



# CONTRACT OVERSIGHT DESK REVIEW

Devereux Community Based Care, #ZJK85

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

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## EXECUTIVE SUMMARY

The Department's Contract Oversight Unit performed a Desk Review for Devereux Community Based Care (DCBC), Contract #ZJK85. DCBC provides child welfare services for Circuit nineteen, which encompasses Martin, St. Lucie, Indian River and Okeechobee Counties in the Southeast Region of Florida since November 2013. The scope of DCBC's desk review was determined by Department of Children and Families Executive Leadership, with the intent of informing the development of a plan to address ongoing performance. The period under review encompasses data available as of February 2018.

## NATIONAL SNAPSHOT

The charts and graphs on the following page are provided by Casey Family Programs. Casey Family Programs works in all 50 states, the District of Columbia and two territories and with more than a dozen tribal nations. They actively work with Florida child welfare professionals to improve practice through use of evidence based programs and data analytics. Data on the following page provides information related to safety, permanency, length of time in care, placement and entries and exits. The following Casey data shows that the number of children in care being served by DCBC declined in 2015 & 2016 but increased slightly in 2017 and the rate of children in care fell below the state and national rate in 2015-2016 but is now comparable to both the state and national rate. Over the past few years, DCBC has shown some improvement in the percent of permanency for children in care between three and twenty-three months.

## Data Basics

### Devereux CBC

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

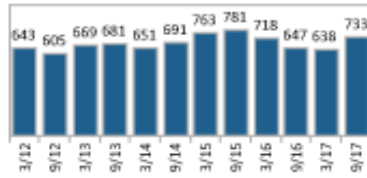
Produced by Data Advocacy, Casey Family Programs

Data source: state-submitted AFCARS and NCANDS files

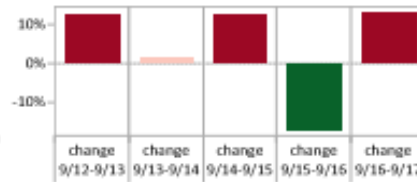
Date prepared: 1/8/2018

#### # of children in care

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



#### year over year change in the # in care



#### rate in care

(per 1,000, < age 18)

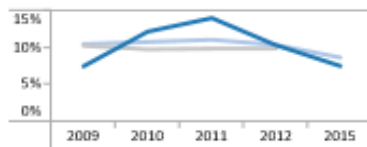


## Safety

#### % children who experience repeat maltreatment within 6 months



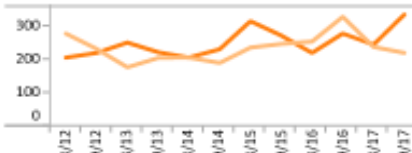
#### % children who experience repeat maltreatment within 12 months (note 2013-2014 data masked due to data quality)



## Entries

#### # of children entering & exiting

(6 month entry cohorts ending on each date)

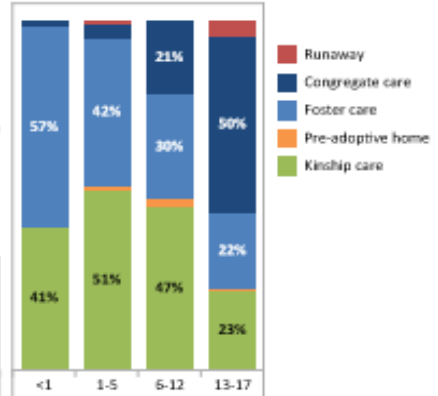


#### rate of children entering care



## Placement

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



## Timely & Stable Permanency

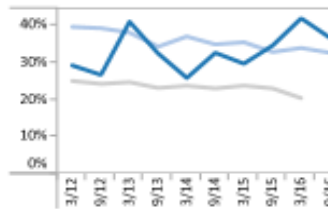
#### % permanency within 30 days of entering care

(6 month entry cohorts ending on each date)



#### % permanency within 3-12 months of entering care

(6 month entry cohorts ending on each date)



#### % permanency w/in 12 months for children in care 12-23 months



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

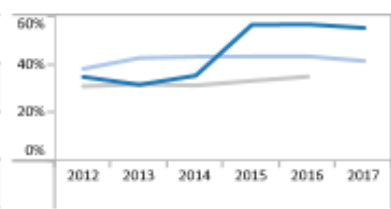


## Children In Care 2+ Years (9/30/2017)

#### in care 2+ years

#	90
%	12%
state	17%
Nat'l (2016)	25%

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



#### profile of current caseload in care 2+ years

(for groups that represent at least 2% of the total; by age, placement type and case plan goal)

	ages 2-12		ages 13-17		
	Adopt	Adopt	APPLA	NA	Relatives
Congregate care	10%	17%	8%	2%	
Foster care	28%	8%			
Kinship care	21%	3%			2%
Runaway		2%			

## SECTION 1: SERVICE AREA DESCRIPTION

This section provides a snapshot of the community DCBC serves, including demographic information, a description of the child welfare partners and information about all child fatalities, including those investigated by the Department. DCBC provides child welfare services for Circuit nineteen, which encompasses Martin, St. Lucie, Indian River and Okeechobee Counties in the Southeast Region of Florida since November 2013. The median household income in three of the four counties is lower than the statewide average. Martin County has the highest average household income and the greatest percentage of the population over 25 years old with a high school diploma and college degree. In contrast, residents of Okeechobee County have the lowest average household income, greatest percentage of residents living in poverty and the lowest percent of the population with a high school diploma and/or college degree (see Table 1).

US Census Facts	Indian River	Martin	Okeechobee	St. Lucie	Florida
Median Household Income	\$47,466	\$52,622	\$36,415	\$44,140	\$48,900
Percent of population living in poverty	12.3%	11.3%	20.2%	17.0%	14.7%
Percent of population over 25 years old with high school diploma	87.6%	90.0%	71.9%	88.8%	87.2%
Percent of population over 25 years old with a college degree	27.2%	31.5%	10.7%	19.8%	27.9%

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

## CHILD FATALITIES

### INFANT AND CHILD MORTALITY RATES

The birth rate per 1,000 population is lower than the statewide average in Indian River, Martin and St. Lucie Counties. In Okeechobee County between 2012 and 2015, the birth rate was higher than the statewide average of 11.1 (see Table 2).

Birth Rate per 1,000 population					
Statewide Rate: 11.1					
County	2012	2013	2014	2015	2016
Indian River	8.9	8.7	9.1	8.6	8.5
Martin	7.6	7.9	8.5	8.4	8.4
Okeechobee	13.2	13.1	13.9	13	1.8
St. Lucie	10.5	10.6	10.5	10.7	10.2

Source: <http://www.flhealthcharts.com/FLQUERY/Birth/BirthRateRpt.aspx>  
(Run date 12-19-17)

Table 2

The infant mortality rate, per 100,000 live births, was relatively consistent with the statewide average from 2012 through 2016. The highest infant mortality rate seen in the four counties was in Indian River in 2012 (see Table 3).

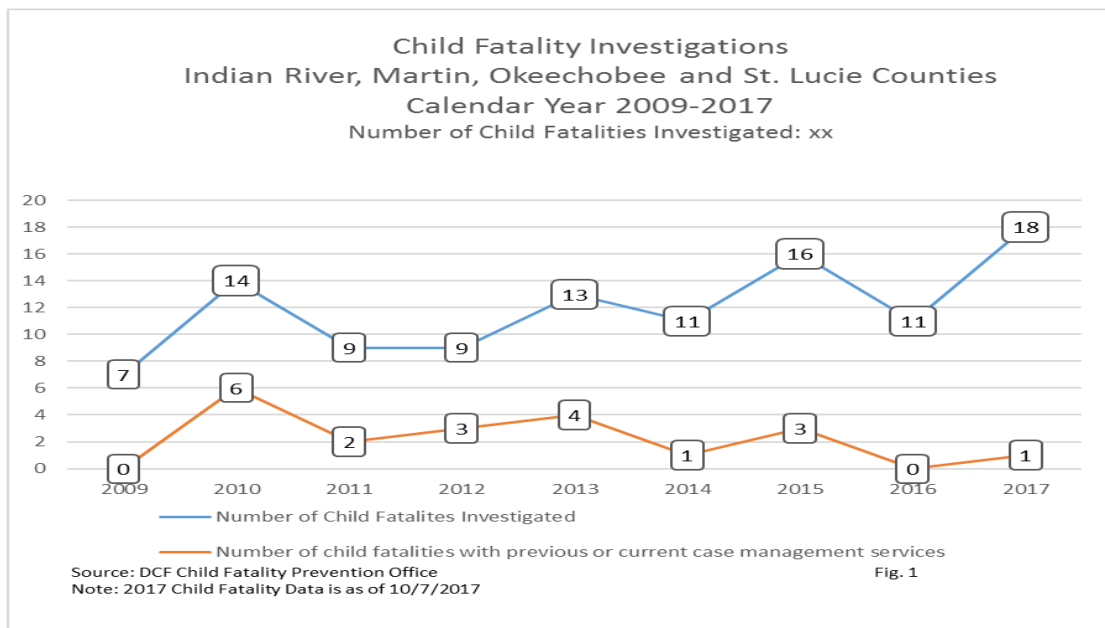
Infant Mortality Rate per 1,000 live births Statewide Rate: 6.1					
County	2012	2013	2014	2015	2016
Indian River	9.6	6.6	4.7	7.2	8
Martin	7.1	6.8	7.1	4.8	7.1
Okeechobee	3.8	7.7	9	5.7	6.2
St. Lucie	5.1	4.3	6.1	5.8	5.3

Source: <http://www.flhealthcharts.com/FLQUERY/InfantMortality/InfantMortalityRateRpt.aspx>

Table 3

### CHILD FATALITY INVESTIGATIONS

From 2009, until the time of this monitoring, 108 child fatalities were investigated in Circuit 19. Of that number, twenty had current or previous case management services (see Fig. 1).



In 2015, Critical Incident Rapid Response Teams (CIRRT) were initiated to examine the circumstances surrounding a child death and assist communities in identifying resources and efforts that may prevent or reduce child fatalities. In Circuit 19, three CIRRT responses were completed from 2016 to date. The CIRRT findings are as follows:

- 8/26/16 – A three-month-old Okeechobee infant was found unresponsive after sleeping on the couch with his mother. At the time of the incident there was an open investigation concerning substance abuse issues. The death was determined to be the result of natural causes stemming from an illness.

- 5/24/17 – A one-month-old Martin infant was pronounced deceased after her parents brought her to the hospital unresponsive. The investigation subsequently revealed that the infant was found unresponsive after sleeping in bed with her parents, both of whom were highly intoxicated.
- 2/19/18 - A one-year-old Okeechobee child was pronounced deceased eight days after he sustained lethal head injuries while in the care of his mother's paramour. The investigation and final CIRRT report are pending.

## SECTION 2: AGENCY SUMMARY

DCBC's mission is to enhance the safety, permanency and well-being for all children in Okeechobee and the Treasure Coast through a community network of family support services.

DCBC was established in November, 2013, when the Department for Children and Families (DCF) awarded DCBC the contract to provide child welfare services in Martin, St. Lucie, Indian River and Okeechobee counties. DCBC is currently in the early stages of a name change from Devereux Community Based Care to Communities Connected for Children.

### NUMBER OF INVESTIGATIONS, REMOVALS AND CHILDREN SERVED

Between FY14/15 and FY16/17, the number of reports accepted for investigation by the Department's child protective investigations team increased by 4.38%. During the same time period, the number of children removed by the Department increased by approximately 11%. The overall number of children and young adults receiving in-home services has been steadily increasing in the past three years while the number of children receiving out of home services slightly decreased (see Table 4).

<b>Child Protective Investigations and Child Removals (Indian River, Martin, Okeechobee and St. Lucie Counties)</b>	<b>FY 2014/2015</b>	<b>FY 2015/2016</b>	<b>FY 2016/2017</b>
Reports accepted for Investigation by DCF (Initial & Additional Reports) <sup>1</sup>	5,359	5,439	5,941
Children Entering Out-of-Home Care <sup>2</sup>	547	448	500
<b>Children Served by Devereux CBC <sup>3</sup></b>	<b>FY 2014/2015</b>	<b>FY 2015/2016</b>	<b>FY 2016/2017</b>
Children Receiving In-Home Services	1,267	960	976
Children Receiving Out of Home Care	1,183	1,173	1,122
Young Adults Receiving Services	114	93	102
Children Receiving Family Support Services	283	369	552

Data Sources:

Table 4

<sup>1</sup>Child Protective Investigations Trend Report through June 2017 (run date 1-2-2018)

<sup>2</sup>Child Welfare Dashboard: Child Welfare Trends/Children Entering Out-of-Home Care (run date 1-3-2018)

<sup>3</sup>FSFN OCWDRU Report 1006 Children & Young Adults Receiving Services by CBC Agency (run date 1-2-2018)

## FINANCIAL VIABILITY REPORT ANALYSIS

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

A total of eight findings were identified: Four findings pertained to non-payroll related disbursements, three pertained to FSFN Review and one finding was identified in the 'Additional Financial Requirements' category. Two observations were noted and technical assistance pertaining to general ledger was provided. DCBC followed the recommendations set forth in the monitoring report and corrected and/or submitted responses to all identified issues.

For further details, please see the complete fiscal report – [2017-18 CBC Desk Review Financial Monitoring of DCBC](#)

## SECTION 3: PERFORMANCE MEASURES AND QUALITY ASSURANCE DATA

This area assesses whether DCBC is meeting contract measures and evaluates their functioning related to performance and quality measures. In two of the thirteen measures listed on the next page, DCBC's performance, at the end of FY16/17, was below the CBC Contract Measure targets, however both were within a percentage point of meeting the measure. Further discussion, to include more recent performance trends, is contained in succeeding sections.



**CONTRACT AND CBC SCORECARD MEASURES**

SC #	Devereux CBC Performance Measures Contract #ZJ85SOC	CBC Contract Measure Targets	Federal National Standard (Performance of Other States <sup>1</sup> )	Statewide Performance (FY 2016/2017)	Devereux CBC	
					FY 2015-2016	FY 2016-2017
					July 1, 2015- June 30, 2016	July 1, 2016- June 30, 2017
1	Rate of abuse or neglect per day while in foster care <i>(Source: CBC Scorecard)</i>	<8.5	<8.5	10.56	12.84	8.63
2	Percent of children who are not neglected or abused during in-home services <i>(Scorecard)</i>	>95%		97.20%	97.20%	97.30%
3	Percent of children who are not neglected or abused after receiving services <i>(Scorecard)</i>	>95%		95.60%	96.60%	96.60%
4	Percentage of children under supervision who are seen every thirty (30) days <i>(CBC Scorecard)</i>	>99.5%		99.80%	99.90%	99.90%
5	Percent of children exiting foster care to a permanent home within twelve (12) months of entering care <i>(Scorecard)</i>	>40.5%	>40.5% <i>(16%-61%)</i>	41.60%	38.90%	43.70%
6	Percent of children exiting to a permanent home within 12 months for those in care 12 to 23 months <i>(Scorecard)</i>	>44%	>43.6% <i>(21%-50%)</i>	53.70%	60.80%	66.00%
7	Percent of children who do not re-enter foster care within twelve (12) months of moving to a permanent home <i>(Scorecard)</i>	>91.7%	>91.7% <i>(83%-98%)</i>	89%	89.20%	92.30%
8	Children's placement moves per 1,000 days in foster care <i>(Scorecard)</i>	<4.12	<4.12 <i>(2.6%-8.7%)</i>	4.33	4.03	4.13
9	Percentage of children in out-of-home care who received medical service in the last twelve (12) months. <i>(Scorecard)</i>	>95%		97.14%	98.48%	97.88%
10	Percentage of children in out-of-home care who received dental services within the last seven (7) months. <i>(Scorecard)</i>	>95%		92.70%	93.90%	95.00%
11	Percentage of young adults in foster care at age 18 that have completed or are enrolled in secondary education <i>(Scorecard)</i>	>80%		87.60%	84.90%	85.80%
12	Percent of sibling groups where all siblings are placed together <i>(Scorecard)</i>	>65%		63.90%	65.60%	67.90%
	Number of children with finalized adoptions <i>(DCF Dashboard run date 10/17/18)</i>				174	162

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

Table

**PERFORMANCE INDICATORS AND QUALITY ASSURANCE DATA**

This section provides a picture of DCBC’s performance as indicated by data indicators that are used to assess how well DCBC 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 12 key measures to determine how well they are meeting the most critical needs of at-risk children and families.

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

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

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

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

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

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

## CHILD SAFETY

Ensuring children are not exposed to maltreatment is of utmost importance. DCBC is performing above target or trending positively in most child safety measures. Some RSF (Rapid Safety Feedback) and CQI (Continuous Quality Improvement) reviews highlight areas where continued efforts to improve performance are warranted.

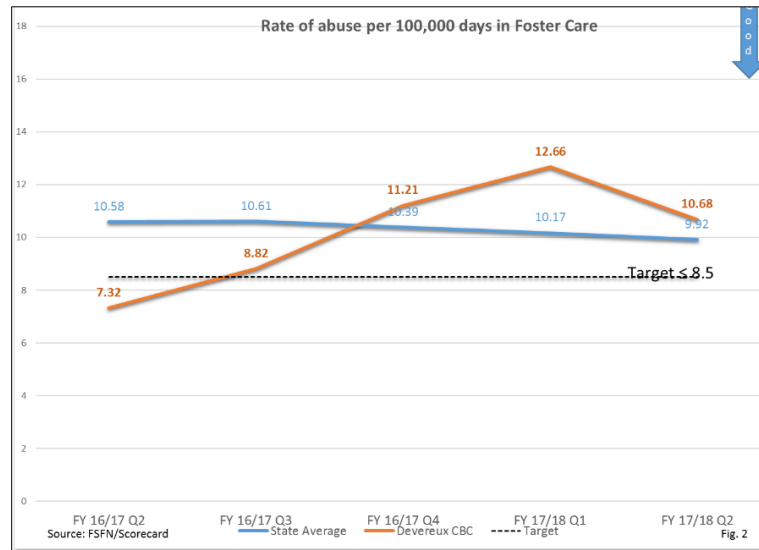
The graphs and tables on the following pages depict DCBC’s performance related to child safety in the following areas:

1. Rate of Abuse in Foster Care
2. No maltreatment after Family Support Services
3. No maltreatment during in-home services
4. No maltreatment after termination of supervision
5. Children seen every 30 days
6. CQI qualitative case review results

## RATE OF ABUSE IN FOSTER CARE

**Rate of abuse or neglect per day while in foster care (Scorecard Measure M01):** The graph below depicts the

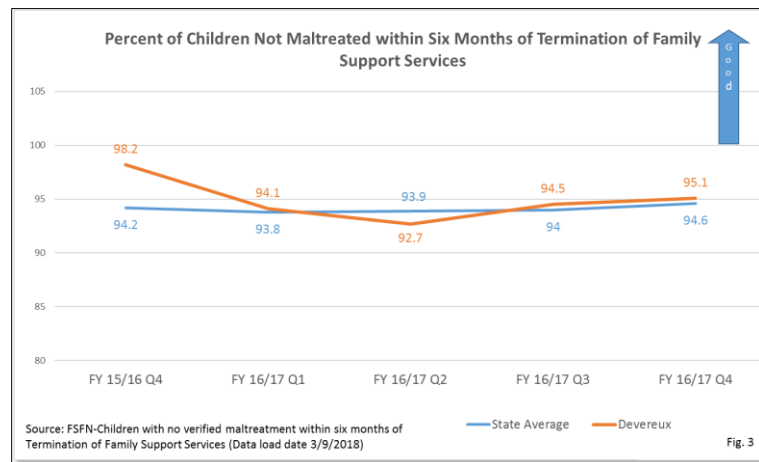
rate at which children are the victims of abuse or neglect while in foster care (per 100,000 bed days) during the report period. This is a national data indicator that measures whether the state child welfare agency ensures that children do not experience abuse or neglect while in the state's foster care system. The purpose is to hold states accountable for keeping children safe from harm while under the responsibility of the state. DCBC has failed to meet the performance target in the past four quarters. Additionally, CQI reviews show a need for improvement in making concerted efforts to assess and address the risk and safety concerns related to child(ren) in their home or while in foster care (CQI Item 3 – see Table 6 which shows a 20% improvement from FY15/16 performance. A continued positive trend in performance is needed to meet or exceed the statewide average performance, the Federal CFSR performance and the Federal PIP goal on this measure.



## NO MALTREATMENT AFTER FAMILY SUPPORT SERVICES

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

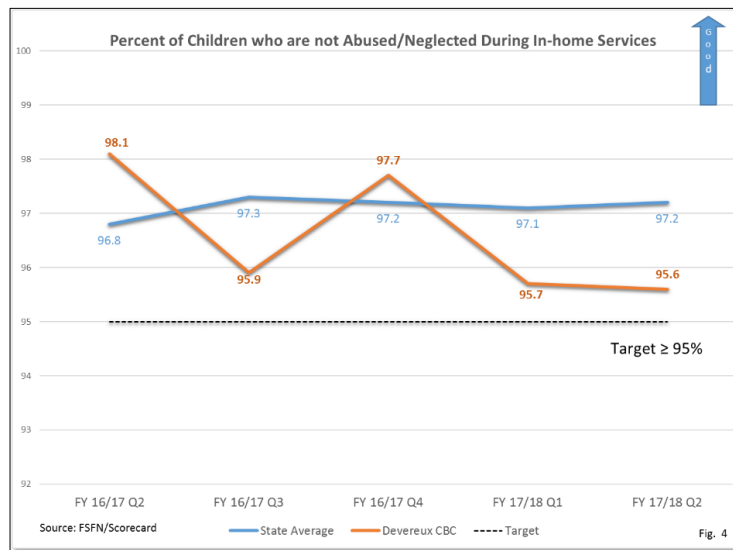
Figure three depicts the percentage of children who did not have a verified maltreatment after termination of family support services. This is a Florida indicator that measures the CBC's success in keeping children safe after prevention services have ended. DCBC exceeded the statewide average in the past two quarters and appears to be slightly trending positively on this measure. Currently, DCBC has a rating of '4' for Family Support Services and '3' for Safety Management Services.



## NO MALTREATMENT DURING IN-HOME SERVICES

### Percent of children not abused or neglected while receiving in-home services (Scorecard Measure M02):

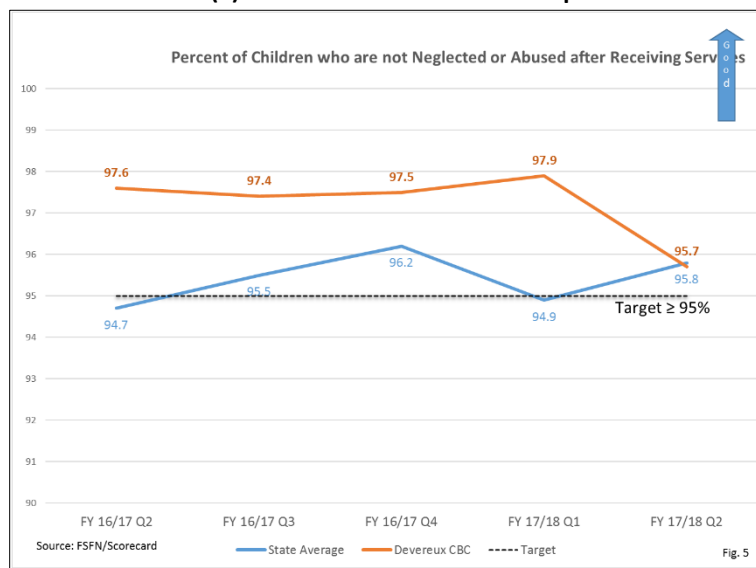
Figure four depicts the percentage of in-home service episodes during the report period where the child did not have a verified maltreatment while receiving services. This indicator measures whether the CBC was successful in preventing subsequent maltreatment of a child while the case is open and the CBC is providing in-home services to the family. DCBC has exceeded the target in the past six quarters. Quality reviews show a need to improve frequency of visits and efforts to assess and address risk and safety concerns and ensure the safety, permanency and well-being of the child(ren) to promote achievement of goals and outcomes (See Tables 6 & 7, CQI Items 3 & 14 which shows improvement from FY15/16 performance. A continued positive trend in performance is needed to meet or exceed the statewide average performance, the Federal CFRS performance and the Federal PIP goal on this measure).



## NO MALTREATMENT AFTER TERMINATION OF SUPERVISION

### Percent of children with no verified maltreatment within six (6) months of termination of supervision (Scorecard Measure M03):

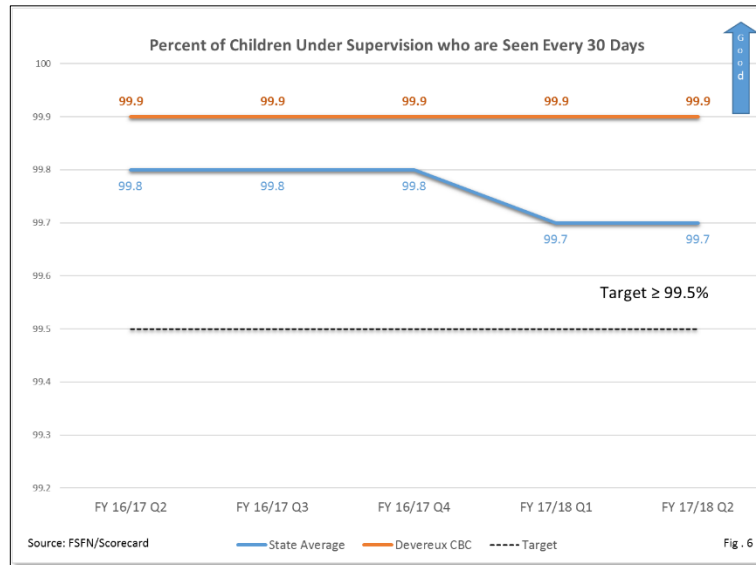
Figure five depicts the percent of children who were not the victims of abuse or neglect in the six months immediately following termination of supervision. DCBC exceeded the target in the past five quarters and exceeded the statewide average in four of the past five quarters, with a slight dip in performance in FY17/18 Q2. Some RSF and CQI reviews indicate a need to improve the quality of visits between the case manager and child(ren) to sufficiently evaluate safety and progress towards established goals and outcomes (RSF Items 2.1, 2.5 and CQI Item 14 – see tables 7 & 8).



## CHILDREN SEEN EVERY 30 DAYS

### Children under supervision who are seen every thirty (30) days (Scorecard Measure M04): Figure six depicts the

rate at which children are seen every thirty (30) days while in foster care or receiving in-home services during the report period. DCBC has exceeded both the target and statewide average in the past six quarters. Quality reviews indicate a need to improve the frequency and quality of visits between caseworkers and the child(ren) to sufficiently ensure the safety, permanency and well-being of the child(ren) and promote achievement of case goals (See Table 8, CQI Item 14 which shows improvement from FY15/16 performance. A continued positive trend in performance is needed to meet or exceed the






statewide average performance, the Federal CFSR performance and the Federal PIP goal on this measure).





## QA CASE REVIEW DATA

The table below provides DCBC's performance based on case reviews performed by child welfare professionals. Rapid Safety Feedback (RSF) reviews show that from the period of July 1, 2016 through June 20, 2017, DCBC case managers were completing visits of sufficient quality to address issues pertaining to safety and evaluate progress towards case plan outcomes in 60% of the cases reviewed (see Table 6, RSF 2.1). Sufficient safety plans and family assessments were seen during case reviews (see Table 6, RSF 1.1 and 4.1). Florida CQI reviews further support that DCBC was not making concerted efforts to assess and address the risk and safety concerns related to the children in their own homes or while in foster care (see Table 6, CQI Item 3 which shows improvement from FY15/16 performance. A continued positive trend in performance is needed to meet or exceed the statewide average performance, the Federal CFSR performance and the Federal PIP goal on this measure).

Quality reviews show that DCBC case managers are making concerted efforts to provide services to the family to prevent the child(ren)'s entry into foster care or re-entry after reunification. Additionally, sufficient safety plans are put in place to control danger threats to protect children.

Quality Assurance - Rapid Safety Feedback Item	Devereux CBC n=40	Statewide RSF Performance <sup>1</sup> n=851
<i>Assesment Based on Case Reviews by Child Welfare Professionals</i>		
<b>July 1, 2016-June 30, 2017</b>		
RSF 1.1: Is the most recent family assessment sufficient?	 77.5%	50.6%
RSF 2.1: Is the quality of visits between the case manager and the child (ren) sufficient to address issues pertaining to safety and evaluate progress towards case plan outcomes?	 60.0%	62.7%
RSF 4.1: Is a sufficient Safety Plan in place to control danger threats to protect the child?	 89.5%	60.7%

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

Quality Assurance - Florida CQI Item	Devereux CBC	Devereux CBC	Percent Improvement	Statewide CQI/QA Performance <sup>1</sup> n=1,290	2016 Statewide Federal Child & Family Service Review <sup>2</sup> 4/1/16-9/30/16 n=80	Federal Program Improvement Plan (PIP) Goal <sup>3</sup>	Federal and State Expectation <sup>4</sup>
<i>Assesment Based on Case Reviews by Child Welfare Professionals</i>	FY 2015/2016 n=80	FY 2016/2017 n=71					
CQI Item 2: Did the agency make concerted efforts to provide services to the family to prevent children's entry into foster_care or re-entry after reunification?	95.45%	 97.37%	 1.9%	93.0%	76.5%	85.2%	95.0%
CQI Item 3: Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child (ren) in their own homes or while in foster care?	46.25%	 66.20%	 20.0%	77%	71.3%	77.7%	95.0%

Source: QA Rapid Safety Feedback; Federal Online Monitoring System

Table 6

<sup>1</sup>This date provides the statewide rating in each case review item for all CBCs

<sup>2</sup>This provides the performance rating for the state in each of the items as approved by the Administration for Children and Families.

<sup>3</sup>The PIP Goal is set by the Children's Bureau and is the expected level of improvement needed to avoid financial penalties.

<sup>4</sup>This is the overall federal and state expectation for performance.

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

## PERMANENCY

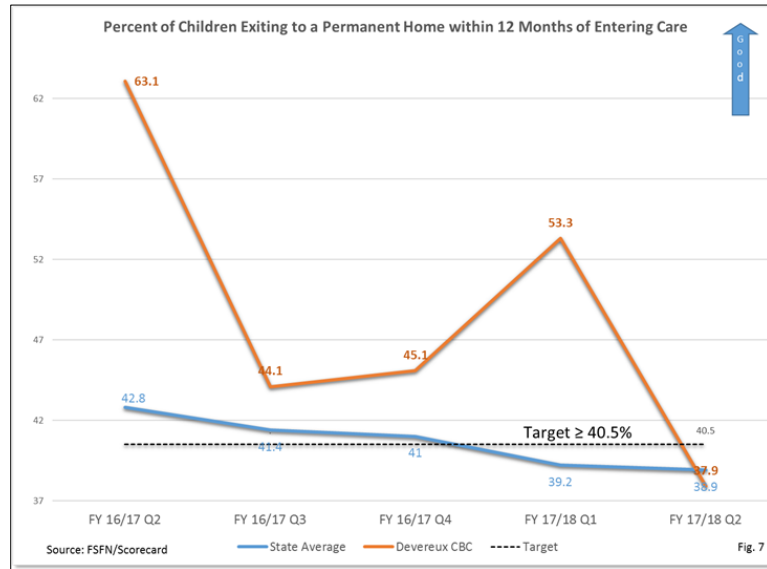
When children are placed in out-of-home care it is imperative that child welfare agencies find safe, permanent homes for them as quickly as possible. Helping children achieve permanency in a timely manner is extremely important to children as a year in a child's life is a significant amount of time. DCBC is performing at or above target in most permanency measures. Some RSF and CQI reviews highlight areas where continued efforts to improve performance are warranted.

The graphs and tables on the following pages depict DCBC'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

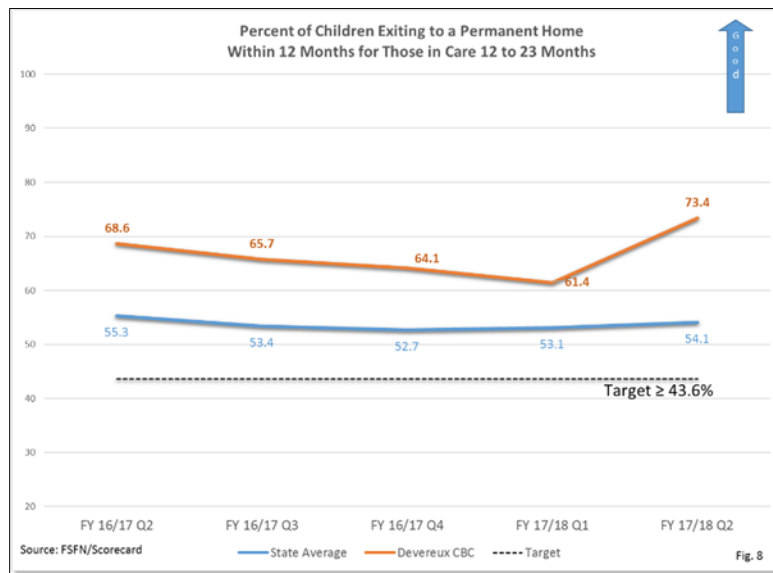
## PERMANENCY IN 12 MONTHS

**Percent of children exiting foster care to a permanent home within twelve (12) months of entering care (Scorecard Measure M05):** Figure seven depicts the percentage of children who entered foster care during the report period where the child achieved permanency within twelve (12) months of entering foster care. DCBC exceeded the performance target in four of the past five quarters. In the most recent quarter, DCBC's performance fell below the target and statewide average. Additionally, quality reviews indicate a need to improve concerted efforts to achieve reunification, guardianship, adoption or other planned permanent living arrangements for the child(ren) (see CQI Item 6, Table 7 which shows a slight decline from FY15/16 performance. DCBC performance remains below the statewide average performance, below the Federal CFSR performance, below the Federal PIP goal on this measure).



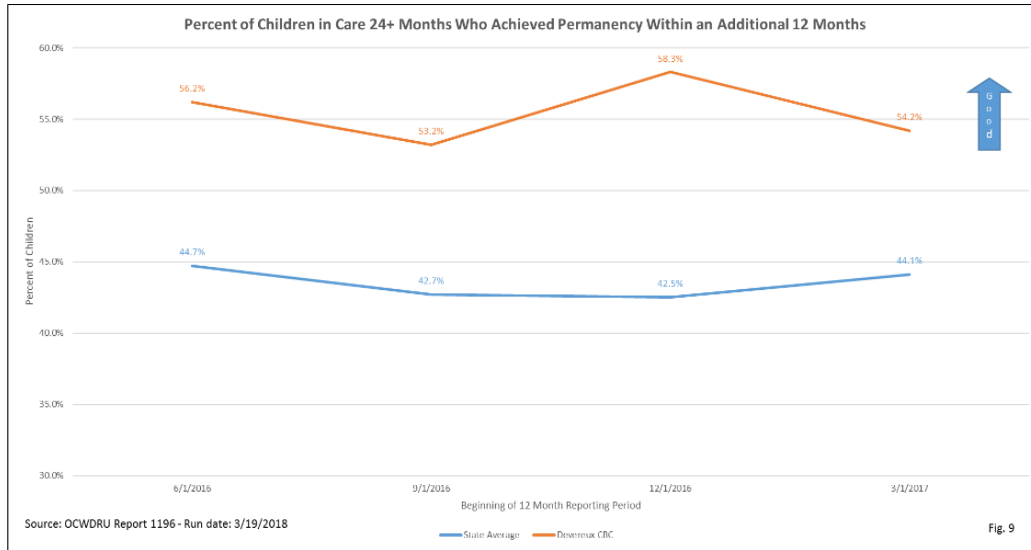
## PERMANENCY IN 12 – 23 MONTHS

**Percent of children exiting foster care to a permanent home in twelve (12) months for children in foster care twelve (12) to twenty-three (23) months (Scorecard Measure M06):** Figure eight provides the percentage of children in foster care, as of the beginning of the reporting period, whose length of stay is between twelve (12) and twenty-three (23) months and who achieved permanency within twelve (12) months. DCBC exceeded the performance target and statewide average performance on this measure for the past six quarters. Additionally, case reviews indicate that the frequency and quality of visits between case workers and parents were of sufficient quality to ensure the safety, permanency and well-being of the child(ren) and promote achievement of case goals (see CQI Item 15, Table 7).



## PERMANENCY AFTER 24 MONTHS

**Percent of children in care 24+ months who achieved permanency within an additional 12 months:** Figure nine provides the percentage of children in foster care whose length of stay is twenty-four (24) months or more who achieved permanency within twelve (12) months of the beginning of the report period. Devereux is performing above the statewide average in securing permanency within an additional twelve months for children who have been in care more than twenty-four months (see Fig. 9).

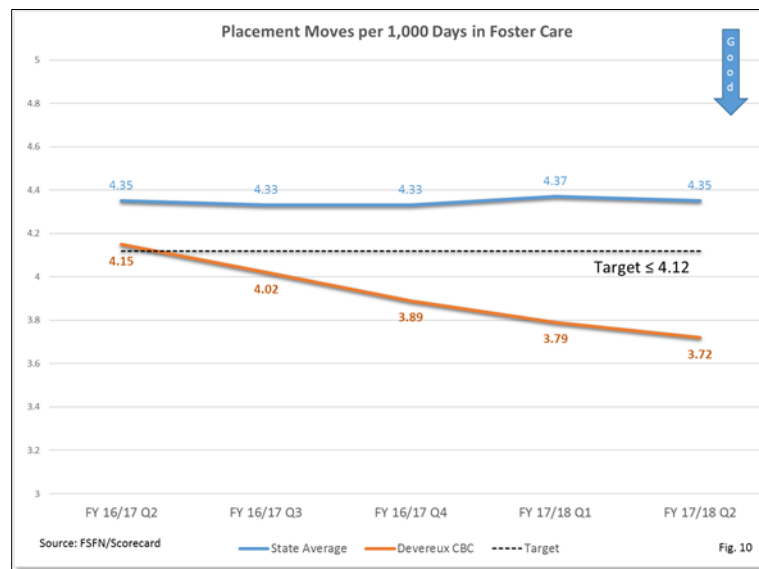


## PLACEMENT STABILITY

**Placement moves per one-thousand (1,000) days in foster care (Scorecard Measure M08):** Figure ten

depicts the rate at which children change placements while in foster care. DCBC placement moves for children in out-of-home care is currently lower than the statewide average and the target and has been trending positively for the past five quarters.

Quality reviews indicate that 83.72% of placement moves were made in the best interest of the child(ren) and/or consistent with achieving the child's permanency goal(s) (see CQI Item 4, Table 7).

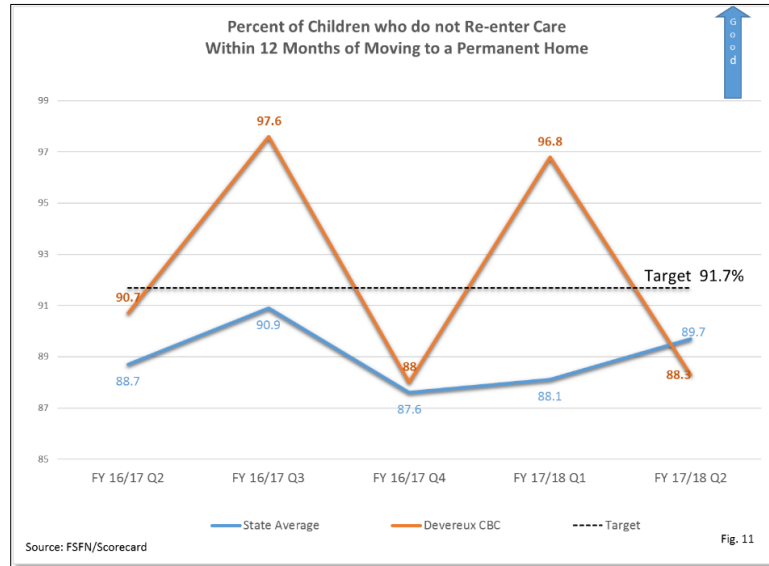




## PERCENT NOT RE-ENTERING INTO OUT-OF-HOME CARE

### Percent of children who do not re-enter foster care within twelve (12) months of moving to a permanent home Scorecard Measure (Scorecard Measure M07):

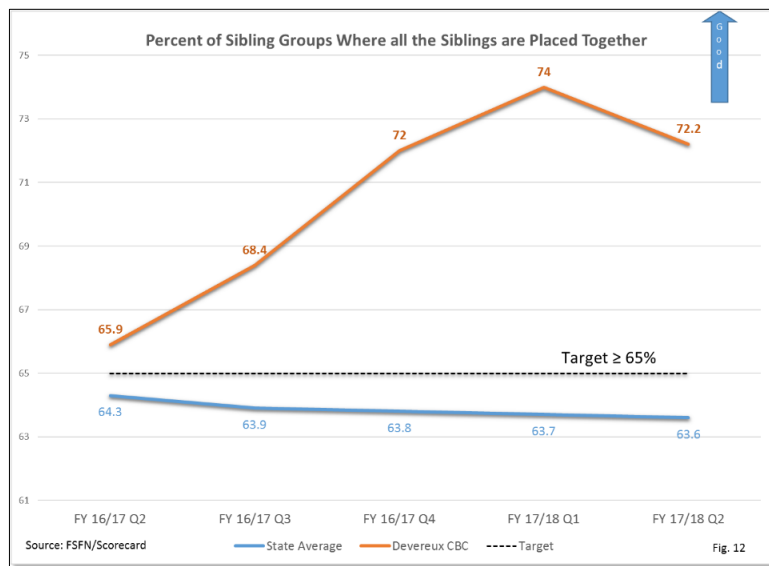
Figure eleven depicts the percentage of exits from foster care to permanency for a cohort of children who entered foster care and exited within twelve (12) months of entering and subsequently did not re-enter foster care within twelve (12) months of their permanency date. DCBC's performance on this measure has show wide fluctuation in the past six quarters with performance in the most recent quarter (FY17/18 Q2) falling below the target and statewide average. However, DCBC met the measure in last fiscal year and overall has improved on this measure.



## SIBLINGS PLACED TOGETHER

### Percent of sibling groups where all siblings are placed together (Scorecard Measure M12):

The percentage of sibling groups with two or more children in foster care as of the end of the report period where all siblings are placed together is depicted in figure twelve. DCBC has exceeded the performance target and statewide average in the past five quarters. Additionally, quality case reviews show that concerted efforts are being made to ensure that siblings in foster care are placed together unless separation was necessary to meet the needs of one of the siblings (see CQI Item 7, Table 7).



## QA CASE REVIEW DATA

The table below provides DCBC's performance based on case reviews completed by child welfare professionals. Rapid Safety Feedback (RSF) reviews show that from the period of July 1, 2016 through June 20, 2017, only 53.3% of the visits between the case manager and father, and 60% of the visits between the case manager and the child(ren)

were of sufficient quality to address issues pertaining to safety and evaluate progress towards case plan outcomes. However, 87.2% of visits between the case manager and mother were of sufficient quality to address issues pertaining to safety and evaluate progress towards case plan outcomes (see Table 7, RSF items 2.1, 2.3 and 2.5).

Quality Assurance Item	Devereux CBC n=40	Statewide RSF Performance
<i>Assesment Based on Case Reviews by Child Welfare Professionals</i>		
RSF 2.1 Is the quality of visits between the case manager and the child(ren) sufficient to address issues pertaining to safety and evaluate progress towards case plan outcomes?	60.0%	62.7%
RSF 2.3 Is the quality of visits between the case manager and the child's mother sufficient to address issues pertaining to safety and evaluate progress towards case plan outcomes?	87.2%	67.7%
RSF 2.5 Is the quality of visits between the case manager and the child's father sufficient to address issues pertaining to safety and evaluate progress towards case plan outcomes?	53.3%	55.1%

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

Quality Assurance - Florida CQI Item	Devereux CBC	Devereux CBC	Percent Improvement	Statewide CQI/QA Performance FY 2016/2017 n=1,290	2016 Statewide Federal Child & Family Service Review <sup>2</sup> 4/1/16-	Federal Program Improvement Plan (PIP) Goal <sup>3</sup>	Federal and State Expectation <sup>4</sup>
<i>Assesment Based on Case Reviews by Child Welfare Professionals</i>	FY 2015/2016 n=80	FY 2016/2017 n=71					
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)?	77.08%	83.72%	6.6%	83.0%	82.0%	88.5%	95.0%
CQI Item 5: Did the agency establish appropriate permanency goals for the child in a timely manner?	60.42%	83.72%	23.3%	84.0%	81.8%	82.1%	95.0%
CQI Item 6: Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangements for the child?	75.00%	72.09%	-2.9%	81.0%	74.5%	75.4%	95.0%
CQI Item 7: Did the agency make concerted efforts to ensure that siblings in foster care are placed together unless separation was necessary to meet the needs of one of the siblings?	62.96%	76.67%	13.7%	64.0%	67.3%	None	95.0%
CQI Item 8: Did the agency make concerted efforts to ensure that visitation between a child in foster care and his or her mother, father and siblings was of sufficient frequency and quality to promote continuity in the child's relationships and with these close family members?	44.19%	54.29%	10.1%	69.0%	69.0%	None	95.0%
CQI Item 9: Did the agency make concerted efforts to preserve the child's connections to his or her neighborhood, community faith, extended family, Tribe, school and friends?	81.25%	88.37%	7.1%	79.0%	82.0%	None	95.0%
CQI Item 10: Did the agency make concerted efforts to place the child with relative when appropriate?	82.98%	95.24%	12.3%	83.0%	72.0%	None	95.0%
CQI Item 11: Did the agency make concerted efforts to promote, support and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregivers from whom the child had been removed through activities other than just arranging visitation?	39.02%	51.52%	12.5%	61.0%	60.0%	None	95.0%

Source: QA Rapid Safety Feedback; Federal Online Monitoring System

Table 7

<sup>1</sup>This date provides the statewide rating in each case review item for all CBCs

<sup>2</sup>This provides the performance rating for the state in each of the items as approved by the Administration for Children and Families.

<sup>3</sup>The PIP Goal is set by the Children's Bureau and is the expected level of improvement needed to avoid financial penalties.

<sup>4</sup>This is the overall federal and state expectation for performance.

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

## WELL-BEING

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

In the past six quarters, DCBC consistently met the targets for children receiving medical care and young adult’s enrollment in secondary education. They meet the target for children receiving dental care in three out of the past six quarters. As of February 1, 2018 1.8% of children ages 0-5 were placed in group care.

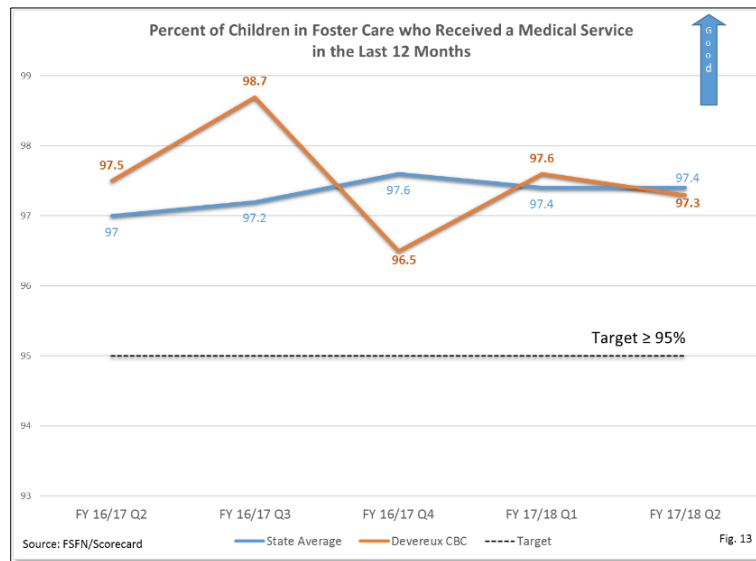
The graphs and tables below depict DCBC performance related to well-being in the following areas:

1. Children receiving medical care
2. Children receiving dental care
3. Young adults enrolled in secondary education
4. Children in ages 0-5 in group care
5. Qualitative Case Review Results

### CHILDREN RECEIVING MEDICAL CARE

#### Percent of children in foster care who received medical care in the previous 12 months (Scorecard Measure M9):

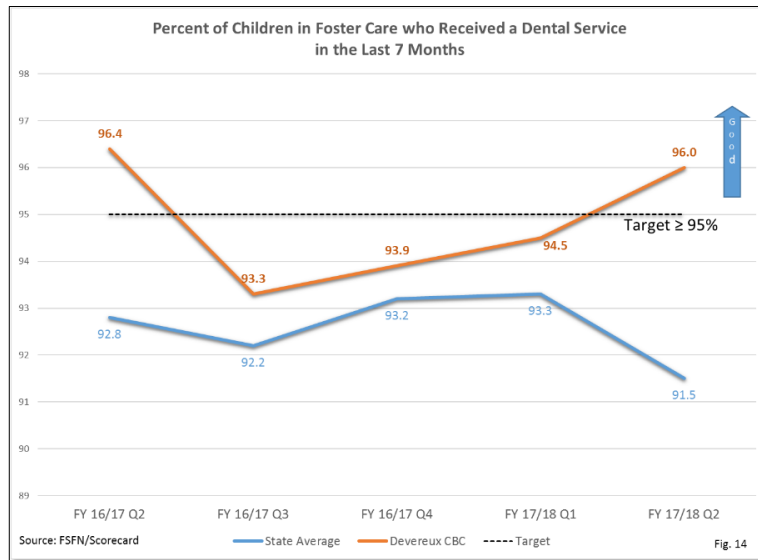
This measure is the percentage of children in foster care who have received a medical service in the last twelve (12) months. DCBC exceeded the performance target in the past six quarters. Some quality reviews indicate DCBC’s performance in addressing physical needs of children is below the statewide average (see CQI Item 17, Table 8).



## CHILDREN RECEIVING DENTAL CARE

### Percent of children in foster care who received a dental service in the last seven months (Scorecard Measure M10):

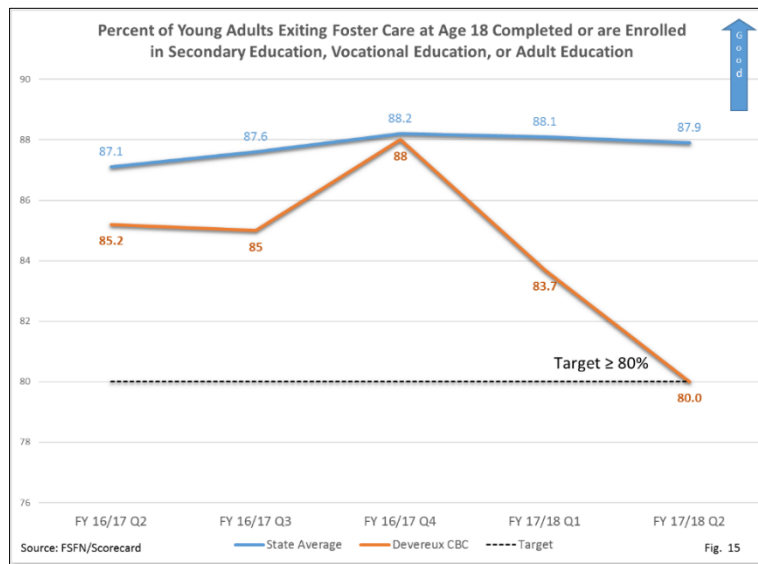
This measure shows the percentage of children in foster care as of the end of the report period who have received a dental service in the last seven (7) months. DCBC's performance is currently above the state target of 95% and above the statewide average performance. A continued positive trend in performance on this measure will ensure DCBC remains above the performance target. CQI case reviews indicate that DCBC performed below the statewide average in ensuring that children's physical health needs, including dental, were met (see CQI Item 17, Table 8).



## YOUNG ADULTS ENROLLED IN SECONDARY EDUCATION

### Percentage of young adults who have aged out of foster care at age 18 and completed or are enrolled in secondary education, vocational training, or adult education (Scorecard Measure M11):

This measure is the percentage of young adults who aged out of foster care who had either completed or were enrolled in secondary education, vocational training, or adult education as of their eighteenth (18) birthday. As Fig. 15 shows, DCBC has performed below the statewide average for the past six quarters and is currently trending negatively on this measure.



## QA CASE REVIEW DATA

The table below provides DCBC's performance based on case reviews completed by child welfare professionals. Florida CQI reviews show improving performance in all but one CQI item related to well-being shown in Table 8.

Quality Assurance - Florida CQI Item	Devereux CBC	Devereux CBC	Percent Improvement	Statewide CQI/QA Performance FY 2016/2017 n=1,290	2016 Statewide Federal Child & Family Service Review <sup>2</sup> 4/1/16-9/30/16 n=80	Federal Program Improvement Plan (PIP) Goal <sup>3</sup>	Federal and State Expectation <sup>4</sup>
<i>Assesment Based on Case Reviews by Child Welfare Professionals</i>	FY 2015/2016 n=80	FY 2016/2017 n=71					
CQI Item 12A: Did the agency make concerted efforts to assess the needs of and provide services to <u>children</u> to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?	93.75%	95.77%	↑ 0.02	89%	51.3%	58.4%	95.0%
CQI Item 12B Did the agency make concerted efforts to assess the needs of and provide services to <u>parents</u> to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?	60.81%	81.67%	↑ 20.9%	73.0%	51.3%	58.4%	95.0%
CQI Item 12C Did the agency make concerted efforts to assess the needs of and provide services to <u>foster parents</u> to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?	97.67%	97.62%	↓ -0.1%	88.0%	51.3%	58.4%	95.0%
CQI Item 13 Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?	61.25%	62.69%	↑ 1.4%	66.0%	63.6%	70.7%	95.0%
CQI Item 14: Were the frequency and quality of visits between caseworkers and the <u>child (ren)</u> sufficient to ensure the safety, permanency and well-being of the child(ren) and promote achievement of case goals?	42.50%	52.11%	↑ 9.6%	67%	72.5%	78.9%	95.0%
CQI Item 15 Were the frequency and quality of the visits between the case workers and <u>mothers and fathers</u> sufficient to ensure the safety, permanency and well-being of the children and promote achievement of the case goals?	24.32%	51.67%	↑ 27.4%	48.0%	43.5%	51.1%	95.0%
CQI Item 16: Did the agency make concerted efforts to assess children's educational needs and appropriately address identified needs in case planning and case management activities?	72.09%	74.29%	↑ 2.2%	84%	92.0%	None	95.0%
CQI Item 17: Did the agency address the physical health needs of children, including dental needs?	58.82%	62.22%	↑ 3.4%	77%	85%	None	95.0%
CQI Item 18: Did the agency address the mental/behavioral health needs of children?	60.53%	81.25%	↑ 20.7%	75%	72%	None	95.0%

Source: Federal Online Monitoring System

Table 8

<sup>1</sup>This date provides the statewide rating in each case review item for all CBCs

<sup>2</sup>This provides the performance rating for the state in each of the items as approved by the Administration for Children and Families.

<sup>3</sup>The PIP Goal is set by the Children's Bureau and is the expected level of improvement needed to avoid financial penalties.

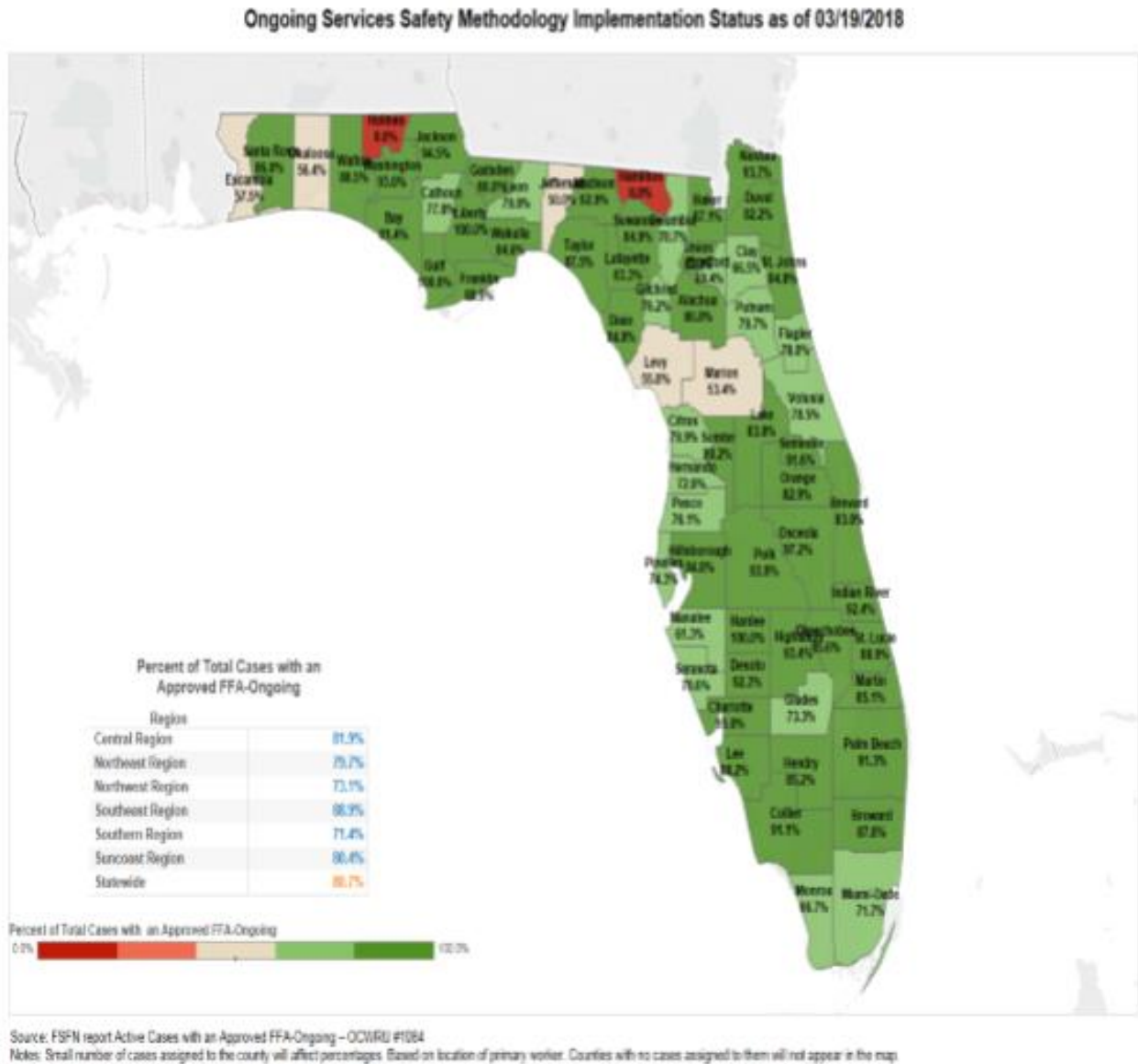
<sup>4</sup>This is the overall federal and state expectation for performance.

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

## SECTION 4: PRACTICE MODEL IMPLEMENTATION

### IMPLEMENTATION STATUS

DCBC has fully implemented the practice model in all four counties in Circuit 19. In all four counties served by DCBC, more active cases have an approved Family Functioning Assessment Ongoing (FFA-O) than the statewide average (80.7% as of 3/19/18).



### SERVICE ARRAY

In July of 2016, the Office of Child Welfare initiated a [service array assessment](#) with each CBC across the state. The assessment focuses on evaluating the availability, access and application of services for child welfare involved families. CBCs have the flexibility to create programs and services that meet the needs of children and families.

CBCs should continuously monitor and analyze the success of programs they purchase or develop. This analysis should go beyond monitoring contract outcomes to also include analysis of outcomes for children and families related to safety, permanency and well-being. Prior to modifying, implementing or purchasing a program the CBC should ensure there is research supporting the use of this program for the child welfare population. Currently, DCBC has a rating of '4' for Family Support Services and '3' for Safety Management Services.

DCBC evaluates the need for new programs or program improvements by reviewing utilization versus capacity of programs and evaluating the effectiveness of current programs. DCBC collaborates closely with DCF child protective investigations partners, dependency case managers and other community funders and providers regarding resources and system of care needs. Ongoing efforts to assess services and solicit input from partner agencies are managed through several meetings, including:

- monthly joint operations meetings with DCF Investigations staff contracted provider directors and leaders
- monthly leadership meetings with CLS, GAL, DCF and DJJ
- a quarterly joint performance meeting with DCF
- monthly continuous quality improvement meetings
- quarterly provider meetings including DCBC funded providers, Medicaid and Managing Entity (ME) funded providers, and other community services agencies
- Monthly joint supervisor's meeting involving supervisors for child welfare case management, Medicaid and ME funded providers, and other community services agencies that offer services to dependent children and families.

### Family Support Services

DCBC subcontracts with Behavior Basic, Inc. for a program called Refocusing the Modern Family Program (RMF), an in-home program that offers behavioral modification education with clear outcome measures and goals for individualized family success. Included within the program is training to competency and application of such aspects as "safe discipline" along with applied support and role modeling to the family as a whole so that children can live in secure, healthy home environments. The program uses certified behavioral analysts to deliver a 12-week in home program. The program is used by CPI's for Family Support referrals, by DCM's as a support to in home families and those with children out of home that are on track to reunify. The program boasts a consistent 96.67% or higher outcome of no maltreatment 6 months following successful program completion, and 92% engagement of referred families.

Safe Families CASTLE is an evidence-based, home visitation parenting program designed to help families with minor children remain together. Through long-term (up to one year) intensive (at least weekly) visits from parent educators, families learn positive parenting techniques and family-friendly role modeling. Families work with Parent Educators to resolve challenges and issues. Families are allowed to proceed at their own pace and can remain enrolled from a minimum of 16 weeks and up to one year.

Safe Families addresses child abuse and neglect by working one-on-one with parents to change harmful or negligent patterns and replace them with positive approaches to raising and disciplining children. By first addressing risk factors that lead to abuse, and then building in protective factors that create family stability, Safe Families deals with the problem directly, and stays with a family until the job is complete. As a result, parents learn the skills necessary to become strong parents, leading to safe children and long-term stability for families.

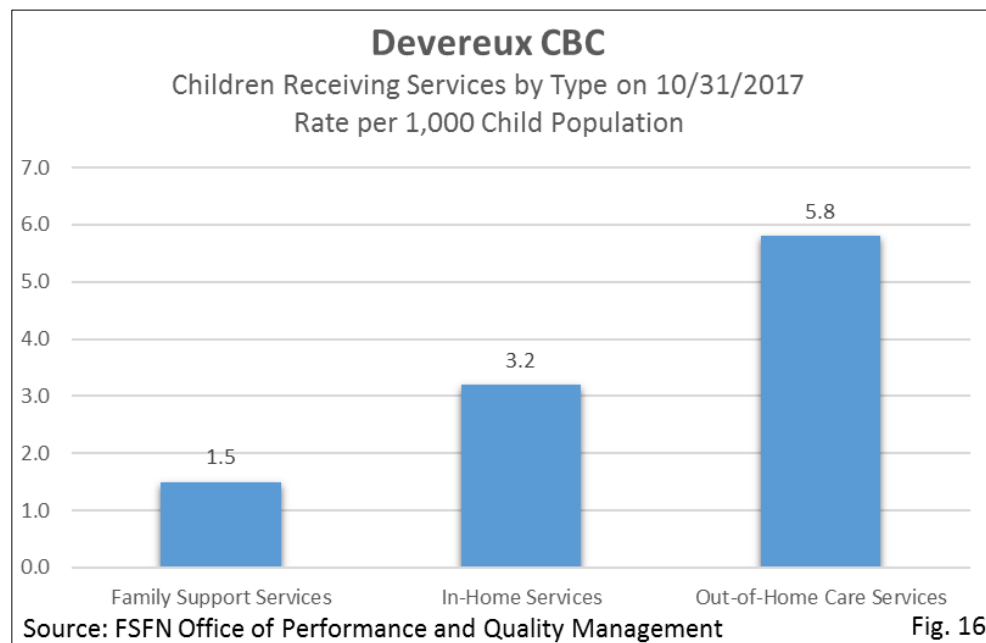
Both RMF and CASTLE provide services to safe, high risk children, and to support reunification efforts of children in out of home care.

### Safety Management Services

DCBC subcontracts with the Father Flanagan’s Boystown program to deliver a rapid response safety management service to support the Child Protective Investigator (CPI) during the CPI investigation, and to provide safety management to case management for in-home cases. Boystown provides an intensive family engagement and support program to allow children who would otherwise be classified as unsafe to remain in/return to their home. The program is designed to respond to referrals within two hours, and to provide intensive (3-4 times per week) interventions in the family’s home. Weekly utilization reports are submitted to the Director of Contract Management and analyzed against capacity to ensure adequate availability. DCBC collected and analyzed data for cases referred to Boystown between 7/1/16 and 6/30/17. According to their analysis, of the 177 children determined to be Unsafe who were served by Boystown, 148 (83.6%) were able to be safely maintained in the home.

### SERVICES MIX

The graph below provides the rate of children receiving services by type. This illustrates the mix of services between Family Support Services, In-Home Services and Out-of-Home Services. As of 10/31/17, the majority of children being served through DCBC were receiving out-of-home services (see Fig. 16). From FY15/16 to FY16/17, the number of children receiving family support services increased (see Table 4). This shift suggests that the Region is making purposeful strides towards increasing the provision of services in an effort to reduce out-of-home care and maintain children in their homes when appropriate.

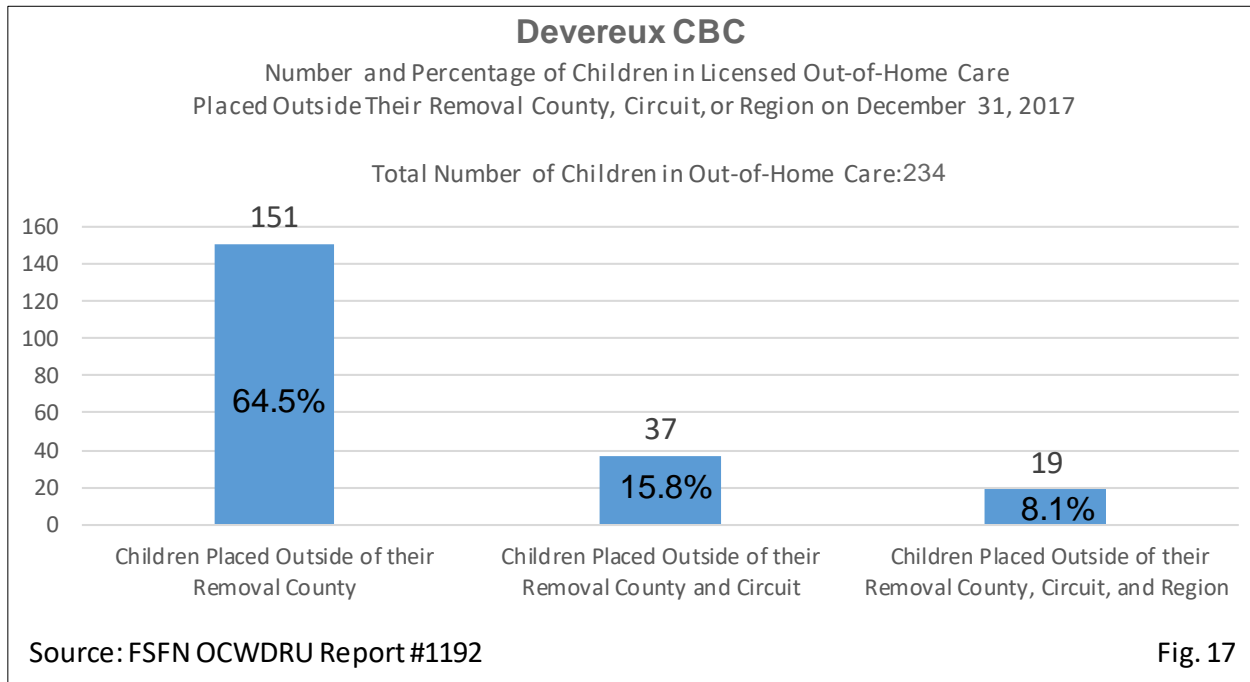


## **SECTION 5: PLACEMENT SERVICES AND GROUP CARE**

### **CHILDREN PLACED OUTSIDE THEIR REMOVAL CIRCUIT**

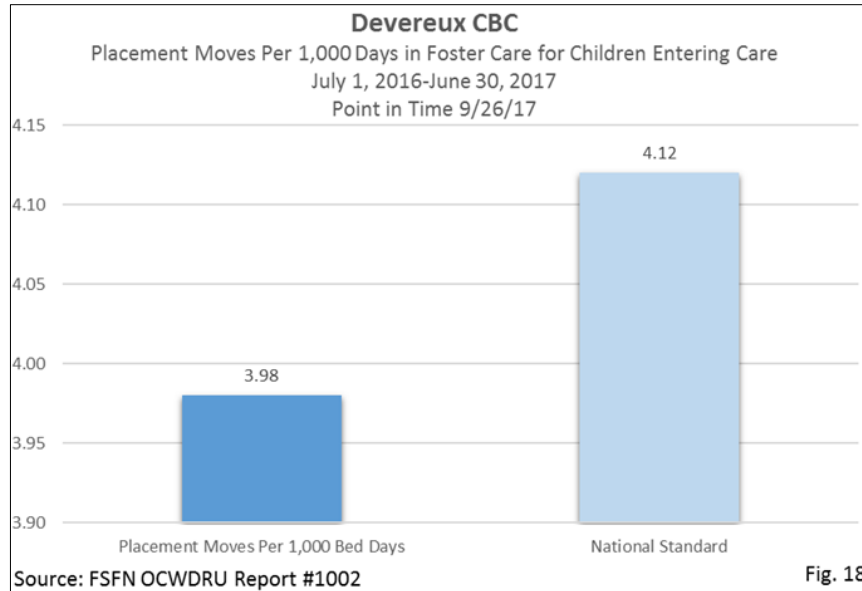


The majority of children in licensed out of home care served by DCBC are placed outside of their removal county. As of December 31, 2017, 64.5% of children in licensed care were placed outside of their removal county and 8.1% outside of their removal region. This indicates a need for DCBC to make more concerted efforts to keep children in their home county. Since last fiscal year, DCBC has made strides in maintaining more children in their removal circuit. In FY1617, 21.9% of children served by DCBC were placed outside of their removal circuit. In FY1718, this number dropped to 15.8% (see Fig. 17).



## PLACEMENT MOVES

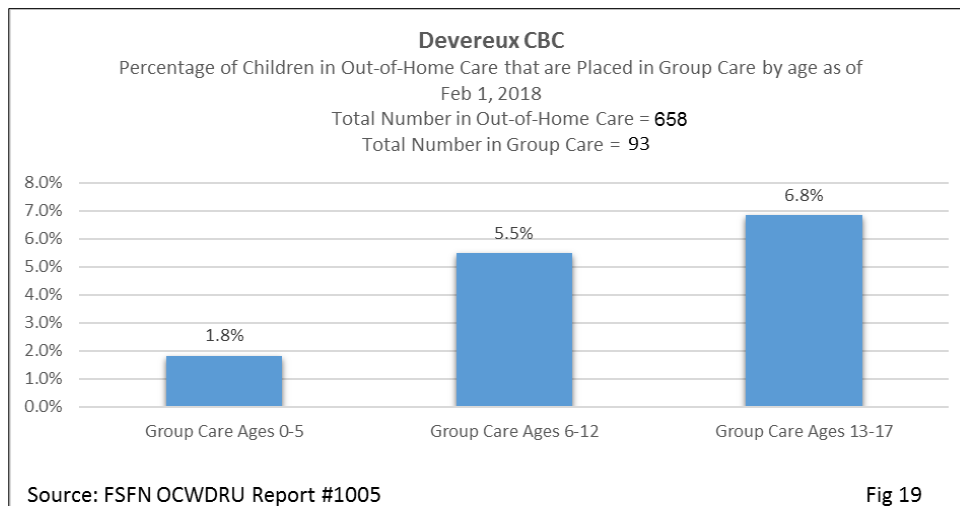
From July 1, 2016 through June 30, 2017, DCBC moved children at a rate lower than the national average and the statewide goal. Sig Fig. 17. For the past four quarters, DCBC's performance on this measure has trending positively.



## CHILDREN IN GROUP CARE

In regards to placement type, DCBC has a higher percentage of children in group care than the statewide average but a lower percentage of children placed in licensed foster care. As of 3/11/18, DCBC had 12.33% of children placed in group care compared to the statewide average of 8.94% indicating a need to review group care placements to determine if a lower level of care is possible. DCBC is performing well in locating relative placements (49.32%), compared to the statewide average (43.61%). DCBC's licensed foster care placements (19.59%) are lower than the statewide average (29.83%). (Source: [Child Welfare Dashboard](#))

Figure 19 (below) shows the breakdown of children in group care, by age.



## SECTION 6: REGIONAL FEEDBACK

### ADOPTIONS

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In coordination with Southeastern Region staff, DCBC determines the annual adoption target based on the DCF Statewide Methodology developed by the Office of Child Welfare which includes review of the current census and prior years' adoption finalization. DCBC's FY17/18 adoption goal is 135 finalized adoptions. An Adoption Applicant Review Committee (AARC) is active in the Southeastern Region and operating in accordance with Florida Administrative Code 65C-16. Each AARC consists of individuals with specific knowledge regarding the case. Additionally, at least one DCF Region staff person, with knowledge regarding the adoption process, is included in every AARC with a recommended denial. Separated sibling staffings are held on a regular basis and prospective adoptive parents are encouraged to adopt sibling groups whenever possible.

DCBC subcontracts with Children's Home Society (CHS) for adoption services. Devereux CBC directly assumed the post adoption support role in 2016, and established a position to conduct one-year post adoption follow-ups, assist post-adoptive families needing service referrals, and facilitate connection with the Devereux CBC Clinical Department and Community Based Care Integrated Health clinical care coordination for children with deep-end treatment needs.

In 2017, DCBC and CHS adoptions enhanced their efforts to more specifically anticipate potential future needs of adoptive children through the following actions:

- Requiring a new Comprehensive Behavioral Health Assessment, if one had not been completed within one (1) year prior to referral for secondary adoption case management services.
- Analysis of potential need for medical subsidy as a component of each Maintenance Adoption Subsidy negotiation, and documenting projected needs on the adoption assistance agreement to establish a path for medical assistance funded supports for the duration of the child's minority following adoption finalization.

### TRAINING

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The Training Department at Devereux CBC consists of the Director of Training and Organizational Development and three Training Specialists. The trainers all have child welfare backgrounds, and have specific areas of expertise such as FSFN, Intimate Partner Violence and motivational interviewing. The trainers are all certified as Child Welfare Professionals by the Florida Certification Board. Devereux CBC facilitates the current Department approved core pre-service training for all Child Protective Investigators, licensing specialists, and case managers in Circuit 19. They continue with Department approved specialty track for case managers. When possible, new child protective services staff are hired four to six weeks prior to pre-service to give new staff a chance to build relationships, shadow more seasoned staff, and learn what the job entails prior to pre-service training. Devereux CBC provides additional "System of Care Training" that trainees complete immediately following pre-service training. All new dependency case managers complete this program before they begin working in the field. The curriculum is designed to enhance participants understanding of the local child welfare system, as well as provide an evidence based framework for practice. A range of learning media is used throughout the training to meet participant's needs. This program continues to be enhanced to respond to changes in the local system of care.

The training team provides ongoing support to trainees to help them meet the competencies necessary to achieve certification within the designated timeframes. Activities include observations of home visits and court hearings,

participation in casework practice where the trainees have the opportunity to take part in a facilitated case presentation and discussion on an active case to assist participants practice presentation and assessment skills.

## STATEWIDE PERFORMANCE

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The State of Florida is currently underperforming in the following three federal measures:

- Rate of Abuse in Foster Care
- % of Children who do not re-enter care within 12 months of moving to a permanent home
- Placement moves per 1,000 days in foster care

DCBC's performance in the three most recent quarters did not meet the target for rate of abuse per 100,00 days in foster care. Although, FY17/18 Q2 saw a slight uptick in performance, there has been an overall decline in performance since FY16/17 Q3. For the percentage of children not reentering out-of-home care, DCBC has shown inconsistent performance over the past six quarters with only half meeting the performance target. DCBC analyzed cases involving children returning to care within twelve months and found a high occurrence of substance misuse. DCBC proactively met with the Managing Entity to discuss this finding and the need for additional supports in the community. Additionally, DCBC incorporated relapse prevention and planning as part of the reunification planning as a additional strategy to address this measure. And, DCBC utilizes a variety of evidenced based or evidence informed practices to further augment performance on these measures.

DCBC has made noteworthy improvement in placement moves per 1,000 days in foster care. In the past six quarters, DCBC has improved performance in every quarter and has exceeded the performance target in the past four quarters.

## FSFN DATA ENTRY

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DCBC has several internal processes in place to ensure FSFN data integrity, including collaboration between case management, placement staff and finance to ensure accurate payments are made according to FSFN data entry. DCBC consulted with Kay Casey and PCG Human Services agency to assess DCBC's current practice relating to the Title IV-E funding in order to better prepare for a post-waiver environment. DCBC participated in the System Adoption Initiative with Circuit 19 and Department representatives. Gaps were identified in the areas of case transfers, finance and trust account management. These gaps confirmed that a lack of FSFN capabilities require Circuit 19 staff to use workarounds such as email notifications, ancillary systems and manual tracking via excel spreadsheets.

## REGIONALLY IDENTIFIED TOPICS

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The Department's region leadership works with DCBC to identify system of care deficiencies and enhancements. Often, joint trainings are offered which foster teamwork between investigations and case management staff.

DCBC is working to reduce the number of children in group care while keeping sibling placements intact and meeting the individual needs of children through a performance based recruitment and retention plan where the Child Placing Agencies are only paid for placements made and maintained, rather than by the number of foster homes licensed. DCBC instituted a targeted recruitment project that identifies one child per child placing agency each month for intensive recruitment to move from group care to a foster home. Despite a 42% increase in the number of children entering licensed care, DCBC has continued to increase the percentage of children who are placed in foster homes, from 57% in July of 2017 to 63% in January of 2018.

## SECTION 7: CORRECTIVE ACTION PLAN

DCBC is currently on a corrective action plan with the Southeastern Region following the FY16/17 On-Site Review for the following identified areas of deficiency outlined in the Contract Evaluations Reporting System (CERS):

1. Improve quality of case work in the following measures: RSF 2.1 -CQI Item 3 -RSF 2.5 -CQI Item 8 -CQI Item 5 and 6
  - a. Progress: DCBC continues to update the Region Quality and Contract Management staff on RSF and CQI performance. During the February 2018 monthly CQI meeting, DCBC reported on their quarter two peer review findings, including strengths, areas needing improvements and strategies for practice improvements.
2. Increase the number of available, quality foster homes which will then allow a decrease in the over-reliance on group care and temporary emergency shelters and will minimize the number of placement moves children in care experience.
  - a. Progress: DCBC completed eight 'One School One Child' presentations since December 2017. Four children were moved from a group home to a foster home as a result of the Targeted Recruitment project. Three of the four were a sibling group that were kept together.
3. (Closed 3/19/18) Ensure proper FSN documentation for any placement, as defined 65C-30.001(88), which is a supervised placement of a child in a setting outside the child's own home
  - a. Progress: The Sanctuary MOU was amended to reflect a unit rate payment methodology for head-on-a-bed. As such, payments to Hibiscus for Sanctuary services are processed through FSN Financial Module.
4. (Closed 3/19/18) Ensure availability of safety management services throughout ongoing case management, including at the point of reunification
  - a. Progress: Weekly reports are provided by Boystown for safety management services and verified by the Devereux CBC Director of Contracts. Adequate capacity has been available since 7/1/17, and there is no waitlist at Boystown for safety management services. Case Management has increased its referral frequency in that time as well. As of December 31, 2017, Case Management referred to Boystown seven times. At this rate, the end of year projection shows a 100% increase in referrals.
5. While there is a robust foster parent support system, there is room to develop similar supports for relative and non-relative caregivers
  - a. Progress: A new caregiver support position started in January 2018. Surveys were sent to all relative and non-relative caregivers on February 28, 2018 to gain insight as to the most critical needs. The survey results are being aggregated to design future supports for this. The "Caregivers Guide to Dependency Court" and the "Caregiver Input Form" were mailed to all relative and non-relative caregivers on February 27, 2018. The "Caregivers Guide to Dependency Court" was provided to foster parents at the February 2018 foster parent association meetings in Martin, Saint Lucie, and Okeechobee Counties. It was provided to foster parents in Indian River County at the March foster parent association meeting. It was emailed to all foster parents on March 9, 2018. The DCF's Economic Self Sufficiency department provided Okeechobee staff a detailed training on Relative Caregiver Benefits. A similar training was also conducted at the monthly St. Lucie Staff Meeting in February by the DCBC Finance Manager. DCBC Finance Manager continues to train all new staff during pre-service training on the benefits to caregivers and the ability of

Eligibility Specialists to assist with this process. Eligibility staff have been tasked with emailing a reminder to case managers when they identify a child has been placed with a relative or non-relative.

6. DCBC should ensure that any processes developed to measure the quality and effectiveness of their safety management services evaluates the relationship of the services to the removal
  - a. Progress: Analysis of Safety Management impact has been delayed due to the FSFN move to the cloud. The required reporting is now available in FSFN and analysis is in-progress.
7. Develop formalized process to support transition planning during placement changes
  - a. Progress: Policy 146 was discussed at recent CQI meetings and will continue to be a standing agenda item. The annual foster parent survey was sent February 2018 to solicit additional feedback from foster parents.
8. Communication and satisfaction of services provided as assessed by direct services level partners and stakeholders
  - a. Progress: Several Town Hall meetings were held, including: 11/26/17 Martin County, 10/31/2017 Okeechobee County, 11/1/17 Indian River County, 12/19/2017 CHS Executive Director and Director of Program Operations. During the months of February and March 2018 DCBC's Quality Management department sent Foster Parent surveys to all four Child Placing Agency Foster Parents. The survey results will be included in their annual monitoring reports and reviewed for feedback to promote organizational improvements. Surveys were sent for one residential group care provider and one in-home family services provider. Survey results were included in the provider's annual reports as part of their annual contract monitoring. During the month of March surveys were sent to one Residential Group Care provider for feedback regarding the quality of care while youths were in placement. Also, a survey on Quality Parenting Initiatives was sent to case management in order to strengthen the current foster parent communication process.
9. Retention of case managers, including those internal to DCBC and through subcontracted providers
  - a. Progress: The Going the Extra Mile Award (GEM) initiative began in January 2018, and more than twenty nominations from staff were received and reviewed by the Devereux CBC office of Community Relations. CHS leadership was invited to be part of the judging panel for the Emerald Awards, and the first quarter awards were announced during the April Board of Directors meeting and/or the staff appreciation picnic.

DCBC calculates case manager and case manager supervisor turnover in accordance with F.S.S. 409.988. Turnover data is posted on DCBC's website ([DCBC FSS 409.988 Compliance](#)). Turnover data represents rolling year turnover which is calculated by dividing the number of employees separated during the 12 month period by the average number of employees on payroll during the 12 month period.

The current (4/1/17 – 3/31/18) Case Managers Turnover Rate is as follows:

Month	CHS (Indian River, Martin & Okeechobee Counties)	DCBC (St. Lucie County)	Circuit 19
4/1/17 – 3/31/18	54.30%	49.40%	51.70%

The current (4/1/17 – 3/31/18) Case Managers Supervisor Turnover Rate is as follows:

Month	C CHS (Indian River, Martin & Okeechobee Counties)	DCBC (St. Lucie County)	Circuit 19
4/1/17 – 3/31/18	72.70%	28.60%	48.00%

10. Develop opportunities for additional information sharing and discussion about best practices between DCBC staff and CHS case managers to allow for professional growth and shared innovation.
  - a. Progress: Town Hall meetings were conducted with CHS Case Management on the following dates: 11/26/17 in Martin County, 10/31/2017 in Okeechobee County, 11/1/17 in Indian River County. In January, February and March 2018, Case consultation phone calls with Action 4 Protection occurred. Best practice and high performer topics will be added as standing agenda items for quarterly CQI meetings. The Annual Survey for case management training is due to be distributed during June 2018.

Continued monitoring by the Department’s Region staff will continue until DCBC is able to successfully complete performance which meets the identified target.

## SECTION 8: DESK REVIEW FINDINGS

Based on the limited desk review of Devereux Community Based Care, contract ZJK85 the following areas with critical need for improvement and opportunities for system enhancement were found.

### AREAS FOR IMPROVEMENT

1. Develop and monitor countermeasures to positively impact performance in the following areas:
  - a. Rate of abuse per 100,000 days in foster care
  - b. Percent of children who do not re-enter care within 12 months of moving to a permanent home (SCM 7) - This measure was not met in four of the past five quarters.

### OPPORTUNITIES FOR ENHANCEMENT

1. Continue to monitor all contract and performance measures and take immediate corrective action by initiating local review and discussion of any measure which falls below the established performance target, including but not limited to percent of children in foster care who receive a dental service in the last seven months, to ensure the current upward trend in performance continues.
2. Continue to review and discuss cases involving children currently placed in group care for possible step down to a less restrictive placement option as outlined in the Out of Home Care review process and the financial viability plan.