parents, caregivers, and children may provide for better understanding and enhancement of the system of care. Other ways to engage these groups or other methods of engagement should be explored.
6. Placement Resources– While ChildNet is continually messaging family centered practice and trauma informed care with providers, it is not clear whether this messaging is reaching the foster parents under all child placing agencies. The foster parent focus group suggested a lack of communication about information known for children being initially and/or subsequently placed in foster homes. Further exploration of the disconnect between information provided to the child placing agencies and what the foster parents are receiving is warranted.
7. Practice Competency – ChildNet would benefit from additional development of practice model expertise at the case management level to further incorporate family centered and trauma informed principles throughout the life of the case. Family Team Meetings that are currently driven by a practice model expert are initially providing good direction for new cases. By adding this same level of expertise throughout the case and to case closure using frontline staff experts would further bolster integration.
8. Partnership Relations – ChildNet should continue to re-iterate and message case management statistics, specifically referencing case manager turnover rates, to all partners and providers at every opportunity. Interviews with CLS, Legal Aid Society, and Foster Parents indicate that there is a perceived conception that turnover rates are very high with little stability in the workforce.

ADMINISTRATIVE FINDINGS:

9. Incident Reporting – 1 of 10 critical incidents was reported late into IRAS.
10. Information Security – ChildNet's policy for information security standards which states the information security manager shall conduct annual internal security audits and evaluations to ensure appropriate users' rights and permissions was not practiced.

SECTION 14: INNOVATIVE PRACTICES

There are some innovative practices that ChildNet has in place to support efficient operations and provide opportunities to expand services and achieve broader system-wide goals. These include:

- Placement Unit Enhancements – The placement unit provides support to case management by completing initial essential tasks, including: supervision and transportation of first parent(s)/child(ren) visitations, scheduling and transportation to initial medical/dental appointments and school coordination and transportation. These activities are those that would ultimately fall on case management to delegate or complete themselves, potentially causing delays in providing for children's well-being and permanency.

- Therapeutic Child Assessments - ChildNet provides for an assessment of all children five (5) years of age and older to address further therapeutic needs. The type of assessment is based on the child's type of placement. The results are received within 72 hours of the assessment and referrals or recommendation for referrals are made.

- Homelessness Initiative - ChildNet took on the challenge of housing young adults and creating a centralized model to assist young adults with housing them initially, but providing further services as needed. The initiative is a work in progress and ChildNet has created contacts with the Lewis Center to assist with immediate shelter needs and created intake hubs for young adults for assistance with housing. Thus far, they have housed 120 young adults.

- Virtual Reality/Simulation Training – Training is provided in several modalities within ChildNet. The most innovative training method is the interactive, simulation approach through a web-based system. ChildNet employs a trainer with the skills to develop these trainings which, based on the demonstration provided, will certainly enhance case management and supervisory skills.

2017 Florida Child Well-being Index
Palm Beach County

Rank **27**

35 Economic

	Current Year	%	#	Baseline Year	%	
Children in Poverty	2014	21.9	58,944	2009	21.5	Unchanged
Unemployment Rate	2015	5.0	34,867	2010	11.0	Better
High Housing Cost Burden (more than 30% income spent)	2015	44.7	256,971	2010	44.7	Unchanged
Teens Not in School and Not Working	2011-2015	6.7	4,209	2006-2010	8.8	Better

21 Education

Students Not Ready for Kindergarten	2013-2014	9.6	1,192	N.A.		
Fourth Grade Students Not Proficient in English Language Arts	2014-2015	73	9,822	N.A.		
Eight Grade Students Not Proficient in Math	2014-2015	76	6,439	N.A.		
High School Students Not Graduating on Time	2014-2015	20.6	2,967	2011-2012	23.0	Better

51 Health

Low-Birthweight Babies	2015	8.5	1,259	2010	8.9	Unchanged
Uninsured Children	2014	11.3	31,912	2009	25.7	Better
Overweight and Obese 1st, 3rd, and 6th Grade Students	2013-2014	37.6	12,998	2008-2009	39.3	Better
High School Teens who Used Alcohol/Drugs (Past 30 Days)	2014	40.7	398	2010	46.0	Better

39 Family and Community

Children in Single Parent Families	2011-2015	35.0	84,523	2006-2010	33.9	Worse
Children Living in High Poverty Areas	2011-2015	14.8	40,375	2006-2010	8.0	Worse
Children with Verified Maltreatment (per 1,000)	2015-2016	5.0	1,364	N.A.		
Youth Contacts with the Juvenile Justice System (per 1,000)	2014-2015	17.4	2,152	2009-2010	31.1	Better

We all do better when Florida's children succeed. Find out how you can act locally and at the state level to ensure:

1. children have access to healthcare.

2. we prevent child abuse, juvenile justice involvement, and substance use.

3. parents have educational and work opportunities that support their families.

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Appendix 1