

Kids Central, Inc.

Annual Summary of Practice Trends

FY 2017 - 2018



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SECTION I: OVERVIEW AND REPORT PARAMETERS

OVERVIEW

Kids Central, Inc. (KCI) is the lead agency for child welfare services in five (5) counties: Citrus, Hernando, Lake, Marion and Sumter counties. Kids Central subcontracts with the following three (3) agencies to provide case management services: The Centers (Marion County), LifeStream (Lake and Sumter counties) and Youth and Family Alternatives (YFA) (Citrus and Hernando counties). Staff within the Quality and Utilization Management department consists of the following: Quality Management Supervisor, Senior Quality Management Specialist, four (4) Quality Management Specialists, Utilization Management Supervisor, two (2) Utilization Management Specialists, Quality Improvement Data Analyst, Quality Management Data Technician, Nurse Care Coordinator and Children's Mental Health Specialist. Kids Central is dedicated fiscally and organizationally to Quality Management (QM) and Continuous Quality Improvement (CQI). Various tools and instruments are integrated, systemically to measure and assess organizational capacity, performance and quality improvement. The DMAIC process is a tool used frequently at Kids Central to identify process inefficiencies or the root causes of performance shortcomings. This information is integrated with the CQI system, used to create Plan Do Check Act (PDCA) processes and inform the development of the Annual Quality Management Plan, Strategic Plan, Annual Business Plan and Balanced Scorecards.

In FY 06-07, Kids Central developed a Balanced Scorecard to monitor organizational performance and incentivize senior leaders. In FY 07-08, Balanced Scorecard monitoring efforts and incentives were expanded to include management and operational level staff. In FY 08-09, all agency staff were included in this initiative. The Balanced Scorecard was introduced to the Case Management Agencies (CMA) in FY 09-10 and used to support and improve performance across the system of care. In FY 12-13, the process was again expanded to ensure the Strategic Plan and Annual Business Plan objectives were integrated into both the Kids Central and subcontracted scorecards. This ensured all stakeholders were focused on common strategic objectives and areas of improvement.

Kids Central has developed a comprehensive approach to meeting performance targets that engage all partners within our system of care. Our approach is centered on collaboration (including the use of effective contractual relationships with providers), accurate collection and reporting of data, quality assurance, monitoring and continuous quality improvement (CQI). Through integrating each of these components, the goal is to enhance child welfare case practice and improve performance. Our approach to meeting performance targets is based on contractual expectations between the Department of Children and Families (DCF) and Kids Central, Child and Family Service Review (CFSR) outcomes and Adoption and Safe Family Act (ASFA) standards. Organizational learning begins with the acquisition of data through various information systems, state databases, external evaluations or other sources. These data are compiled, stratified and assessed by the Quality Assurance Department for trends. Kids Central collects workforce knowledge through the assessment of FSFN data, the implementation of a comprehensive CQI process, customer and stakeholder surveys, satisfaction data and outcome data. Information is gathered and knowledge gained in an effort to improve organizational learning, effectiveness and efficiency.

Quality Practice Standards reviews and Quality Service Reviews are completed to ensure organizational performance and capabilities. Results of these reviews are provided to our contractors. Areas requiring improvement are identified and used as goals not only on Kids Central's Balanced Scorecard, but also on the Balanced Scorecards of our CMA's. Performance review findings are used to predict future performance by trending out data on a monthly basis. Kids Central reconciles current performance with projections by analyzing monthly data extracts obtained from DCF as well as through use of internally produced data extracts. Performance review findings are used as a baseline to determine opportunities for improvement throughout the system of care. Trends are quickly identified, and measures are taken to correct and improve performance. By using comparative data, the organization can tell if this is systemic or a statewide issue. Action Plans have measurable goals at Kids Central. These goals are projected as high performance, but achievable. Action Plans are developed to address improvement opportunities or to build upon performance foundations already in place. Work groups are formed to implement action plans, meet deliverable dates and ensure quality and performance expectations are met.

REPORT PARAMETERS

This report focuses on child and family outcomes related to state and federal performance indicators. During FY 17-18, Kids Central continued towards continuous quality and performance improvement efforts, maintaining its commitment to Permanency, Safety and Well-Being of the children served. The data collected and analyzed is done so by the Quality Management department, Utilization Management department and Contracts department within Kids Central.

SECTION II: DATA SOURCES

SYSTEM UTILIZATION DATA

System utilization data is monitored ongoing. This data is monitored quarterly, monthly, bi-monthly, weekly and even daily. Below in Table 1 is data looking at dependency programs as well as family support programs over the last five (5) FY years.

Table 1: Utilization Data

Dependency Programs	30-Jun-13 C5 / KCI	30-Jun-14 C5 / KCI	30-Jun-15 C5 / KCI	30-Jun-16 C5 / KCI	30-Jun-17 C5 / KCI	30-Jun-18 C5 / KCI
Alleged Victims in Closed Investigations	1630	1430	1527	1584	1644	1822
Children Sheltered by DCF	59	59	71	111	110	81
Children Receiving In Home Services	957	911	999	789	693	670
Children Receiving Out of Home Services	993	995	1184	1577	1621	1721
Young Adults Receiving Services *	41	21	64	58	43	44
Children and Young Adults Receiving Dependency Services *	1991	1927	2247	2424	2357	2435
Family Support Programs						
Children Receiving Evidence Based Family Support Services *				136	229	263
Children Receiving Other Family Support Services *	187	200	186	215	138	118
Children Receiving Family Support Services *	187	200	186	351	367	381
All Children Served						
Children Receiving In-Home, Out-of-Home, Young Adult and Family Support Services *	2178	2127	2433	2775	2724	2816

Source: DCF Child Welfare Dashboard unless *obtained from FSFN Reporting using ad-hoc queries

PRACTICE MANAGEMENT DATA

Kids Central's data unit pulls numerous reports that are available to the CMA's through a shared folder. The notification the reports are ready are sent out via email to the CMA's. Some of these reports are as follows: Daily reports – Children Seen Every 30 Days, Children Seen Every 30 Days for Family Support Services and Daily Census non Verification; Bi-Weekly reports – Contact with biological parents; Weekly reports – AFCARS, Missing Education Module, Family Functioning Assessment, Placement Exceptions, Medical, Dental and Immunizations and Monthly reports – MY Jump Vault Registration and MY Jump Vault Documentation Performance. In addition to this, bimonthly data calls are held with the CMA's to review their performance. At the first bi-monthly data call of the month, the performance of each CMA on their respective Balanced Scorecard is also discussed. MindShare and FSFN are systems used that provide real time status indicators that provide case managers with data sensitive upcoming tasks.

CONTRACT PERFORMANCE AND CBC SCORECARD PERFORMANCE MEASURES

Scorecard measures focus on federal indicators related to Florida's community based care child welfare system. The table below depicts the performance of since FY 15-16, where Kids Central has exceeded the statewide performance. Kids Central exceeded performance within the Central Region, with the exception of FY 17-18. Overall though, over the last three (3) FY's, Kids Central exceeded performance statewide and within the Central Region. In regards to adoption performance, Kids Central has exceeded the target, ending FY 17-18 at 114.3%.

Table 2: Performance Measures Achieved

	FY 20	15/16	FY 20	16/17	FY 20	17/18	Last	3 FY's
Quarterly CBC Scorcard Targets Met	#	%	#	%	#	%	#	%
Kids Central, Inc.	35	72.9%	31	64.6%	35	72.9%	101	70.1%
Statewide	32	66.7%	27	56.3%	25	52.1%	84	58.3%
Central Region	29	60.4%	29	60.4%	37	77.1%	95	66.0%
Adoption Target Performance	Target		Target		Target	%	Target	%
Kids Central, Inc.	148	103.4%	170	110.6%	175	114.3%	493	109.7%

The following data below looked at performance and outcomes that occurred over a multi-year period, 09/15 – 06/18. CBC01, CBC02, CBC03 and CBC04 are related to safety; CBC05, CBC06, CBC07 and CBC08 are related to permanency and CBC09, CBC10, CBC11 and CBC12 are related to well-being. Kids Central met or exceeded targets in nine (9) out of the twelve (12) measures for FY 17-18. June 2017 data compared to June 18 data shows Kids Central's performance declined on CBC01 - moving from the green to the red, CBC06 – moving from the green to the yellow and CBC07 – remaining in the red, but increasing performance to come closer to the stated target. While all measures in which Kids Central falls below the DCF target are closely monitored and tracked, CBC06 has additional monitoring and tracking as it is included in the CMA Balanced Scorecard.

Table 3: CBC Contract/Scorecard Performance

CDC Cooperated Managemen	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.	1st Qtr.	2nd Qtr.	3rd Qtr.	4th Qtr.
CBC Scorecard Measures	Sep-15	Dec-15	Mar-16	Jun-16	Sep-16	Dec-16	Mar-17	Jun-17	Sep-17	Dec-17	Mar-18	Jun-18 △
CBC01: Rate of abuse or neglect pe	r 100,00	0 days ir	n foster d	are							8.5	8.85
Kids Central, Inc.	8.64	7.44	9.58	10.73	12.73	13.19	10.57	8.18	6.06	6.52	7.27	9.42
Statewide	10.55	10.46	10.46	10.7	10.71	10.57	10.54	10.11	9.94	9.92	9	8.94
Central Region		10.57	10.63	11.6	12.04	11.53	10.64	8.52	7.58	8.27	8.47	9.37
CBC02: % of children not abused or									0= 0		95	92.9
Kids Central, Inc. Statewide	96.9 96.7	95.5 96.7	97.3 97.2	94.8	97.2 97.3	97.2 96.8	97.4 97.3	98.5 97.2	97.3 97	96.6 97.2	95.4 97.2	98.2 97.4
Central Region		96.3	97.3	96.7	97.4	97	97.7	97.6	97.2	96.6	97.1	97.4
CBC03: % of children with no verific	ed maltr	eatment	within 6	months	of termin	nation of	depende	ency sup	ervision		95	92.9
Kids Central, Inc.	93.7	96.3	96.4	94.1	92.6	96.5	95.7	97.9	98.8	96.4	98.8	99.5
Statewide	95.4	96	95.4	96	96	94.7	95.5	96.2	95.5	96.3	96.3	95.7
Central Region		95.8	94.6	95.6	94.9	94.4	95	96	96	95	96.9	95.5
CBC04: Children under supervision			, ,			00.40					99.5	98.9
Kids Central, Inc. Statewide	99.65	99.72	99.65	99.66	99.51	99.68	99.88	99.9	99.72	99.2	99.57	99.55
Central Region	99.8	99.7	99.8	99.8	99.8	99.8	99.8	99.8	99.7	99.6	99.7	99.7
CBC05: % of children exiting foster	care to	a permai	nent hom	ne within	12 mon	ths of er	ntering ca	are			40.5	36.3
Kids Central, Inc.		39.11	45.94	32.3	44.16	42.2	38.67	44.41	38.49	37.4	39.66	41.69
Statewide	42.8	45.1	43.1	41	41.3	42.8	41.4	41	39.2	38.9	41.5	39.1
Central Region	34.5	40.3	39	37.3	36.4	40.2	39.9	40.5	42	38.7	43.3	46
CBC06: % of children exiting foster											43.6	39.2
Kids Central, Inc.	57.2 53.9	57.89 54.9	53.78	55.97 55.1	42.43 53.8	44.63 55.3	48.29 53.4	45.74 52.7	45.07 53.1	40.49 54.1	46.5 53.7	42.12 V 52.5
Statewide Central Region	55.5	53.7	54.6	52.1	50.2	51.6	52.4	53.6	55.9	55.1	53.7	50.4
CBC07: % of children who do not re	-enter f	oster car	e within	12 mont	hs of mo	vina to a	a permar	ent hom	ie		91.7	90.8
Kids Central, Inc.		95.83	94.25	83.63		87.2	82.96		84.55	84.68	93.44	90.78
Statewide	89	89.1	87.5	90.2	90.4	88.7	90.9	87.6	88.1	89.7	89.2	91.5
Central Region	87.4	89.8	89.1	87.6	91	85.9	88.9	86.6	86.2	86.6	89.5	91.5
CBC08: Placement moves per 1,000									I		4.12	4.54 ▼
Kids Central, Inc.	3.98	3.48	3.42	3.71 4.03	4.21	4.4	4.06	4.48	4.04	3.85 4.35	3.88 4.48	3.94
Statewide Central Region	3.7	3.79	3.3	3.45	3.88	3.89	3.72	3.83	3.84	3.77	3.99	4.55 3.68
CBC09: % of children in foster care	who hav	e receiv	ed medic	al servic	es in the	last 12	months				95	89.9
Kids Central, Inc.	96.9	95.4	94.4	93.1	95	96.8	96.4	96.8	95.6	95.2	96.7	98.3
Statewide	97.7	97.9	97.5	97	96.6	97	97.2	97.6	97.4	97.4	97.7	97.6
Central Region	97.3	97.1	96.3	96.4	96.6	97.2	97.2	97.8	96.7	97.2	97.5	98
CBC10: % of children in foster care											95	89.9
Kids Central, Inc.	96.2 93.3	95.6 93.3	91.8 92.5	90.5	92.7 92.8	93.5 92.8	90.7	91.9	94.8	91.3 91.5	92.6 92.1	95.6 92.9
Statewide Central Region	95.6	94.3	93.4	94.7	93.4	93.5	92.2	95.1	95.9	93	93.4	94.6
CBC11: % of young adults aged out	of foste	er care co	mpleted	/enrolled	d in seco	ndarv/vo	cational	/adult ed	ducation/	training	80	69.9
Kids Central, Inc.		87.1	90.9	92.5	90.9	91.6	85.7	84.9	85.1	84.9	91.4	94.6
Statewide	89	88.5	87.6	88.1	87.7	87.1	87.6	88.2	88.1	87.9	90.1	89.4
Central Region		83.5	82.1	83.8	82.6	82.7	84.4	86.2	82.1	84.3	90.1	90.9
CBC12: % of sibling groups where a											65	60
Kids Central, Inc.	71	74.8	74.7	75.4	74.1	73.6	70.2	71.5	69.4	71	73	74.5
Statewide Central Region	63.3 64.6	63.9 64.7	63.6 65.3	63.5 65.5	63.5 65.4	64.3 67.4	63.9 66.3	63.8 64.4	63.7 64.3	63.6 66	63.7 65.5	63.8 66
Source: Multiple Office of Child Welfare Data Rep		reports as o	htained from	n ESEN.						Baran - Da	ta Analyst -	Kids Central, Inc

Kids Central has steadily increased the number of adoptions finalized over the last eleven (11) years. For FY 17-18, Kids Central finalized 200 adoptions.

Adoptions Finalized Kids Central, Inc. FY 2006/07 through 2017/18 n **Kids Central Contract Target**

Table 4: Adoptions Finalized

QUALITY ASSURANCE FOR SUBCONTRACTORS

Kids Central's Contracts department completes administrative monitoring reviews of our subcontracted providers. Some of the items specifically reviewed include: personnel files for staff, youth files at the group homes, policy and procedure and facility reviews. For FY 17-18, the following providers and/or programs were reviewed: Camelot Community Care Intensive Reunification Program (IRP), The Centers Case Management, Devereux Parenting Journey/Nurturing Parenting (Diversion Programs), LifeStream Case Management, Neighbor to Family, Arnette House, Covenant Children's Home, Eckerd E-Nini-Hassee, Hands of Mercy Everywhere (abbreviated), Press Forward (abbreviated) and WIN for Kids. The process is as follows: The subcontracted provider is contacted 30 days out from the scheduled review date. The provider readies a 10% sample size for the onsite or desk review and upon the review being complete, an informal exit interview is conducted followed by a formal written review. Once the written review is received by the contracted provider, the provider has ten (10) business days to respond to any findings. The final report is completed within 30 days of the monitoring visit.

Kids Central's Utilization Management department conducts reviews throughout the year of our subcontracted

providers. These reviews were completed on the following providers: Camelot IRP, Neighbor to Family, Devereux Kids Family Team Coach and Nurturing Parenting Program and Family Connections. The Utilization Management department also conducts reviews on Comprehensive Behavioral Health Assessments (CBHAs) to ensure the recommendations made by the assessor are being followed by the CMA case managers. These reviews were completed in the 1st, 3rd and 4th quarters.

Table 5: Camelot Intensive Reunification Program (IRP)

Intensive Reunification Program Reviews FY 2017/18		Oc.	t 2017	Арі	r 2018
	Target				
Did the provider assign themselves to the case as secondary in FSFN within forty-eight (48) hours of referral acceptance?		41	90.24%	34	79.41%
2 Did IRP initiate services within 7 days of the referral date?	95.0%	41	60.98%	34	61.76%
3 Is there documentation in FSFN to support diligent efforts to initiate services within seven (7) days?	99.5%	16	43.75%	13	69.23%
4 Did IRP complete the initial NCFAS G+R as required? (within 4 days of initial visit, at 45 days, and closure)?	98.0%	40	72.50%	34	94.12%
5 Did the Service Plan contain 2-3 domains from the NCFAS G+R?		39	92.31%	34	97.06%
6 Did IRP include the CBHA as collateral documentation for the Service Plan?		33	93.94%	30	93.33%
7 Did the adult client(s) involved in IRP substantially complete the Family Service Plan?	70.0%	35	65.71%	15	84.62%
8 Did the child(ren) participate in the creation of the Service Plan?	80.0%	12	83.33%	34	60.00%
p Did IRP complete visits with the family at least every seven (7) days*? *exceptions will be made for family vacation/breaks that don't exceed more than two (2) consecutive weeks	90.0%	39	12.82%	25	21.47%
10 Is there documentation in FSFN to support diligent efforts to make face to face contact within seven (7) days?	99.5%	36	58.33%	33	64.00%
11 Did the IRP Support Specialist have a formal consultation at least every thirty (30) days with the Family Care Manager and Intervention Specialist; the family will also be included as necessary?	90.0%	41	68.29%	34	81.82%
12 Did IRP document events in the client file and FSFN within forty-eight (48) hours of activity being completed?	90.0%	41	60.98%	22	76.47%
Did IRP make linkage and referrals to non-traditional supports identified by the family? (Finance, vocation, menta health, substance abuse, physical health, housing, safety, transportation, etc.) Must be documented.	95.0%	30	83.33%	26	90.91%
14 Did IRP provide the family with an Aftercare/Safety Plan upon case closure? (providing action steps to sustain access to community supports and address all remaining safety issues)		28	75.00%	6	84.62%
15 If the case was open longer than 120 days, was there documentation that IRP requested an extension from the Kids Central Utilization Department by the 110th day?		2	50.00%	34	66.67%
16 Were the children free from substantiated child abuse report(s) during the service period?	95.0%	36	100.00%	12	97.06%
17 Was the family free from verified child abuse report(s) within 6 months of IRP case closure? Attachment IV: 11	90.0%	35	97.14%	28	100.00%
18 Was the family referred for a Reunification Family Team Conference at least thirty (30) days prior to case closure?	90.0%	32	84.38%	31	85.71%
19 Did the children not re-enter care following case closure?	90.0%	34	97.06%	28	96.77%
20 Was the case closed in FSFN within forty-eight (48) hours of case closure?		37	64.86%		82.14%

Table 6: Neighbor to Family

Ne	ighbor to Family Program Reviews FY 2017/18		Apr	2018
		Target		
1	Was the family met (initial visit) within 24 hours once agreed upon by all referring parties and SMS?	100.0%	27	77.78%
2	If an immediate response was needed, the NTF Counselor contacted the family within 2 hours once agreed upon by all referring parties and SMS?	99.5%	26	100.00%
3	Services were flexible for the family within the home and community and focused on mitigating identified safety risks to the children?		53	100.00%
4	Was the level of appropriateness, intensity and frequency documented within the safety plan?		52	100.00%
5	Were all children in the case seen at a minimum of every 7 calendar days?	99.5%	52	42.31%
6	Were the visits entered into FSFN within 48 hours of the visit?	99.5%	53	58.49%
7	The children were not sheltered during the service provision?	95.0%	53	92.45%
8	NFT Counselor maintained regular contact with the CPI/CMO to give updates about the family's progress or concerns within 24 hours of visit?	85.0%	53	49.06%
9	Cases was closed in FSFN within 48 hours of date of closure?	85.0%	53	90.57%
10	During services provision were the children NOT subject to a verified or some indicated report?		53	96.23%
11	Case closure summaries were entered into FSFN within 7 days of closure of the case	95.0%	52	75.00%
12	SMS service did not exceed 30 days, if so SMS contacted UM 10 days prior to the 30th day for pre-approval of extension?		53	96.23%

Table 7: Devereux – Family Team Coach

Fai	mily Team Conferencing Reviews FY 2017/18		Feb	2018
		Target		% Yes
1	If referred for a Family Team Conference, was face to face contact by Devereux Kids completed within two (2) business days of receipt of the referral?	95.0%	44	95.45%
2	If face to face contact was not made within 2 business days, was there documentation in FSFN that supports diligent efforts made by the provider to make the face to face contact within the 2 business days?	99.5%	2	100.00%
3	Did Devereux Kids assign themselves to the case in FSFN within forty eight (48) hours of the referral being accepted?		44	100.00%
4	DV: Was an Individualized Course of Action Plan (ICA) completed and scanned into FSFN within thirty-five (35) days of the date of referral with the family's participation and individualized with goals clearly identified and services pertinent to safety and risk issues?	95.0%	15	80.00%
5	Reunification: Was a Family Support Plan (FSP) completed and scanned into FSFN within twenty-one (21) days of the date of referral with the family's participation and individualized with goals clearly identified and services pertinent to safety and risk issues?	90.0%	26	92.31%
6	Were all children in the case seen a minimum of every 30 days in the child's current residence and was the visit documented in FSFN within 48 hours of the visit? For Dependency cases: documentation of the visit will be entered into the narrative with a case note.	100.0%	44	97.73%
7	Were all case notes entered into FSFN within forty-eight (48) hours?	85.0%	44	93.18%
8	DV: If Devereux Kids determined the family needed to have services longer than one hundred (100) days, did they request approval from Kids Central Utilization Department by day ninety (90)? Reunification: If Devereux Kids determined the family needed to have services longer than thirty (30) days, did they request approval from Kids Central Utilization Department by the 25th day of service?		8	87.50%
9	Were diligent attempts to engage the family clearly documented?		44	100.00%
10	DV: If the case was closed for non-compliance or lack of engagement, did the provider conduct a joint visit with the referring CPI or Supervisor; and, if need be, contact the DCF Family Services Specialist prior to contacting the Family Preservation Specialist for assistance?		8	62.50%
11	Reunification: If applicable, was the case closed successfully?	90.0%	26	96.15%
12	DV: applicable, was the case closed successfully with the targeted client? Closing successfully is defined as the targeted client substantially achieved goals identified in either the ICA Plan	80.0%	13	84.62%
13	DV: If applicable, was the case closed successfully with the family unit? Closing successfully is defined as the family unit substantially achieved goals identified in either the ICA Plan.	70.0%	14	57.14%
14	Was the case closure summary entered into FSFN within 7 days of case closure?	85.0%	44	100.00%
15	Was the case closed in Mindshare and FSFN within 48 hours of closure (or end date themselves in FSFN on dependency cases)?	85.0%	44	100.00%
16	Was the family free of verified abuse reports during services?	95.0%	44	97.73%
17	If the family completed the Program, were they free of some indicators or verified abuse reports within 6 months of program completion?	90.0%	38	89.47%
18	Reunification: Did the children not re-enter care within 12 months following reunification?	90.0%	26	96.15%
19	Reunification: If the family successfully completed the Program, was there a Relapse Prevention Plan completed before the case was closed?	100.0%	25	100.00%
20	Reunification: If the family successfully completed the Program, was a family leader identified?	100.0%	25	100.00%
21	DV: If the family successfully completed the Program, did they show an improvement in the risk factors that brought them to the attention of the system, an increased knowledge of community resources, and increase in 2 of the 5 protective factors, and have a family leader identified?	83.0%	10	100.00%

Table 8: Devereux - Nurturing Parenting Program

Nu	rturing Parent Program Reviews FY 2017/18		Feb	2018
		Target		% Yes
1	Was contact made with the family within two business days of acceptance of the referral to initiate services?	95.0%	39	87.50%
2	If face to face contact was not made within 2 business days, was there documentation in FSFN that supports diligent efforts made by the provider to make the face to face contact within the 2 business days?	99.5%	5	100.00%
3	Was the assessment completed within the first 6 hours of service provision?		39	97.44%
4	Was the Family Nurturing Plan completed and scanned into FSFN within the first 10 hours of service provision?	90.0%	36	91.67%
5	Were all children in the case seen a minimum of every 30 days in the child's current residence and was the visit documented in FSFN within 48 hours of the visit? For Dependency cases: documentation of the visit will be entered into the narrative with a case note.	100.0%	39	97.44%
6	Were all case notes entered into FSFN within 48 hours?	85.0%	40	92.50%
7	If the case was closed for non-compliance or lack of engagement, did the provider conduct a joint visit with the referring CPI or Supervisor; and, if need be, contact the DCF Family Services Specialist prior to contacting the Family Preservation Specialist for assistance?		2	100.00%
8	Was the case closure summary scanned into FSFN within 7 days of case closure?	85.0%	27	100.00%
9	Within 48 hours of closing the case, was the case closed in FSFN and Mindshare?	85.0%	27	100.00%
10	Was the family free of verified abuse reports during Nurturing Parenting services?	95.0%	38	94.74%
11	If applicable, was the case closed successfully?	80.0%	27	74.07%
12	If the family completed the Nurturing Parenting program, did they achieve a score of 4 or higher in each of the 5 constructs? (found in the AAPI-2)	80.0%	20	100.00%
13	If case closed successfully, did the family complete 12 or more Parenting Education sessions?	70.0%	20	95.00%
14	If the case has been open longer than 20 weeks, did the provider request approval from the Kids Central Utilization Management department by the 19th week?		5	80.00%

Table 9: Comprehensive Behavioral Health Assessments (CBHA)



DEPARTMENT REQUIRED QUALITY ASSURANCE REVIEWS

Rapid Safety Feedback Reviews

Florida's Rapid Safety Feedback Tool was used to assess the safety of young children, birth to age four (4), who were receiving in home services. Case reviews were completed by the Quality Management staff using the FSFN case record. If a safety concern was identified, a safety consultation call was scheduled with the case manager and other pertinent staff within two (2) business days to determine how the safety concern was going to be resolved. Upon the Request for Assistance (RFA) being generated, seven (7) business days were given to the case manager to complete the recommendations from the RFA. Administrative concerns could also be generated based upon the findings of the review. A consultation call is not required for an administrative concern, but a RFA is generated with the same time frame requirements.

In addition to these reviews being completed for DCF, it is an internal process within Kids Central for 100% of the in home cases with children birth to age (3) to have a Rapid Safety Review completed. The same protocol is followed for the internal Rapid Safety Reviews as is the DCF Rapid Safety Reviews. The CMA's are also measured on their performance with the internal Rapid Safety Reviews via their Balanced Scorecards.

Table 10: Rapid Safety Feedback Reviews

Ra	api	d Safety Reviews FY 2017/18 Summary	Kids	Central	Stat	ewide
1		Are family assessments of danger threats, child vulnerability, and family protective capacities sufficient to identify safety concerns and case plan actions needed to effectively address caregiver protective capacities and child needs?	n		n	
	.1	Is the most recent family assessment sufficient?	43	18.6%	841	52.4%
		Is the most recent family assessment completed timely?	43	16.3%	841	45.5%
2		Are visits between case managers, children, and parent(s) or legal custodian(s) sufficient to ensure child safety and evaluate progress toward case plan outcomes?				
	.1	Is the quality of visits between the case manager and the child(ren) sufficient to address issues pertaining to safety and evaluate progress toward case plan outcomes?	42	47.6%	839	60.5%
	.2	Is the frequency of visits between the case manager and the child(ren) sufficient to ensure child safety and evaluate progress toward case plan outcomes?	42	40.5%	838	76.4%
	.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 toward case plan outcomes?	41	34.1%	786	66.3%
	.4	Is the frequency of the visits between the case manager and the child's mother sufficient to ensure child safety and evaluate progress toward case plan outcomes?	42	66.7%	819	80.3%
	.5	Is the quality of the vists between the case manager and the child's father sufficient to address issues pertaining to safety and evaluate progress toward case plan outcomes?	35	2.9%	589	53.7%
	.6	Is the frequency of the visits between the case manager and the child's father sufficient to ensure child safety and evaluate progress toward case plan outcomes?	36	22.2%	635	50.4%
3		Are background checks and home assessments sufficient and responded to with a sense of urgency when needed to address potential danger threats?				
	.1	Are background checks and home assessments completed when needed?	43	25.6%	841	74.7%
	.2	Is the information assessed and used to address potential danger threats?	43	32.6%	841	78.4%
4		Is a sufficient safety plan in place to control danger threats to protect a child?				
	.1	Is the safety plan sufficient?	42	14.3%	830	56.1%
	.2	Is the safety plan actively monitored to ensure that it is working effectively to protect the child(ren) from identified danger threats?	38	18.4%	816	47.8%
5		Is the case manager supervisor conducting guided discussions at specific points in the case management process focused on promoting effective practice and decision making?				
	.1	Is the supervisor regularly consulting with the case manager?	43	23.3%	841	59.5%
	.2	Is the supervisor ensuring recommended actions are followed up on?	43	23.3%	841	53.6%

Florida Continuous Quality Improvement (CQI) and Child and Family Services Reviews

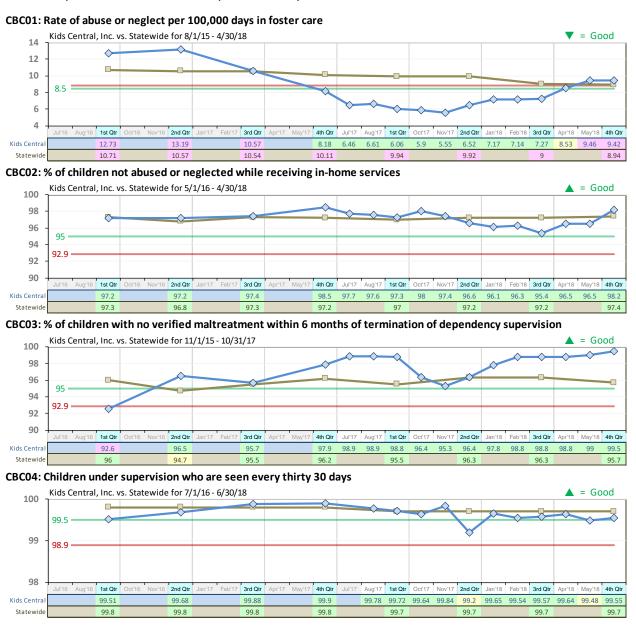
49 cases were reviewed as part of the Florida CQI/CFSR reviews in FY 17-18. For FY 18-19, as part of each CMA's Balanced Scorecard, each CMA will be responsible for completing six (6) CFSR reviews per quarter. Note: These reviews will not require the collateral contacts with stakeholders.

Table 11: CQI/CFSR Results

Were the agency's responses to all accepted child maltreatment reports initiated, and face-to-face contact with the child(ren) made, within the time frames established by agency policies or state statutes? Safety Outcome 2 Children are safely maintained in their homes whenever possible and appropriate. 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? 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? Permanency Outcome 1 Children have permanency and stability in their living sitations. 4 Is the child in foster care in a stable placement and were any changes in the child's placement in the best interests of the child and consistent with achieving the child's permanency goal(s)? 5 Did the agency establish appropriate permanency goals for the child in a timely manner? 5 Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangement for the child? Permanency Outcome 2 The continuity of family relationships and connections is preserved for children. Did the agency make concerted efforts to ensure that siblings in foster care are placed together unless speration was necessary to meet the needs of one of the siblings? Did the agency make concerted efforts to ensure that visitation between a child in foster care and his or her amother, father, and siblings was of sufficient frequency and quality to promote continuity in the child's relationships with these close family members? 9 Did the agency make concerted efforts to preserve the child's connections to his or her neighborhood, on the agency make concerted efforts to preserve the child with relatives when appropriate? 10 Did the agency make concerted efforts to preserve the child's connections to his or her neighborhood, on the agency make concerted efforts to place the c	5% 5% 3% 2% 5% 3% 5% 3% 3% 7%
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to the agency's involvement with the ramily?	.6%
74 No. de Assessment and Combres to Oblidera	20/
	2%
	.0%
	.1%
Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the	.8%
case planning process on an ongoing basis? Were the frequency and quality of visits between caseworkers and child(ren) sufficient to ensure the safety,	
permanency, and well-being of the child(ren) and promote achievement of case goals? 54 59.3% 898 6	.9%
Were the frequency and quality of visits between caseworkers and the mothers and fathers of the child(ren)	
	.0%
goals?	
Well-Being Outcome 2	
Did the agency make concerted efforts to assess children's educational needs and appropriately address	2%
16 identified needs in case planning and case management activities?	
Well-Being Outcome 3	.2%
Children receive adequate services to meet their phyical and mental health needs. 30 60.0% 677 6	
18 Did the agency address the mental/behavioral health needs of children? 25 36.0% 465 7	.6%

SECTION 3: DATA ANALYSIS SUMMARY IN RELATION TO FEDERAL OUTCOMES

During FY 2017-2018, Kids Central has either met DCF assigned targets or outperformed overall statewide performance for these important safety related CBC Scorecard measures.

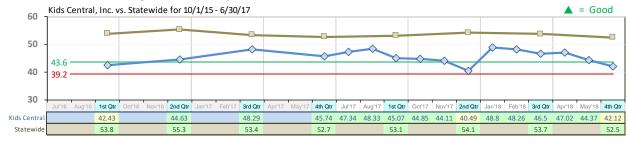


In January 2018, Kids Central and staff from all three (3) CMA's began collaborating on DMAIC projects to improve CBC05 and CBC07 performance. The CBC05 team determined most cases failing to reach permanency within 12 months had experienced court related issues in either Citrus or Lake County. Problems included delayed adjudications, communication and scheduling issues. Kids Central met CBC05 target for the 4th quarter FY 2017-2018 and managed to maintain CBC06 performance.



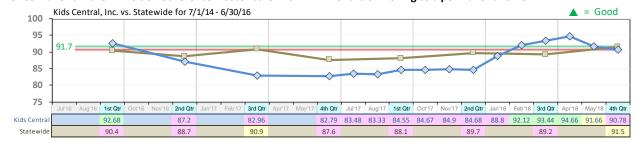


CBC06: % of children exiting foster care to a permanent home in 12 months for children in foster care 12 to 23 months

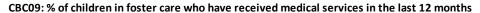


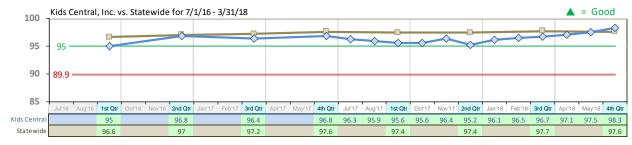
Analysis of CBC07 exceptions determined most reentries were involving reunifications where family assessments could have been more comprehensive. Kids Central is developing training to address this and other issues. Further analysis determined there were problems related to the diversion program specifically used for this population, to include staffing issues and the fidelity of the program. Due to these issues, the program was placed on a Corrective Action Plan (CAP). Leadership at Kids Central has been working with the provider to ensure these issues are remedied. During FY 17-18, Kids Central's CBC07 performance has significantly improved.

CBC07: % of children who do not re-enter foster care within 12 months of moving to a permanent home

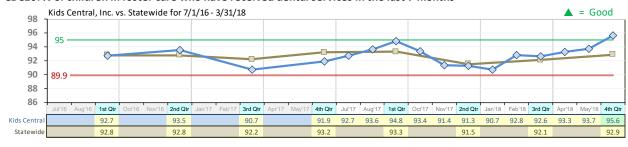


Root-cause analysis of children not receiving timely dental services (CBC10) revealed one (1) county had limited dental service availability. Kids Central collaborated with a partner to provided mobile dental vans twice a week. During FY 17-18, Kids Central continued to improve timeliness of medical and dental visits and managed to end the fiscal year surpassing targets and statewide performance for CBC09 and CBC10.



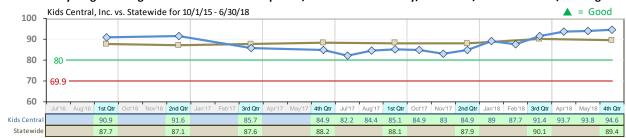


CBC10: % of children in foster care who have received dental services in the last 7 months



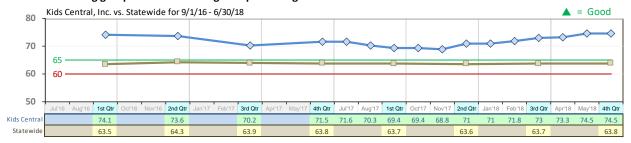
Kids Central has met CBC11 target for all four (4) quarters and surpassed statewide performance for the 3rd and 4th quarters.

CBC11: % of young adults aged out of foster care completed/enrolled in secondary/vocational/adult education/training

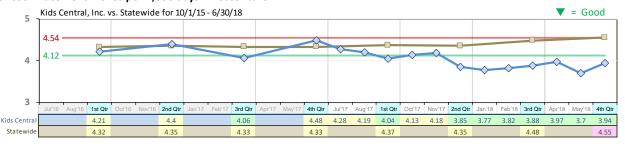


Kids Central has continued to be a statewide leader of CBC12 performance while reducing placement moves to meet target and surpassing statewide CBC08 performance levels.

CBC12: % of sibling groups where all siblings are placed together



CBC08: Placement moves per 1,000 days in foster care



Kids Central has met DCF assigned targets, outperformed statewide performance or at least significantly improved performance for each CBC Scorecard measure. There will be continued focus and additional analysis on the weakest performance areas (CBC05, CBC07 and CBC10).

SECTION 4: LOCAL PRACTICE TRENDS

Safety performance results for the CQI/CFSR continue to lag when compared to statewide performance. Safety Outcome 2 related to assessing and addressing risk and safety concerns regarding children needs significant improvement. Training is currently being developed by the training department within Kids Central which will include the opportunity for the participants to assess risk on real case scenarios. The training will be offered quarterly. This training will also assist with the scores of the Rapid Safety Reviews related to the family assessment.

Permanency outcomes related to permanency and stability in the children's living arrangements continue to need improvement. Focusing on permanency continues to be heavily focused on within Kids Central. The CMA's have several measures on their Balanced Scorecards which focus on permanency in an effort to increase our performance.

Well-being outcomes regarding the frequency and quality of visits with birth parents also continues to need improvement. This measure is discussed at the bi-monthly CMA Data Call and this outcome is also monitored via the CMA Balanced Scorecards. CMA individual discussions are also held to assist in developing counter measures in order to increase performance.

SECTION 5: PLANNING FOR CONTINUOUS QUALITY IMPROVEMENT

Continuous Quality Improvement activities for FY 18-19 will focus on:

- SWOT Analysis and the development of Strategic objectives for the Annual Strategic Plan
- Updating policies and procedures throughout Kids Central in order to begin readying for reaccreditation with the Council on Accreditation (COA)
- Re-accreditation with COA scheduled for April 2019