MyFLFAMILIES.COM Monitoring Report On-Site Visit Completed:

Report Issued:

December 2019

October 2019

As required by section 402.7305 F.S., The Department of Children and Families completed an On-Site Contract monitoring of St. Johns County BOCC – Family Integrity Program. 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 NJ206

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EXECUTIVE SUMMARY

This report provides findings for the contract monitoring of St. Johns County Board of County Commissioners (BOCC) – Family Integrity Program (FIP). The on-site monitoring was conducted October 14 – 18, 2019 and focused on FIP's child welfare system of care. The monitoring process included a review of FIP's programmatic and administrative operations. In addition, the Community Based Care contract monitoring team reviewed fiscal monitoring reports. Findings are based on an 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 indepth assessment of the system of care in seven critical areas of operation: (1) leadership and governance; (2) workforce management; (3) continuous quality improvement process; (4) placement resources and process; (5) child welfare practice; (6) partnership relations and (7) community relationships. Additionally, one subcontract and five employee files (employment eligibility verification) were administratively reviewed.

Significant findings of each category are below:

Leadership and Governance:

- FIP's mission, vision and values are aligned with the department's and are communicated to all levels in the organization.
- A knowledgeable and engaged director leads the organization toward attainment of strategic goals.
- FIP is a county run organization and as such, does not have a board of directors. Instead, elected commissioners oversee county operations with the assistance of a county administrator.
- FIP's director is evaluated annually by the county administrator who is knowledgeable and involved in FIP operations.

Workforce Management:

- FIP has a stable and experienced workforce with consistently low turnover.
- FIP staff report feeling supported by FIP's executive leadership which is contributing to positive employee morale and staff retention.
- FIP's benefit package, through St. Johns County government, is robust and valued by staff.
- FIP is a member of the Northeast Region's Integrated Training Alliance (RITA) with ensures continuity of pre-service training throughout the region.
- FIP does not have a formal field training program thus post classroom training and support is primarily the responsibility of the unit manager.
- Inequity exists between judicial and non-judicial case managers. Judicial case managers' caseloads are in the mid to high twenties while in home non-judicial case managers have significantly lower caseloads.

Continuous Quality Improvement Process:

• FIP's quality services staff provide useful data reports which are disseminated internally and externally.

- The revenue maximization staff member works closely with child protective investigators, case managers, licensing and placement to accurately track Title IV-E, Temporary Assistance for Needy Families (TANF), and Medicaid eligibility.
- FIP Quality Services staff routinely monitor performance on all targets and contractual performance measures.
- FIP does not employ an individual specifically tasked with data analysis thus data do not proactively track and trend performance struggles to determine strategies to augment performance before targets are unmet.

Placement Resources and Process:

- FIP's foster home recruitment initiatives are limited and include efforts such as word of mouth advertising, attendance at community events and a \$100 referral bonus.
- Use of social media campaigns to identify and target potential licensed caregivers are lacking.
- A formalized relative and non-relative caregiver support system does not exist. Relative and non-relative caregiver assistance is reactionary and consists of aid from case managers following contact from the caregiver.
- Foster parents voiced dissatisfaction with the Children's Home Society Parent Resource for Information Development and Education (PRIDE) training.
- A formal process to follow up on Comprehensive Behavioral Health Assessment (CBHA) and Child Placing Agreement (CPA) recommendations was not readily known to front line staff.
- FIP has been successful in keeping young children out of group care. As of the writing of this report, FIP has placed no children under the age of 12 in group care.
- An experienced and accomplished Extended Foster Care / Independent Living (EFC/IL) specialist coordinates beneficial services such as housing and life skills training for EFC/IL youth.

Child Welfare Practice:

- The majority of FIP interviews demonstrated alignment with family centered and trauma informed care principles.
- Staff widely praised the Tonier Cain trauma informed care training and verbalized a desire for additional similar trainings.
- Staff acknowledge struggling with safety planning and expressed a need for additional training in this area.
- Challenges with the judiciary accepting the Practice Model and safety planning are negatively impacting the system of care.

Partnership Relations:

- FIP is co-located with numerous partners including investigations, Children's Legal Services (CLS), Stewart Marchman and the local domestic violence provider.
- Interviews and focus groups overwhelmingly agree on a positive working relationship between FIP and Its partners.
- Respect and collaboration are evident in FIP's system of care.

• *FIP's leadership team is active in the community forging positive relationships and remedying issues expeditiously.*

Community Relationships:

- FIP leverages community relationships to garner needed goods and services for the children and families served by FIP.
- *Relationships with faith-based organizations aid in foster home recruitment initiatives and school and holiday drives.*
- Interviews and focus groups revealed an opportunity to enhance the relationship with the Early Learning Coalition to secure needed services for families served in the system of care.

Administrative Findings:

- Employment eligibility (I-9's and E-Verify) documentation were completed as required.
- While there was a finding regarding subcontracts, the administrative review revealed overall positive compliance as required.

SECTION 1: AGENCY AND SERVICE AREA SUMMARY

In 2003, the Department contracted with the St. Johns County Board of County Commissioners (SJCBOCC) to provide dependency case management services in St. Johns County, thus the Family Integrity Program (herein referred to as "FIP") was established. FIP is a division within St Johns County's Health and Human Services Department which also contains the county's social services, housing and community development, and the veteran's services divisions. FIP is responsible for the provision of dependency case management services, In Home Non-Judicial services, foster care licensing, contract management, adoption and post-adoption services, and independent living services, including extended foster care services. The department's contract with FIP was renewed in 2019 for five years, expiring in 2024.

The St. Johns County Health and Human Services Department was initially accredited by the Council on Accreditation (COA) in November 2008. The Family Integrity Program was included in this initial accreditation in the areas of Adoptions Services, Child Protective Case Management Services, Foster Care/ Kinship Care, and Youth Independent Living Services. The Family Integrity Program, under the HHS, was re-accredited in November 2012 and again in November 2016. The agency's current accreditation is active until 2021.

FIP works in partnership with community agencies for the provision of services. In April 2019, FIP finalized a contract with the Devereux- Family Builders program to provide safety management services to eligible families. FIP also participates in the Northeast Region Integrated Practice Team with the Department, Partnership for Strong Families, Community Partnership for Children, Kids First of Florida, and Family Support Services of North Florida. FIP subcontracts with Children's Home Society for PRIDE training for foster parents.

NUMBER OF INVESTIGATIONS, REMOVALS AND CHILDREN SERVED

St John's County has experienced an overall increase in children entering out of home in FY 18/19 and an overall increase in the number of children served by FIP, either through family support services, inhome services, and out of home care. There has been a decrease in young adults receiving services.

| Service Area Data | | | | | | | |
|---|--|------------------|------------------|------------------|------------------|--|--|
| | | FY 2015/ 2016 | FY 2016/ 2017 | FY 2017/ 2018 | FY 2018/ 2019 | | |
| Child Protective Investigations and Child | Reports accepted for Investigation by DCF (Initial & Additional Reports) | 1,685 | 1,714 | 1,635 | 1,725 | | |
| and Child Removals (St. Johns County) Children Enteri | Children Entering Out-of-Home Care | 110 | 135 | 128 | 181 | | |
| Children Served by Family Integrity Program | Children Receiving In-Home Services | 206 | 201 | 243 | 302 | | |
| | Children Receiving Out of Home Care | 309 | 338 | 307 | 331 | | |
| | Young Adults Receiving Services | 23 | 21 | 17 | 16 | | |
| | Children Receiving Family Support Services | 120 | 162 | 215 | 228 | | |
| Table 1. Data Sources | s: Child Protective Investigation Trend Report, Child Welfare Dashb | oard, FSFN | OCWDRU R | eport 1006. | Data Run | | |

FINANCIAL VIABILITY SUMMARY

FUNDING SUMMARY

Date: July 24, 2019

The Office of CBC/ME Financial Accountability performed financial monitoring procedures, based on the DCF 2018-19 CBC-ME Financial Monitoring Tool for Desk Reviews, of FIP. The desk review period was for the period of October 31, 2018 through December 31, 2018 and was published on July 5, 2019. One finding related to general ledger – expenditure report not reconciling to FSFN, was found. FIP corrected the transactions on the next FSFN to CBC expenditure report reconciliation. For further details, please see the completed fiscal report – <u>FY1819 Financial Monitoring Report – FIP</u>.

FIP's core services funding has increased slightly each year since FY1415. FIP received 'Back of the Bill' funding in FY1718 and FIP applied for, but did not receive, Risk Pool funding in the amount of 157,350 in FY18/19 and \$150,000 in FY16/17.

| St Johns Count | y Commiss | ion - Fam | ily Integrit | y Prograr | n | |
|--|-----------------------|---------------|--------------|-------------|-------------|-------------|
| | Lead agency s | ince March 1, | 2004 | | | |
| | Total | Funding | | | | |
| DCF Contract Funds Available at Year End (by Fiscal Year) | FY14-15 | FY15-16 | FY16-17 | FY17-18 | FY18-19 | FY19-20 |
| Core Services Funding | \$3,960,943 | \$4,017,481 | \$4,265,829 | \$4,475,248 | \$4,508,148 | \$4,809,445 |
| Risk Pool Funding | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| CBC Operations "Back of the Bill" Funding | \$0 | \$0 | S0 | \$147,679 | \$0 | \$0 |
| Other Amendments to Initial Allocations | \$6,393 | \$3,109 | \$459 | \$29,542 | \$35,395 | \$0 |
| Amended Core Services Funding | \$3,967,336 | \$4,020,590 | \$4,266,288 | \$4,652,469 | \$4,543,543 | \$4,809,445 |
| Fundi | ng not defined a | as Core Servi | ces Funding | | | |
| Independent Living (IL and Extended Foster Care) | \$147,606 | \$147,606 | \$147,606 | \$135,949 | \$287,691 | \$287,691 |
| Children's M ental Health Services (Cat 100800/100806) | \$66,259 | \$66,259 | \$66,259 | \$66,259 | \$66,259 | \$66,259 |
| PIT raining, CaseyFoundation or other non-core svcs | \$0 | \$0 | S0 | \$0 | S0 | S0 |
| SafetyM anagement Services (Nonrecurring) | \$0 | \$0 | \$62,462 | \$0 | \$62,462 | \$62,462 |
| Total at Year End | \$4,181,201 | \$4,234,455 | \$4,542,615 | \$4,854,677 | \$4,959,955 | \$5,225,857 |
| M aintenance Adoption Subsidy(MAS) | \$1,052,217 | \$1,129,529 | \$1,275,180 | \$1,480,645 | \$1,732,696 | \$1,801,969 |
| Guardianship Assistance Payments (GAP) | | | | | | \$8,384 |
| M AS Prior Year Deficit | | \$0 | | | | |
| CarryForward Balance from Previous Years | \$216,625 | \$16,289 | -\$91,506 | \$47,667 | -\$2,467 | \$205,821 |
| Total Funds Available | \$5,450,043 | \$5,380,273 | \$5,726,289 | \$6,382,989 | \$6,690,184 | \$7,242,031 |
| Carry Forward Balance into FY 19-20 are estimates subject | to final determinatio | ns | | | | |

FINANCIAL VIABILITY PLAN

FIP has experienced an overall increase in the number of children entering out of home care in St. Johns County in the past few years. The financial viability plan is focused on reviewing removal trends and determining root causes for removals, reviewing high cost and long-term placements, utilizing effective services to prevent children from entering out of home care and supporting parents and caregivers during and after termination of services. FIP continues to work collaboratively with the department to drive success of the financial viability plan.

SECTION 2: PERFORMANCE INDICATORS AND QUALITY ASSURANCE DATA

This section provides a picture of FIP's performance as captured by data indicators that are used to assess how well FIP 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 represents 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 twelve 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). The Department of Children and Families has developed additional methods to evaluate the quality of the services provided by the lead agency using Rapid Safety Feedback (RSF) and Continuous Quality Improvement (CQI) reviews.

- 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).

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 are completed by CBC and DCF staff and consist of a case file review, interviewing case participants, and 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 <u>CFSR On Site Review Instrument</u> and <u>Instructions</u> and the <u>Rapid Safety Feedback Case Review Instrument</u> are both available on the Center for Child Welfare website and provide details on how ratings are determined.

The Child Welfare Quality Assurance (QA) unit in the Office of Child Welfare is tasked with conducting secondary oversight of ongoing quarterly case reviews completed by Community-based Care lead agencies, specifically the Florida Continuous Quality Improvement (CQI) reviews which utilize the Child and Family Services Review (CFSR) on-line system review instrument and web-portal. The purpose of oversight of the reviews is to improve inter-rater reliability between CBCs and to provide guidance to QA who in turn transfer the learning to operations and child welfare professionals. The ratings on the Florida CQI reviews vary significantly between CBCs.

The QA team currently provides secondary oversight for each case monitored as a part of the state's Program Improvement Plan (PIP). The process used for second level oversight of the Florida CQI case reviews mirrors that of the PIP second level oversight. These reviews identify practice strengths and areas in need of improvement, and measure performance improvement.

The Child Welfare QA unit conducted secondary oversight of all six (6) of the Florida CQI reviews conducted by FIP during the fourth quarter of FY 2018 – 2019. Each case reviewed was returned for additional justification of the ratings and scores changed on one case, one item from a Strength to an Area needing Improvement.

Common feedback provided involved:

- Strengthen justifications of ratings
- Tool instructions for sub-items, tables, and CPI Efforts

The total responses rated a strength have been steady for the last three years across ill items with a slight dip in the most recent quarter, scoring 76.5% strength compared to 68.3% for the state.

Compared to the state and the average Florida CQI and PIP scores, FIP scored higher than the statewide performance for the 2018-2019 fiscal year with an average overall performance of 80.74% compared to 69.63% for the state. This is just under one standard deviation above the average.

Action for Child Protection conducts fidelity reviews of 150 cases twice per year, 25 per region of which 13 transfer to case management, to rate the level of fidelity to the practice model in the field. FIP has two (2) or three (3) cases included per fidelity report which accounts for the variability in performance. Fidelity to the practice model has been steadily improving over time. Strengths include developing safety plans, portions of the family functioning assessment (child functioning, parenting discipline and child needs), and updating safety plans based on case circumstances. Areas for improvement include identifying conditions for return, case planning, and supervisor consultations.

CONTRACT AND CBC SCORECARD MEASURES

FIP has met six (6) out of 13 contract measures in the past two fiscal years. Of the remaining seven (7) measures, three (3) have not been met in either of the past two fiscal years, including:

- Rate of abuse or neglect per day while in foster care
- Percent of children who are not abused or neglected after receiving services
- Percent of children exiting foster care to a permanent home within 12 months of entering care

Performance Measures Contract Targets Compared to Federal Standards and Statewide Performance

| | contract rangets | • | amily Integrity | | i Statewide Perior | |
|---|---|--------------------------------------|--|--|--|--|
| | | Гс | CBC Scoreca | | | |
| Scorecard Measure Number | Performance Measure | CBC Contract Measure Targets | Federal National Standard (Performance of Other States) | Statewide Performance (FY 2018/2019) | Family Integrity Program July 1, 2017-June 30, 2018 | Family Integrity Program July 1, 2018-June 30, 2019 |
| 1 | Rate of abuse or neglect per day while in foster care | <8.5 | <8.5 | 8.41 | • 15.57 | ● 8.62 |
| 2 | Percent of children who are not neglected or abused during in-home services | >95% | | 94.82% | ● 90.9% | ● 96.0% |
| 3 | Percent of children who are not neglected or abused after receiving services | >95% | | 96.45% | 91.0% | ● 93.7% |
| 4 | Percentage of children under supervision who are seen every thirty (30) days | >99.5% | | 99.05% | ● 100.0% | • 100.0% |
| 5 | Percent of children exiting foster care to a permanent home within twelve (12) months of entering care | >40.5% | >40.5% (12%-64%) | 40.15% | • 32.9% | ● 38.5% |
| 6 | Percent of children exiting to a permanent home within 12 months for those in care 12 to 23 months | >44% | >43.6% (25%-66%) | 53.97% | • 72.6% | ● 74.6% |
| 7 | Percent of children who do not re-enter foster care within twelve (12) months of moving to a permanent home | >91.7% | >91.7% (83%-98%) | 90.32% | 90.6% | ● 94.2% |
| 8 | Children's placement moves per 1,000 days in foster care | <4.12 | <4.12 (2.7 - 9.8) | 4.61 | • 4.86 | • 2.39 |
| 9 | Percentage of children in out-of-home care who received medical service in the last twelve (12) months. | >95% | | 97.01% | ● 98.9% | ● 99.5% |
| 10 | Percentage of children in out-of-home care who received dental services within the last seven (7) months. | >95% | | 92.51% | 92.3% | ● 96.3% |
| 11 | Percentage of young adults in foster care at age 18 that have completed or are enrolled in secondary education | >80% | | 89.22% | ● 88.9% | ● 83.3% |
| 12 | Percent of sibling groups where all siblings are placed together | >65% | | 63.82% | 66.9% | ● 71.2% |
| | Number of children with finalized adoptions (DCF Dashboard run date 8/14/2018) | FY 2017/18: 33 FY 2018/19: 33 | | | ● 53.00 | ● 62.00 |
| A green dot denotes p Table 3: CBC Scorecard | performance is above the CBC Contract Measure Target: a red dot d, Run date: 7/24/2019 | denotes performance is below the CBC | Contract Measure Target. | | | |

CHILD SAFETY

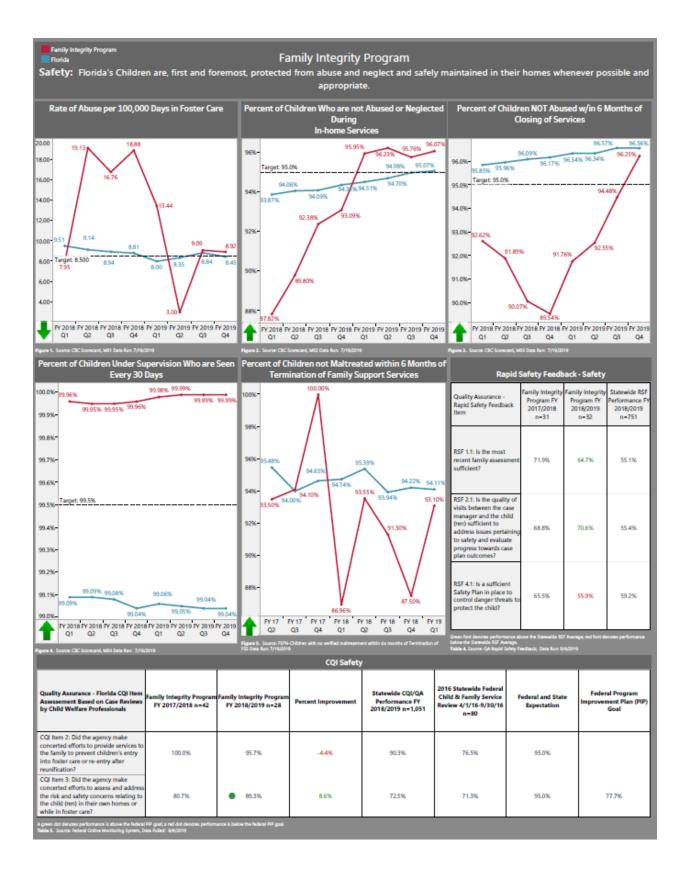
The figures and tables on the follow pages depict FIP's performance related to safety in the following areas:

- 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. Qualitative Case Review

FIP has trailed both statewide performance and federal targets, where applicable, in four of the five safety scorecard measures and both qualitative measures; however, has improved its overall safety performance in FY 18/19.

- Rate of abuse per 100,000 days in foster care has been consistently higher than the target and the statewide performance over the past two fiscal years; however, has improved over FY 18/19.
- **Percent of children who are not abused or neglected during in-home services** has improved over the last few quarters and has remained above the statewide performance and contract target since FY 2019 Q1.
- Percent of children not maltreated within 6 months of termination of family support services is currently below the statewide number at 93.10% with fluctuations above and below the statewide performance.
- Percent of children under supervision who are seen every 30 days and percent of children not abused within 6 months of closing services have steadily trended above statewide performance and federal target for both safety measures.
- **Percent of children not abused within six months of closing of services** has remained below the statewide performance and contract target from FY 2018 Q1 through FY 2019 Q3. Performance surpassed the statewide target in FY 2019 Q4.

FIP's quality reviews show good performance in safety related items. While FIP declined in performance around concerted efforts to prevent entry or re-entry into foster care during FY 18/19, it remains above the statewide performance and the federal and state expectation. There has been improved performance in concerted efforts to assess and address risk and safety concerns and they remain over the PIP goal for CQI Item 3.



PERMANENCY

The graphs and tables on the follow pages depict FIP'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. Qualitative case review results

FIP has consistently met three (3) of the five (5) permanency related performance measure during the past two fiscal years; however, has improved performance during FY 2019 five (5) measures.

- Percent of children exiting to a permanent Home within 12 months of entering care has been consistently below the target and statewide performance and exceeded the target in FY 2019 Q4.
- Percent of children exiting to a permanent home within 12 months of care for those in care 12-23 months has been consistently above target for the past two fiscal years.
- Percent of children in care 24+ months who achieve permanency with an additional 12 months has been consistently above the statewide performance but has seen a recent decline in performance.
- Percent of children who do not re-enter care within 12 months of moving to a permanent home has fluctuated around the target and statewide performance for the past two fiscal years; however, has been trending positively since FY19 Q3.
- Placement moves per 1,000 Days in Foster Care has positively exceeded the statewide performance and target since FY 2018 Q4.
- **Percent of sibling groups where all siblings are placed together** has consistently been above the statewide performance and contract target for the past two fiscal years.

FIPs performance on permanency related quality measures has been generally good for the past two fiscal years. FIP's performance exceeded the statewide performance on seven of the eight measures in FY 18/19. FIP met one of two quality measures with PIP performance expectations. FIP failed to meet the PIP target on 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 goals). The period under review coincides with FY 17/18, during which FIP struggled with placement moves. FIP has since improved in the quantitative measure.



| Family Integrity Program Permanency: Forida's children have permanency and stability in their living situation and the continuity of family relationships and connections is preserved. | | | | | | | | |
|---|---|--|----------------------------|---|---|----------------------------------|---|--|
| Rapid Safety Feedback - Permanency | | | | | | | | |
| Quality Assurance - Rapid Safety Feedback Item | Family Integrity Program FY 2017/2018 n=31 Family Integrity Program FY 2018/2019 n=32 | | | | Statewide RSF Performance FY 2018/2019 n=751 | | | |
| RSF 2.1 Is the quality of visits between the case manager and the child() address issues pertaining to safety and evaluate progress towards case | 68. | 8% | 70.6% | | 55.4% | | | |
| RSF 2.3 Is the quality of visits between the case manager and the child's address issues pertaining to safety and evaluate progress towards case | 84. | 4% | 85. | 3% | 64.0% | | | |
| RSF 2.5 Is the quality of visits between the case manager and the child's address issues pertaining to safety and evaluate progress towards case | | 65. | 0% | 84. | 84.6% | | 51.8% | |
| Green font denotes performance above the Statewide RSF Average; red f Table 6. Source: QA Rapid Safety Feedback; Data Run: 9/4/2019 | ont denotes performa | nce below the Statewid | e RSF Average. | | | | | |
| | | CQI Perm | anency | | | | | |
| Quality Assurance - Florida CQI Item Assessement Based on Case Reviews by Child Welfare Professionals | Family Integrity Program FY 2017/2018 n=42 | Family Integrity Program FY 2018/2019 n=28 | Percent Improvement | Statewide CQI/QA Performance FY 2018/2019 n=1,051 | 2016 Statewide Federal Child & Family Service Review 4/1/16-9/30/16 n=80 | Federal and State Expectation | Federal Program Improvement Plan (PIP) Goal | |
| 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)? | 73.3% | 87.5% | 14.2% | 79.7% | 82.0% | 95.0% | 88.5% | |
| CQI Item 5. Did the agency establish appropriate permanency goals for the child in a timely manner? | 80.0% | 68.8% | -11.3% | 82.7% | 81.8% | 95.0% | | |
| CQI litem 6. Did the agency make concerted efforts to achieve reurification, guardianship, adoption, or other planned permanent living arrangements for the child? | 93.3% | 81.3% | -12.1% | 65.0% | 74.5% | 95.0% | 75.4% | |
| CQJ litem 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? | 100.0% | 88.9% | -11.1% | 78.5% | 67.3% | 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? | 71.4% | 93.3% | 21.9% | 60.4% | 69.0% | 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? | 86.6% | 100.0% | 13.4% | 72.3% | 82.0% | 95.0% | | |
| CQI Item 10: Did the agency make concerted efforts to place the child with relative when appropriate? | 71.4% | 81.3% | 9.9% | 78.7% | 72.0% | 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? | 61.5% | 46.7% | -14.8% | 47.7% | 60.0% | 95.0% | | |
| A green dot denotes performance is above the federal PP goal; a red dot denot Table 7. Source: Federal Online Monitoring System, Data Pulled: 8/4/2019 | tes performance is below | v the federal PIP goal. Gre | en font in the "Percent In | rprovement" column den | otes positive improveme | nt; red font denotes a ne | gative change | |

WELL-BEING

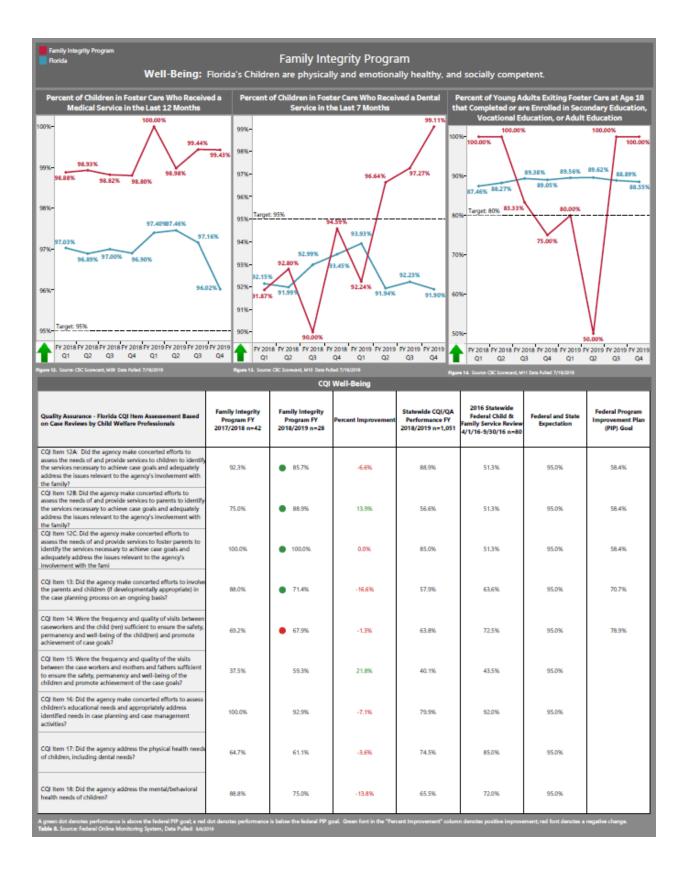
The graphs and tables on the follow pages depict FIP 's performance related to well-being in the following areas:

- 1. Children receiving medical care
- 2. Children receiving dental care
- 3. Young adults enrolled in secondary education
- 4. Qualitative case reviews

FIP has consistently met the contract target for two (2) of the three (3) well-being related performance measures; however, have generally performed below the state during the past two fiscal years.

- **Percent of children in foster care who received a medical service in the last 12 months** has remained above the target for the past two fiscal years.
- Percent of Children in foster care who have received a dental service in the last seven months exceeded the statewide performance and contract target in FY 2019 Q2 and sustained through FY 2019 Q4.
- Percent of young adults exiting foster care at age 18 that completed or are enrolled in secondary education, vocational education, or adult education has fluctuated, but been above the target for six of the eight quarters included in this report.

FIP has performed well on quality measures related to well-being. FIP has exceeded the PIP target in four of five PIP monitored measures and have exceeded the state on seven of the nine quality measures. FIP declined in performance on CQI Item 14 (The frequency and quality of visit between caseworkers and the children were sufficient to ensure the safety, permanency, and well-being of children and promote the achievement of case goals) and did not meet the PIP goal. FIP's performance on CQI Item 17 (The agency assessed and provided for the physical health needs of children, including dental needs) declined and was below the statewide performance. FIP's performance on the dental quantitative measure indicates that struggles with dental services may be driving the poor performance on this measure.



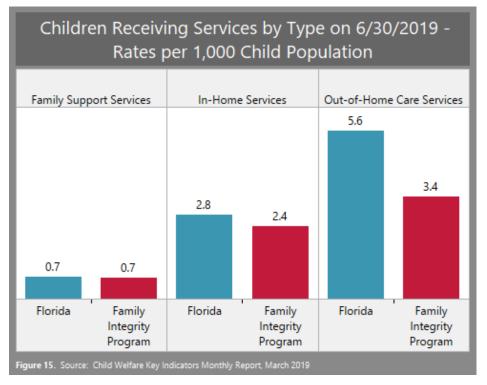
SECTION 3: SERVICE ARRAY FOR SAFETY MANAGEMENT AND FAMILY SUPPORT SERVICES

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.

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.



<u>Family Support Services-</u> FIP has a rating of "3" for Family Support Services. FIP's In-Home Non-Judicial (IHNJ) unit specializes in safe, but high or very high-risk cases. Caseloads for IHNJ case managers are low and manageable. FIP recently ended their contract with Children's Home Society for the Strengthening Ties and Empowering Parents (STEPs) program and initiated a contract with Devereux for Family Builders services. The Family Builders program has limited capacity, only serving five eligible families in St. Johns County. If a family becomes non-compliant or is not successful in the program, a 'close the loop' staffing is held which includes the case manager, investigator, and CLS.

<u>Safety Management Services-</u> FIP has a rating of "1" for Safety Management Services. FIP employs a Safety Management Specialist who is responsible for assisting with safety planning activities and managing child safety to prevent removals. SMS services are not fully aligned with the child welfare practice model and future emphasis on fully aligning services to the Practice Model are warranted.

ANALYSIS

FIP is a structurally unique CBC in that it is a county run social service agency. FIP operates under the Health and Human Services division (HHS) overseen by the St. Johns County Director of Health and Human Services. This division also includes the county's Social Services, Veteran's Services and Housing Services programs. Operation under one director enables FIP to assess services more easily. FIP's family support and safety management services are limited and not fully aligned with the Practice Model.

SECTION 4: LEADERSHIP AND GOVERNANCE

SUMMARY

This category focuses on alignment of FIP's Mission/Vision/Values (M/V/V) to those of the Department and includes an assessment of resource and risk management, evaluation of the Director of Health and Human Services and leadership development.

Mission/Vision/Values

FIP's mission is to "work in partnership with the State of Florida and the local community to develop, implement and manage a highly effective, strength-based community-based system of care for abused and neglected children and their families." FIP's mission is aligned with the Department's and is integrated into every aspect of FIP operations. FIP's leadership team is committed to supporting and reinforcing the mission to ensure system-wide quality service delivery.

Resource Management

As of October 2019, FIP has 20 case manager positions, four case management supervisor positions, 10 support positions such as licensing, placement, transportation and administrative. Additionally, FIP employs nine staff members in "blended" positions who perform duties for FIP as well as other health and human services departments. FIP effectively maximizes funding from the county to enhance resource management and ensure fiscal sustainability. The co-location and integration of FIP and other health and human services, such as housing, social services, and veteran's services, augments FIP's ability to serve St. Johns County's most vulnerable citizens.

FIP proactively applies for grant funding to augment funding received from the State. In FY19/20, FIP received grant funding in excess of \$1.4M to provide services such as rapid rehousing and counseling. In addition, families served by FIP benefit from County General Funds, in excess of \$1.9M, which support local non-profit agencies with human services missions.

Evaluation of CBC Leadership

The Board of County Commissioners is the oversight entity for FIP and provides fiscal accountability to the agency. The board is comprised of elected officials serving two-year terms and relies on county administration staff to provide direct and consistent guidance to the HHS director. The Assistant County Administrator meets with FIP's HHS Director weekly to review qualitative and quantitative performance and address fiscal matters. The Assistant County Administrator regularly attends partnership meetings with DCF and other local partners to further assess and monitor FIP's performance. The HHS Director receives regular annual performance evaluations which identify areas needing improvement, if applicable, and goals for the upcoming year.

Risk Management

FIP's Quality Services (QS) team is tasked with tracking and reporting on client related incidents, in accordance with CFOP 215-6. Incidents pertaining to staff are handled in partnership with the county's personnel department, in accordance with COA standards. On a quarterly basis, the QS team provides FIP leadership with data on incidents and trends. FIP is committed to ensuring all incidents are reported and addressed in a timely manner. The grievance procedure for clients served is outlined in the caregiver handbook that is provided to all parents and caregivers served by FIP. A foster parent manual is also provided to all foster parents, outlining this procedure as well. All grievances are handled through FIP management, and routed to the HHS director, when necessary. DCF tracker complaints, Inspector General reports and county wide grievances (collected through a system called "PRIDE") are all monitored by the QS team.

In an effort to proactively manage grievances and maintain a pulse on the community, FIP distributes annual satisfaction surveys to staff, foster parents and stakeholders. The results are shared with FIP leadership and an abbreviated version is disseminated to staff. When necessary, programmatic changes are implemented to address issues identified through the surveys.

Board Activities

As previously mentioned, FIP is a county administered agency which is unlike any other CBC in the state. The St. Johns County Board of County Commissioners is prohibited from providing direct guidance and/or direction for any operational processes or needs by Florida Statute 125.74 and St. John's County Ordinance Section 6. The board does provide limited oversight through fiscal review and budget approval. The board is comprised of elected officials, serving two-year terms, who rely on county administration staff to provide direct and consistent guidance to the HHS director.

Leadership Development

Leadership development is supported through several formal and informal training opportunities including a leadership academy, supervising for excellence and the San Sebastian Toastmasters program which is open to St. Johns county employees and consists of monthly meetings designed to develop

management skills. Further opportunities to enhance leadership skills are available through partnerships with Barry University and Flagler College.

Each case management unit has a lead or senior case manager who has been identified as having leadership potential and who acts in a supervisory capacity when the unit supervisor is unavailable. The unit lead provides some mentoring and field training to new case managers.

ANALYSIS

FIP's mission, vision and values are aligned with the Department's and FIP staff are clearly committed to providing quality child welfare services. The agency is county run and as such does not have a board of directors. Instead, county officials oversee FIP operations and provide general guidance and support. FIP employees are supported and retained and leaders are developed through robust county run leadership development trainings.

SECTION 5: WORKFORCE MANAGEMENT

SUMMARY

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

Workforce Capacity

FIP is committed to maintaining a highly skilled and effective workforce. Employees who have completed the introductory/probationary period of six months receive an evaluation, rating performance from one to five (Ineffective, Marginally Effective, Effective, Very Effective, or Outstanding.) Employees who receive an overall evaluation of marginally effective or ineffective will have their probationary period extended in order to closely monitor performance. Employees in a probationary status whose overall evaluation is marked marginally effective or ineffective are subject to adverse employment action.

Of the 20 case managers employed by FIP, four are assigned to serve families involved with In-Home Non-Judicial (IHNJ) services. While the case managers who are serving court involved families have average caseloads in the mid to high twenties, average caseloads for IHNJ case managers are five to seven suggesting potential capacity to offset the higher caseloads of the former group. Newly trained case managers begin with a restricted caseload of no more than five cases (ten children) in their first month out of pre-service. Following completion of the first month, additional cases are added in accordance with FIP's rotation and assignment guidelines.

Retention Activities

Historically, FIP has had a low turnover rate. From May 2018 through May 2019, FIP experienced no turnover. FIP ensures staff satisfaction through various activities and trainings geared toward compassion fatigue and "burn out". Recently, FIP offered a training with Tonier Cain on Trauma Informed Care practices, including self-care and secondary trauma support. This training was well received by staff. Additionally, FIP creatively collaborated with St. Johns County Animal Control to bring in a dog and a couple of kittens for the staff to interact with during training. This creative supplement to the training experience was widely enjoyed by staff. The QS team is responsible for tracking and

reporting staff retention and turnover in accordance with 409.988 F.S. requirements and with HHS guidelines. As of September 2019, the agency was at a 91.7% retention rate (source: <u>FIP Turnover</u>).

FIP's robust employee benefit package is a clear reason why FIP is able to maintain consistently low staff turnover. As a county administered agency, staff are eligible to participate in the Florida Retirement System. Staff are eligible to receive up to \$1,000 in tuition reimbursement. Additionally, FIP staff members are able to receive regular cost of living raises in addition to merit increases based on performance. Furthermore, enhanced benefits are made available to FIP staff such as financial literacy and housing assistance programs and are positively viewed by FIP staff. Personnel are regularly recognized at staff meetings for exceptional performance. FIP's Sunshine Network Committee raises money through fund raisers to support staff in their time of need or recognize staff birthdays and special occasions. In addition to the comprehensive benefit package, FIP staff members articulated feeling valued and supported by FIP leadership. Informal supports such as an open-door policy, the ability to access FIP leadership at any time, and allowing schedule flexibility, clearly contribute to personnel satisfaction and retention.

<u>Training</u>

It is the policy of the FIP to ensure all staff members have the opportunity for training and professional development to keep current in their field, enhance their knowledge, skills, and abilities and to ensure teamwork and cooperation among staff and with partner agencies. Training is provided by FIP or County personnel or through contracted providers. Training aligns with certification requirements, federal, state, and local laws. Case managers, supervisors, and licensing specialists are certified and re-certified in adherence to the Florida Certification Board (FCB) standards. Training needs are determined through solicitation of feedback from staff and review of quality and performance standards. Staff report feeling empowered to voice training needs and are allowed to attend trainings to enhance performance of their duties.

All new personnel hired by FIP who do not hold a Florida Certification Board (FCB) certification in at least one of the three valid certifications offered shall attend the Pre-Service Training, led by an approved provider. As of the writing of this report, FIP is not approved by the FCB to lead pre-service training. Following successful completion of pre-service training, required in-service training hours are tracked. FIP's QS department maintains a spreadsheet that itemizes all trainings attended by all FIP staff. Staff members have access to the spreadsheet on a shared drive an are able to monitor their progress toward completion of the required 20 hours of in-service training to maintain their child welfare certification.

Pre-Service Training

In 2018, the Department of Children and Families issued an Invitation to Negotiate for the Northeast Region Child Protective Investigation Training Program and awarded FSSNF the three-year contract which began in July 2018. To cover the entire Northeast Region, FSSNF contracts with Community Partnership for Children in Daytona and Partnership for Strong Families in Gainesville to provide the needed training in their areas. This new collaborative is called the Regional Integrated Training Alliance (RITA).

Through RITA, case managers and child protective investigators receive consistency in training and bridge lasting connections and partnerships that will carry forward throughout their work. Co-training

the core curriculum aids in increasing consistency in local and regional child welfare practices, messaging, and decision-making.

Under RITA, enhancements have been incorporated into pre-service training to improve real application in the field. One enhancement utilizes an Avatar system which allow trainees to practice engagement, collect financial information, and have difficult conversations with one of three available avatars (virtual client). Trainees hear from guest speakers such as a foster parent and a teen who share their first-hand experiences with the child welfare system. A mock courtroom training day is incorporated and provides an opportunity for trainees to practice standing before the Judge or Magistrate for shelter or Judicial Review. Trainees are provided feedback from the judiciary and CLS. The trainees also participate in staffings such as case transfer staffings and permanency staffings.

While RITA has enhanced training in the Region, FIP staff report a deficiency in local specific providers and protocols. Staff members are able to voice their concerns and training needs and report that FIP leadership is responsive to their feedback. Staff reported feeling confident that the pre-service training curriculum would be enhanced in the future to fill the identified gaps.

Case Management Supervisor Development

As previously mentioned, staff who aspire to step into a leadership position have the opportunity to apply to attend the Leadership Academy, Supervising for Excellence, and a position as a Unit Lead. FIP's leadership are committed to recognizing exceptional performance and staff who demonstrate leadership abilities are mentored and encouraged to enhance their skills and apply for leadership positions as they become available. FIP posts leadership positions internally prior to seeking qualified candidates outside the agency.

ANALYSIS

FIP's employee turnover is low and staff report feeling valued and appreciated. FIP's robust benefit package contributes towards employee morale and retention. As a county administered agency, FIP has access to St. Johns County's extensive and beneficial training program, including supervisor development trainings. However, child welfare specific training is primarily provided by neighboring CBCs, limiting the specificity of those trainings to local service providers and protocols. Also, a notable disparity exists between the caseloads of judicial and non-judicial case managers.

SECTION 6: CONTINUOUS QUALITY IMPROVEMENT

SUMMARY

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

FIP's Quality Services (QS) Team consists of one Supervisor and three Specialists. All four staff members hold Florida child welfare certifications. St. Johns County Health and Human Services Finance and Contracts Manager directly supervises the quality services supervisor. The Quality Services employees are considered "blended" positions, which serve the Family Integrity Program primarily, but also provide quality improvement activities and oversight to the Health and Human Services' Social Services division, Housing and Community Development division, and Veteran's Services division. The monies for these positions are 75% funded through the FIP budget and the remaining 25% are funded through general funds from the county and allocated in the Health and Human Services Department budget annually.

Data Quality

The QS team collects data from a variety of sources, including the DCF Scorecard, FSFN Business Objects reporting system, MindShare, Stakeholder surveys, National Data Indicators, and case file review reports. Data elements are drilled down to the case level thereby enabling actionable effects to improve permanency for individual children and families served. Regular management meetings are held on a weekly basis. During these meetings, the following are examples of the type of data is shared and discussed: Supervisory Reviews (monthly/ quarterly), Incident/ Grievance Reports (quarterly), Home visit frequency and quality, Medical, Dental, and Immunization compliance, Birth Parent frequency and quality contact, AFCAR errors- Adoption and Foster Care, Scorecard In Depth Analysis, RSF and FL-CQI review data (quarterly), Child Placement Agreements (CFOP170-11), Systematic/ Local trends; strengths and deficiencies, and National Data Indicators. Additional topics are added to the agenda and discussed as needed.

Data Analysis

While an abundance of data is collected, reviewed and shared with FIP's leadership team, analysis of the data to drive lasting performance improvement is limited. FIP does not have a dedicated data analyst position, thus the task of data analytics is the responsibility of a lean QS team. In response to previous monitoring reports, several root cause analyses were completed. The foundation for the root cause analyses drilled down to the individual cases to correct data errors, staff cases involving suspected errors and monitoring subsequent performance measures each quarter to identify and correct data errors. However further efforts to enhance understanding of the cause for the error and deploy broader countermeasures to reduce or eliminate future data errors were limited.

Performance Improvement Strategy

The QS team is primarily responsible for performing quality assurance and continuous quality improvement activities for the agency. The QS team works closely with the HHS Director and FIP management to determine performance goals and improvement strategies. When performance deficiencies are noted or opportunities for improvement are identified, the QS team monitors performance data to determine if the identified strategies are effective and useful. Timeframes regarding internal and external projects are determined by agency's management, contractual obligations, and a "best practices" approach.

FIP's QS staff are clearly committed to ensuring child welfare activities are aligned with the mission, vision and values of FIP and the Department. Plentiful data and roll up reports are developed and presented to staff at all levels of the organization. While sufficient data exists to identify deficiencies and opportunities to enhance operations, efforts are mostly reactionary and not proactive. There is little evidence that significant interventions have been deployed that will result in lasting change or improvement. Staff report that laborious focus on a specific measure will result in positive outcomes, however when the focus moves to another area or metric, the original area of focus oftentimes wanes.

Quality of Eligibility Determination

FIP's Revenue Maximization Unit consists of one FTE - Federal Funding Specialist (FFS) supervised by the Health and Human Services Finance and Contract Manager. An additional FTE was recently added in response to recent federal Title IV-E changes and the Guardianship Assistance Program (GAP). The FFS maintains regular communication with peer agencies, participates in monthly statewide Rev Max calls, and regularly attends the annual eligibility conference. The FFS is co-located with both the case managers and child protective investigators which supports timely communication and information sharing. The revenue maximization notification process is mostly informal, non-automated and dependent on efficient communication.

ANALYSIS

FIP's Quality Services team completes quality case reviews to include RSF and CFSR reviews to provide feedback to staff regarding performance. Root cause analyses are completed when areas of deficiency are noted. FIP does not employ dedicated staff to perform data analysis and robust reporting thus the efforts of the Quality Services team are mostly reactionary. The addition of dedicated staff to perform data analysis, tracking, trending and reporting would benefit the agency in identifying and proactively addressing deficiencies before they occur.

SECTION 7: 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 placements and services to transitioning youth and adults.

FIP employs two (2) Licensing and Recruitment Specialists, one (1) GAP Licensing Specialist and one (1) Placement Coordinator. These four positions are supervised by FIP's Program Manager and work collaboratively to cover both placement and licensing functions for the county. At the time of the onsite monitoring visit, FIP placement and licensing staff support and manage 48 licensed homes in St. Johns County. According to the Child Welfare Placement in Out-Of-Home Care Data report, there were a total of 81 licensed homes in FIP's service area, as of March 2019, with 133 traditional foster home beds and 4 therapeutic foster home beds (source: <u>Foster Home Bed Capacity</u>, data pull date: 10/22/19).

According to the Child Welfare Dashboard, Children in Licensed Out-of-Home Care Placed in Removal Circuit by CBC Lead Agency report, 85.96% of children served by FIP were placed in their removal circuit as of September 30, 2019 (source: <u>Placed in Removal Circuit</u>, data pull date: 10/22/19).

Family Foster Home Recruitment

FIP's foster home recruitment efforts primarily consist of 'word-of-mouth' recruitment, outreach to faith-based organizations, tabling at community events and offering a \$100 referral incentive to active foster parents or FIP staff who refer a family who completes the licensing process and accepts a child into their home. Social media outreach is limited to minimal Facebook use. Other social media sites are not utilized as an avenue for foster parent recruitment. Press releases are sent to the St. Augustine Record and FIP staff collaborate with a local radio station to state the need for foster parents. There is little to no evidence of targeted recruitment initiatives to increase teen, special needs or sibling homes.

The recruitment process begins with a telephone screening where information is provided to the prospective foster parent regarding the process and basic information is gathered. This information is then forwarded to FIP's program manager who completes a preliminary background screening using FSFN and local databases. If issues arise during the preliminary screening, the prospective foster parent is contacted. Otherwise, they attend an orientation session which is held monthly and placed on a list for the next scheduled Parent Resources for Information, Development, and Education (PRIDE) class which is offered three times per year. FIP subcontracts with Children's Home Society for the provision of PRIDE training. The nine-week training is held at the FIP office on Tuesday evenings from 6:30pm – 9:30pm. At the time of the writing of this report, an accelerated or weekend class was not offered. At or around the third class, LiveScan fingerprints and local background checks are completed. Following LiveScan and background approval, around week seven or eight of PRIDE training, a preliminary home visit is completed to discover any issues in the home that may prevent licensing approval. After the PRIDE class is completed, a second home visit is conducted to complete the licensing home study. FIP aspires to complete the licensing process by the 60th day following successful completion of the PRIDE class.

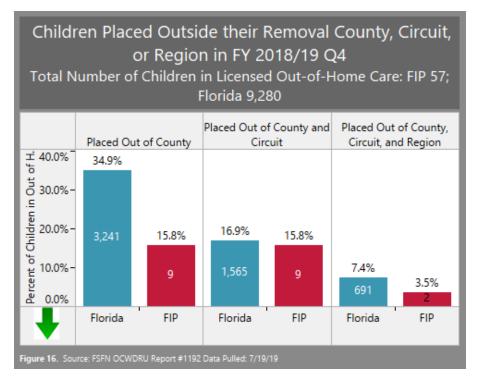
Family Foster Home Retention

FIP hosts an annual foster parent appreciation event which recognizes the contributions foster parents make to the lives of children and families in St. Johns County. FIP staff also work closely with local non-profit agencies to secure school supplies and holiday gifts for children in care. Foster parents expressed feeling valued and a part of the team. FIP staff verbalized their appreciation for foster parents and understand the importance of collaboration and partnership with foster parents. Foster parents clearly voiced their appreciation for FIP's licensing specialists who are readily accessible and helpful whenever an issue arises. Foster parents voiced displeasure with the current PRIDE training and indicated that they trainer appeared pleased when prospective foster parents did not return to class after a session that was particularly difficult. Foster parents indicated that they have reported this concern to FIP staff and feel confident that the issue will be remedied soon. Also, foster parents indicated that the availability of affordable child care is an issue that often impacts their ability to optimally perform their duties and/or accept children in their home.

Placement Process

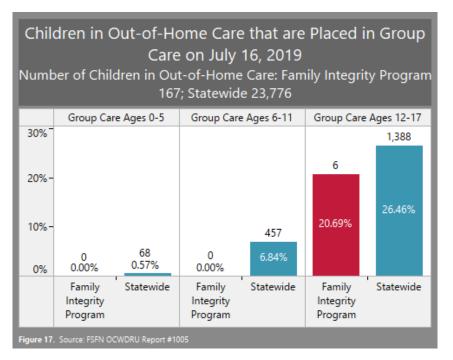
FIP employs one full time placement specialist and two licensing specialists who work in partnership to process initial and subsequent placements requests. Upon a child entering into the system of care, FIP uses a standardized Placement Matching tool to match each child with a home that best suits the child's needs, considering all of the domains that impact a child's quality of life, including family bonds, sibling bonds, education, friends, cultural, ethnic, and religious values and practices, physical, medical, nutritional, developmental needs, emotional well-being, mental health, and personal growth. A clear protocol for monitoring and terminating Comprehensive Placement Assessments, in accordance with Children and Families Operating Procedure (CFOP) 170-11, is not evident.

FIP staff recognize the trauma associated with multiple placements and endeavor to limit placement moves whenever possible. Scorecard data (measure 08: children's placement moves per 1,000 days in foster care) suggests that FIP placement staff are minimizing placement moves whenever possible. FIP staff endeavor to place siblings together whenever possible and scorecard data shows that in FY18/19, FIP was able to place 71.2% of siblings together, exceeding the performance target of 65%. Separated sibling staffings occur on a monthly basis in conjunction with high cost placement staffings.



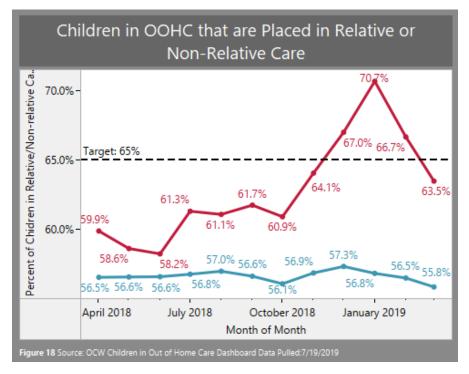
Group Home Care

As of August 2019, 2.96% of children ages 0 - 17 were placed in group care and residential treatment centers in FIP's service area (source: <u>Children in Group Care</u>, data pull date 9/10/19).



Relative/Non-Relative Caregiver Supports

Aside from support from dependency case managers, there is minimal evidence of structured relative and non-relative support in St. Johns County. Support is reactionary and in response to requests for assistance from relative and non-relative caregivers. The figure below depicts the percentage of children in out of home care that are placed in relative and non-relative care (FIP – red; State – blue).



Services to Transitioning Youth and Young Adults

FIP employs one case manager, titled an Independent Living Coordinator (ILC), who serves transitioning youth and young adults. As of the time of the monitoring visit, six youth were in extended foster care and an additional four-five were receiving Postsecondary Education Services and Support (PESS) services. FIP's ILC works closely with St. Johns County Health and Human Services Housing Department to secure affordable and safe housing for young adults. The ILC also works closely with St. Johns County public schools, colleges and area non-profit organizations to link EFC/IL youth and young adults to necessary services to achieve independence. The ILC attends PRIDE gradations and communicates with licensing staff to identify licensed caregivers who have expressed an interest in working with this population. FIP's ILC has forged valuable community relationships to provide essential services, such as housing and life skills training, to youth and transitioning young adults.

ANALYSIS

FIP's foster home recruitment efforts are minimal and primarily consist of word of mouth advertising. Foster parents express feeling supported by licensing staff and a clear collaboration exists between FIP staff and St. Johns County foster parents. Supports for relative and non-relative caregivers is reactionary and the responsibility of case managers. FIP recently added an FTE to provide Guardians As Parents (GAP) services, thus increased support to relatives and non-relatives is anticipated. FIP successfully keeps young children out of group care and reviews group care placements regularly.

SECTION 8: PRACTICE

SUMMARY

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

Theory Comprehension

The St. Johns County FIP operating guideline OG01 outlines the process to ensure all DCF operating procedures and legal updates are distributed to staff. Staff have access to a shared drive where all operating guidelines are posted, and updates are made. All updated or new policies, procedures, guidelines and legal updates are disseminated to staff via e-mail and saved on the shared drive for future reference. Policies, procedures, guidelines and legal updates are also communicated to staff in unit and All Staff meetings.

FIP's focus on family centered practice is most evident in staffings which include parents and focus on the principle of 'nothing about me, without me.' From case transfer staffings to permanency staffings, parents are invited and encouraged to attend and participate. Informal supports and associated providers, to include school social workers, are also invited to attend. Most staff verbalized family centered practices such as preparing a parent for a goal change prior to court but a focus on requiring parents to travel to the office for appointments, family team conferences, etc. appeared to be common. Further, quality reviews show a 16.6% decline in FY18/19 in making concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis. (See Table 8, CQI Item 13)

Recently, staff attended Trauma Informed Care training with Tonier Cain which was widely well received. The training focused on increasing awareness of the characteristics and effects of trauma and

improving the performance of service providers and government agencies who interact with people who have experienced, or are experiencing, trauma. While FIP staff verbalized understanding of trauma informed care principles, demonstration of those skills was not evident.

FIP participates in the Northeast Region Integrated Practice Team (IPT), a solution focused process utilizing a trauma-informed approach to stabilize families. FIP began collecting data on the efficacy of the process in January 2019. According to the data collected as of the end of June 2019, 17 cases were referred for an IPT staffing, 16 staffings occurred and 14, or 87.5%, of the cases staffed were successful in preventing removal/entry into the dependency system.

Practice Competency

FIP staff are introduced to the Practice Model during pre-service training and efforts to ensure transfer of learning to practical application in the field are reinforced through supervisor consults, quality reviews, CTS and permanency staffings. Staff vocalized a need for safety planning training and struggled to demonstrate Practice Model competency during focus groups and interviews. Concerns regarding resistance from the judiciary surrounding conditions for return and safety planning further exacerbate full fidelity to the Practice Model within the system of care. More Practice focused in-service training is needed to fully immerse staff in the model and ensure full application of Practice Model concepts.

ANALYSIS

All staff have been trained on the core practices associated with Florida's Child Welfare Practice Model and efforts to improve practice are ongoing. However, further support and training on the Practice Model is needed, to include safety planning training. The majority of staff exhibited knowledge and understanding of trauma informed and family centered practices. Enhanced trauma informed care trainings are offered to, and readily received by, FIP staff.

SECTION 9: PARTNERSHIP RELATIONS

This category focuses on established relationships with Child Protective Investigators (CPI), 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.

Child Protective Investigations

The Child Protective Investigations units are co-located with FIP at the St. Johns County Health and Human Services building. Co-location enables timely and ongoing communication between case management and investigations and augments relationships between the two groups. Case managers and investigators co-train and share social events such as pot lucks and employee recognition events. Both case managers and investigators describe a harmonious and collaborative relationship which contributes to efficiency of operations and enhanced services to families being served by FIP. Staff from both agencies report that the case transfer process is smooth and when issues arise they are resolved expeditiously.

Children's Legal Services

Children's Legal Services (CLS) are co-located with FIP at the St. Johns County Health and Human Services building. While communication is sometimes lacking, especially surrounding family events that

impact the case such as incarceration of a parent, collaboration between FIP and CLS is solid. CLS reports that issues are isolated to one unit but expressed confidence that FIP leadership would remedy the issues. Overall, CLS reported that FIP leadership is receptive and responsive when issues are presented and stated that when issues are discussed, resolution follows.

<u>Judiciary</u>

Two judges preside over dependency cases in St. Johns County. Feedback was solicited and received from both judges and clear differences in opinion were noted. Efforts to improve communication and relationships with the judiciary are ongoing. The judiciary hosts a roundtable meeting monthly which case managers are encouraged to attend and where issues are discussed, and resolutions are pursued. Circuit meetings are held quarterly. Front line staff describe feeling stressed or frightened to go to court due one of the judges showing front line staff a lack of professional respect and the judge displaying a lack of understanding of the practice model, in particular, safety planning. However, FIP staff report feeling supported by FIP leadership and express faith in FIP's executive leadership to resolve issues and minimize barriers.

<u>GAL</u>

While not co-located with FIP, Guardian Ad Litem (GAL) staff are housed a short distance from FIP's offices. The GAL focus group revealed a solid working relationship between case management and GALs. GALs expressed appreciation for training received from FIP staff and report feeling included in case decisions. GAL are invited and encouraged to attend staffings and are able to do so via conference calls when necessary. Child Advocate Managers (CAMs) are invited to shadow a case manager which further strengthens teamwork and role delineation between the two groups.

Other Governmental Agencies

FIP works with the Agency for Persons with Disabilities (APD) to secure services for individuals with disabilities such as autism, cerebral palsy, spina bifida, intellectual disabilities, down syndrome, etc.

FIP is co-located with the Stewart-Marchman-Act Behavioral Healthcare (SMABHC) who provide behavioral health services as well as substance abuse, residential and detox services. FIP is also colocated with the County Health Department, Social Services, Housing and Community Development and Veterans' Services. Co-location fosters communication and aids FIP in securing seeded services for children in families served in an expeditious manner.

Lutheran Services Florida Health Systems (LSFHS) is the Managing Entity contracted with the Department to serve the entire Northeast Region and a portion of the Central Region. LSFHS serves 23 counties, including St. Johns County. FIP works in partnership with LSFHS to secure behavior health and substance abuse services for individuals in St. Johns County who do not have the financials means to secure needed services such as prevention, intervention, treatment and care coordination.

Domestic Violence Service Providers

Domestic violence services are provided through the Betty Griffin Center in St. Johns County. The Center operates a 54-bed emergency shelter, six transitional apartments, and provides outreach services, training and education throughout St. Johns County. FIP worked in partnership with multiple

community partners including the Department, the St. John's County Clerk of Court, the 7th Judicial Circuit Office of the State Attorney, the Sheriff's Office in St. John's County, and the Betty Griffin Center to coordinate services and develop a Memorandum of Understanding (MOU) for a Batterers Accountability Specialist in St. Johns County. The Batterers Accountability Specialist is co-located with FIP and provides unique services to enhance the area's domestic violence services by focusing on perpetrator accountability in a respectful and collaborative manner. The Batterers Accountability Specialist regularly performs a variety of functions including attending weekly case transfer and high-risk case staffings, providing individual case consultation to partners, attending multi-disciplinary staffings, case plan conferences, family team conferences and assisting investigators and case managers in petitioning for Chapter 39 Injunctions. This grant funded position was recently renewed for another three-year term.

Educational Coordination

FIP works collaboratively with educational partners and resolves issues when they arise. For example, staff reported an access problem about a year ago. FIP leadership reached out to the school system to address the problem and it is now resolved. FIP includes educational providers in case decisions when appropriate and school social workers are invited to, and regularly attend, permanency staffings.

ANALYSIS

FIP enjoys positive partnership relations with local partners and makes every effort to meet regularly with partners and resolve any issues that arise. FIP is co-located with many partners which aids in collaboration and efficiency.

SECTION 10: 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 Services Council.

Faith-Based Community

FIP works with the St. Johns County faith-based community to recruit foster parents and garner needed goods and services for families served in the system of care. At the time of the writing of this report, FIP was exploring a relationship with Compact to provide CompaCare, an evidence-based, compassionate care ministry resource that mobilizes, trains, and organizes the faith-based community to recruit and support foster parents and volunteers.

Business Community

FIP has been able to leverage relationships within the business community to attain needed good and services in the community. For example, Beaver Toyota donated a van to an adoptive family of six enabling them to travel together safely.

Media Relationship

FIP's Program Manager participates in local radio segments twice annually to promote FIP's mission and broadcast the need for quality foster homes in St. John's County. Additionally, FIP has developed a relationship with the St. Augustine Record to encourage positive community wide representation of FIP and St. Johns County Human Service operations.

Community Alliance

FIP leaders participate in the Circuit 7 Community Alliance which brings community leaders, child welfare staff and system stakeholders together to address system challenges and barrier that impact positive outcomes for children and families in St. Johns County, and other surrounding counties in Circuit 7. Additionally, FIP employs a Community Outreach Specialist who works within the community to develop connections between staff and community partners to promote positive outcomes for the children and families served by FIP.

ANALYSIS

FIP has continued to develop positive working relationships with faith-based agencies and some local businesses. An opportunity to expand relationships with community resources exists and would benefit the families served by FIP.

SECTION 11: ACTIONS TAKEN IN RESPONSE TO PREVIOUS MONITORING ACTIVITIES

The CBC Monitoring Team completed a desk review in December 2018 for FY 18/19. The following is a summary of the findings and any actions taken by FIP to improve. The full <u>FY1819 FIP Desk Review</u> is available for reference.

Areas Needing Action Identified in Previous Report

- 1) Percent of children who do not re-enter foster care within 12 months of moving to a permanent home (M07)
 - a) This finding was included on a Corrective Action Plan and the Northeast Region FIP Financial Viability Plan.
 - b) *Improved Performance* Despite a slight decline in FY18/19 Quarter 4, FIP's performance on this measure has been trending positively since FY17/18, quarter 3 and FIP has exceeded the performance target since FY18/19, quarter 1.
 - c) Summaries of Actions Taken: Item 1.3(b) of the NER FIP Financial Viability Plan includes reviewing removal trends and completing a root cause analysis to determine the cause for reentry into the system of care. Additionally, a root cause analysis was completed and determined that reasons for re-entry were related to substance misuse and reunification against the agency's recommendations. Countermeasures were deployed including provision of community services to parents with the closure letter which outlines options to contact FIP prior to any crisis. FIP was removed from the CAP requirement and are currently meeting the performance measure.

Opportunities for Improvement Identified in Previous Report

- 1) 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?
 - a) This finding was included on a corrective action plan,
 - b) For Quantitative or Qualitative Findings *Improved Performance* In FY18/19, FIP's performance on this measure improved by 14.2% to 87.5%, just shy of the federal PIP goal of 88.5%.
 - c) Summaries of Actions Taken: A root cause analysis was completed and determined that an increase of children with behavioral and mental health concerns came into care during 17-18, Q1 with a correlating decrease in the number of bed days due to reunification efforts. Countermeasures were deployed including trauma informed care training for foster parents, collaboration with the Department regarding relative/non-relative caregiver identification and home studies and quality home study training for staff. FIP was removed from this CAP item and is currently meeting the performance target.
- 2) 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 the case goals?
 - a) This finding was not included on a corrective action plan, performance improvement plan, local action plan, any other improvement plan or initiatives developed by the Region or CBC.
 - b) For Quantitative or Qualitative Findings –*Performance Declined* In FY18/19, FIP's performance on this measure declined 1.3% to 67.9% which is below the Federal PIP goal of 78.9%.
 - c) *Summaries of Actions Taken:* FIP developed and implemented a 'Case Manager Home Visit Review Tool' which combines language and guidance from both the RSF and CSFR. Quality Services staff are reviewing a random sample of home visits and then meeting with the case manager to review opportunities to improve the quality of the home visit.
- 3) Placement Related Data Family Foster Home Recruitment Children Placed in/out County
 - a) This finding was included on the Northeast Region FIP Financial Viability Plan.
 - b) For Quantitative or Qualitative Findings *Improved Performance* FIP's performance in maintaining children in their home county and circuit exceeds that of the State.
 - c) Summaries of Actions Taken: Financial Viability Plan Item 2.2 and 2.4 Continue to efficiently license quality foster homes. As of July 2019, the total number of licensed foster homes, year to date, was 50. This was eight below the target, however additional homes are in the licensing process and FIP continues efforts to recruit and license quality foster homes.

SECTION 12: ON-SITE MONITORING SUMMARY

SUMMARY

Family Integrity Program is the Lead Agency in St. Johns County, within Circuit 7. FIP's leadership team is committed to promoting a positive and effective system of care to ensure the highest quality of service

provision to the citizens of St. John's County. All Community based care organizations have opportunities to enhance their systems of care. FIP's strong executive leader and support from county government ensure FIP's success as they endeavor to address the areas needing action and opportunities for improvement noted below.

AREAS NEEDING ACTION:

These findings represent areas that need prompt attention and action.

- 1. Performance
 - a. Safety
 - i. M01: Rate of abuse or neglect per day while in foster care.
 - 1. Finding was included in the FY17/18 COU On-Site Review. In the last fiscal year, overall performance on this measure has improved but has not consistently met the performance goal.
 - ii. M03: Percent of children who are not neglected or abused after receiving services.
 - 1. Finding was included in the FY17/18 COU On-Site Review. In the last fiscal year, overall performance on this measure has improved but has not consistently met the performance goal.
 - b. Permanency
 - i. M05: Percent of children exiting foster care to a permanent home within 12 months of entering care.
 - 1. Finding was included in the FY17/18 COU On-Site Review. In the last fiscal year, overall performance on this measure has improved but has not consistently met the performance goal.

OPPORTUNITIES FOR IMPROVEMENT:

These findings represent areas where there is need for further analysis and development of an agency improvement plan.

- 1. Performance
 - a) Permanency
 - i) 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 goals?
 - 1. In the last two fiscal years, FIP has failed to meet the federal program improvement plan goal on this measure.
 - ii) CQI Item 5: Did the agency establish appropriate permanency goals for the child in a timely manner?
 - 1. In the last fiscal year, overall performance on this measure declined 11.3%.
 - iii) 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?
 - 1. In the last fiscal year, overall performance on this measure declined 14.8%.
 - b) Well Being

- i) 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?
 - 1. In the last two fiscal years, FIP failed to meet the federal performance improvement goal and in FY18/19, FIP's overall performance on this measure declined 1.3%.

2. Systemic

- a. Placement Resources and Processes
 - ii. Recruitment and Licensure of Quality Foster Homes
 - 1. Improved efforts are needed to:
 - a. Recruit and retain foster parents to increase foster home availability in St. Johns County.
 - iii. Relative and Non-Relative Caregiver Supports
 - 1. Formalized, proactive actions to support and preserve relative and nonrelative placements are needed to strengthen these placements and reduce reliance on licensed out of home care.
- b. Caseload Management

ii. A notable disparity exists between the caseloads of judicial and non-judicial case managers. An opportunity exists to allocate resources to more equitably divide the workload for all case managers.

- c. Training
 - i. While RITA has enhanced training in the Region, FIP staff report a deficiency in local specific providers and protocols. Enhanced training to focus on local providers and resources available in St. Johns County is needed.
 - ii. Ongoing concerns with the current foster parent training exist.
- d. Data Analysis and Performance
 - i. Broader analysis to produce effective countermeasures to reduce or eliminate future data errors is needed.
 - ii. Proactive data analytics are needed to predict and address performance deficiencies before they occur.
- e. Service Array
 - i. Safety Management Services and Family Support Services
 - 1. Finding was included in the FY17/18 COU Desk Review. Service array limitations persist.

ADMINISTRATIVE REVIEW:

The following administrative findings were identified during the monitoring:

1. Subcontracts

Contract NJ206, Standard Contract, 8. and attachment 1.9.3. specifies requirements for subcontracting.

- i. The subcontract did not stipulate that all intellectual property, inventions, written or electronically created copyrightable materials arising from the performance of the contract are works of hire for the benefit of the Department.
- 2. Employment Eligibility
 - a. Contract NJ206, Standard Contract, 35.a.vi. specifies the providers compliance with employment eligibility requirements.
 - i. 100% of I-9's and E-Verify requirements were met.

SECTION 13: CONTRACT MONITORING PROCESS

The monitoring process included a review of FIP's programmatic and administrative operations. In addition, the Community Based Care (CBC) 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 indepth assessment of the system of care in seven critical areas of operation: (1) leadership and governance; (2) workforce management; (3) continuous quality improvement; (4) placement resources and process; (5) child welfare practice; (6) partnership relations and (7) community relationships. Additionally, one subcontract was administratively reviewed, along with five employee files for Employment Eligibility Verification.

Supplementary information was provided by the Department's Office of Financial Management Services, Community-Based Care (CBC)/Managing Entity (ME) Financial Accountability, Office of Child Welfare and the Northeast Region contract manager. Several documents were reviewed and analyzed including, but not limited to: quarterly financial viability reports, system adoption initiative gap analysis, service array assessment and stakeholder survey results. Additional information was gathered through interviews of FIP and DCF staff including leadership from the Northeast Region, FIP management level and specialist level staff, case managers, case manager supervisors and case management leadership, whether internal to CBC or subcontracted to case management organizations. Focus groups were held to obtain information from DCF child protective investigators, Children's Legal Services, guardian ad litem, community partners, and foster parents.

The CBC monitoring team consisted of Department of Children and Families Community Based Care Monitoring Unit staff – Kelly Welch and Jessica Manfresca, DCF Child Welfare representatives – Tina Cain, Northwest Region and Mark Shults, QA and CBC representatives Diane Greene with Embrace Families and Kristyn Robinson with Big Bend Community Based Care.

SECTION 14: APPENDIX 1

OVERALL **COUNTY RANK**

- 2019 FLORIDA CHILD WELL-BEING INDEX -Saint Johns County

Keeping a focus on where counties can make life better for our children & families

| ECONOMIC WELL-BEING DOMAIN RANK | | Baseline Year | % | Current Year | % | Number | Change |
|---------------------------------------|---|---|---|--|---|---|--|
| | Children in poverty | 2012 | 11.7 | 2017 | 9.1 | 4,824 | 3 |
| | Unemployment rate | 2012 | 6.5 | 2017 | 3.3 | 4,075 | 3 |
| | High housing cost burden (>30% income spent) | 2008-2012 | 38.1 | 2013-2017 | 29.0 | 24,257 | 3 |
| | Teens not in school and not working | 2008-2012 | 5.8 | 2013-2017 | 4.7 | 537 | 3 |
| | | Baseline Year | % | Current Year | % | Number | Change |
| | 3 & 4 year old children not enrolled in school | 2008-2012 | 36.3 | 2013-2017 | 40.2 | 2,075 | 8 |
| EDUCATION WELL-BEING | 4th grade students not proficient in English Language Arts | 2014-2015 | 55 | 2017-2018 | 55 | 1,657 | Unchanged |
| DOMAIN RANK | 8th grade students not proficient in math | 2014-2015 | 58 | 2017-2018 | 54 | 1,092 | 占 |
| | High school students not graduating on time | 2012-2013 | 13.3 | 2017-2018 | 6.7 | 202 | 占 |
| | | | | | | | |
| | | Baseline Year | % | Current Year | % | Number | Change |
| ** | Low-birthweight babies | Baseline Year 2012 | % 6.5 | Current Year 2017 | % 6.6 | Number 140 | Change Unchanged |
| HEALTH WELL-BEING | Low-birthweight babies Uninsured children | | | | | | - |
| WELL-BEING DOMAIN RANK | | 2012 | 6.5 | 2017 | 6.6 | 140 | Unchanged |
| WELL-BEING | Uninsured children Overweight and obese 1st, 3rd & 6th grade | 2012 2011 | 6.5 9.4 | 2017 2016 | 6.6 4.6 | 140 2,477 | Unchanged |
| WELL-BEING DOMAIN RANK | Uninsured children Overweight and obese 1st, 3rd & 6th grade students High school teens who used alcohol/drugs | 2012 2011 2012-2013 | 6.5 9.4 23.6 | 2017 2016 2017-2018 | 6.6 4.6 23.5 | 140 2,477 1,985 | Unchanged C Unchanged |
| WELL-BEING DOMAIN RANK 3 | Uninsured children Overweight and obese 1st, 3rd & 6th grade students High school teens who used alcohol/drugs | 2012 2011 2012-2013 2014 | 6.5 9.4 23.6 35.5 | 2017 2016 2017-2018 2018 | 6.6 4.6 23.5 33.4 | 140 2,477 1,985 237 | Unchanged C Unchanged |
| WELL-BEING DOMAIN RANK | Uninsured children Overweight and obese 1st, 3rd & 6th grade students High school teens who used alcohol/drugs (past 30 days) | 2012 2011 2012-2013 2014 Baseline Year | 6.5 9.4 23.6 35.5 % | 2017 2016 2017-2018 2018 Current Year | 6.6 4.6 23.5 33.4 % | 140 2,477 1,985 237 Number | Unchanged C Unchanged Change |
| WELL-BEING DOMAIN RANK 3 | Uninsured children Overweight and obese 1st, 3rd & 6th grade students High school teens who used alcohol/drugs (past 30 days) Children in single parent families | 2012 2011 2012-2013 2014 Baseline Year 2008-2012 | 6.5 9.4 23.6 35.5 % 20.6 | 2017 2016 2017-2018 2018 Current Year 2013-2017 | 6.6 4.6 23.5 33.4 % 20.2 | 140 2,477 1,985 237 Number 9,278 | Unchanged Changed Unchanged Unchanged |

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 health care; (2) Communities prevent child abuse, juvenile justice involvement, and substance abuse; and (3) Parents have educational and work opportunities that support their families.

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