



2015 ANNUAL PERFORMANCE REPORT

FISCAL YEAR 2014-2015

OFFICE OF CHILD WELFARE

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Executive Summary

This report is submitted pursuant to Section 409.997(3)(g), F.S., the statutory requirements for the implementation of the Florida Department of Children and Families Child Welfare Results Oriented Accountability System. The report provides a statewide summary of Community-Based Care (CBC) Lead Agency performance during Fiscal Year 2014-15 on three categories of outcome indicators as established by the Federal Adoptions and Safe Families Act (ASFA, Public Law 105-89) which include:

- **Safety Indicators.** These measures focus on whether children referred to the child welfare system for maltreatment experience subsequent maltreatment, especially while receiving services and after termination of services.
- **Permanency Indicators.** Measures that focus on whether children removed from their families have timely reunification or other permanent living arrangement(s) such as adoption or permanent guardianship.
- **Well-Being Indicators.** Measures of well-being focus on outcomes related to quality of life for children in out-of-home care, including having stable placements that allow for continuing important connections and preparation for adulthood.

Data for the indicators were obtained using data extracts from the Florida Safe Families Network (FSFN), which is the Department's statewide automated child welfare system and official system of record for all investigative and case management activities.

Major Findings

This report focuses on the performance of CBCs related to in-home and out-of-home care services. On June 30, 2015, CBC lead agencies were serving 6,168 children through Family Support Services, 14,679 children and young adults with in-home services and 21,792 children and young adults in out-of-home care.

Safety. Performance measure data indicated that while CBCs met the current standard for reduction of re-abuse following termination of services, they were slightly below the standard for re-abuse during the provision of in-home services. Specifically:

- 96.2% of children served did not have a verified maltreatment within 6 months of termination of in-home services or out-of-home care. This met the current standard of 95%.
- 93.3% of the children served with in-home services were free from verified maltreatment during in-home services, slightly below the current standard of 95%.
- 65.9% of cases reviewed had sufficient safety plans.



Case file reviews using the Rapid Safety Feedback standards indicated that case managers need continued training and technical assistance with initial and ongoing safety and risk assessments, the development of appropriate safety plans, and the monitoring of safety plans including family engagement in safety-related services. Of the five items reviewed, all but one fell below 80%. See page 13 for more information on Rapid Safety Feedback.

Permanency. CBCs met the current standards for both achieving permanency within 12 months of entering care and avoiding re-entry to care within 12 months of achieving permanency (see page 10 and following). Areas of performance needing improvement included reducing the number of placements during the first year of out-of-home care, and increasing the number of children less than 13 years of age in out-of-home care who were placed in a licensed family foster home versus group homes. Specifically:

- 47.4% of children in out-of-home care achieved permanency within twelve months of entering care. This met and exceeded the current standard of 40.5%.
- 94.3% of the children served in out-of-home care did not re-enter out-of-home care within twelve months of achieving permanency. This met the current standard of 91.7%.
- 84.8% of children in out-of-home care had two or less placements between the first eight days through twelve months in out-of-home care. This was slightly below the 86% standard.
- 93.2% of children twelve years of age and younger in out-of-home care were placed in a licensed family foster home. This is slightly below the standard of 95%.

In addition, significant improvement is needed in the area of maintaining positive relationships between children in out-of-home care and their parents, primary caregivers, siblings, and community from which the child had been removed. Of five related measures for maintaining key relationships reviewed through the Rapid Safety Feedback (pp. 14-15), four were below 80%.

Well-Being. As of the end of March 2015, CBCs met the performance standard for children in out-of-home care who received medical services in the past 12 months. Additional work is needed on the same population who received dental services in the past seven months (page 12).

CBCs also met the standards for both former foster youth ages 19-22 who had a high school diploma or GED and young adults still in foster care at age 18 who had completed or were enrolled in secondary education, vocational training and/or adult education.

- 66.1% of former foster youth 19 to 22 years of age had a high school diploma or GED. This met the current standard of 65%.



Florida continues to be a leader amongst states as demonstrated by its CBC performance in achieving permanency for children, contributing to the receipt of a grant award for Federal Fiscal Year 2014 (10/01/13 to 09/30/14, which includes the reporting period for this report) via the Adoption and Legal Guardianship Incentive Payment Program. This award is given to states that exceed baseline standards for adoptions and work to find homes for harder to place children such as teens, sibling groups and those with special needs. As part of the latest grant awards issued to states, the Department received more than \$6.1 million, with close to \$3.5 million being issued on August 11, 2014 and the remaining roughly \$2.6 million being issued on May 8, 2015. These monies have been used by Florida to provide Maintenance Adoption Subsidy payments for children who have been adopted within its system of care.



1. Introduction

Florida's child protection system was created to prevent the occurrence of child abuse, neglect and abandonment through partnerships between the Department of Children and Families (DCF), other agencies, the courts, law enforcement agencies, service providers and local communities (Section 39.001(1), F.S.).

The community-based system of care is designed to provide equal protection for children under the law through consistent intake decision-making regarding those to be served at the front end of the system, developing local systems of care to meet varying community needs, matching the needs of children and families to community resources, and allowing the flexible development of evidence-based and promising approaches to the protection of children.

Section 409.986(1), F.S. requires that:

- DCF "provide child protection and child welfare services to children through contracting with community-based care lead agencies."
- Communities "have responsibility for a participation in ensuring safety, permanency and well-being for all children in the state."
- Outsourcing be "accompanied by comprehensive oversight of the programmatic, administrative and fiscal operation of those entities..." and "...the appropriate care of children is ultimately the responsibility of the state and outsourcing such care does not relieve the state of its responsibility to ensure that appropriate care is provided."

These community-based systems of care (CBCs) combine the outsourcing of foster care and related services to local service agencies with an increased local community ownership of service delivery and design. The nonprofit CBCs contract with the state to handle all prevention, foster care, adoption and independent living services to children and families in the child welfare system. During FY 2014-15, there were 17 CBC lead agencies operating throughout the state (Attachment 1).

- **Licensing.** Community-Based Care agencies are licensed as Child Placing Agencies by the Department and arrange for placement in traditional foster homes, therapeutic foster homes, emergency shelters, maternity programs, wilderness camps, and group homes licensed by the Department.
- **Funding.** Community-Based Care operates under the Title IV-E Waiver Demonstration Project that was implemented statewide in October 2006 and extended for an additional five years in 2014. The Waiver is allowed under Title IV-E of the Social Security Act and authorized by the U.S. Department of Health and Human Services' Administration for Children and Families (ACF). The Waiver authorization allows Florida to use IV-E funding flexibly to promote child safety, prevent out-of-home placement into foster care, and expedite permanency.



- **Accreditation.** Fourteen lead agencies are currently accredited by the Council on Accreditation (COA); one lead agency is accredited by the Commission on Accreditation of Rehabilitative Facilities (CARF); one lead agency is in the application process; and one lead agency is not accredited (Appendix 2).

Pursuant to Section 409.986(2), F.S., it is the goal of the Department to protect the best interests of children by achieving the following outcomes in conjunction with the CBC lead agencies, CBC subcontractors and the community alliance:

- (a) Children are first and foremost protected from abuse and neglect.
- (b) Children are safely maintained in their homes, if possible and appropriate.
- (c) Services are provided to protect children and prevent their removal from their home.
- (d) Children have permanency and stability in their living arrangements.
- (e) Family relationships and connections are preserved for children.
- (f) Families have enhanced capacity to provide for their children's needs.
- (g) Children receive appropriate services to meet their educational needs.
- (h) Children receive services to meet their physical and mental health needs.
- (i) Children develop the capacity for independent living and competence as an adult.

These statutory outcomes are broadly organized under the three goals of child safety, permanency, and well-being.

- **Safety Indicators:** Focus on whether children removed referred to the child welfare system for maltreatment experience subsequent maltreatment, especially while receiving services and after termination of services.
- **Permanency Indicators:** Focus on whether children removed from their families have timely reunification or other permanent living arrangement such as adoption or permanent guardianship.
- **Well-Being Indicators:** Focus on quality of life for children in out-of-home care, including having stable placements that allow for continuing important connections and preparation for adulthood.



2. Results-Oriented Accountability

The 2014 Florida Legislature required the Department to develop and implement a comprehensive, Results Oriented Accountability Program (Section 409.997, F.S.) to measure and monitor the quality and extent of services provided, outcomes for both individual children and their families, and the application of resources used to achieve these outcomes. The program includes data analysis, research review and evaluation, and an assessment of the performance of individual entities as well as the performance of groups of entities working together to provide an integrated child welfare system of care.

During Fiscal Year 2014-15, significant milestones were achieved in establishing the Results Oriented Accountability (ROA) Program. Between October 2014 and February 2015, the Department contracted with a qualified consultant, NorthHighland, to produce a plan to guide implementation of the ROA Program outlined in legislation. After submitting the plan on February 1, 2015, the Department leveraged existing resources to establish the Office of Performance and Quality Management composed of the Data Analytics Unit, the Quality Assurance Unit and a newly created Performance Management Unit. .

Analysis produced by the new Performance Management Unit identified developing trends in out-of-home placements. Increases in the numbers of children removed from homes and decreases in the number of discharges resulted in an overall increase in the number of children and youth in out-of-home care (See full report, Appendix 3). Further analysis to determine root causes led to research in partnership with the Casey Family Foundation and the Ounce of Prevention Fund of Florida, scheduled for completion in December 2015 (Appendix 4).

The analysis also prompted the launch of regional site visits examining management practices related to the Department's Safety Methodology, using Rapid Process Improvement (RPI) to determine how well CBCs were incorporating the Methodology into daily practice. (See Appendix 5)

These developments were consistent with the intent of legislation that data analyzed through the program must inform the development and maintenance of a program of quality improvement which promotes individual and organizational learning.

Moving forward, the ROA Program will work to identify and define a limited number of understandable, valid and reliable measures to quantify outcomes as children move through the child welfare system of care. The measures will be monitored on a regular basis to identify trends and chart progress, using newly acquired software to produce user-friendly data analytics and dashboards. They will also be used to identify opportunities for improvement, which the ROA Program will address through plans that are based on established Quality Improvement models such as Six Sigma, Rapid Process Improvement, Kaizen or others.



Pursuant to statute, the ROA Program must incorporate, at a minimum:

- (a) Valid and reliable measures for each of the statutory outcomes listed on page 2.
- (b) Regular and periodic monitoring activities that track the identified outcome measures on a statewide, regional, and provider specific basis.
- (c) An analytical framework that builds on the results of the outcomes monitoring procedures, assesses the statistical validity of observed associations between child welfare interventions and the measured outcomes, identifies opportunities for improvement and informs systematic efforts for quality improvement.
- (d) A program of research review to identify interventions that are supported by evidence as causally linked to improved outcomes for inclusion in quality improvement efforts.
- (e) An ongoing process of evaluation to determine the efficacy and effectiveness of various interventions.
- (f) Procedures for making the results of the accountability system transparent for all parties involved in the child welfare system as well as policymakers and the public.
- (g) An annual performance report that is provided to interested parties including the dependency judge or judges in the community-based care service area.



3. Analysis and Trends

The tables and graphs below depict trends for children receiving in-home services and out-of-home care in Florida at a point in time, either by last day of the fiscal year or last day of the calendar month within a fiscal year as depicted.

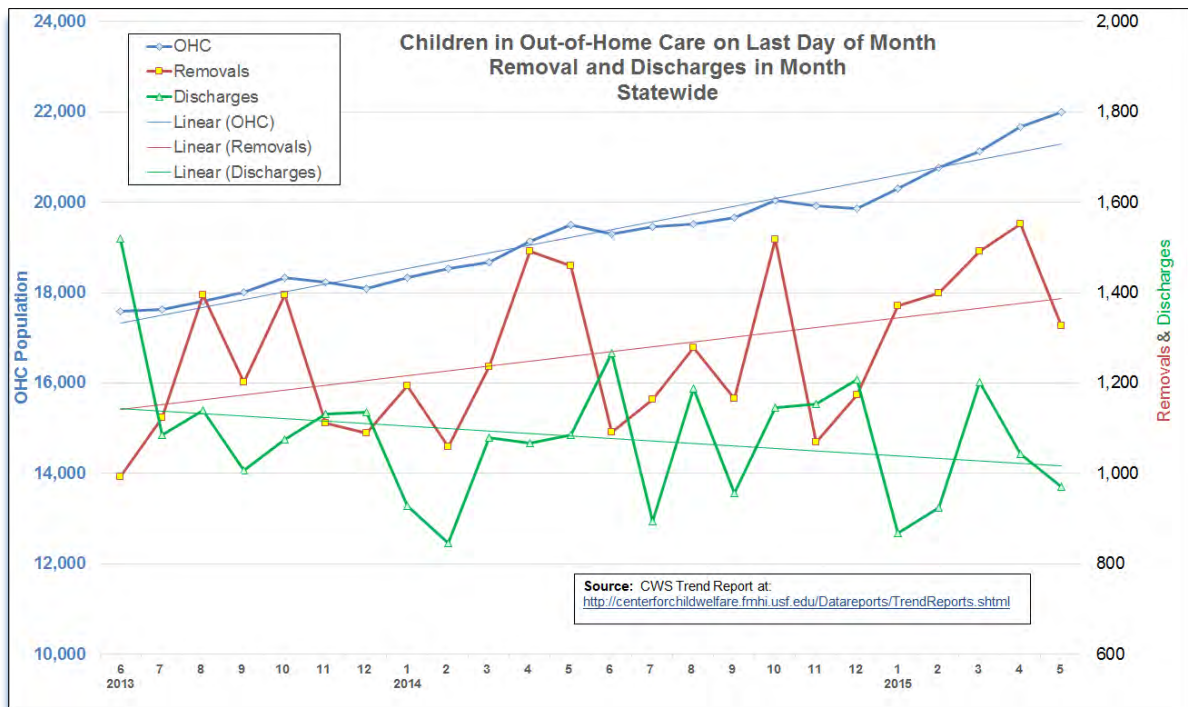
While in-home service numbers increased slightly between FYs 2009-10 and 2010-11, they have progressively decreased every year since then.

Out-of-home care numbers have been less stable, with a consistent decrease each year between FYs 2005-06 and 2009-10. The numbers increased for the next three fiscal years, before showing a slight decrease (364) the following fiscal year. However, they have now increased again from FY 2013-14 to FY 2014-15, with the number for the current fiscal year being over 2,500 more than last fiscal year.

The Department recently presented child placement trends in a report entitled, *Community Based Care Lead Agency Trends and Comparisons: Caseloads and Use of Placement Resources* (dated June 26, 2015, see Appendix 3). The following observations were developed by the Department based on this set of trend data:

- (a) There has been a sharp increase in out-of-home care population over the last 24 months;
- (b) The current out-of-home care population now exceeds the FY 2007-08 level;
- (c) The out-of-home care population increase is driven by both an increase in removal rates and a decrease in discharge rates;
- (d) Removal and discharge rates are variable across the state;
- (e) Circuit and CBCs vary in terms of how often they protect children in their own homes versus using out-of-home care;
- (f) Circuits and CBCs vary in terms of how often they place children in kinship care versus foster care; and
- (g) Circuits and CBCs vary in terms of how often they place children in family foster homes versus group care.

Figure 1. Children in Out-of-Home Care on Last Day of Month



Source: *Community Based Care Lead Agency Trends and Comparisons: Caseloads and Use of Placement Resources*, Appendix 3.

In response to this increase in out-of-home care, the Department has recently initiated a study of child placement trends in collaboration with Casey Family Programs and the Ounce of Prevention Fund of Florida. This study will focus on determining and understanding the factors that have contributed to the increase in out-of-home care, with a special focus on entries into care at the circuit, region and statewide levels.

The development of recommendations to safely address this increase in out-of-home care will guide next steps for improving the overall system of care. This study will also strengthen the Department’s ability to collaborate with child welfare partners to develop and focus resources efficiently as well as benefit the research capacity of the Department’s Office of Child Welfare Performance and Quality Management team by specifically helping to develop new strategies for exploring additional trends in the child welfare system of care.

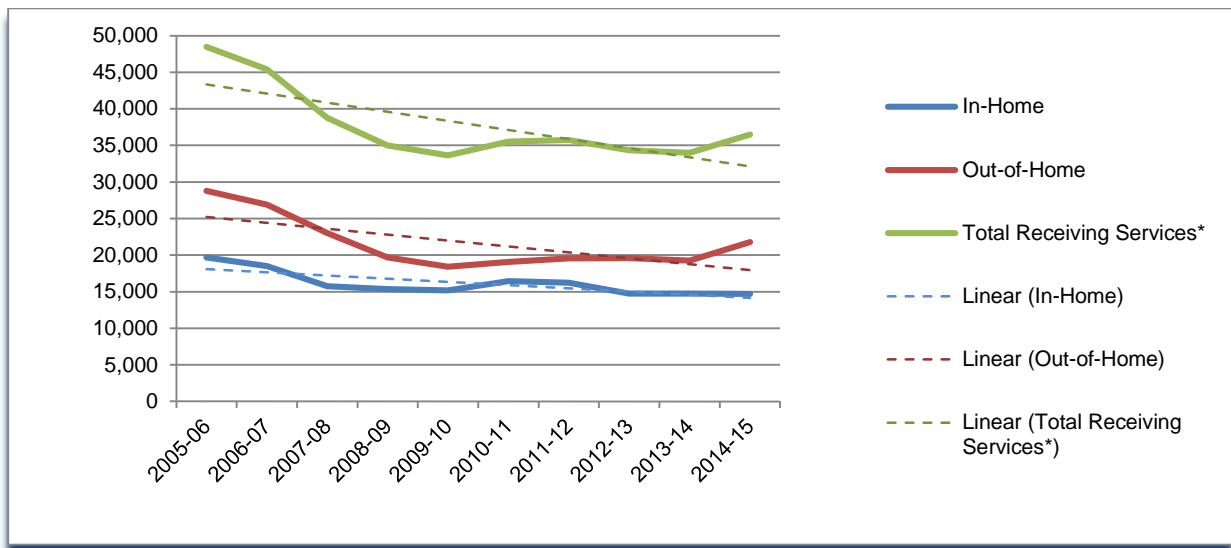
Other trends relative to children receiving both in-home and out-of-home services begin on the following page.

Table 1. Number of Children* Receiving Services as of Last Day of the Fiscal Year

Fiscal Year	In-Home Services	Out-of-Home Services	Total Receiving Services*
2005-06	19,686	28,766	48,452
2006-07	18,498	26,914	45,412
2007-08	15,736	23,009	38,745
2008-09	15,345	19,670	35,015
2009-10	15,195	18,427	33,622
2010-11	16,465	19,064	35,529
2011-12	16,211	19,542	35,753
2012-13	14,752	19,598	34,350
2013-14	14,737	19,234	33,971
2014-15	14,679	21,792	36,471

Source: Florida Safe Families Network, BOE Report 1005
*Includes Young Adults Formerly in Foster Care

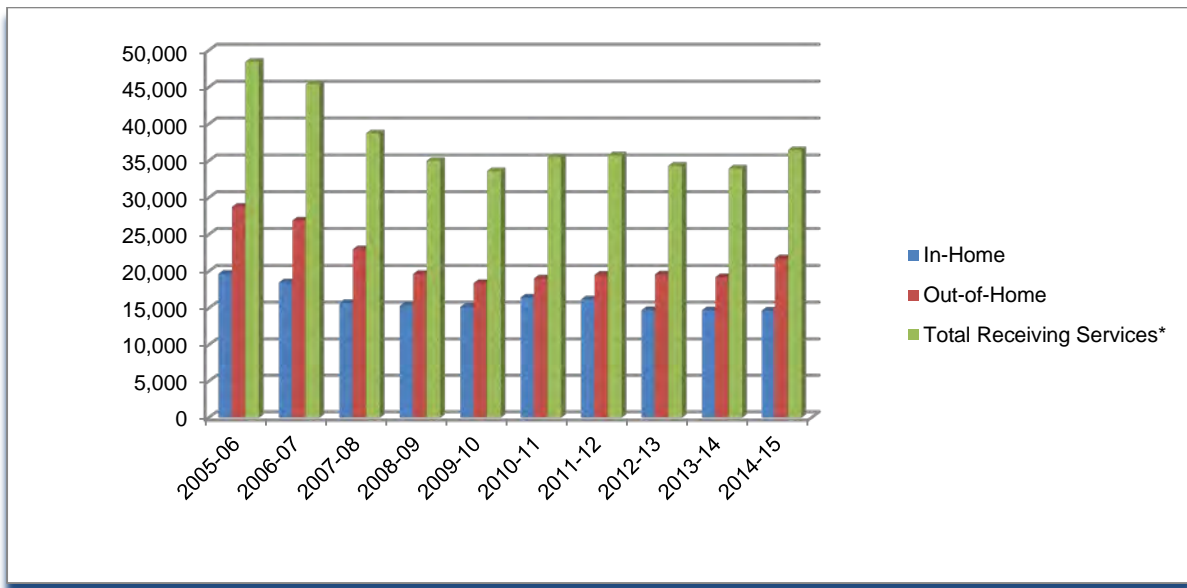
Figure 2. Number of Children* Receiving Services as of Last Day of the Fiscal Year



Source: Florida Safe Families Network, BOE Report 1005
*Includes Young Adults Formerly in Foster Care



Figure 3. Number of Children* Receiving Services as of Last Day of the Fiscal Year



Source: Florida Safe Families Network, BOE Report 1005
 *Includes Young Adults Formerly in Foster Care

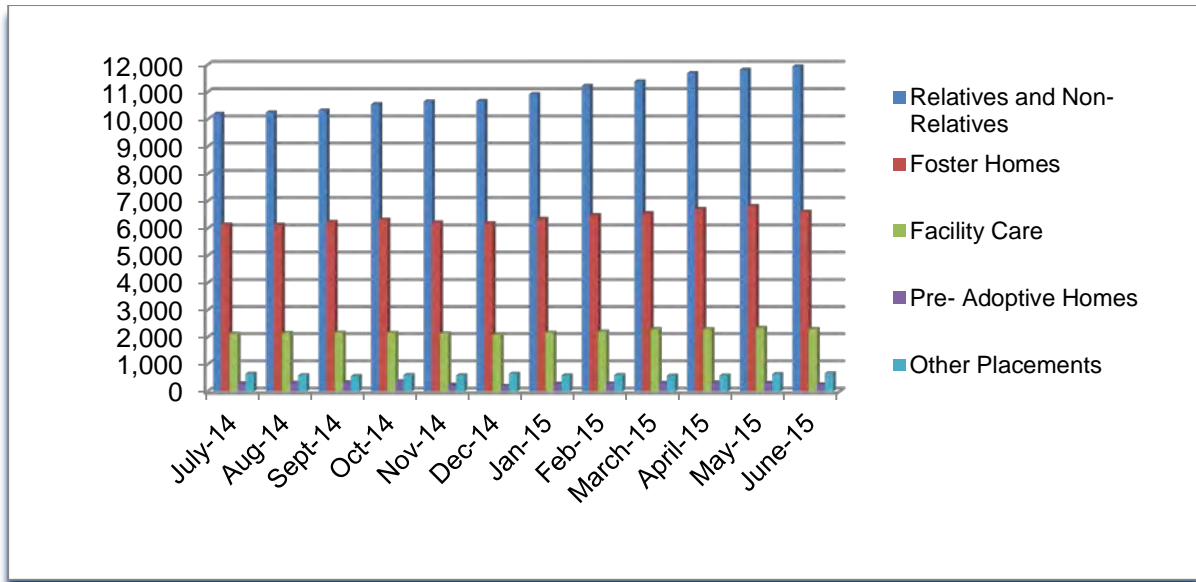
Table 2. Number of Children* in Out-of-Home Care by Placement Type as of Last Day of the Month

Month	Relatives and Non-Relatives	Foster Homes	Facility Care	Pre Adoptive Homes	Other Placements	Total OOH Care
July-14	10,208	6,147	2,127	300	655	19,437
Aug-14	10,255	6,139	2,152	324	594	19,464
Sept-14	10,333	6,245	2,168	340	564	19,650
Oct-14	10,559	6,323	2,163	372	604	20,021
Nov-14	10,662	6,223	2,144	252	592	19,873
Dec-14	10,677	6,195	2,099	202	650	19,823
Jan-15	10,927	6,359	2,167	285	590	20,328
Feb-15	11,233	6,491	2,213	291	603	20,831
March-15	11,394	6,561	2,300	316	582	21,153
April-15	11,696	6,718	2,296	333	586	21,629
May-15	11,823	6,823	2,344	314	638	21,942
June-15	11,945	6,618	2,299	259	671	21,792

Source: Florida Safe Families Network, BOE Report 1005
 *Includes Young Adults Formerly in Foster Care



Figure 4. Number of Children* in Out-of-Home Care by Placement Type as of Last Day of the Month



Source: Florida Safe Families Network, BOE Report 1005
 *Includes Young Adults Formerly in Foster Care



4. Scorecard

The CBC Scorecard was developed in conjunction with the CBC agencies and continues to be refined through the Performance Measures Workgroup, which is a Department and CBC collaborative effort facilitated by Casey Family Programs. It is intended to track a set of indicators over time, but will also be modified as issues emerge and priorities change. These are quantitative measures derived from data extracted from the Florida Safe Families Network (FSFN).

For the first five months of Fiscal Year 2014-15, the CBC monthly Scorecards displayed eight key measures of the most critical needs of children served by Florida's community-based approach to child welfare. The indicators were selected to provide balance among the goals of safety, permanency and well-being.

A Scorecard was not produced for the month of December 2014, as the Department was in the process of changing from a monthly methodology to a quarterly methodology, as well as evaluating the previously chosen measures in comparison to relatively concurrent federal changes that were taking place with the designation of new federal measures.

Following the completion of the Quarter 3 Scorecard (the first to be produced on a quarterly basis for this fiscal year), FSFN was found to have developed a defect in the method by which shelter dates (the date a court approves a child's removal from their legal caregiver) are captured in the FSFN Legal Module. This defect resulted in incomplete/inaccurate data for Quarter 4 only, and a FSFN Build to correct this defect is currently underway with a projected completion of mid-October 2015. At that time, an addendum will be issued which will contain the full year data, with monthly performance again being reported for months July – November 2014, and Quarter 3 and 4 performance being reported for months January – June 2015.

**Table 3. SAFETY:
CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT
Fiscal Year 2014-15**

Standard	Target	2014					
		July	Aug	Sept	Oct	Nov	Dec
No Verified Maltreatment During In-Home Services	97% and above	96.1%	96.3%	96.6%	96.9%	96.7%	NA
No Verified Maltreatment within 6 Months of Termination of In-Home and Out-of-Home Services	95% and above	96.6%	96.4%	96.6%	96.5%	96.7%	NA

Source: CBC Lead Agency Scorecard



**Table 4. SAFETY:
CHILDREN ARE, FIRST AND FOREMOST, PROTECTED FROM ABUSE AND NEGLECT
Fiscal Year 2014-15**

Standard	Target	2015	
		Quarter 3	Quarter 4
Rate of Abuse per 1,000 Days in Foster Care	8.50 or less	10.41	Not Yet Available
Children Who Are Not Neglected or Abused During In-Home Services	95% and above	96.8%	Not Yet Available
Children Who are Not Neglected or Abused After Receiving Services	95% and above	96.5%	Not Yet Available
Children Under Supervision Who Are Seen Every 30 Days	99.5% and above	99.8%	Not Yet Available

**Table 5. PERMANENCY:
CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING ARRANGEMENT
Fiscal Year 2014-15**

Standard	Target	2014					
		July	Aug	Sept	Oct	Nov	Dec
Children in Care 8 Days-12 Months with No More than Two Placements	86% and above	86.5%	86.2%	86.2%	86.5%	86.5%	NA
Children Achieving Permanency within 12 Months of Entering Care	75% and above	45.8%	47.1%	48.7%	49.7%	50.3%	NA
Children Achieving Permanency After 12 or More Months in Care	55% and above	50.3%	50.5%	50.1%	50.7%	50.1%	NA
Children Not Re-entering Out-of-Home Care within 12 Months of Achieving Permanency	92% and above	92.7%	92.4%	91.4%	90.3%	90.9%	NA

Source: CBC Lead Agency Scorecard

Note: CBC lead agencies continue to be a national leader in achieving permanency for children. In FY 2014-15, 11,818 children achieved permanency through reunification (6,217), adoption (2,791) and guardianship (2,810).



**Table 6. PERMANENCY:
CHILDREN HAVE PERMANENCY AND STABILITY IN THEIR LIVING ARRANGEMENT
Fiscal Year 2014-15**

Standard	Target	2015	
		Quarter 3	Quarter 4
Children Exiting Foster Care to a Permanent Home within 12 Months of Entering Care	40.5% and above	46.0%	Not Yet Available
Children Achieving Permanency in 12 Months for Children in Foster Care 12-23 Months	43.6% and above	55.2%	Not Yet Available
Children Who Do Not Re-enter Foster Care within 12 Months of Moving to a Permanent Home	91.7% and above	87%	Not Yet Available
Children's Placement Moves per 1,000 Days in Foster Care	4.12 or less	3.73	Not Yet Available

Source: CBC Lead Agency Scorecard

**Table 7. WELL-BEING
FLORIDA SPECIFIC SCORECARD MEASURES
Fiscal Year 2014-15**

Standard	Target	2014					
		July	Aug	Sept	Oct	Nov	Dec
Children in Licensed Out-of-Home Care Ages 12 and Under in DCF Licensed Foster Homes – (Includes Relatives, Non-Relatives and Pre-Adoptive Homes)	95% and above	94.8%	91.4%	95%	94.7%	94.9%	82.2%
Former Foster Youth Ages 19-22 with Diploma or GED	65% and above	67.6%	67.5%	68.9%	67.3%	66.5%	66.7%

Source: CBC Lead Agency Scorecard



**Table 8. WELL-BEING
FLORIDA SPECIFIC SCORECARD MEASURES
Fiscal Year 2014-15**

Standard	Target	2015	
		Quarter 3	Quarter 4
Children in Out-of-Home Care Who Have Received Medical Services in the Last 12 Months	95% and above	97.2%	Not Yet Available
Children in Out-of-Home Care Who Have Received Dental Services in the Last 7 Months	95% and above	89.8%	Not Yet Available
Young Adults in Foster Care Who at Age 18 Who Have Completed or Are Enrolled in Secondary Education, Vocational Training and/or Adult Education	80% and above	87%	Not Yet Available
Sibling Groups Where All Siblings Are Placed Together	65% and above	64.2%	Not Yet Available

Source: CBC Lead Agency Scorecard



5. Rapid Safety Feedback

As assessment of safety practice is performed by child welfare professionals reading case records and conducting a qualitative assessment of practice. In FY 2012-13 the Department made significant changes to the child welfare quality assurance system through the Rapid Safety Feedback process that substantially impacted the methods used by CBC lead agencies to conduct case reviews.

Rapid Safety Feedback is a process designed to flag key risk factors that could impact the safety of children receiving services. These factors have been determined based on reviews of other cases where child injuries or severe maltreatment have occurred. Among these factors are the age of parents, the presence of a paramour in the home, evidence of substance abuse, or criminal records. The critical component of the process is the case consultation in which the reviewer engages the case manager and the supervisor to discuss the case. This discussion focuses on safety practices and helps build critical thinking skills for the case manager and supervisor. Case reviews focus on 22 questions, as reflected on the following tables beginning with Table 9.

In cases where the Quality Assurance Reviewer had critical child safety concerns, a Request for Action alert was submitted through FSFN to the case manager, supervisor, and second level supervisor. Only 5.5% of the cases reviewed rose to this level during the review period.

Tables containing the results of case management reviews for FY 2014-15 begin on the following page.



Table 9. Case Management Reviews for FY 2014-15

Quarter	Q1	Q2	Q3	Q4	FY Statewide
Statewide	% Strength				
Safety Outcome 1 = 71.4%					
1. Were concerted efforts made to provide services to the family to prevent children's entry into out-of-home care or re-entry after a reunification?	91.3%	85.5%	84.0%	88.6%	87.1%
2. Were initial and on-going assessments conducted to assess risk and safety concerns relating to the child(ren) in their home?	71.8%	67.2%	69.2%	72.1%	70.1%
3. If safety concerns were present, did the agency develop an appropriate safety plan with the family?	65.9%	65.1%	69.0%	62.6%	65.9%
4. If safety concerns were present, did the agency continually monitor the safety plan as needed including monitoring family engagement in any safety-related services?	67.5%	67.0%	65.0%	59.5%	64.5%
5. Are background checks and home study or assessment sufficient and responded to appropriately?	75.0%	71.1%	70.9%	62.3%	69.6%
Permanency Outcome 1 = 81.9%					
6. Is the child in a stable placement at the time of the review and were any changes in placement that occurred during the period under review made in the best interest of the child and consistent with achieving the child's permanency goals?	82.1%	79.0%	87.0%	75.6%	80.3%
7. Was the appropriate permanency goal established for the child in a timely manner?	88.4%	85.8%	90.9%	79.8%	85.8%
8. Are concerted efforts being made to achieve reunification, guardianship, adoption, or other permanent planned living arrangement?	85.5%	82.5%	78.1%	72.3%	79.9%
Permanency Outcome 2 = 75.4%					
9. Were concerted efforts made to ensure that siblings in out-of-home care are placed together unless a separation was necessary to meet the need of one of the siblings?	94.0%	86.6%	83.6%	80.5%	86.5%



Quarter	Q1	Q2	Q3	Q4	FY Statewide
Statewide	% Strength				
10. Were concerted efforts made to ensure that visitation between a child in out-of-home care and his or her mother, father, and siblings was of sufficient frequency and quality to promote continuity in the child's relationship with these close family members?	77.4%	81.3%	78.7%	64.4%	75.7%
11. Were concerted efforts made to maintain the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school, friends?	83.1%	76.6%	75.4%	72.5%	76.8%
12. Were concerted efforts made to place the child with relatives when appropriate?	77.2%	76.2%	74.1%	68.5%	74.1%
13. Concerted efforts were made to promote, support, and/or maintain positive relationships between the child in out-of-home care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation?	75.5%	70.7%	69.7%	54.0%	67.4%
Well-Being Outcome 1 = 62.6%					
14. Were concerted efforts made to assess the needs of children, parents, and foster parents (both at the child's entry into out-of-home care [if the child entered during the period under review] or an ongoing basis) to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family, and provided the appropriate services?	81.5%	77.9%	77.7%	68.7%	76.5%
15. Were concerted efforts made to involve parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?	72.8%	68.6%	71.8%	61.0%	68.2%



Quarter	Q1	Q2	Q3	Q4	FY Statewide
Statewide	% Strength				
16. Is the frequency and quality of visits between caseworkers and the child(ren) in the case sufficient to ensure the safety, permanency, and well-being of the child and promote achievement of case goals?	66.6%	64.1%	58.2%	54.2%	61.0%
17. Is the frequency and quality of visits between caseworkers and the mothers and fathers of the children sufficient to ensure the safety, permanency, and well-being of the children and promote achievement of case goals?	63.6%	56.1%	56.5%	52.1%	57.2%
Well-Being Outcome 2 = 70.8%					
18. Did the agency make concerted efforts to assess children's educational needs at the initial contact with the child (if the case was opened during the period under review) or on an ongoing basis (if the case was opened before the period under review), and were identified needs appropriately addressed in case planning and case management activities?	75.8%	63.0%	73.4%	67.4%	70.8%
Well-Being Outcome 3 = 71.0%					
19. Has the agency addressed the physical health needs of the child, including dental health needs?	78.2%	67.1%	67.6%	64.4%	70.6%
20. Has the agency addressed the mental/behavioral health needs of the child?	76.4%	66.7%	72.6%	67.1%	71.6%
Other: Florida Specific = 63.4%					
21. Does the case plan for safe case closure provide a sequence of strategies, interventions, and supports that are organized into a coherent services process providing a mix of services that fits the child and family's evolving situation?	78.7%	74.0%	70.8%	69.7%	73.5%
22. Is there evidence the case management supervisor is regularly consulting with the case manager, recommending actions when concerns are identified, and ensuring recommended actions followed up on urgently?	60.6%	52.5%	51.4%	48.0%	53.4%

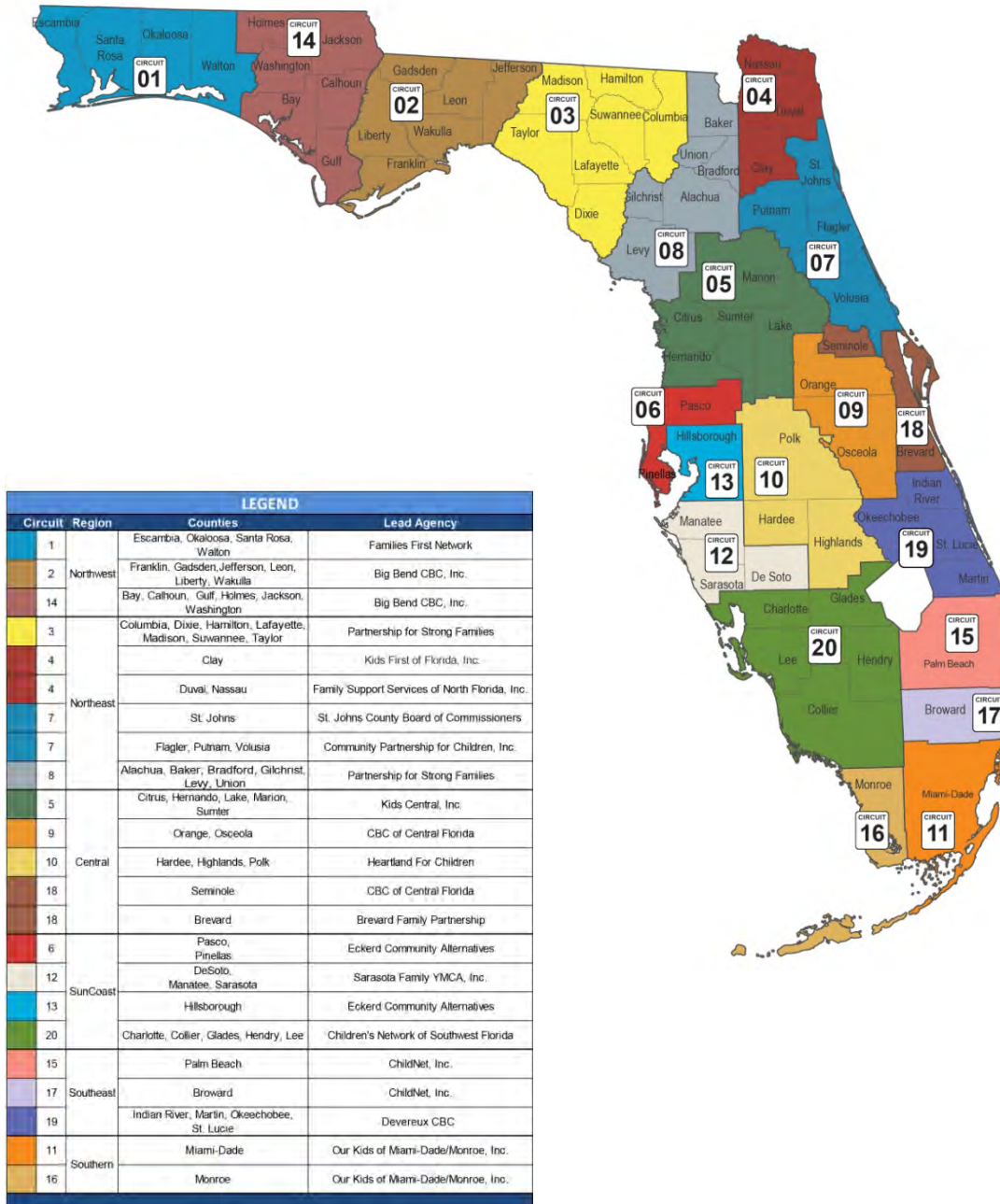


Quarter	Q1	Q2	Q3	Q4	FY Statewide
Statewide	% Strength				
Data Collection = 27.8%					
23. Was a case consultation completed?	66.8%	55.6%	60.4%	61.6%	61.2%
24. Was a Request for Action completed in FSFN for an immediate safety concern?	5.4%	4.8%	6.2%	5.6%	5.5%
25. Was this case a safety methodology case?	4.4%	9.0%	21.2%	34.1%	16.6%

Source: Case Management Services Reviews, Q1-Q4 2014-15, QA Web Portal Data

Appendix 1. CBC Map

Community Based Care Lead Agency Map





Appendix 2. CBC Accreditation Status

CBC Lead Agency Accreditation Status		
Lead Agency	Accreditation Organization	Expiration Date
Big Bend CBC, Inc.	Council on Accreditation	12/31/17
Brevard Family Partnerships	Council on Accreditation	07/31/17
CBC of Central Florida	Council on Accreditation	02/28/19
ChildNet, Inc.	Council on Accreditation	02/28/19
Children's Network of SW Florida	Council on Accreditation	08/31/17
Community Partnerships for Children, Inc.	None – Not Accredited	NA
Devereux CBC, Inc.	None Yet – Awarded Contract 11/01/13, with site visit scheduled for 11/19/15.	NA
Eckerd Community Alternatives	Council on Accreditation	06/30/19
Families First Network of Lakeview	Commission on Accreditation of Rehabilitative Facilities (CARF)	01/31/16
Family Support Services of N Florida, Inc.	Council on Accreditation	12/31/16
Heartland for Children	Council on Accreditation	03/31/17
Kids Central, Inc.	Council on Accreditation	07/31/19
Kids First of Florida, Inc.	Council on Accreditation	10/31/18
Our Kids Of Miami-Dade/Monroe, Inc.	Council on Accreditation	04/30/17
Partnership for Strong Families	Council on Accreditation	06/30/19
Sarasota Family YMCA, Inc.	Council on Accreditation	06/30/17
St Johns County Board of County Commissioners/Family Integrity Program	Council on Accreditation	11/30/16



Appendix 3. CBC Performance Trends

Community Based Care Lead Agency Trends and Comparisons: Caseloads and Use of Placement Resources Report

CBC Lead Agency Trends and Comparisons: Caseloads and Use of Placement Resources



June 26, 2015

Trend and Comparison Charts in this Package

Managing the Workload within Available Resources

The Charts in This Package Clearly Show:

- Sharp increase in removals and out-of-home care (OHC) population over last 24 months
- OHC population now back to 2008 level
- OHC population increase driven by both increase in removal rates and decrease in discharge rates
- Removal rates and discharge rates are variable across the state
- Circuits and lead agencies are variable in mix of protecting children in their own homes vs more expensive out-of-home care
- Circuits and lead agencies are variable in placement of children in kinship care vs more expensive licensed care
- Circuits and lead agencies are variable in placement of children in foster family homes vs more expensive group care

What Can We Learn from These Trends and Lead Agency Comparisons to Improve Performance within Current Resources?

- Some differences are likely due to differences in population served.
- Some differences are likely due to differences in external factors, including CPI, courts and availability of local resources.
- Some differences might be due to differences in allocation of lead agency resources.
- Some differences are clearly under the control of lead agencies. What can we learn to change systems of care to be more effective and efficient?

Impact of Inadequate Placement Resources

In addition to the financial impact on lead agencies, the lack of appropriate placement resources has a negative impact on the children served:

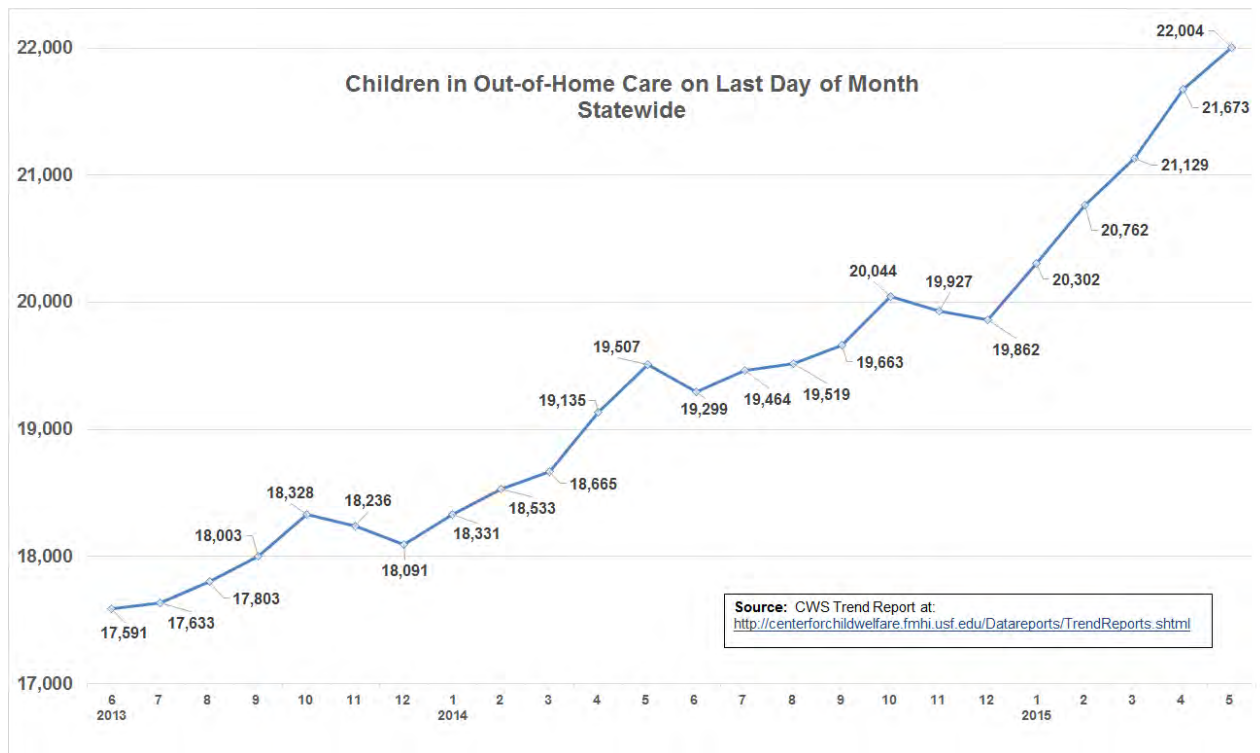
- Too many children, especially young children, are placed in group care.
- Too many children are placed outside the county, circuit and region of removal.
- Too many children are moved from placement to placement
- Too many sibling groups are placed in different homes.

What must be done to remedy this situation?

Short-Term Trends

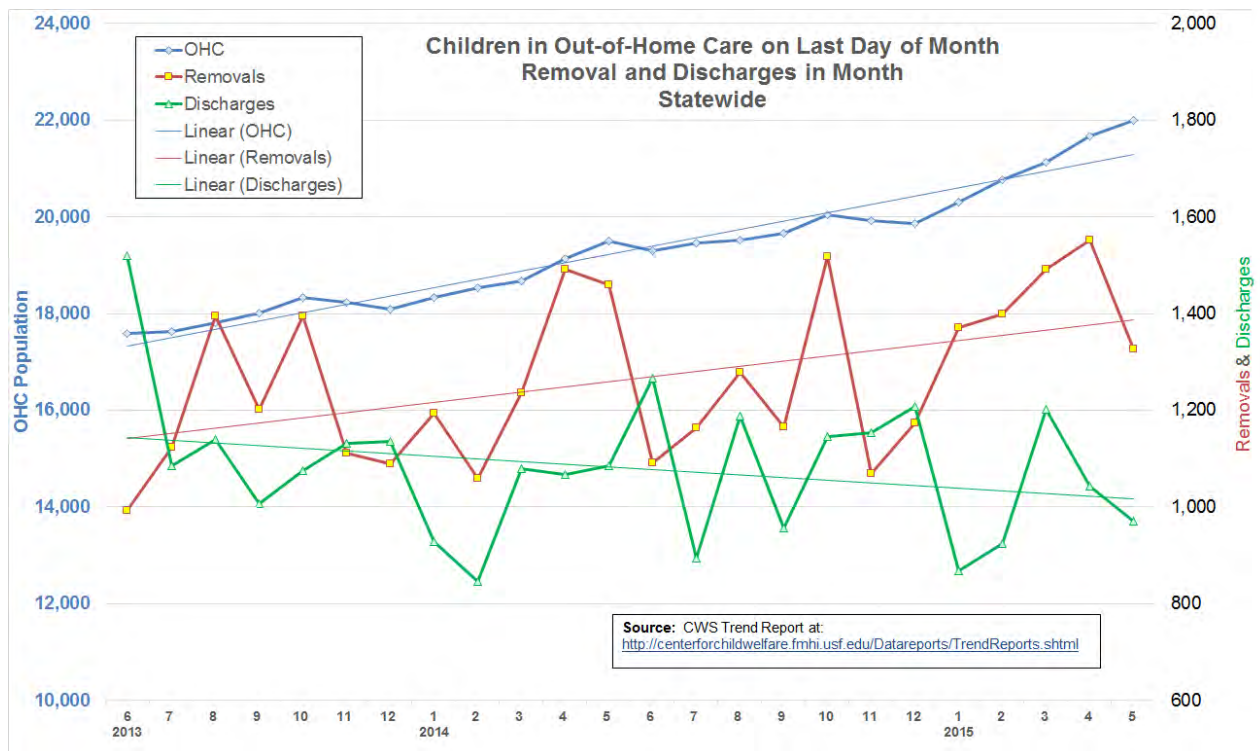
Increase in Out-of-Home Care

The number of children in out-of-home care increased sharply over the last 24 months.



Increase in Removals and a Decrease in Discharges

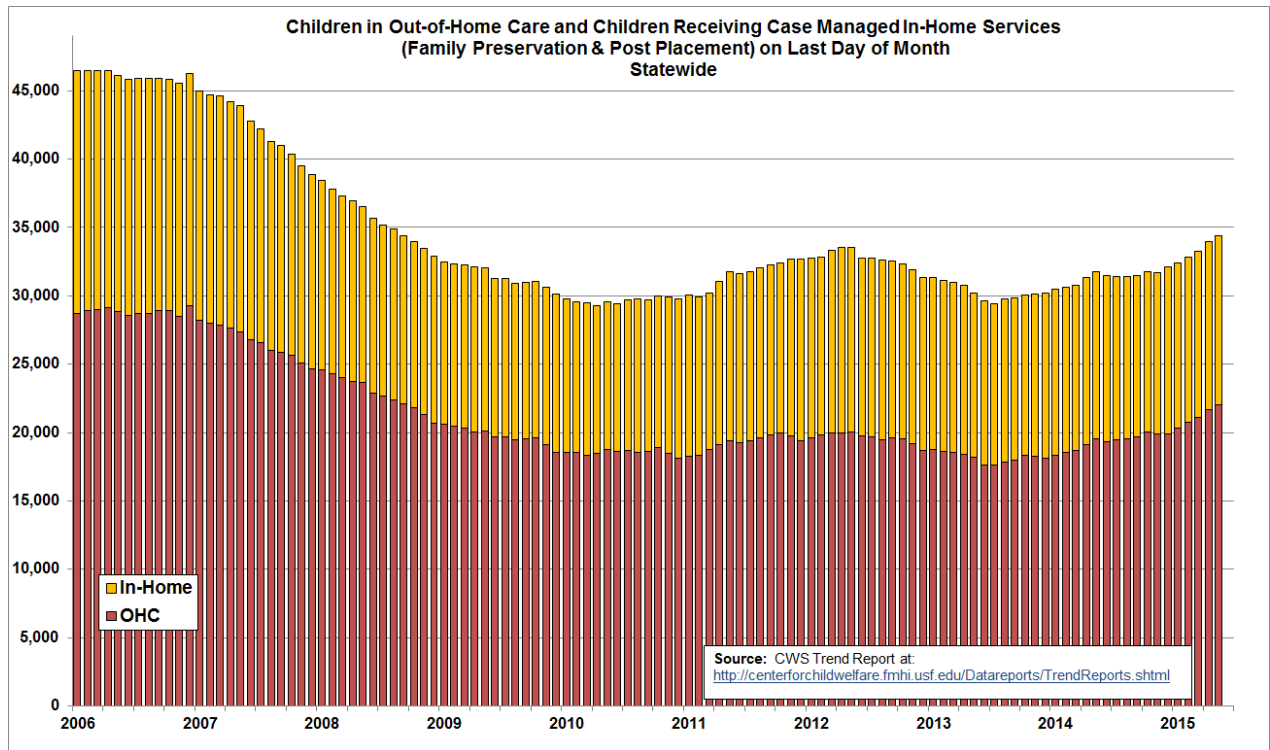
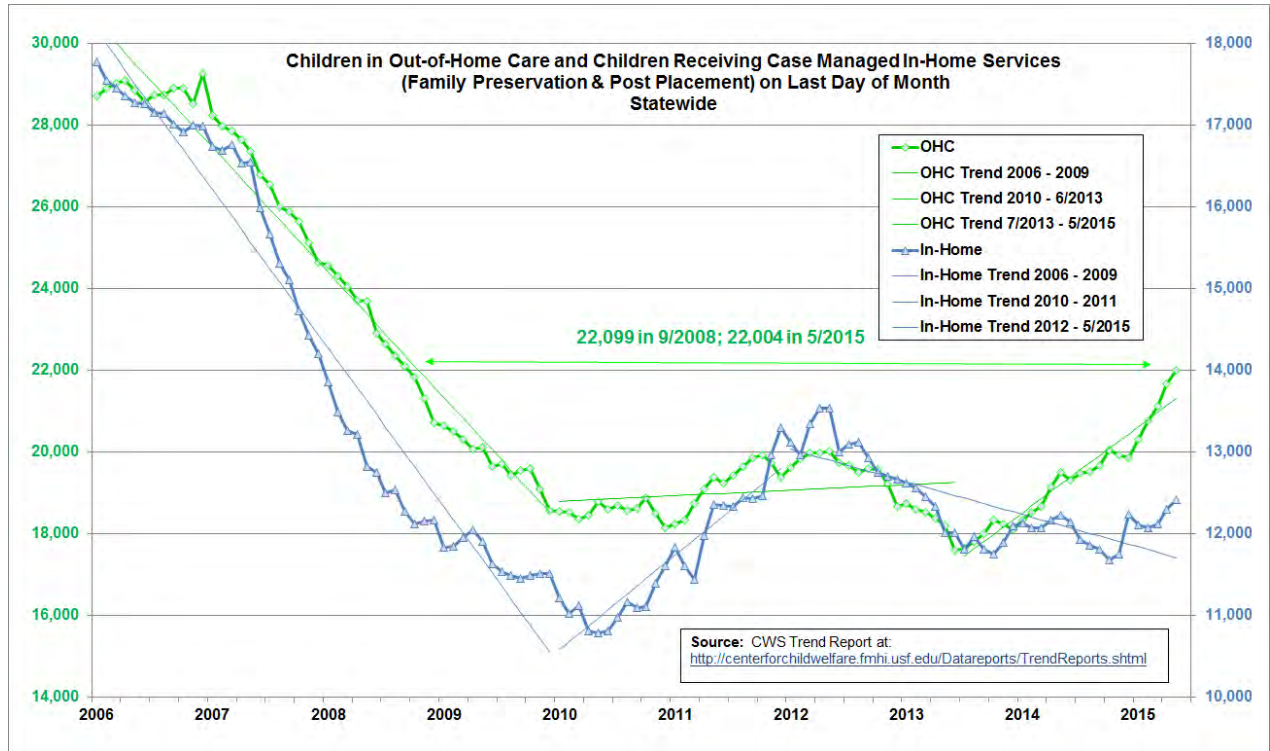
The OHC increase is driven by *both* an increase in removals and a decrease in discharges.



Long-Term Trends in Case Mix

Out-of-Home Care & Case-Managed In-Home Services (Family Pres. & PPS)

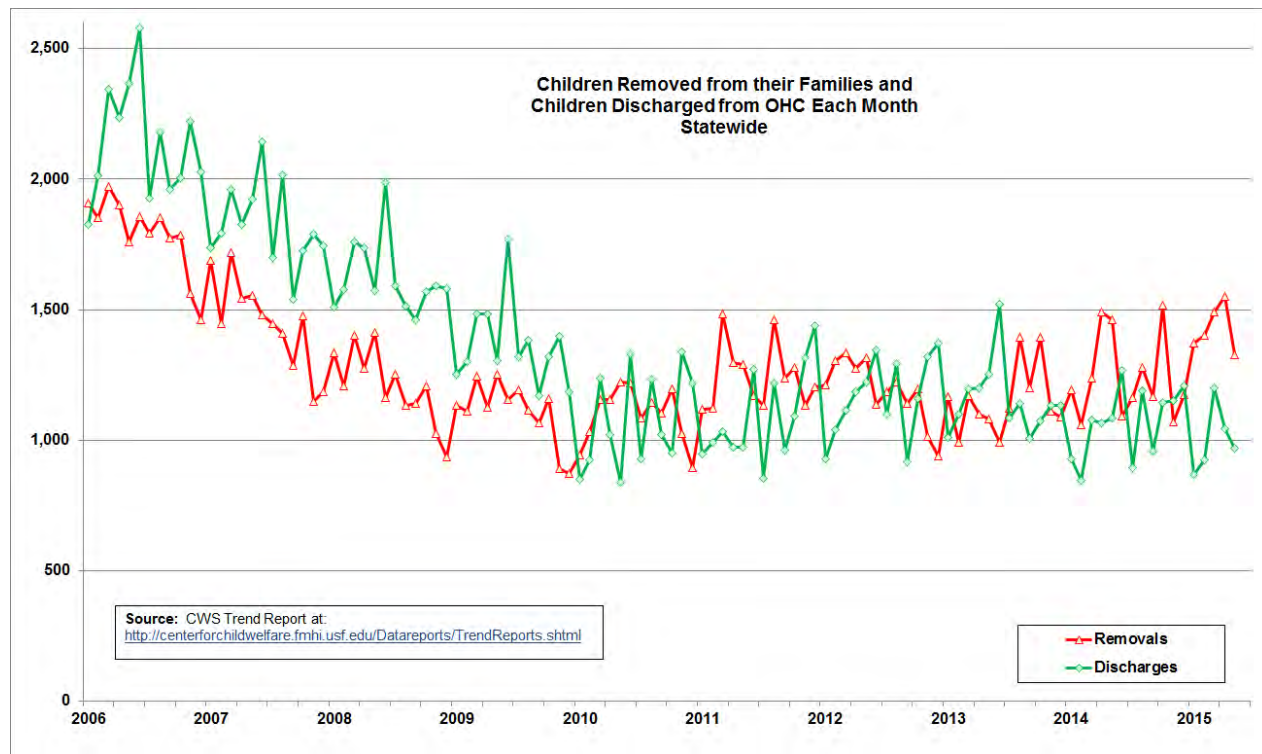
The recent increase to 22,000 children in out-of-home care (OHC) brings us to the same level as 2008 -- not nearly as high as the 29,000 children in 2006. With the simultaneous decline in children protected in their own homes, the total number of children protected is still lower than in 2006 through the middle of 2008. In-home services to prevent removal have declined since a peak in 2012.



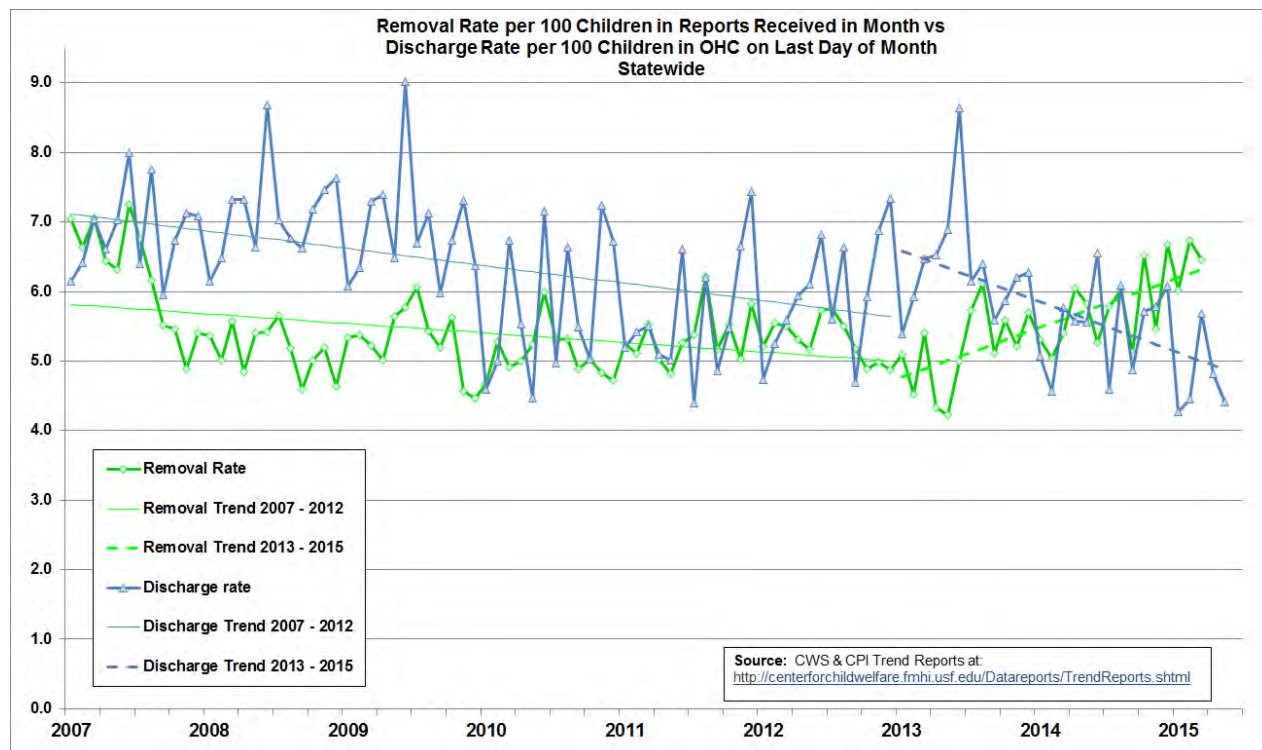
Long-Term Trends in Removals and Discharges

Removals and Discharges

The sharp reduction in OHC in 2006 through 2010 was driven primarily by a reduction in removals. The increase in OHC over the last 24 months has been driven by changes in *both* removals and discharges.



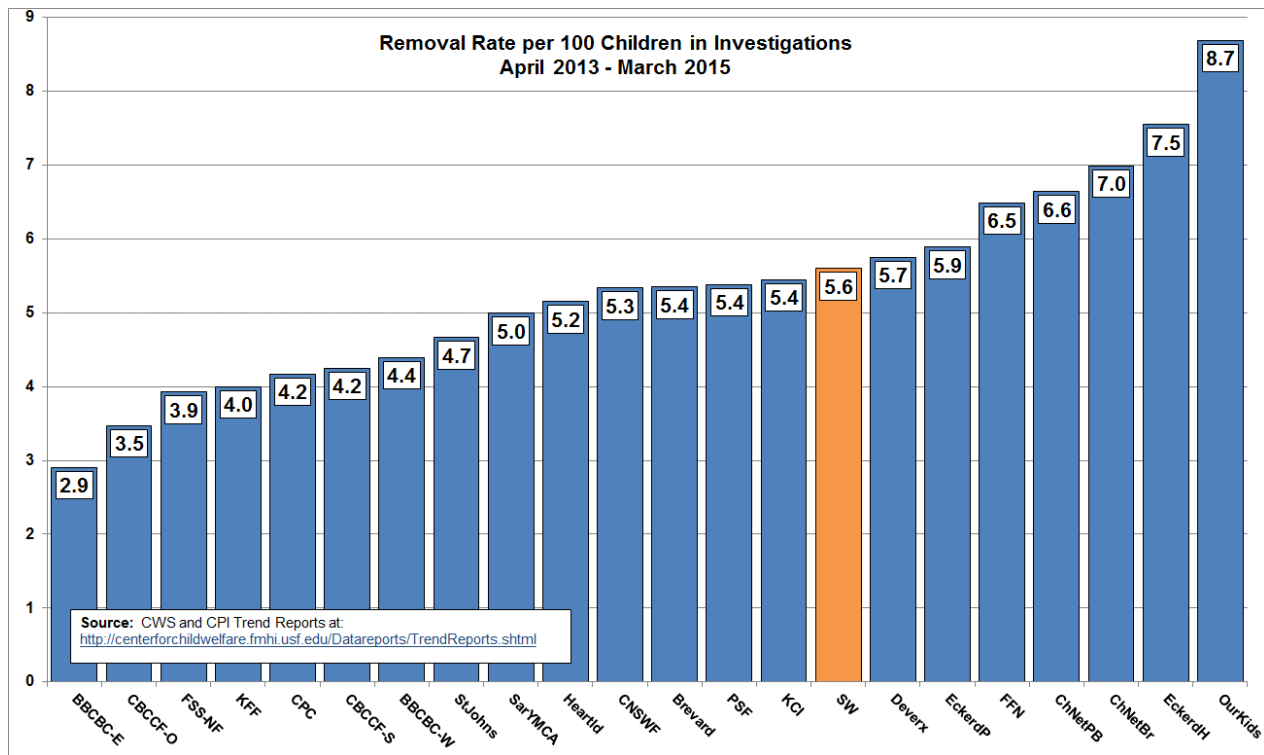
Removal Rate and Discharge Rate



Lead Agency Comparisons: Last 24 Months

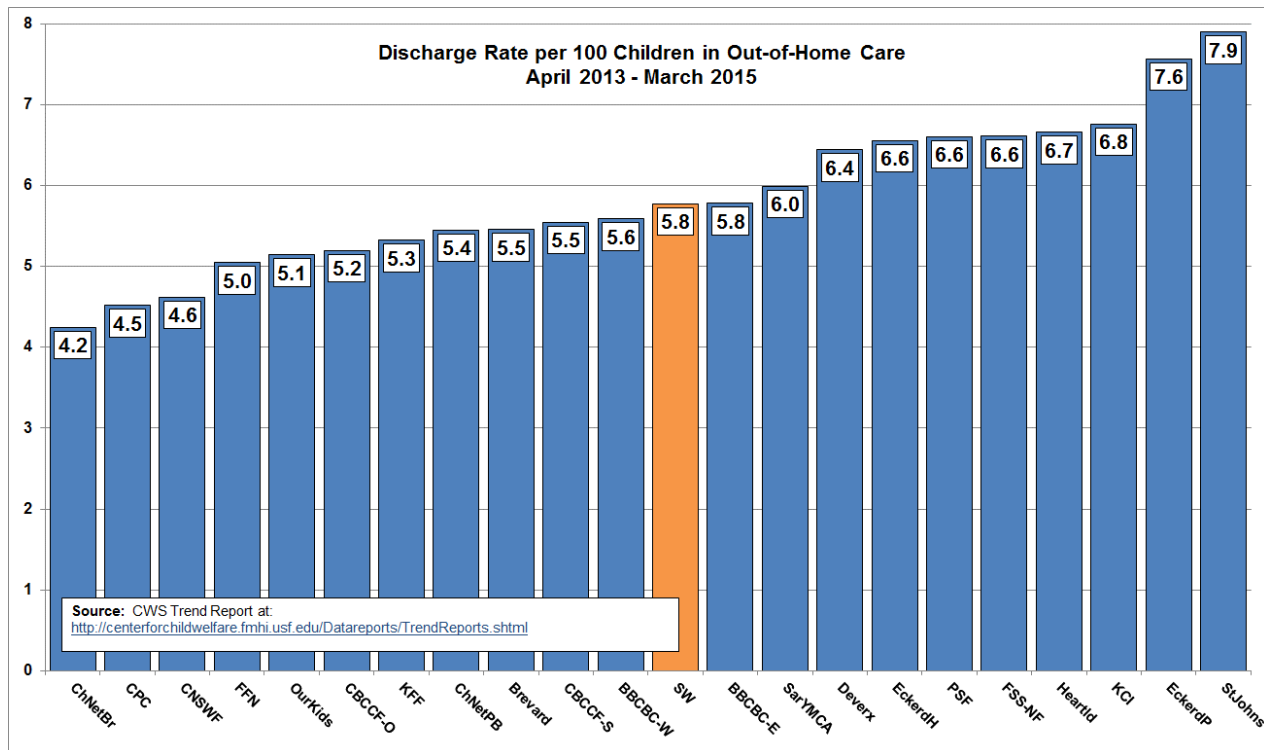
Removal Rate by Area Served by Lead Agency

Areas served by five lead agencies on the right had extremely high removal rates in the last 24 months.



Discharge Rate by Lead Agency

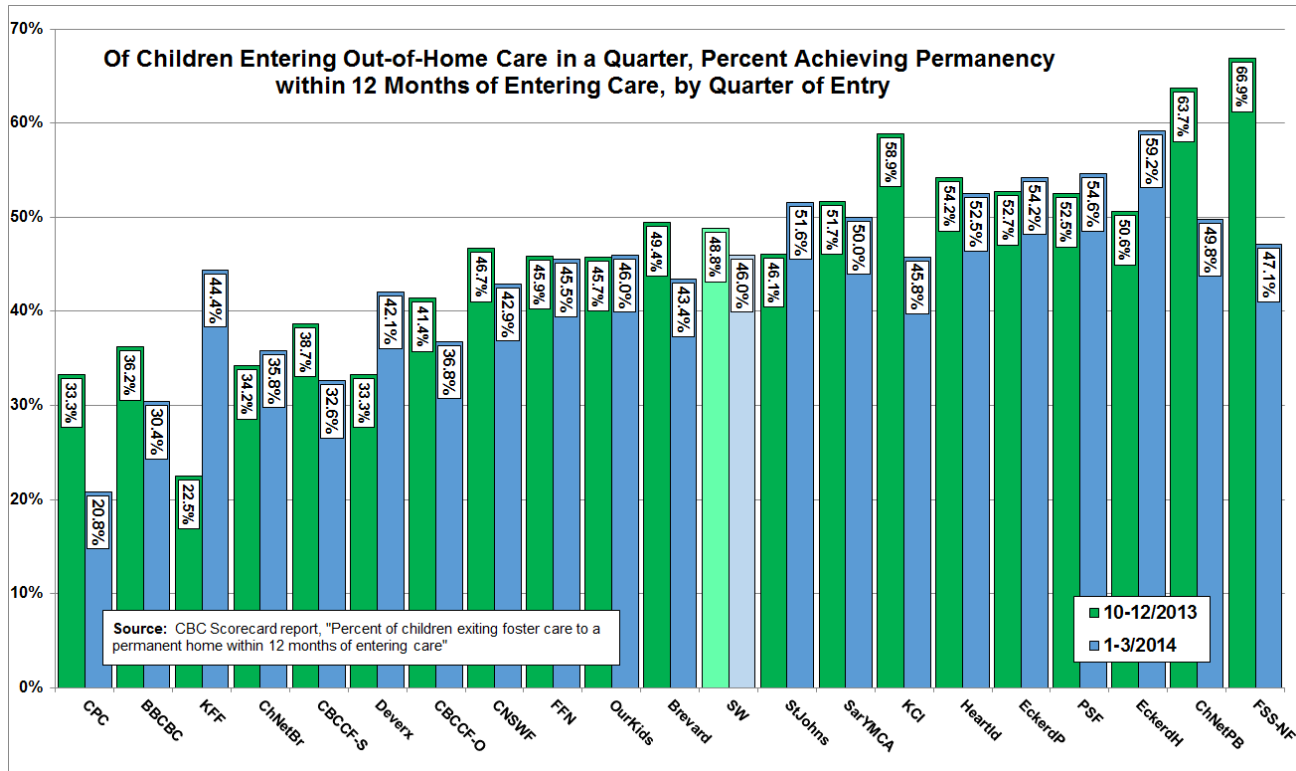
Several lead agencies on the left, including some with high removal rates, had very low discharge rates.



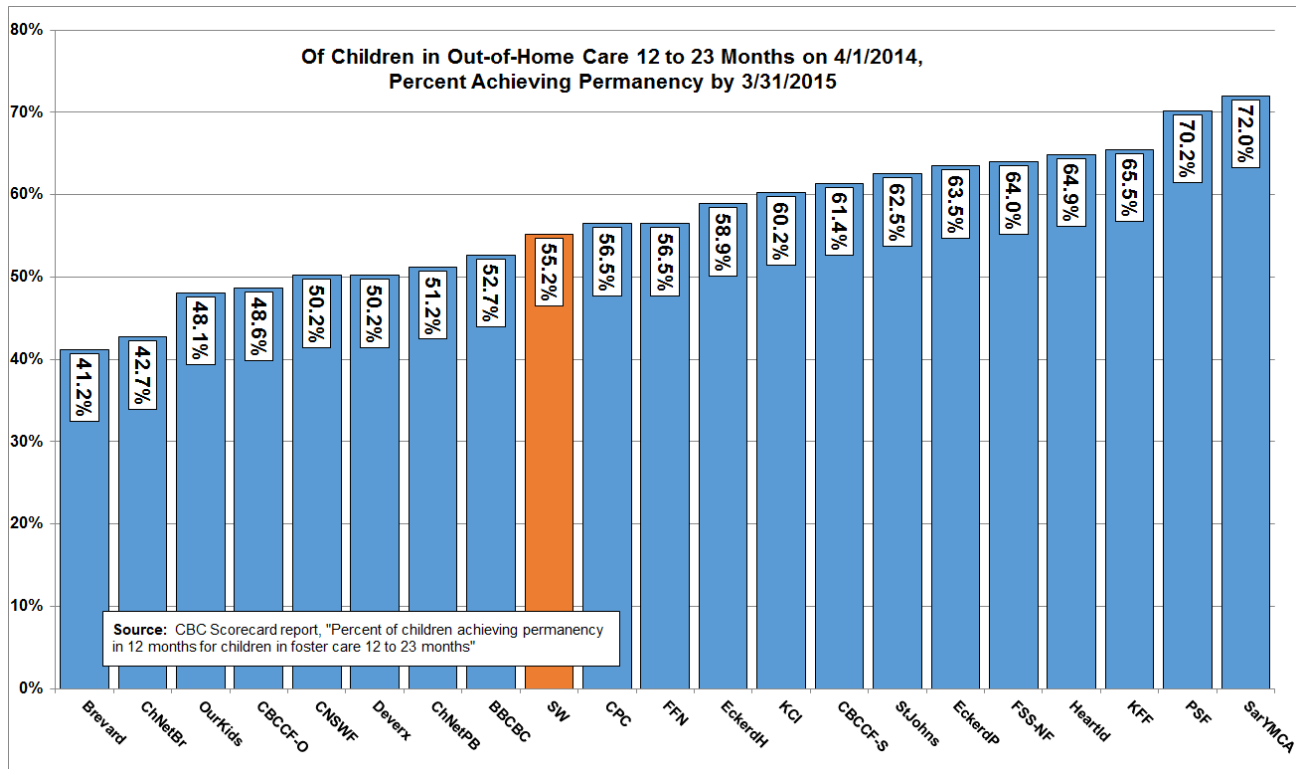
Lead Agency Comparisons of Recent Permanency Performance

Lead agencies on the right side of the charts are achieving permanency faster than those on the right.

Entry Cohorts: Last Two Quarters

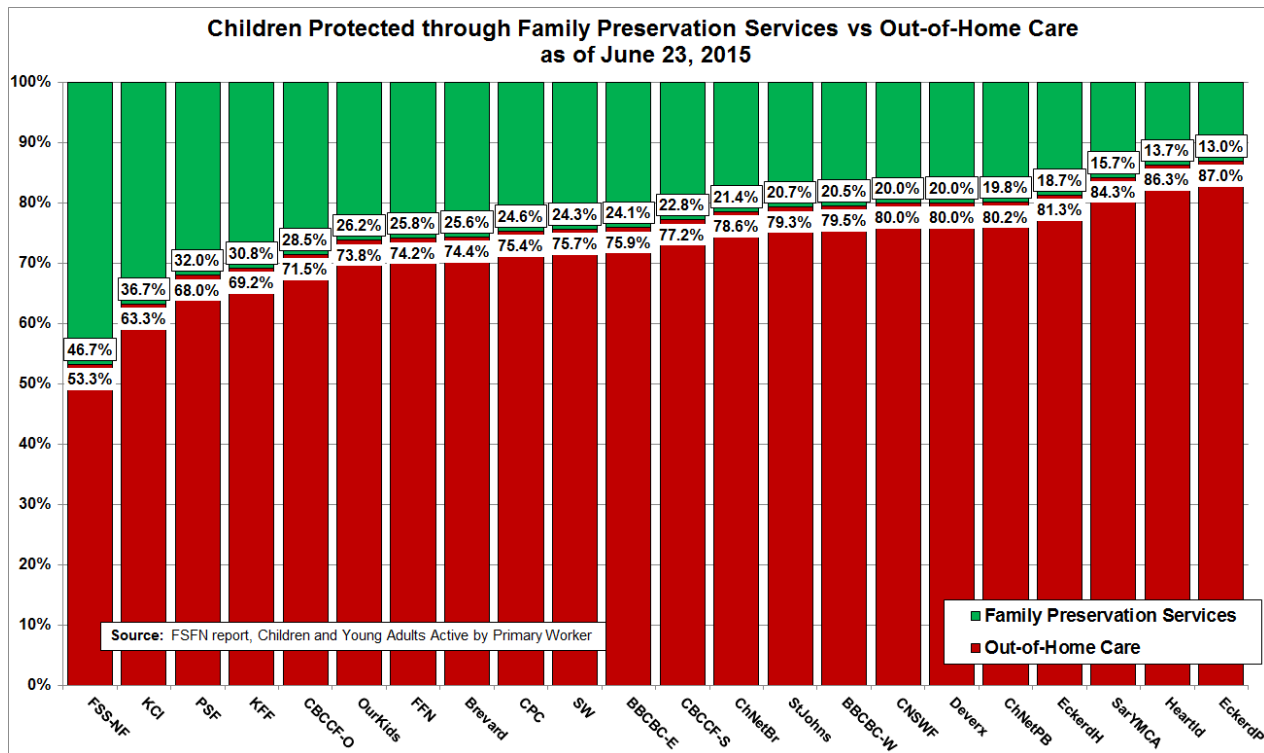


In-Care 12-23 Months Cohort



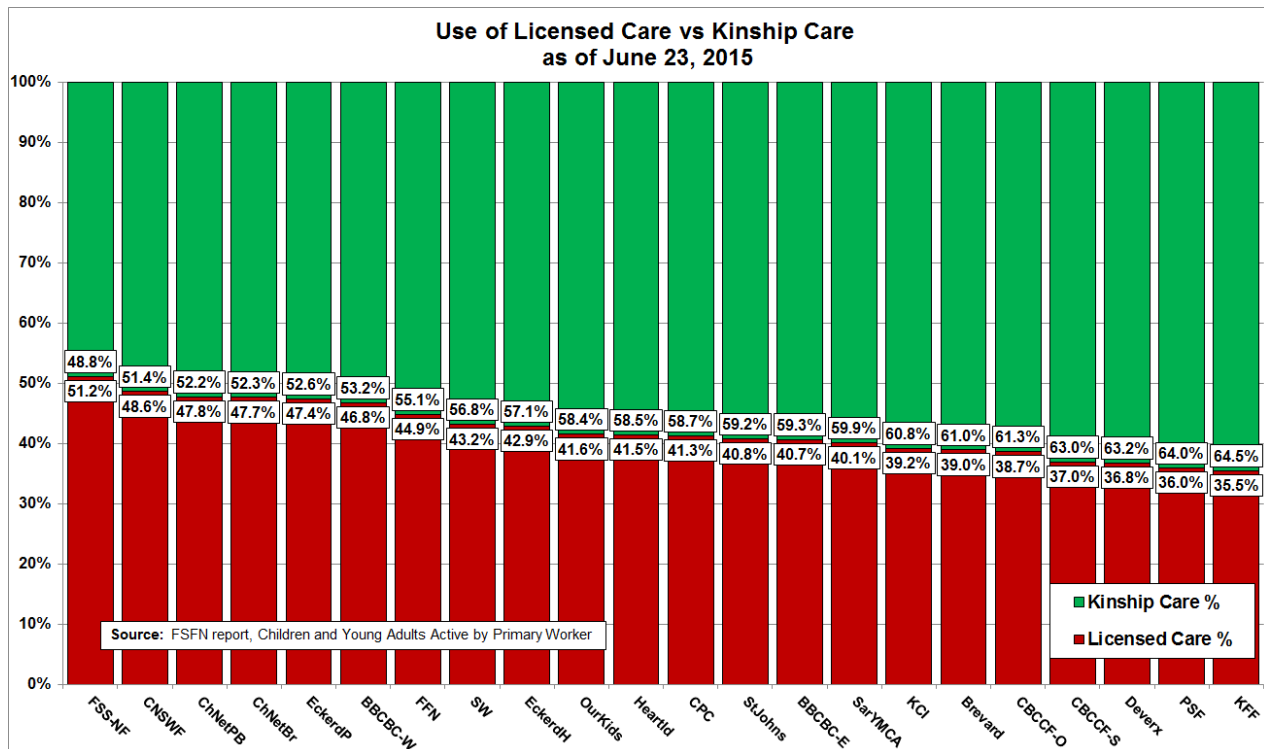
Case Mix: Family Preservation Services vs Out-of-Home Care

Lead agencies on the left side of the chart are protecting a greater proportion of children in their own homes to prevent removal.



Licensed Care vs Kinship Care

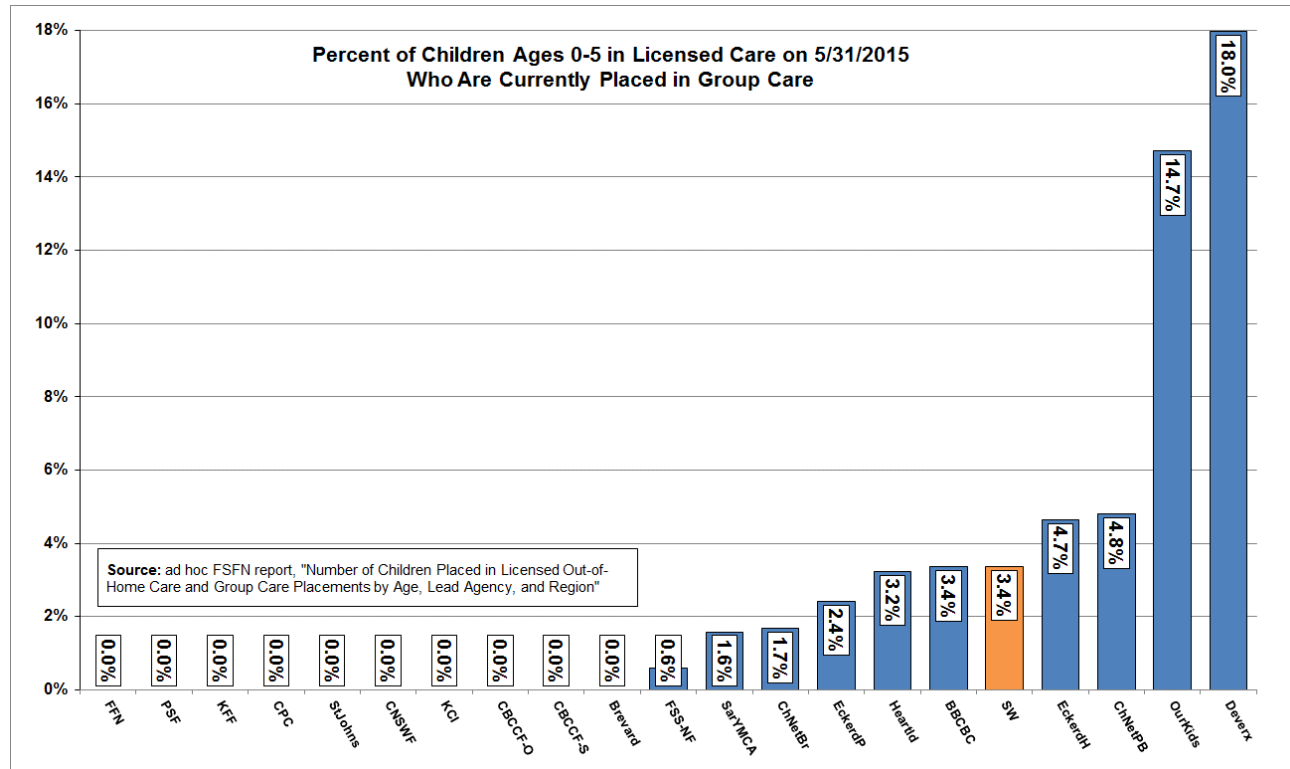
Most lead agencies have a majority of their children in kinship care placements.



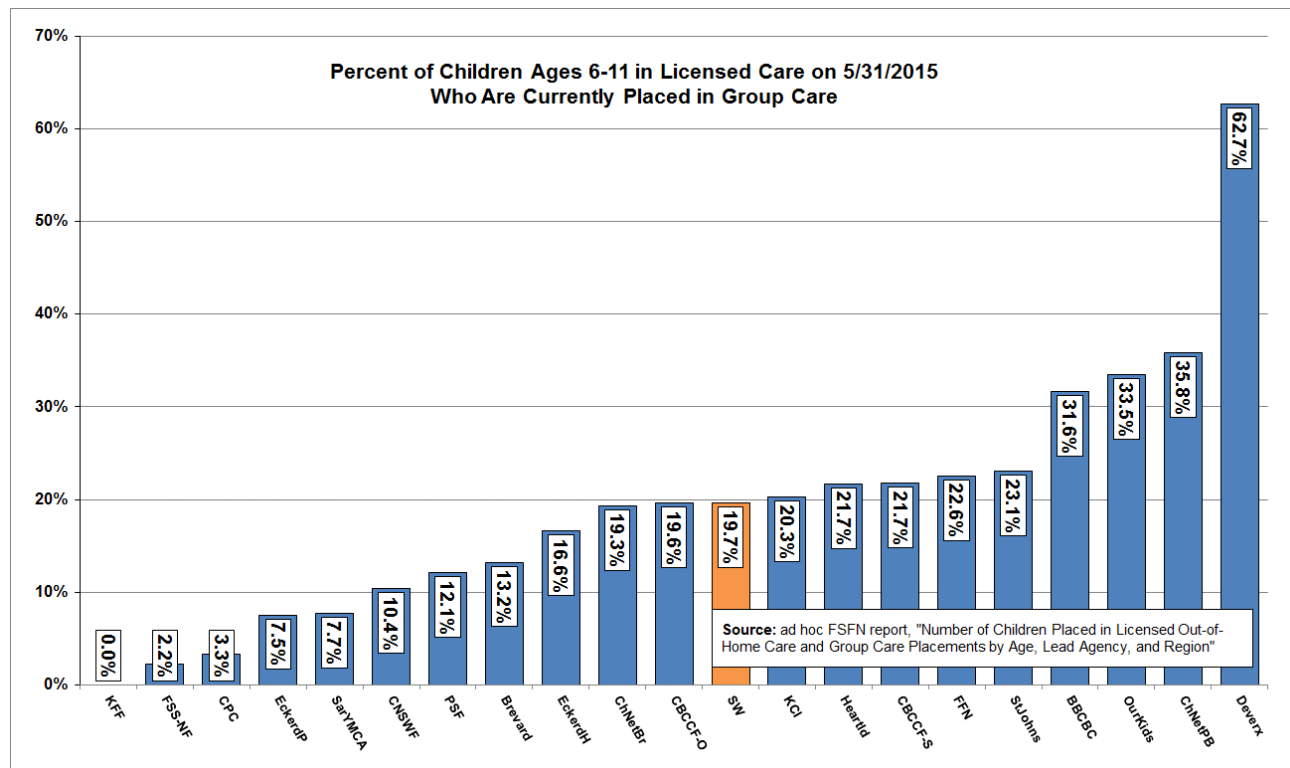
Indicators of Insufficient Placement Resources

Young Children in Licensed Care: Percent Placed in Group Care

Ten lead agencies have no pre-school children in group care. The others can do better.

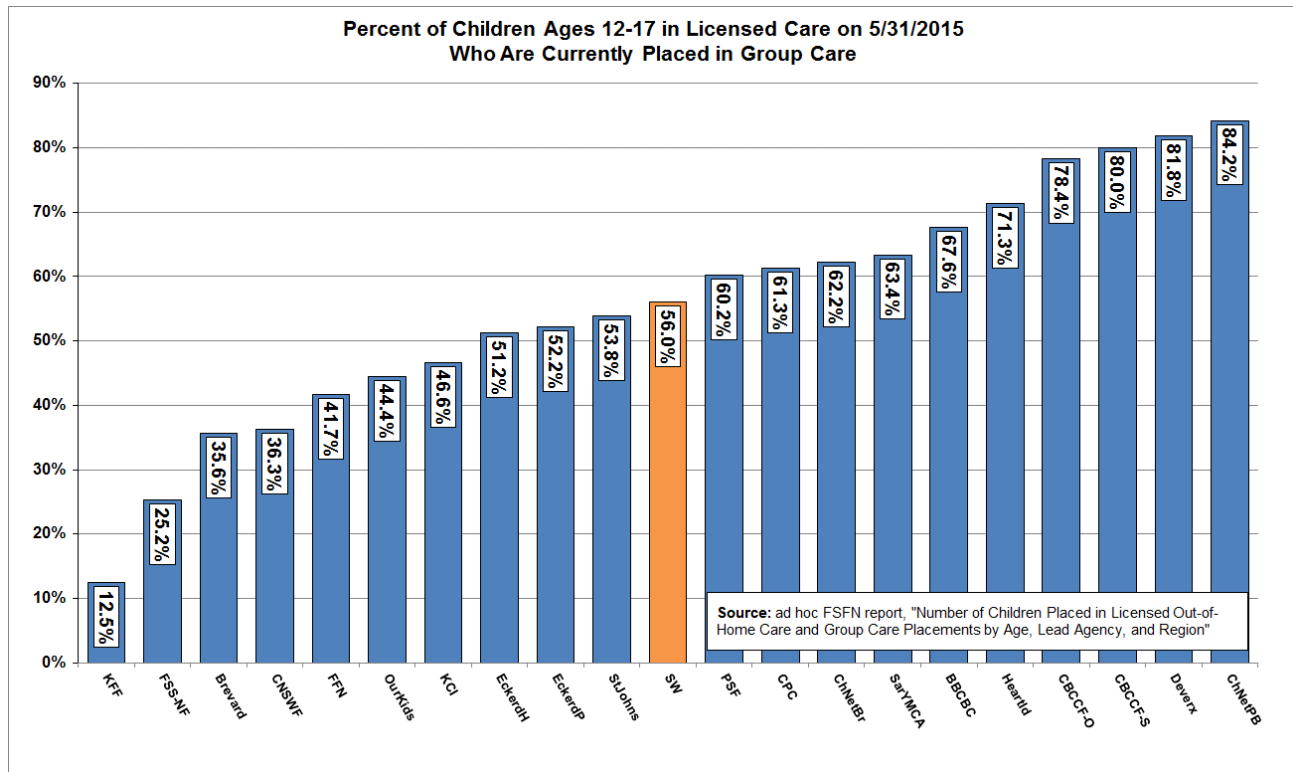


Four agencies place one third of 6-11 year old children in group care, with one of those placing over 60% in group care.

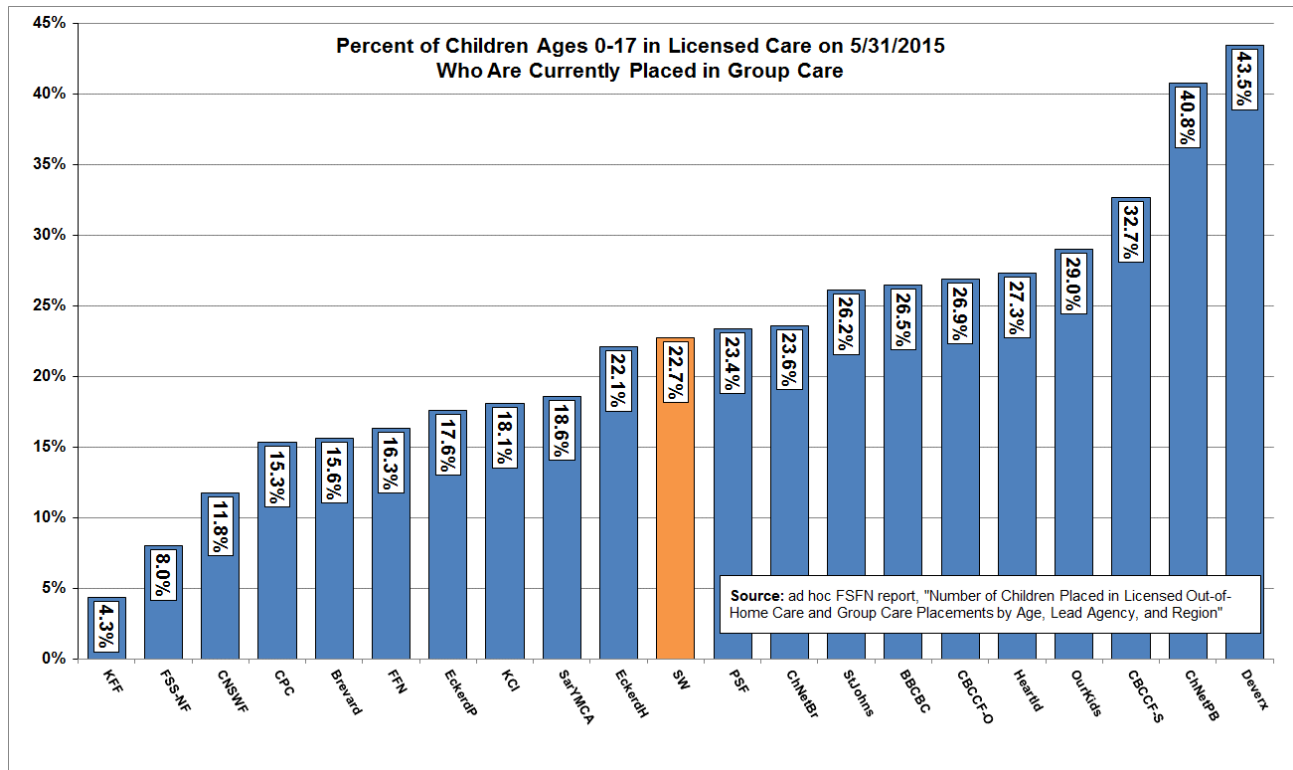


Children in Licensed Care: Percent Placed in Group Care, continued

Four lead agencies place 80% of children teens in group care, while others place most with families.

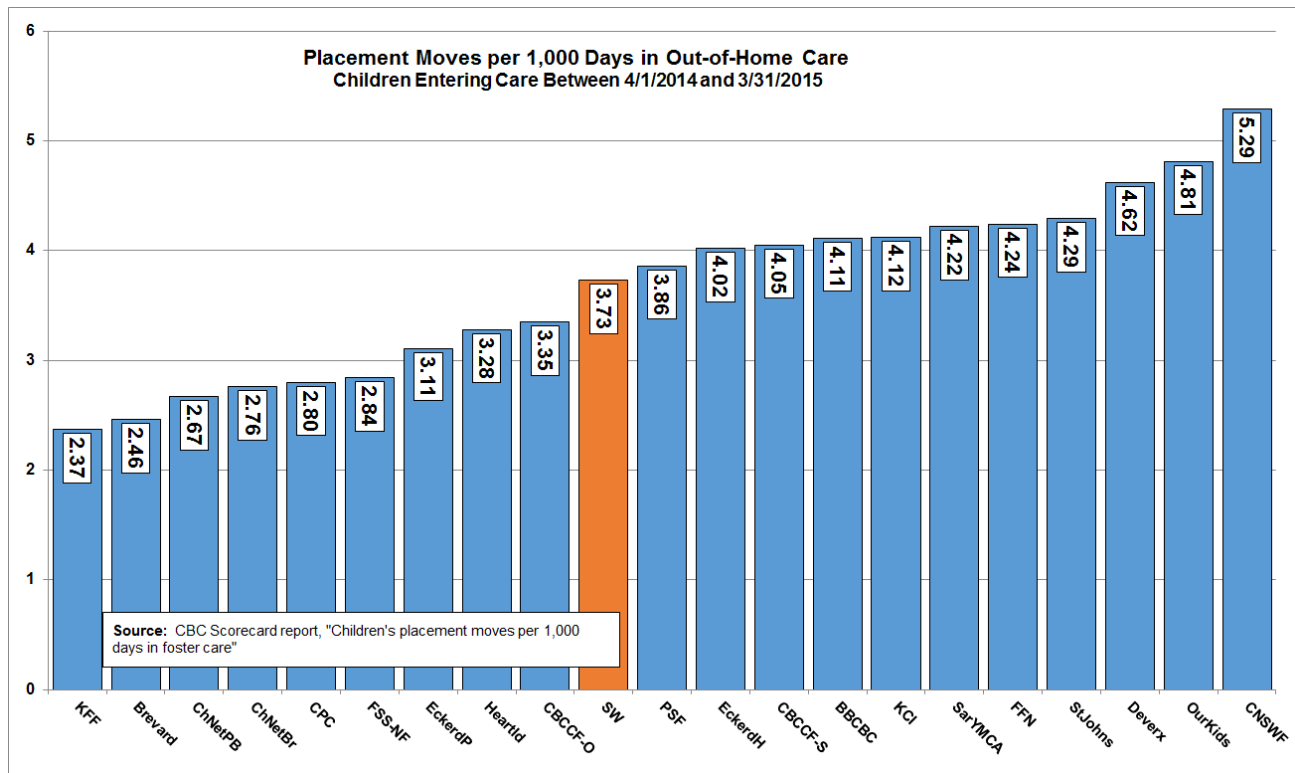


Several lead agencies rely heavily on group care, a major cost factor in providing services.

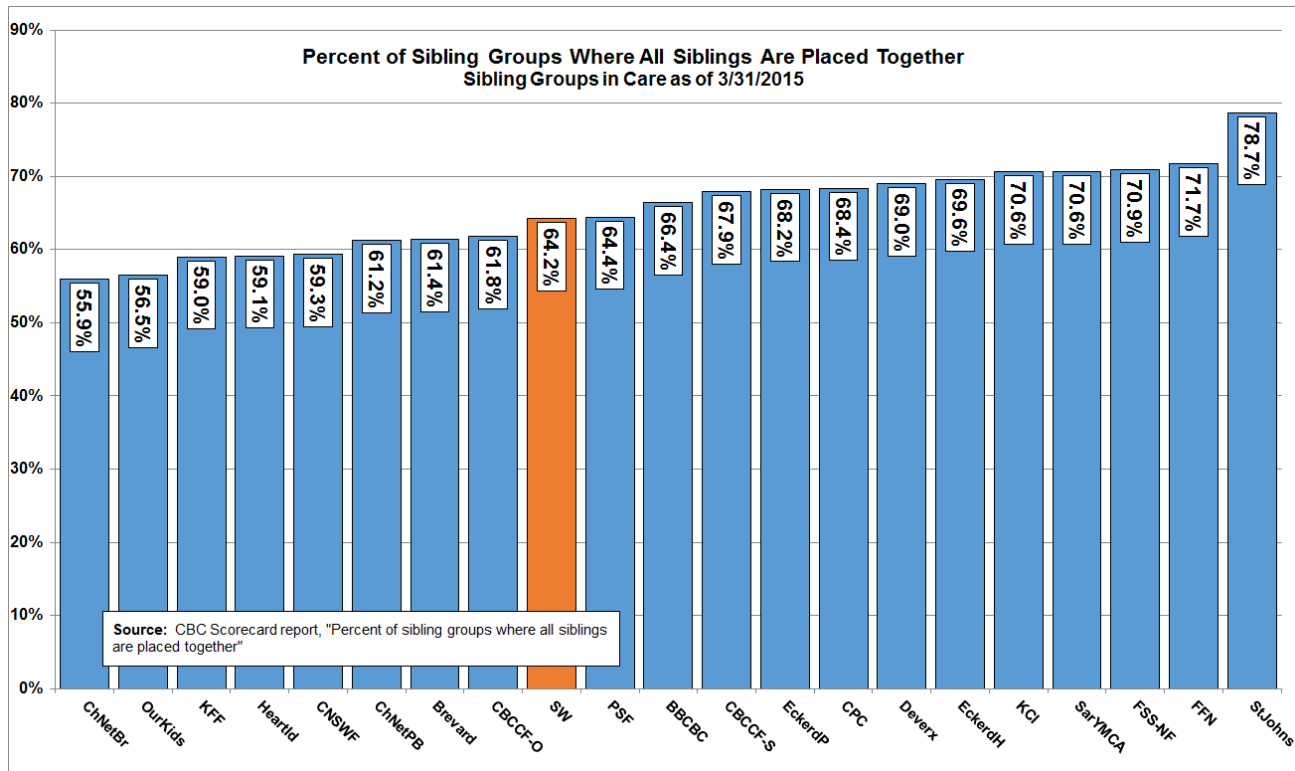


More Indicators of Insufficient Placement Resources

Placement Moves per 1,000 Days in Care

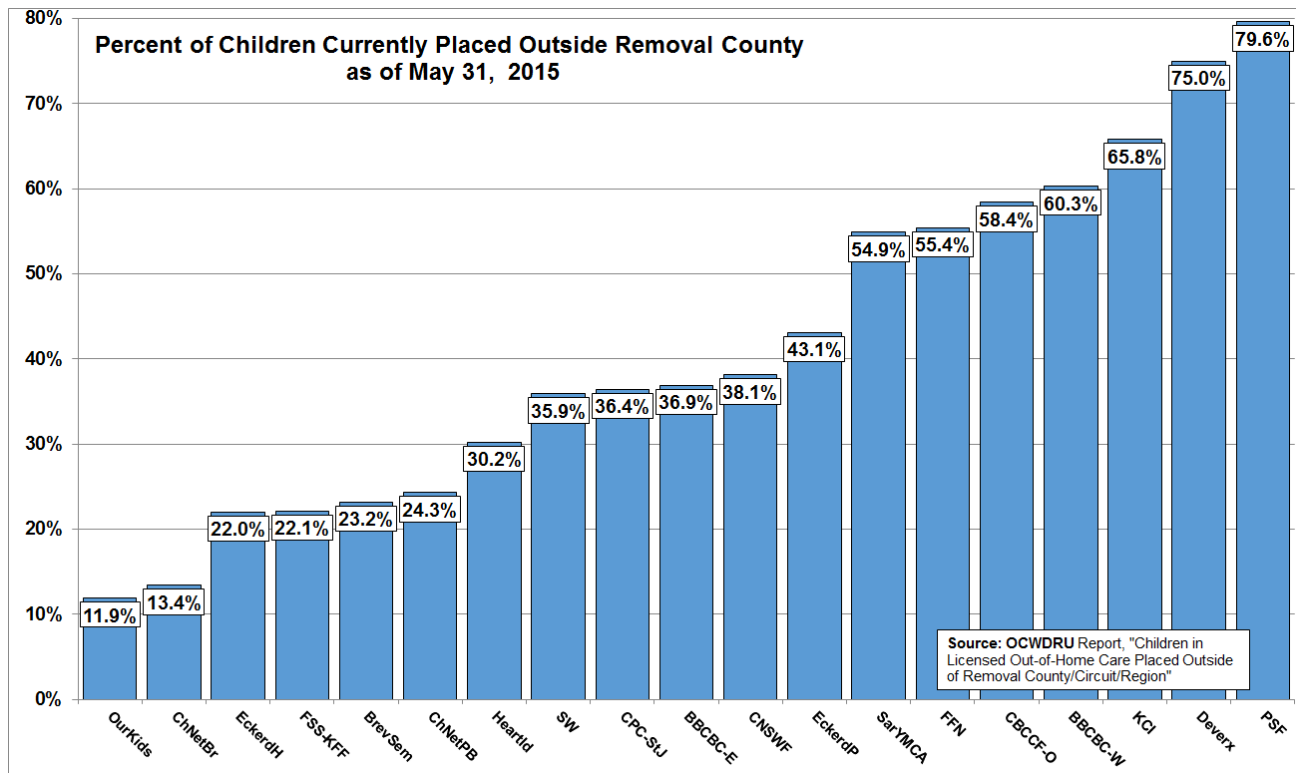


Placement of Sibling Groups Together

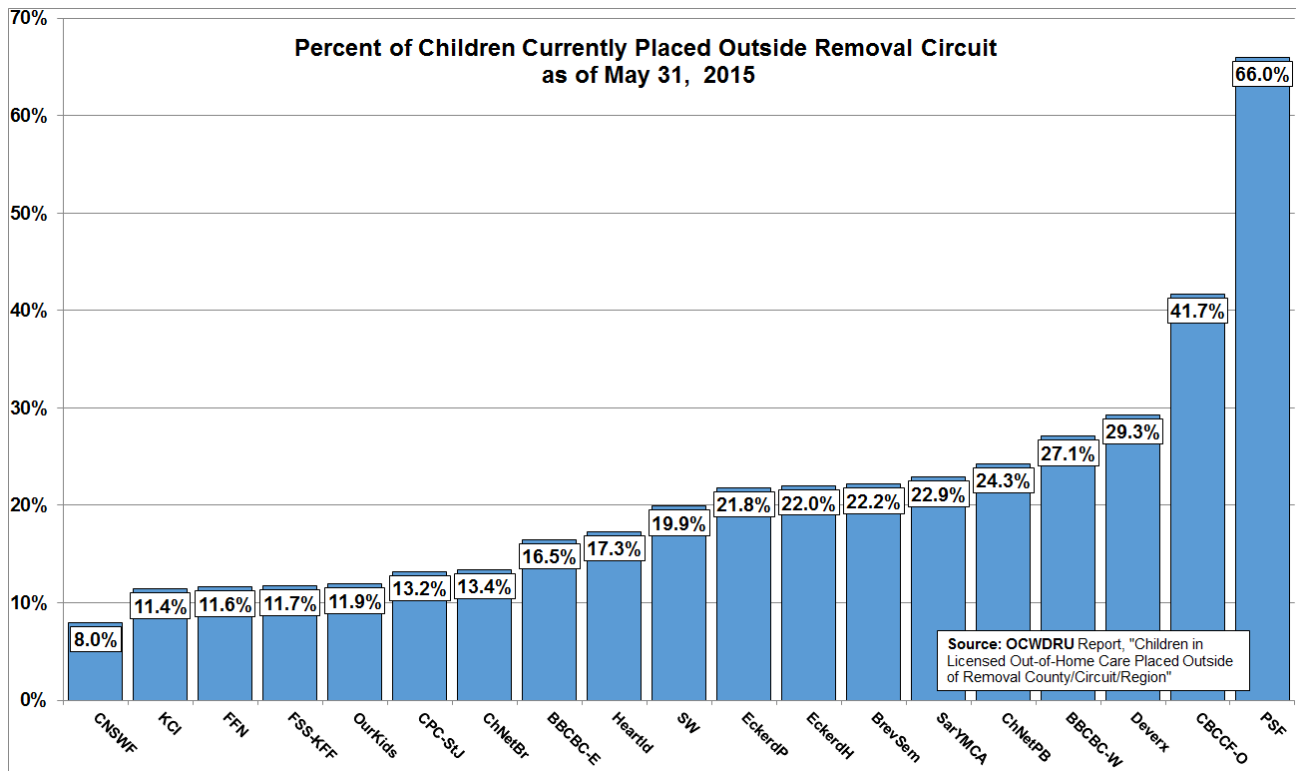


More Indicators of Insufficient Placement Resources

Placement Outside County of Removal

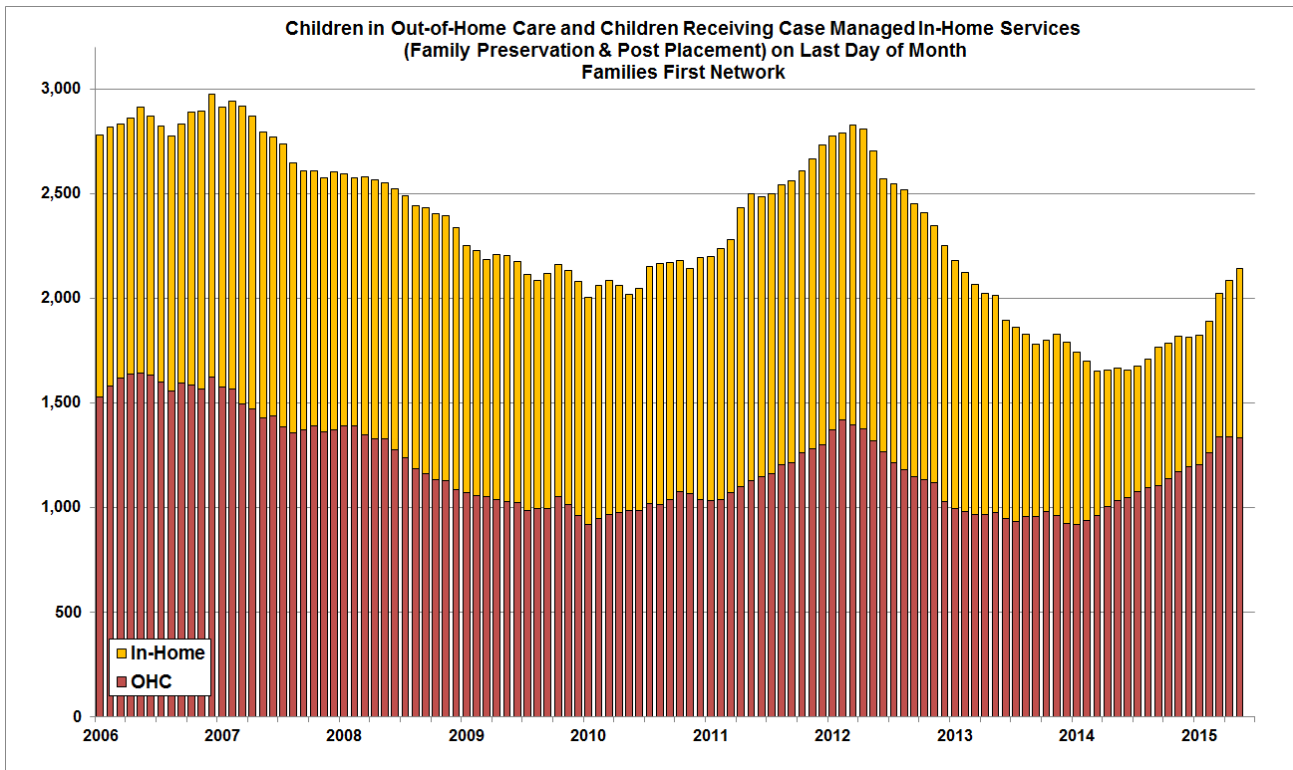
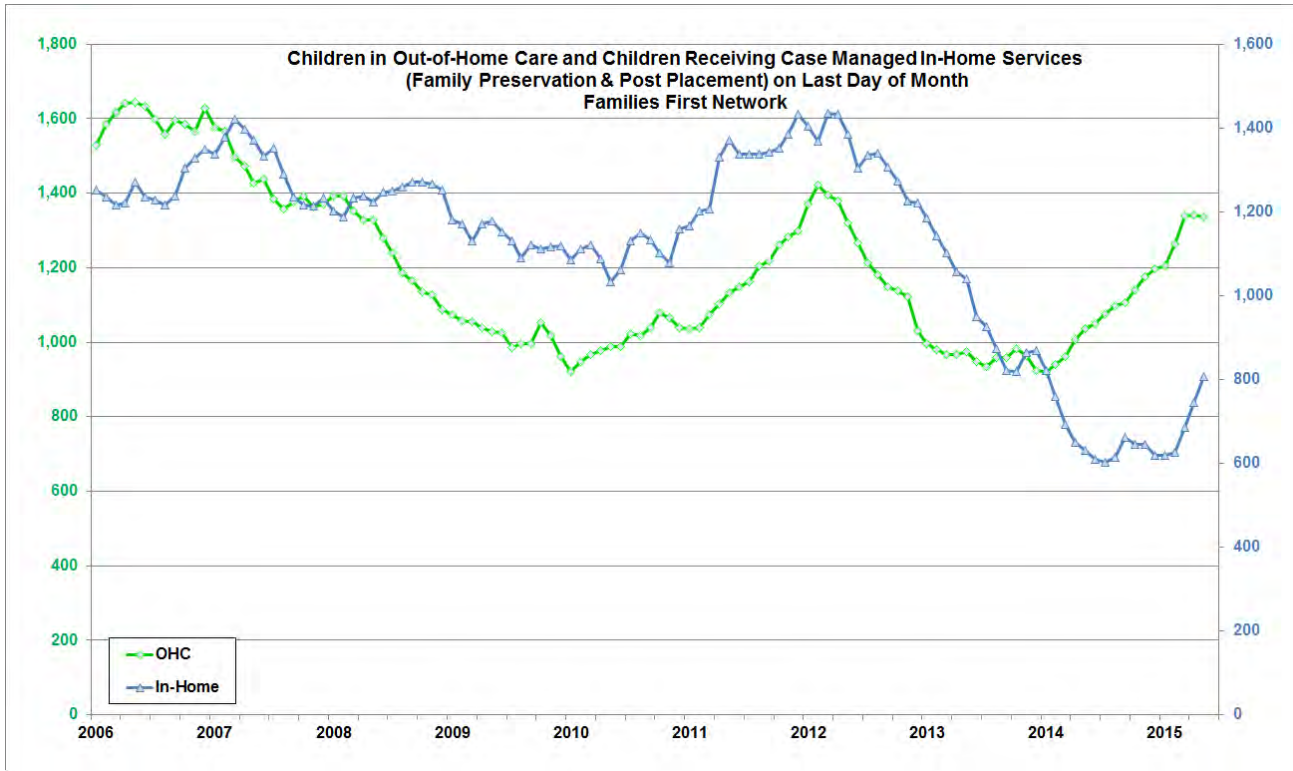


Placement Outside Circuit of Removal



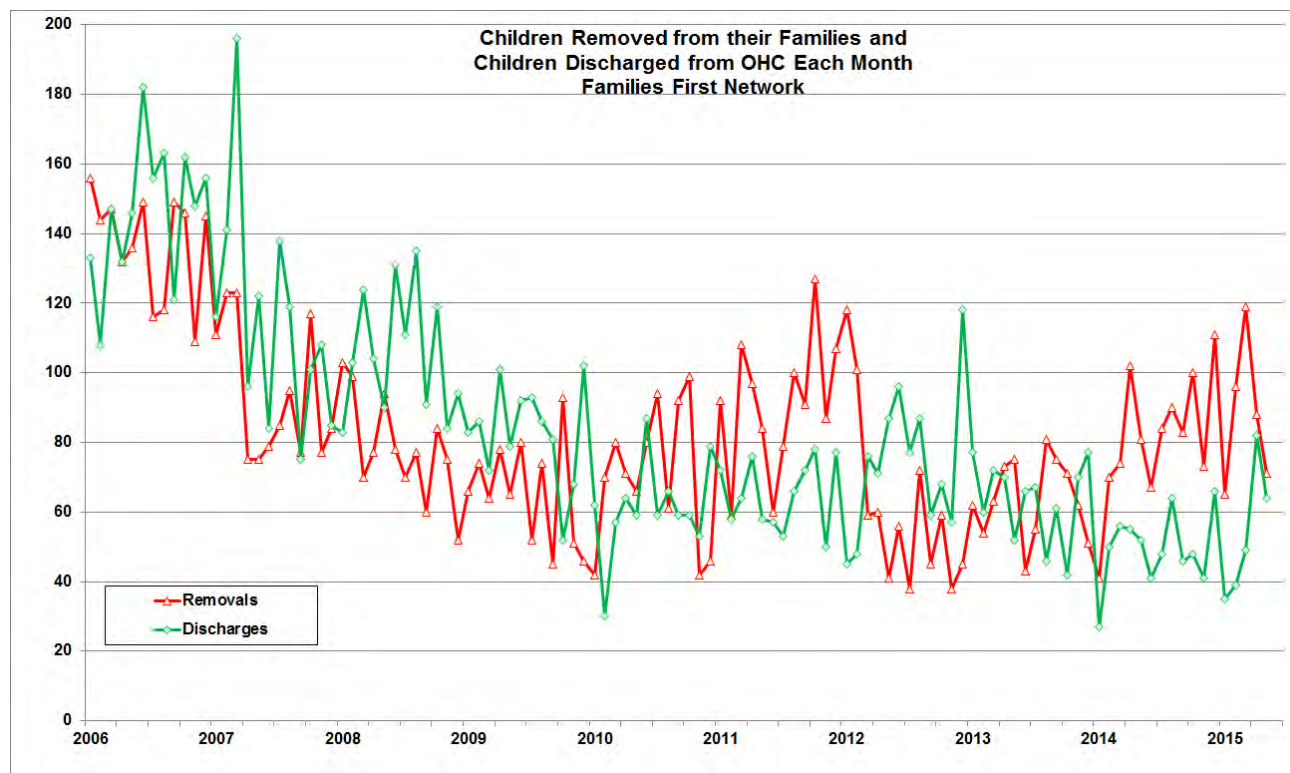
Families First Network, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

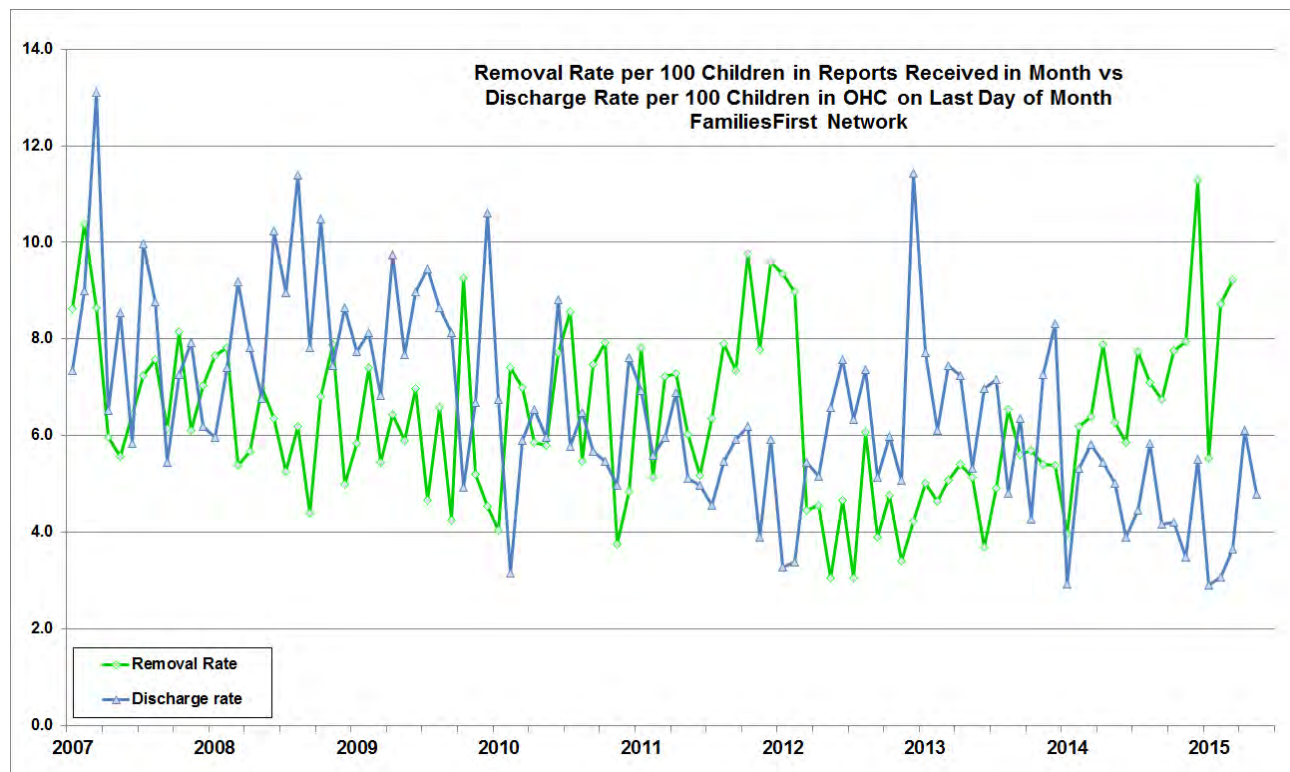


Families First Network, 2

Removals vs Discharges

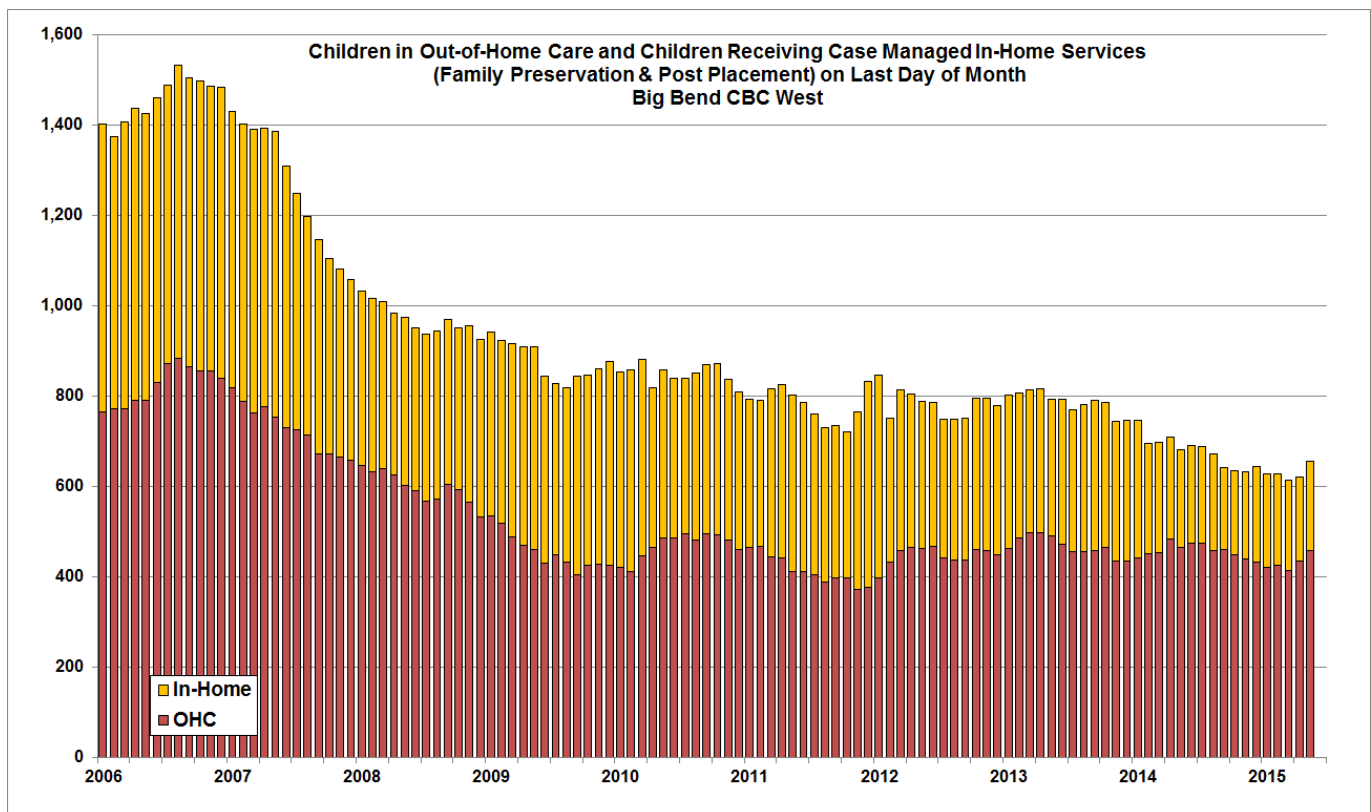
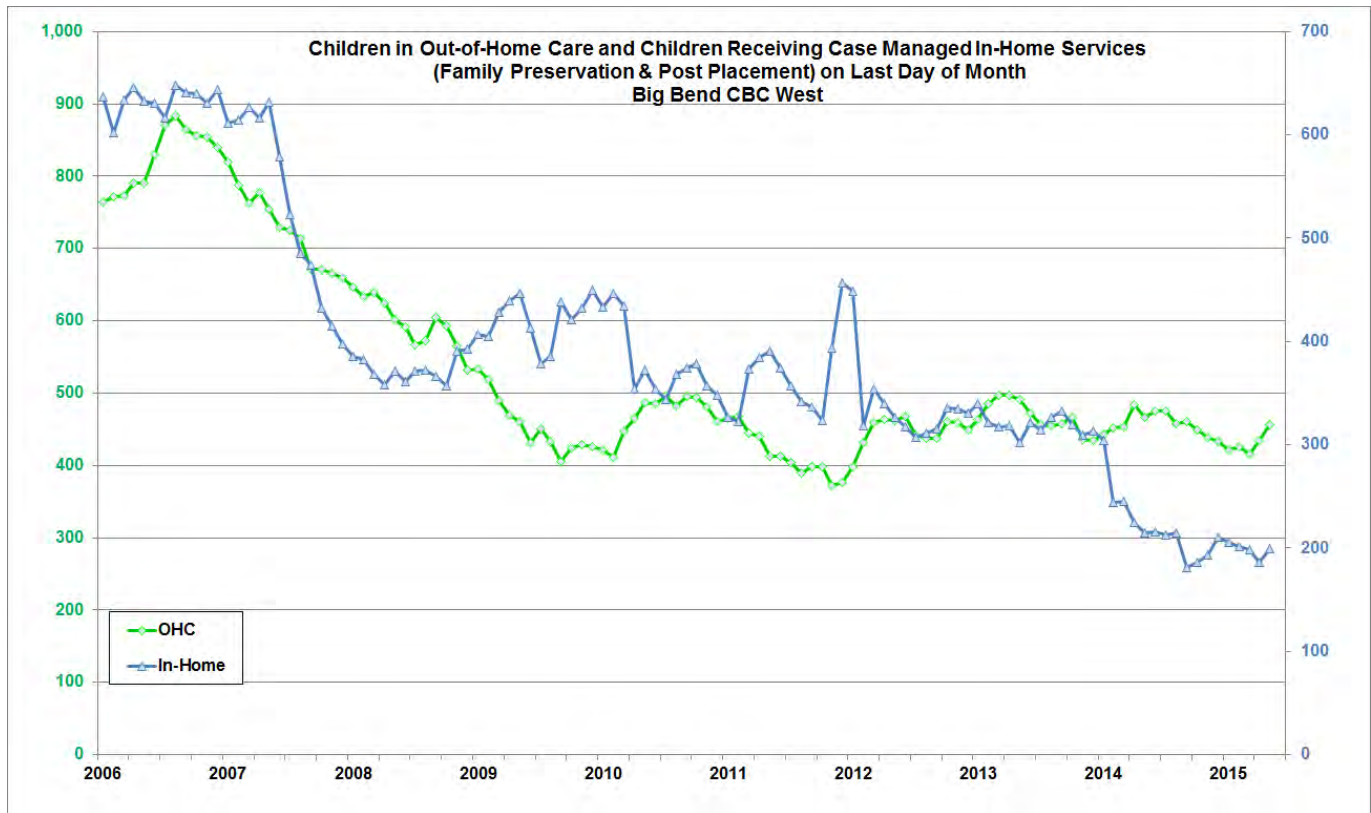


Removal Rate vs Discharge Rate



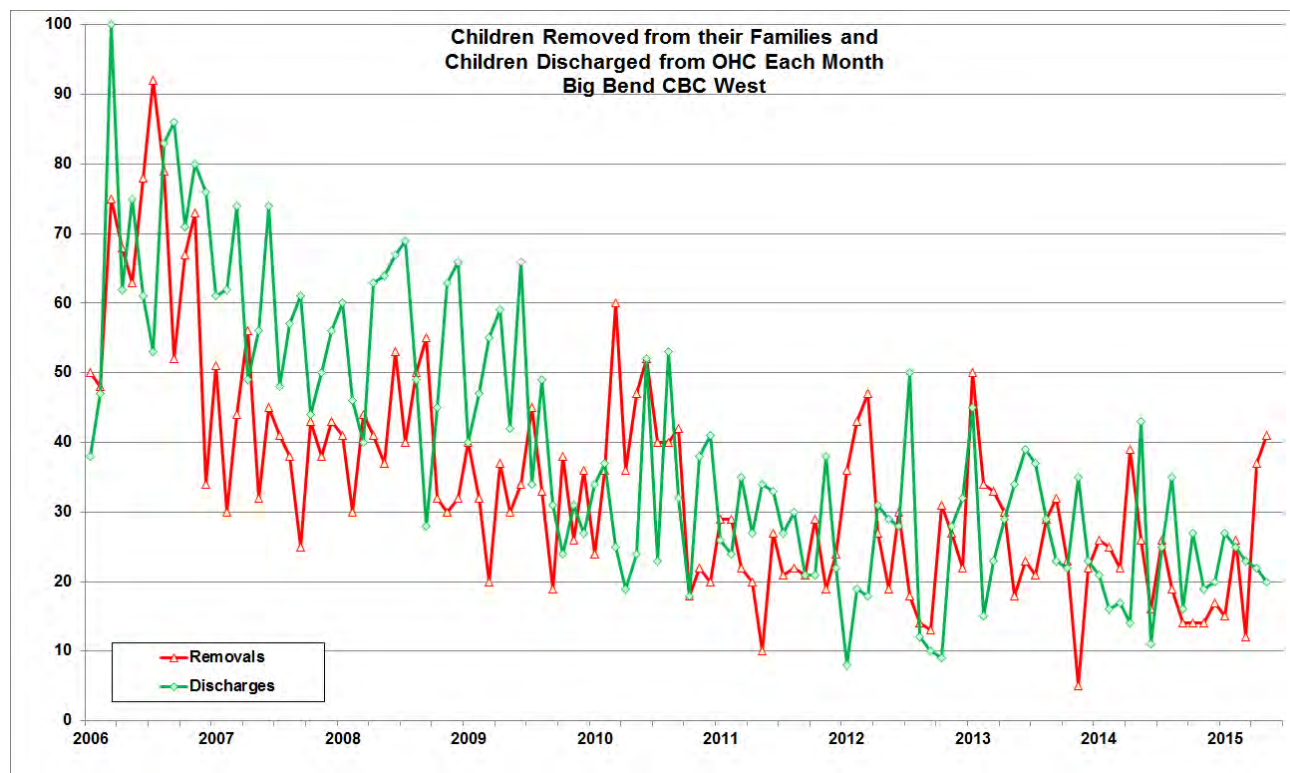
Big Bend CBC West, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

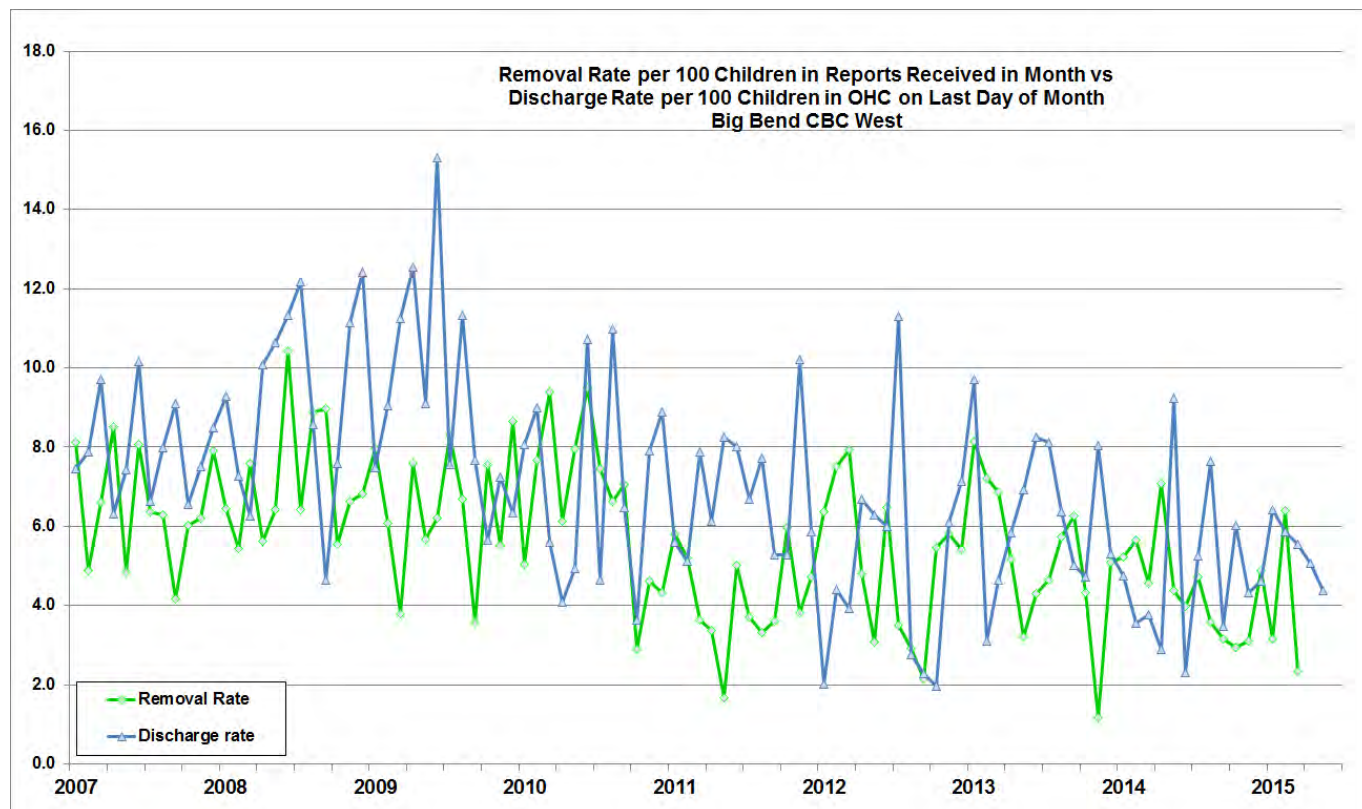


Big Bend CBC West, 2

Removals vs Discharges

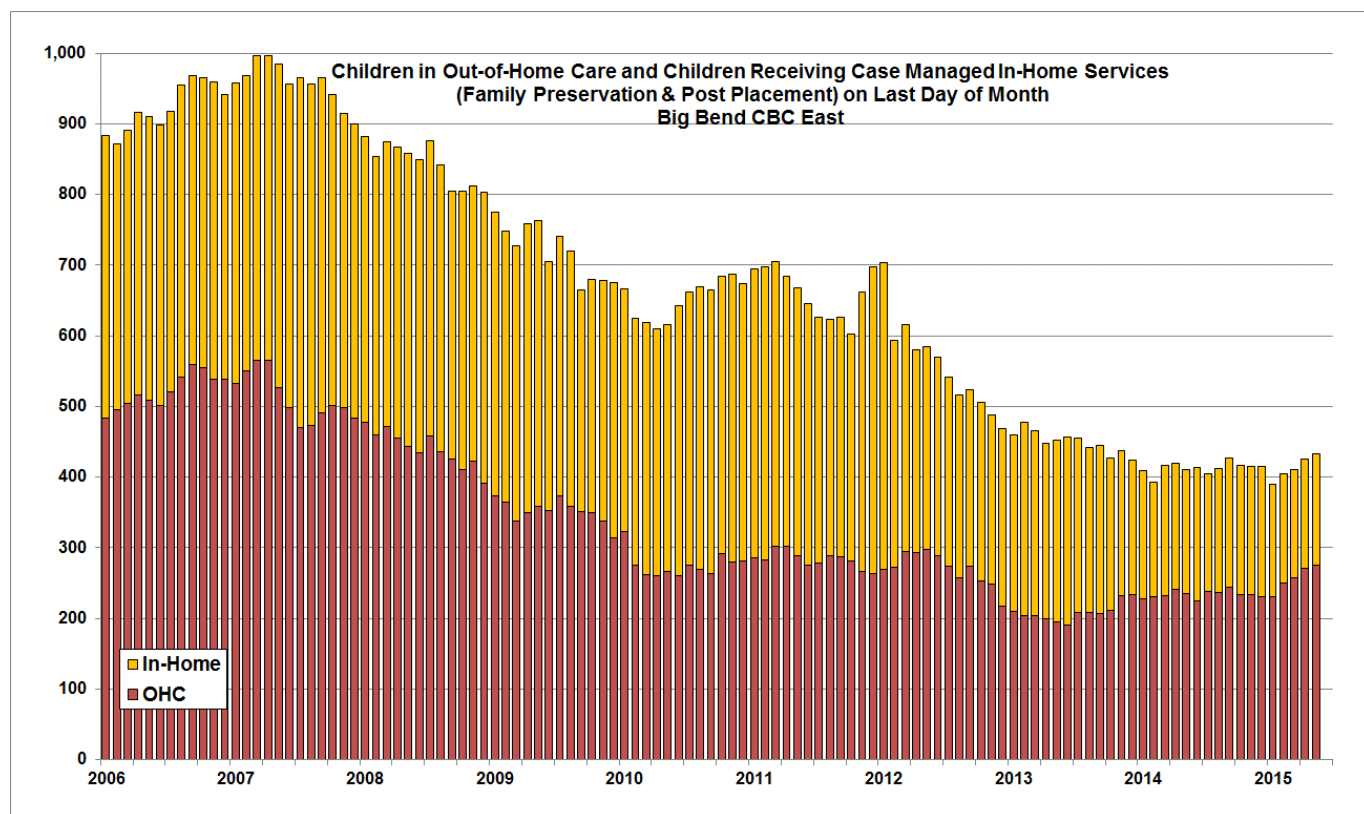
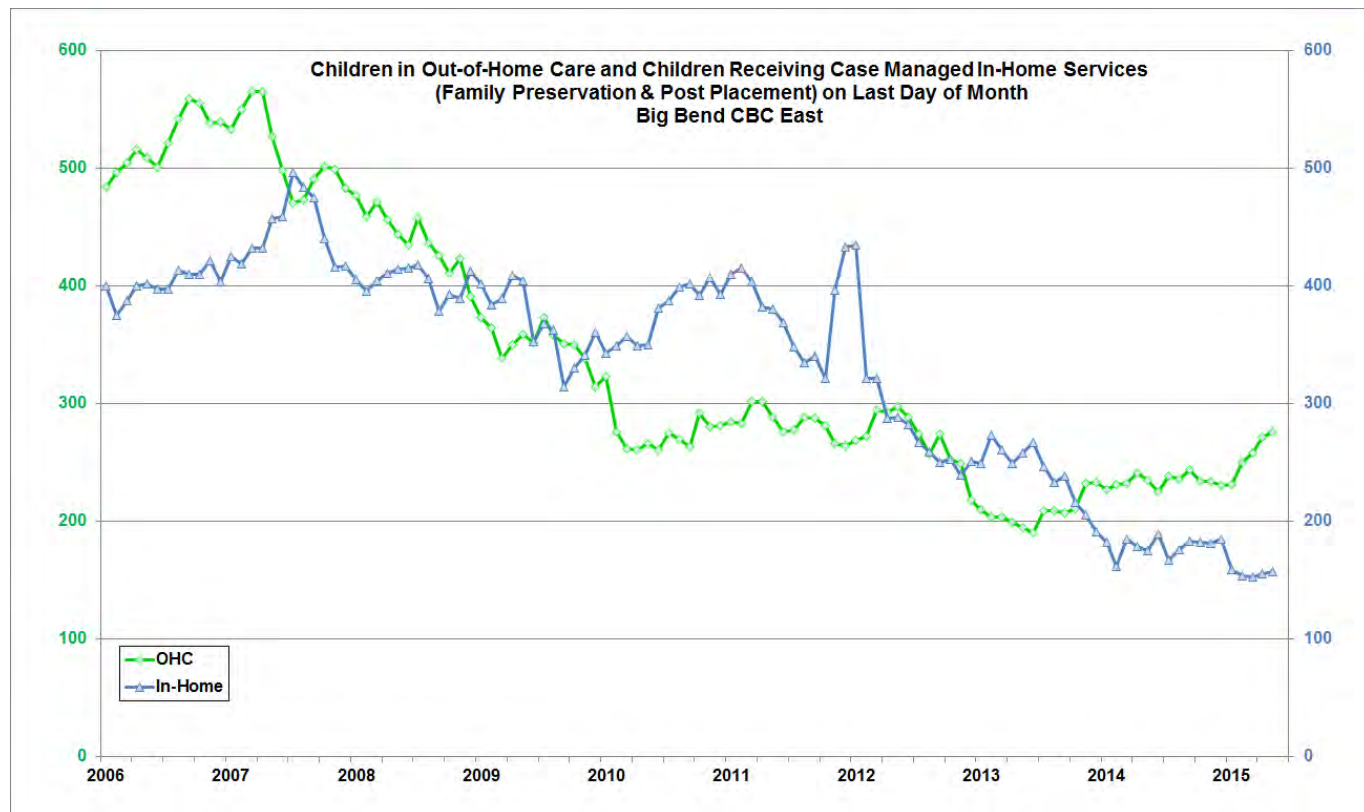


Removal Rate vs Discharge Rate



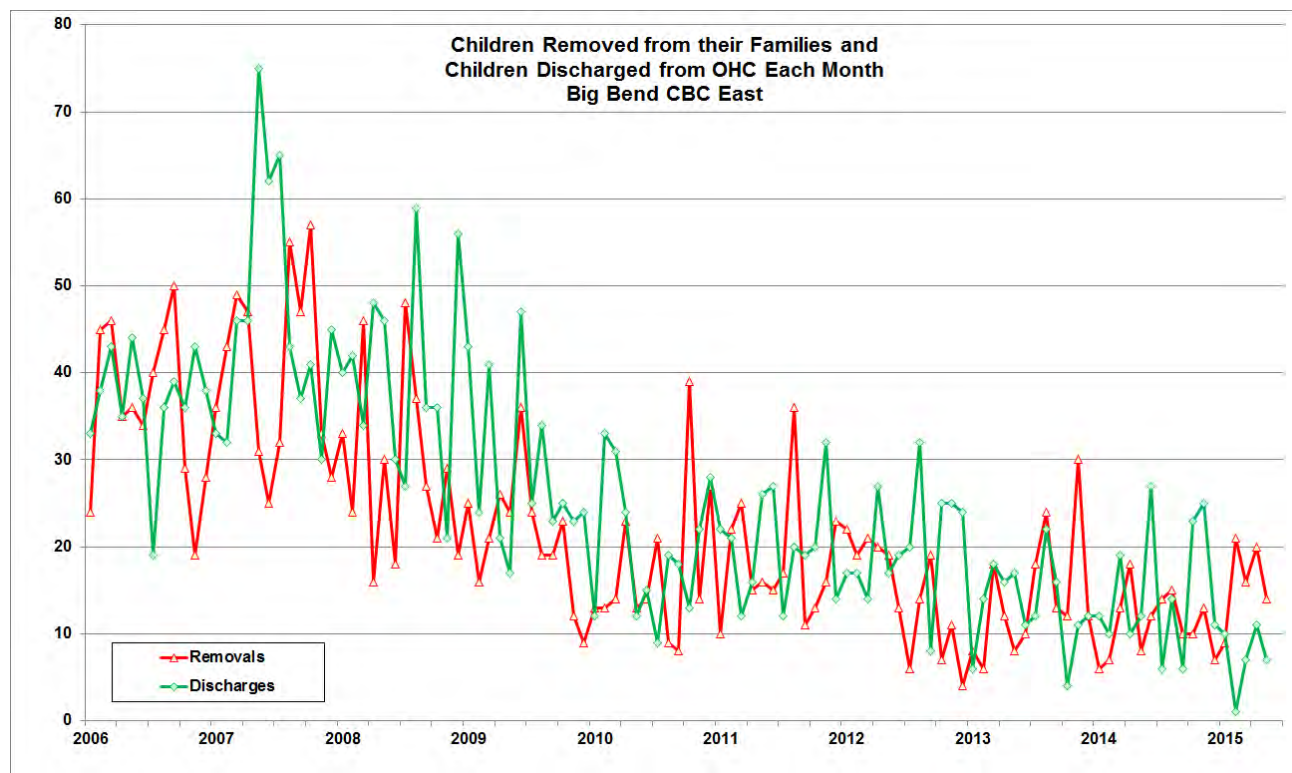
Big Bend CBC East, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

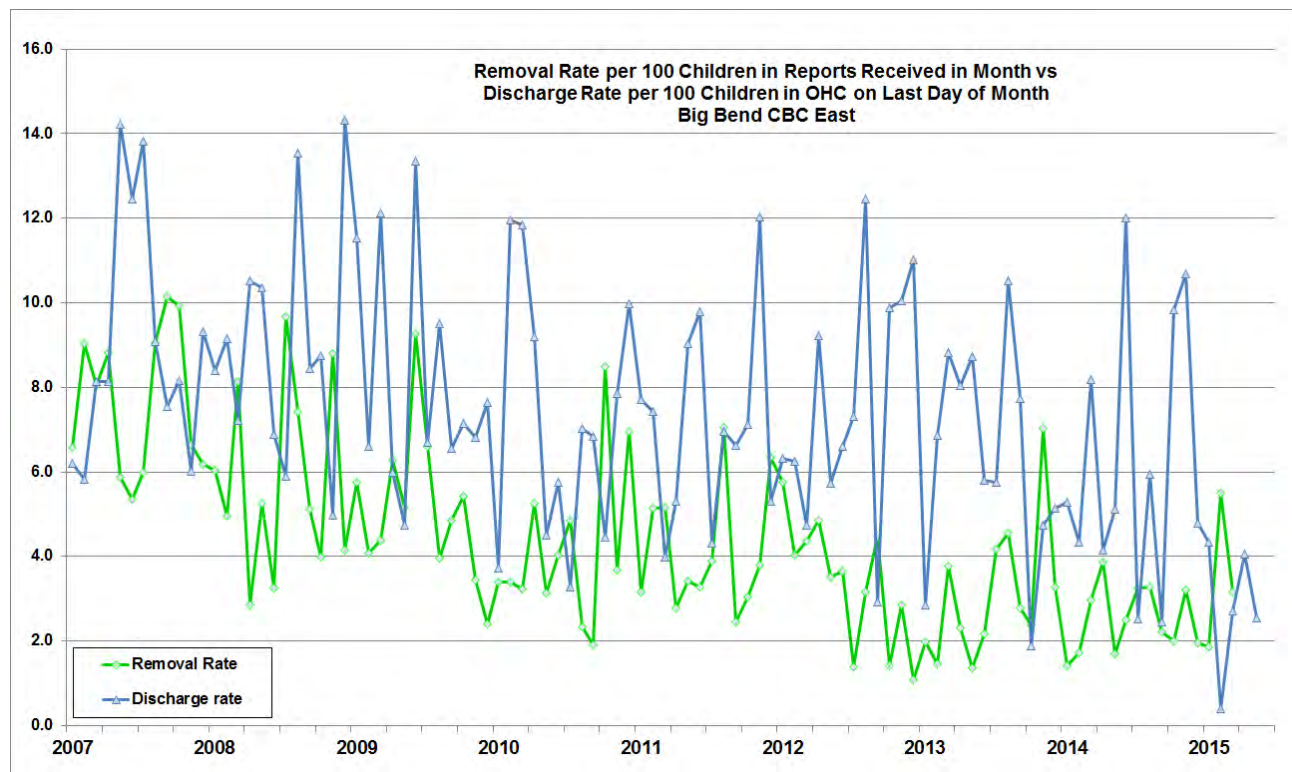


Big Bend CBC East, 2

Removals vs Discharges

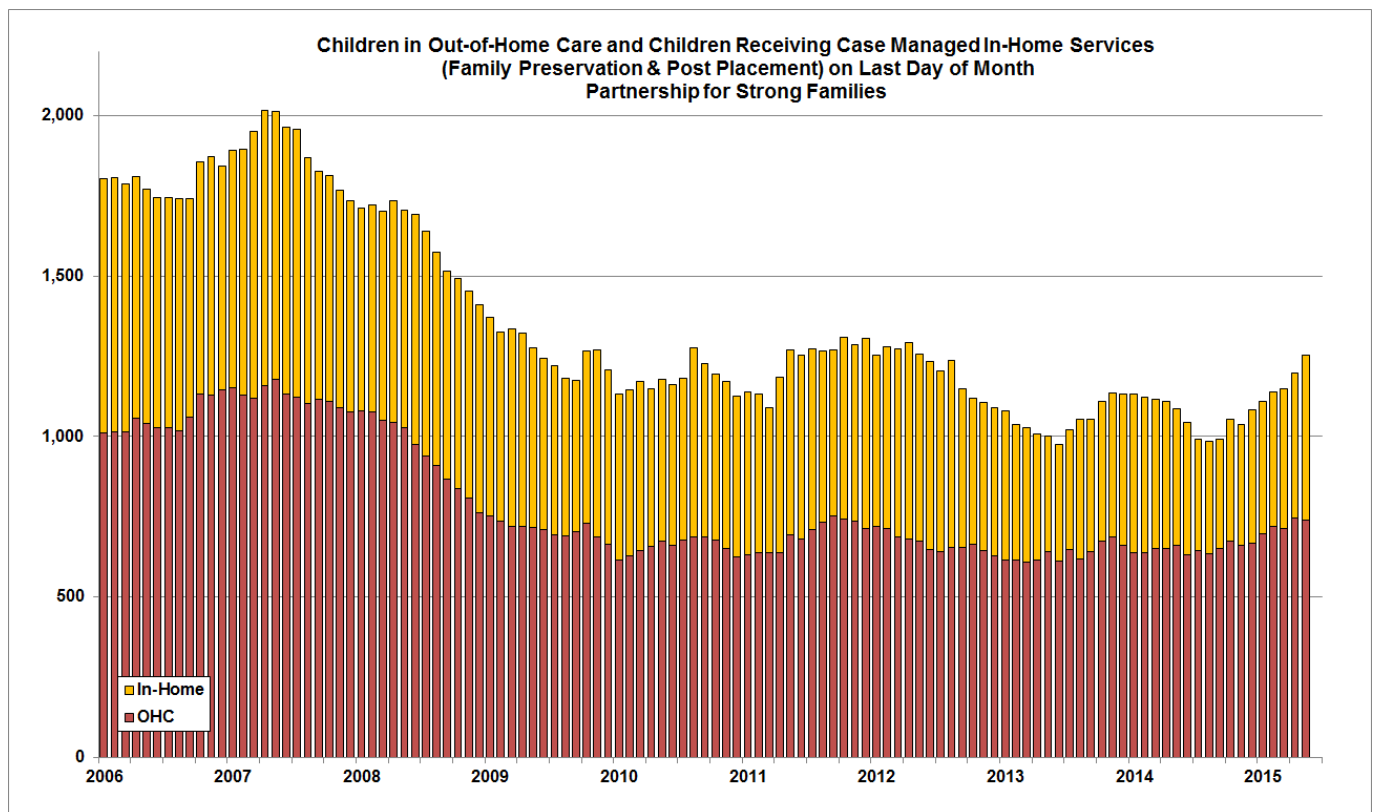
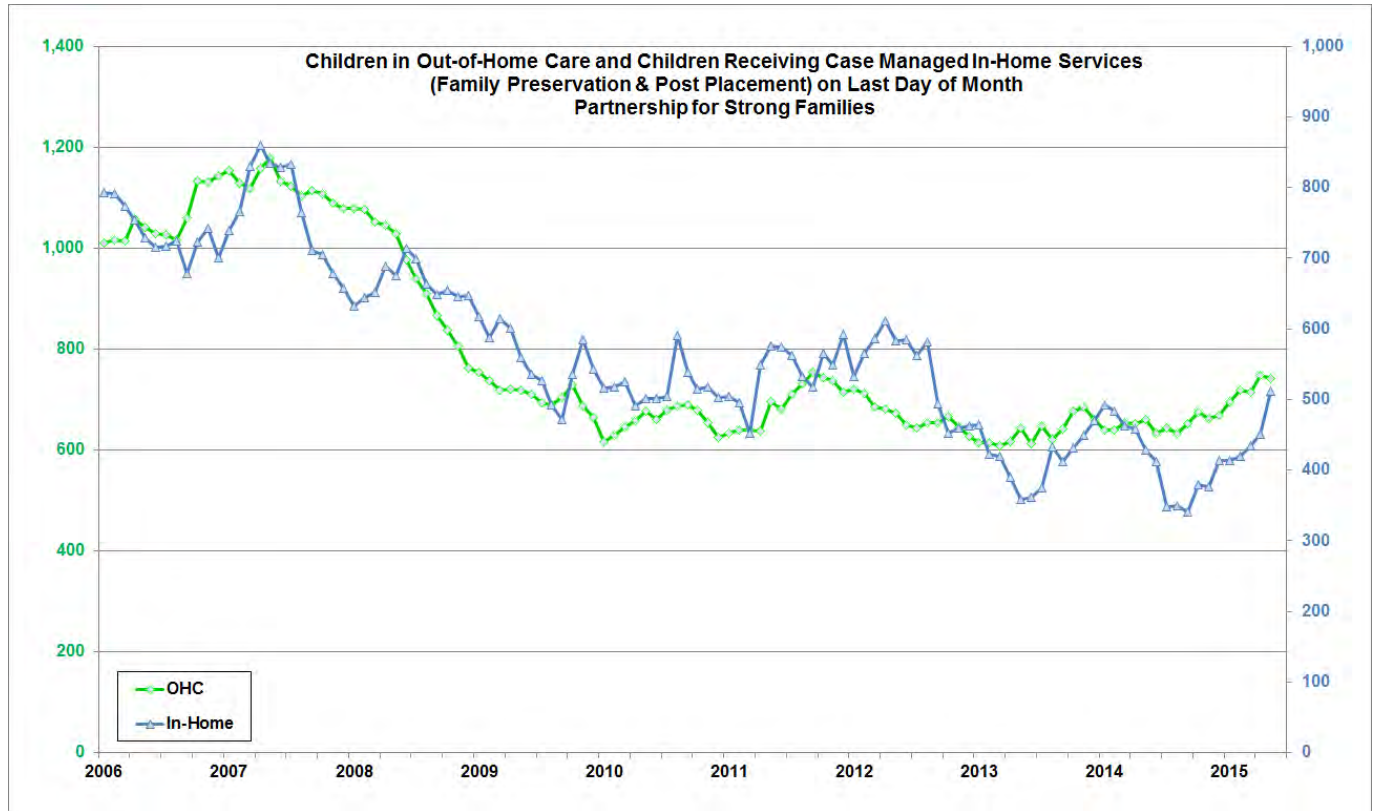


Removal Rate vs Discharge Rate



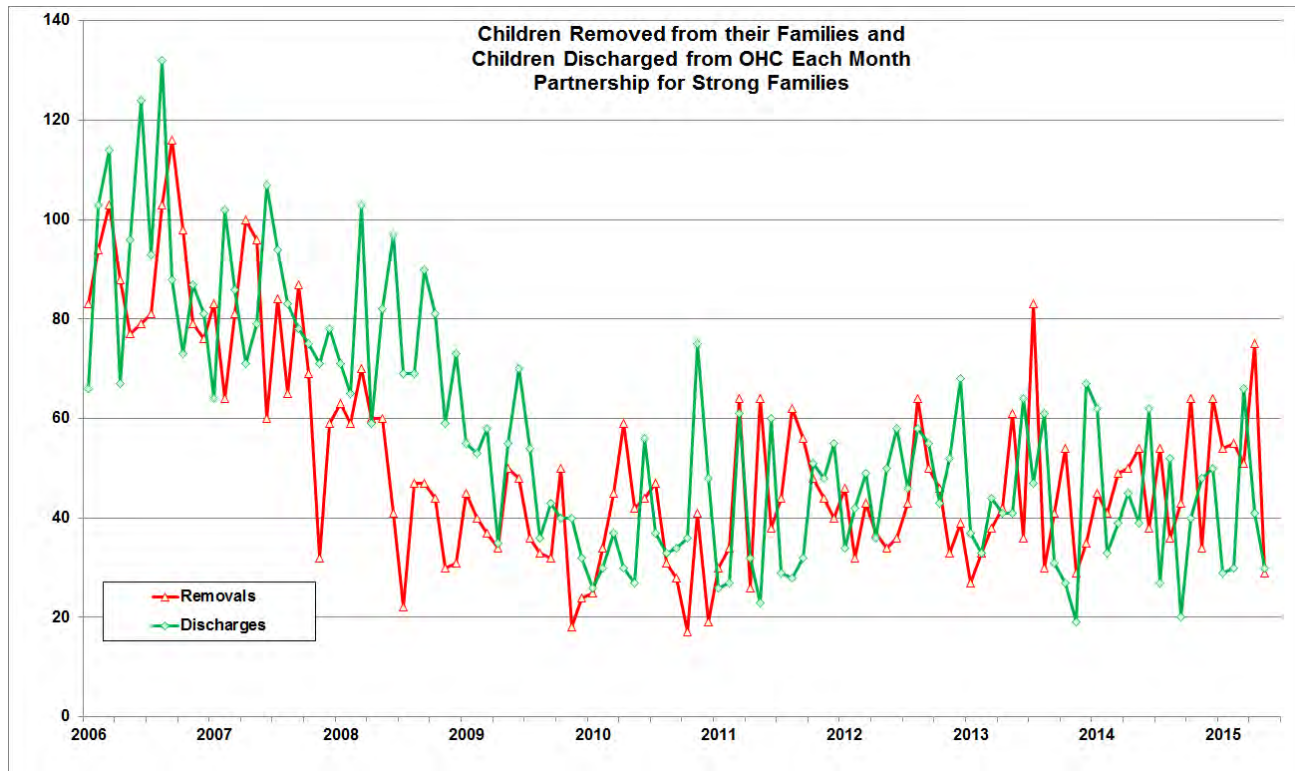
Partnership for Strong Families, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

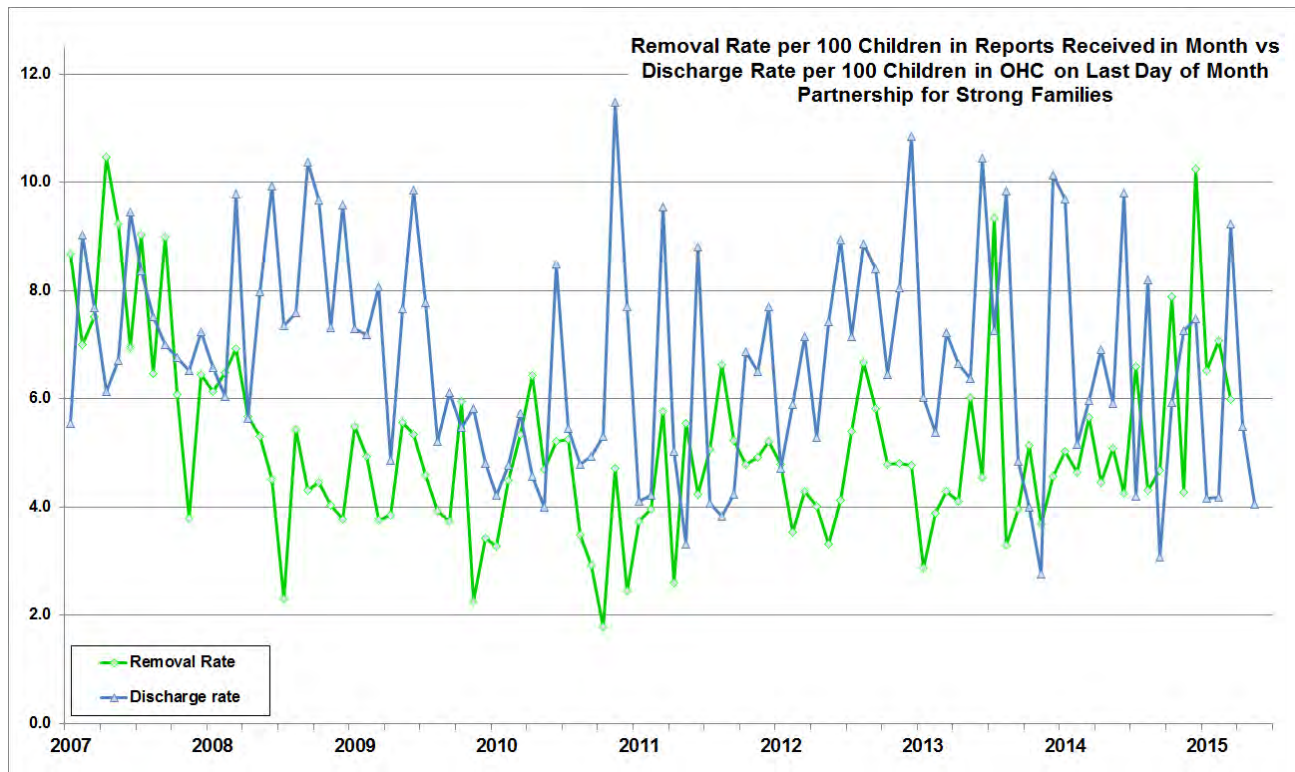


Partnership for Strong Families, 2

Removals vs Discharges

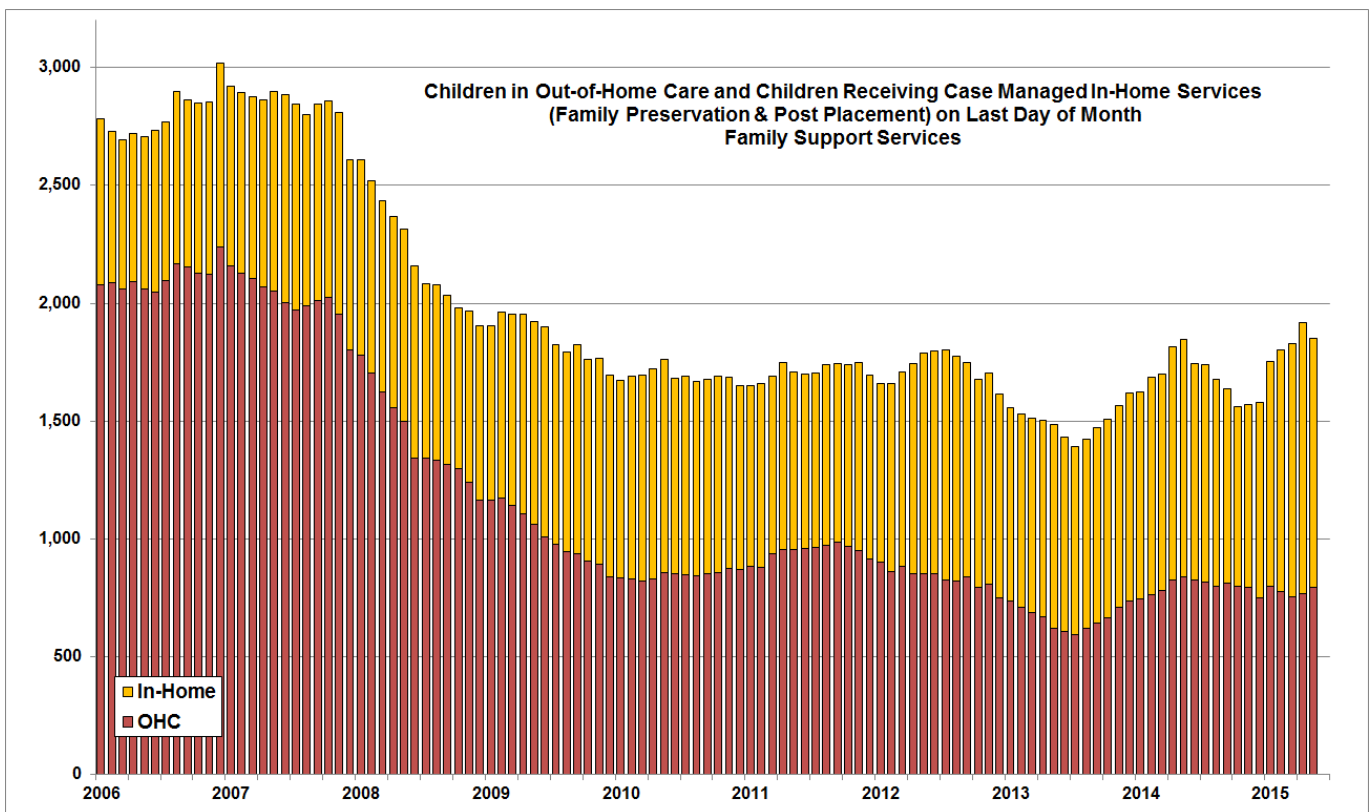
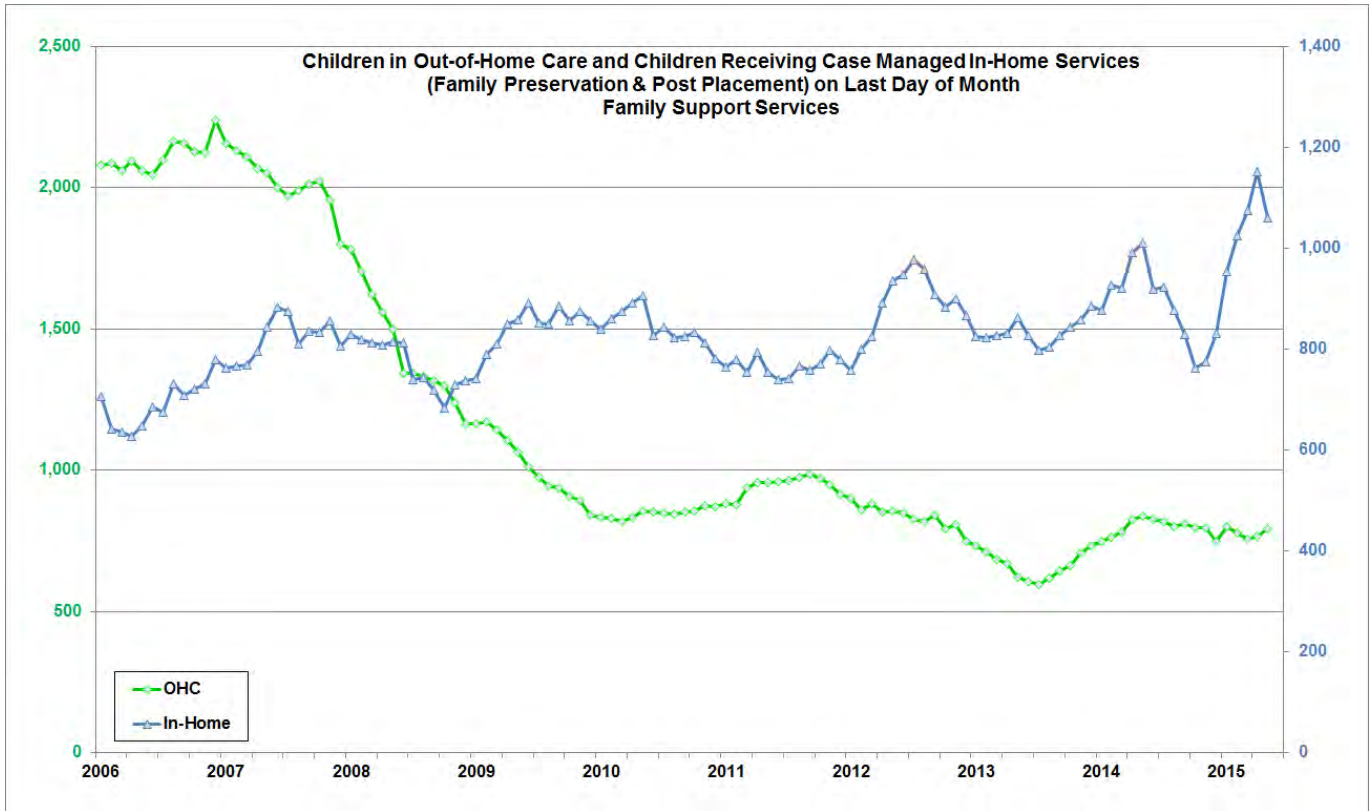


Removal Rate vs Discharge Rate



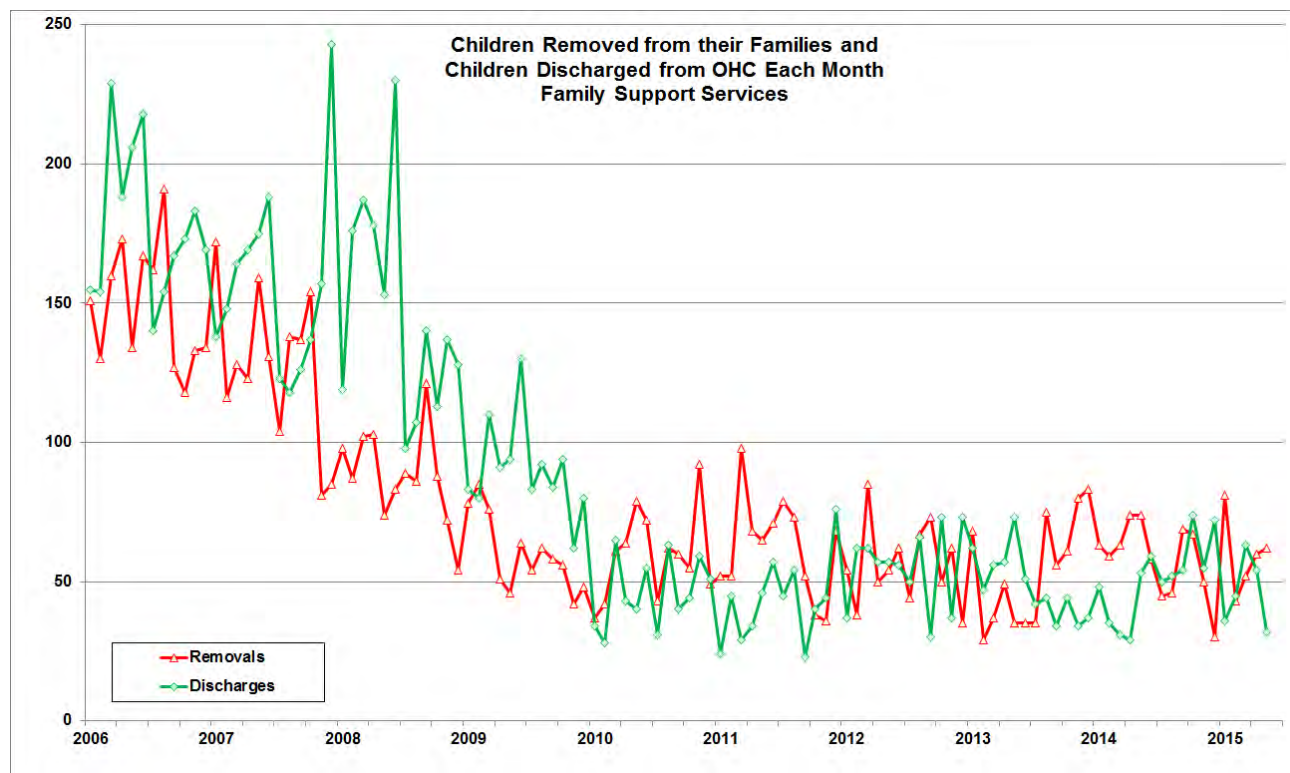
Family Support Services of North Florida, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

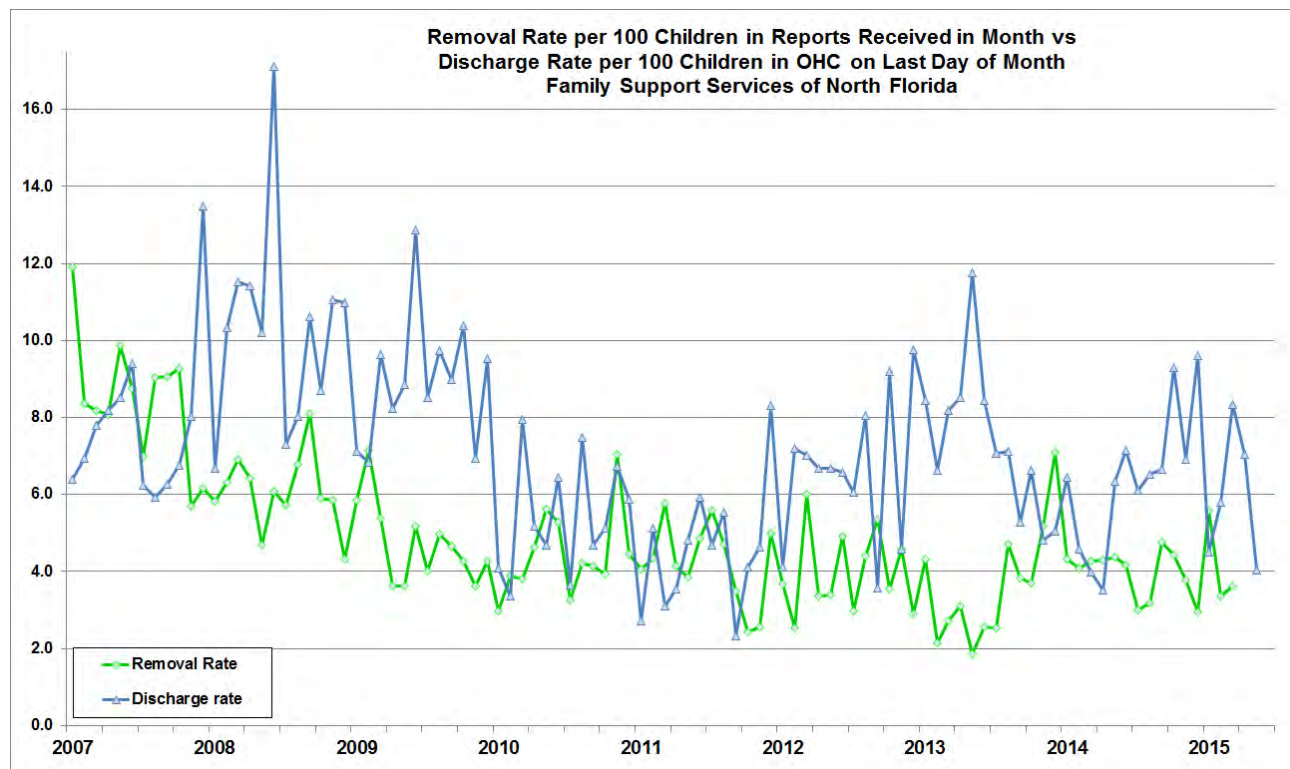


Family Support Services of North Florida, 2

Removals vs Discharges

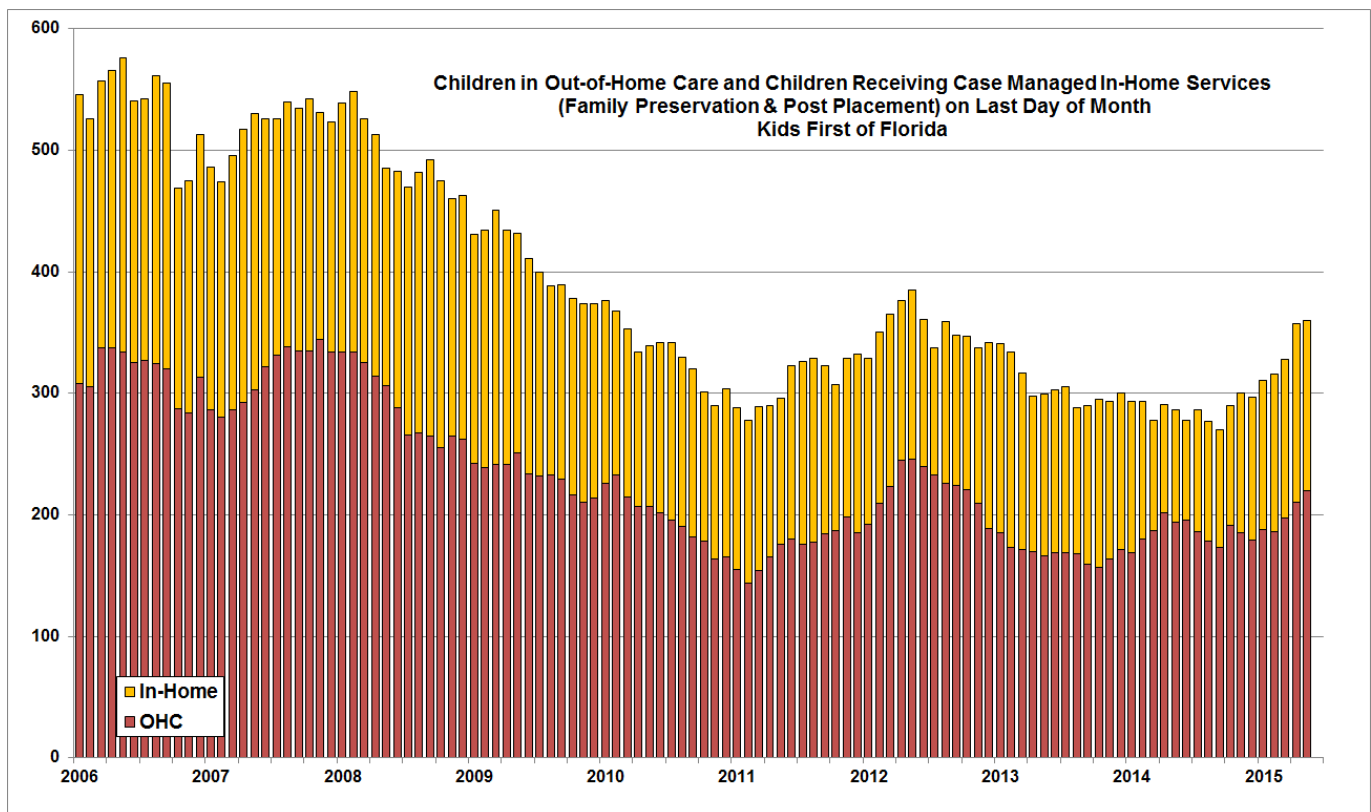
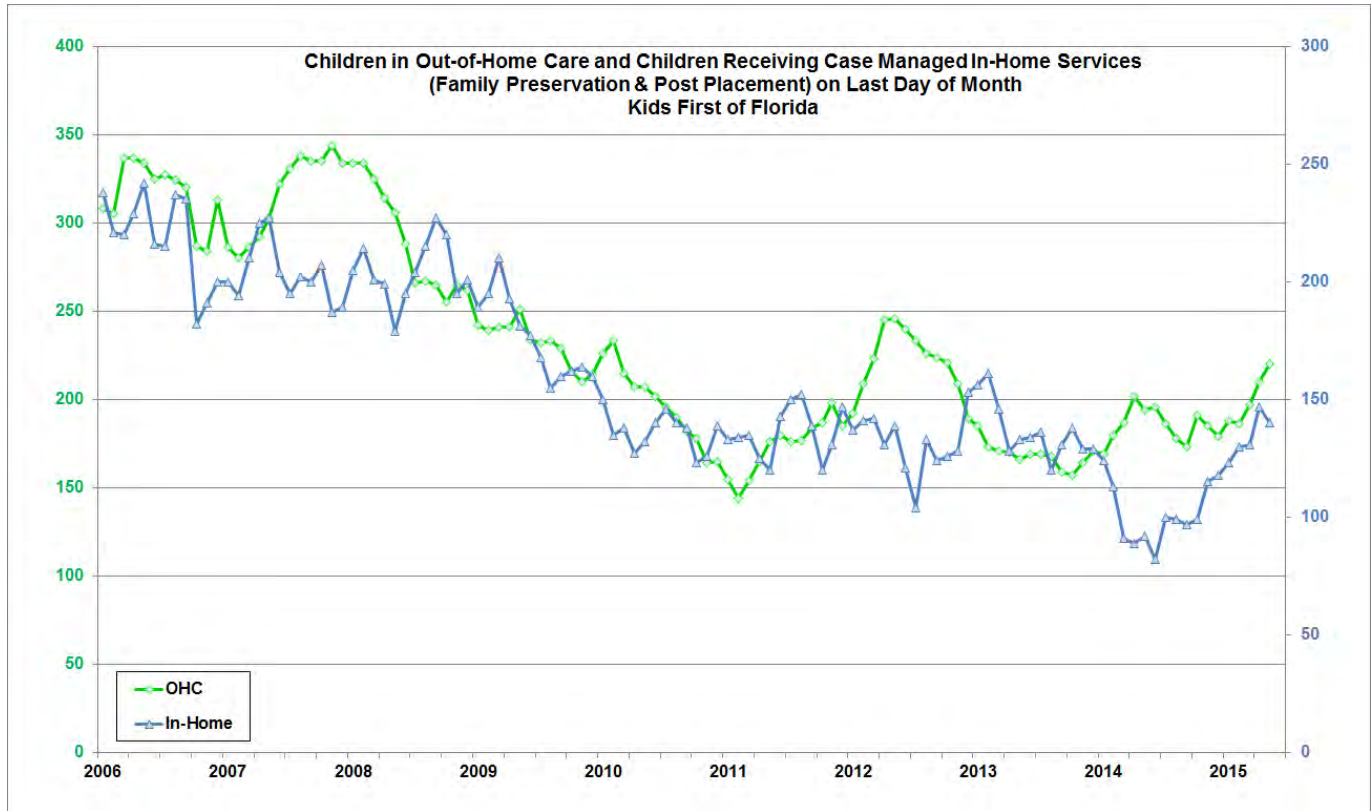


Removal Rate vs Discharge Rate



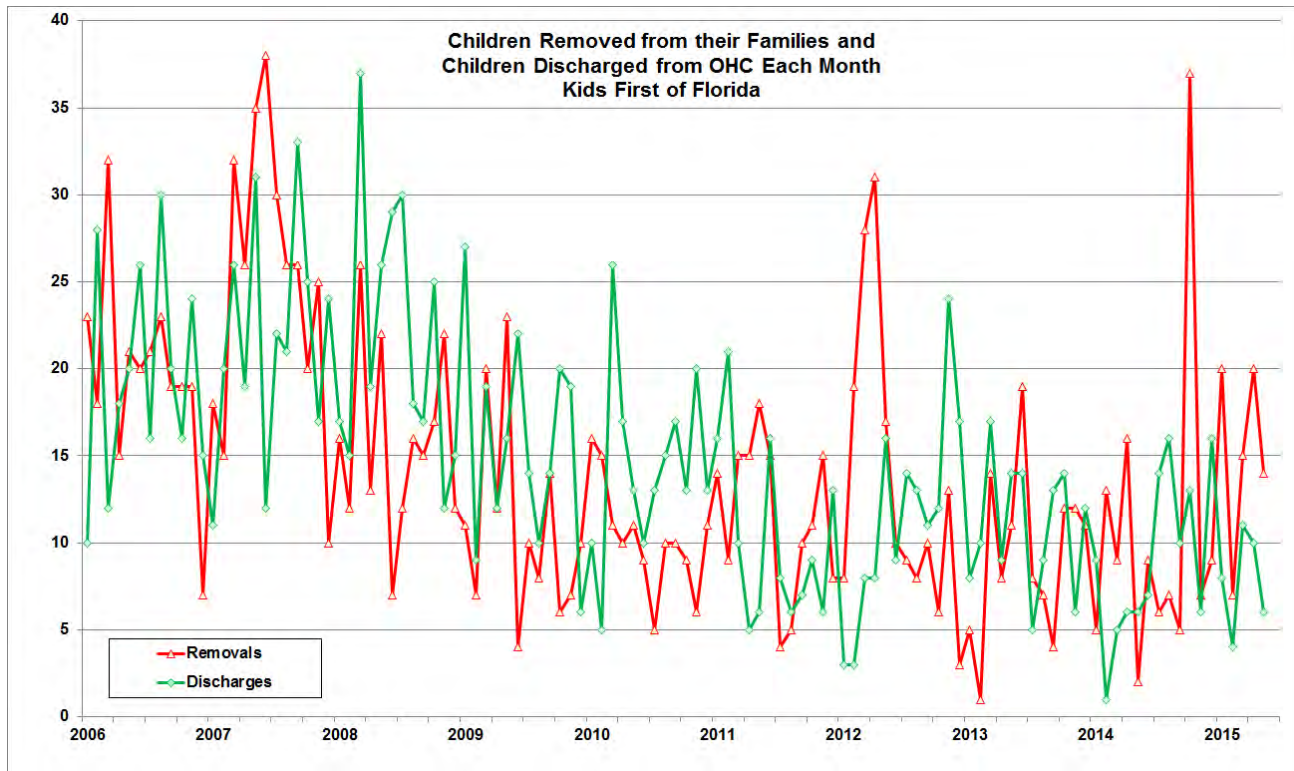
Kids First of Florida, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

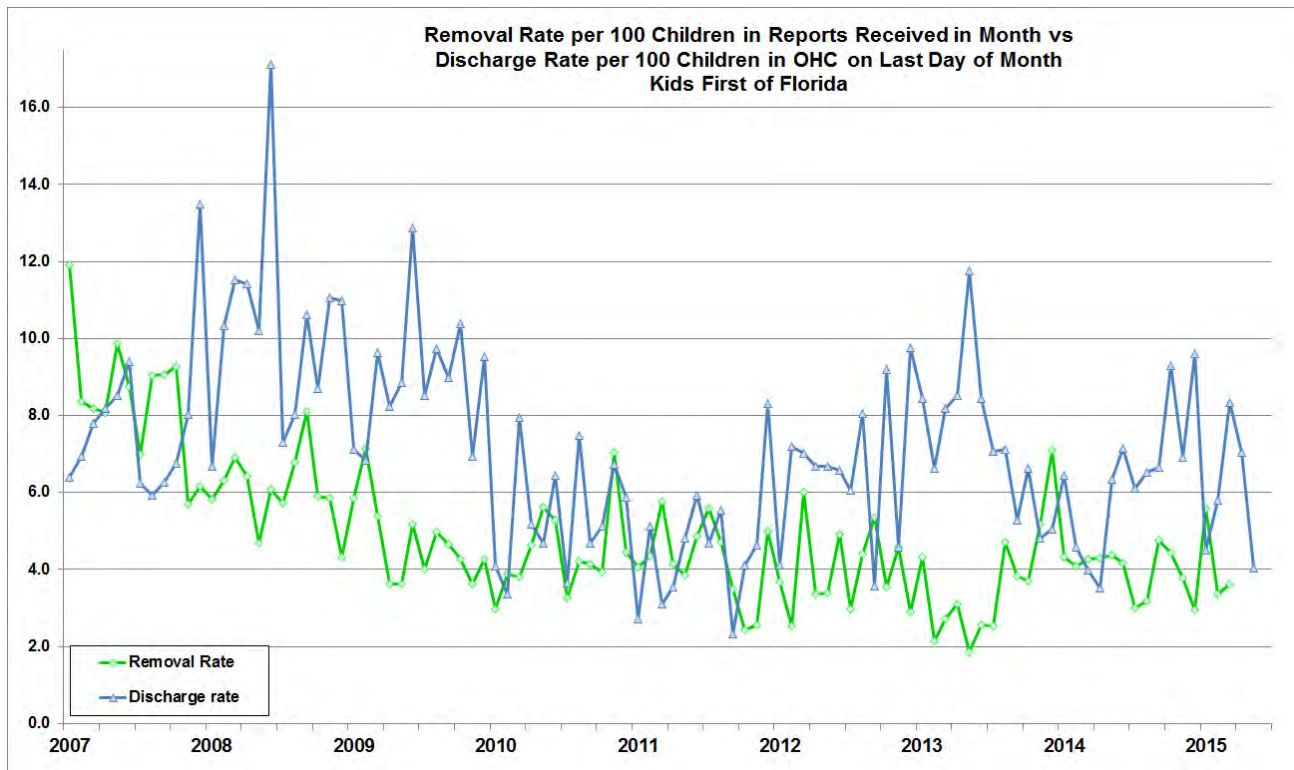


Kids First of Florida, 2

Removals vs Discharges

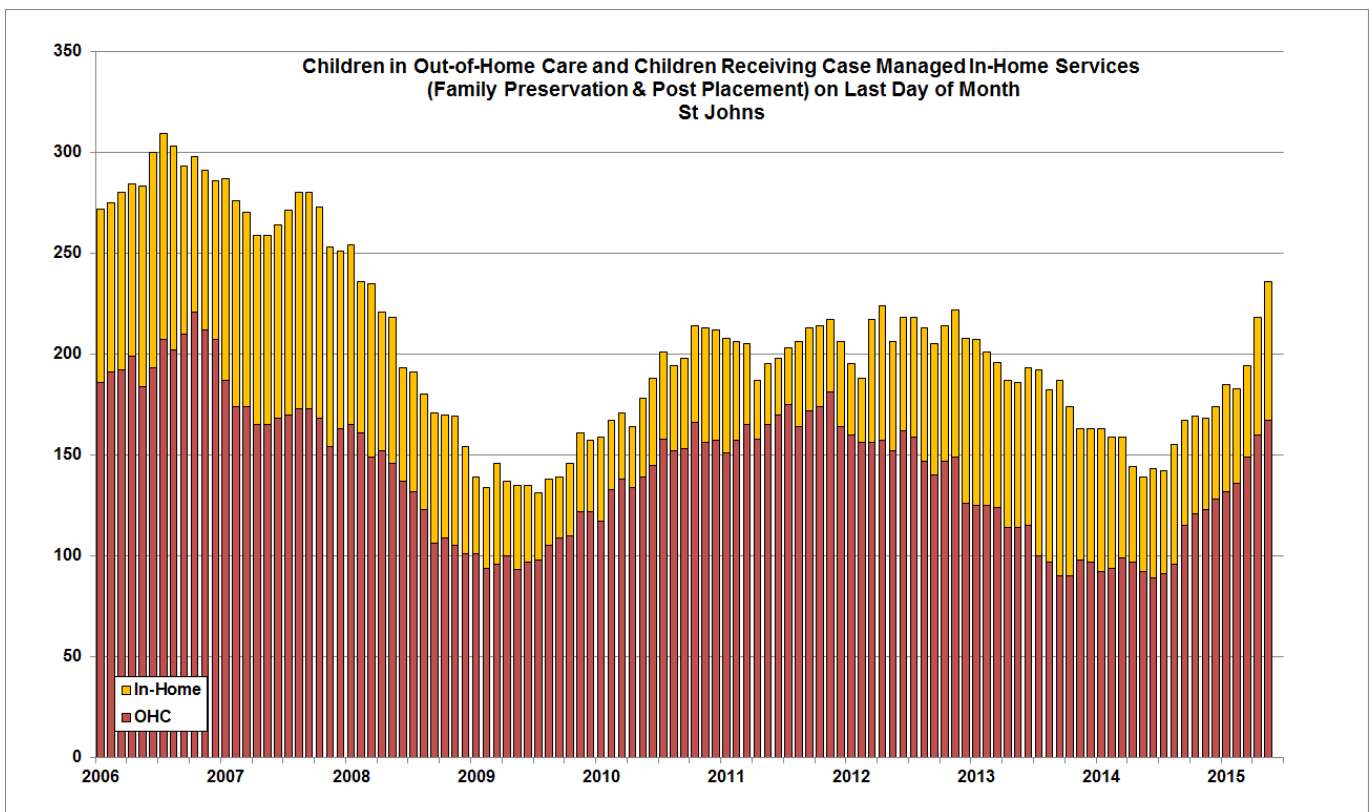
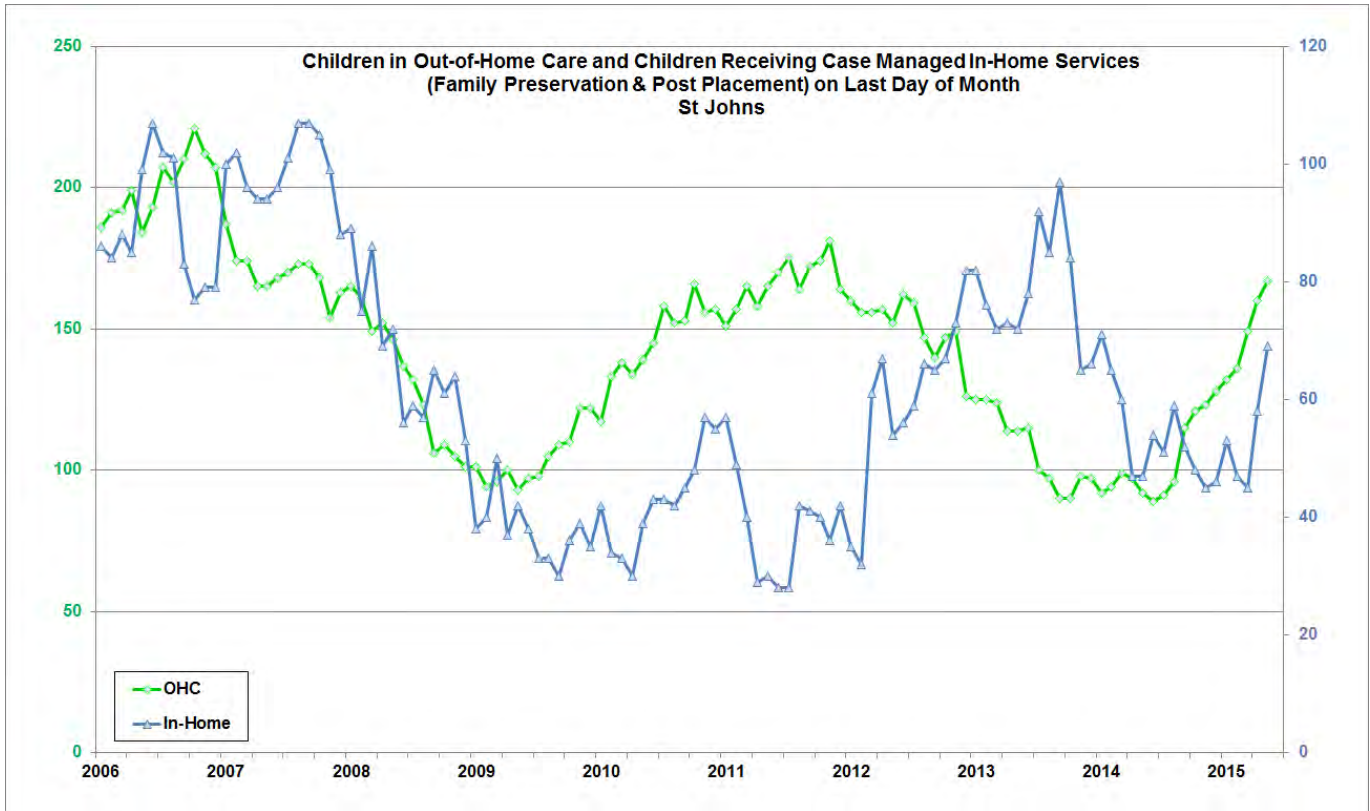


Removal Rate vs Discharge Rate



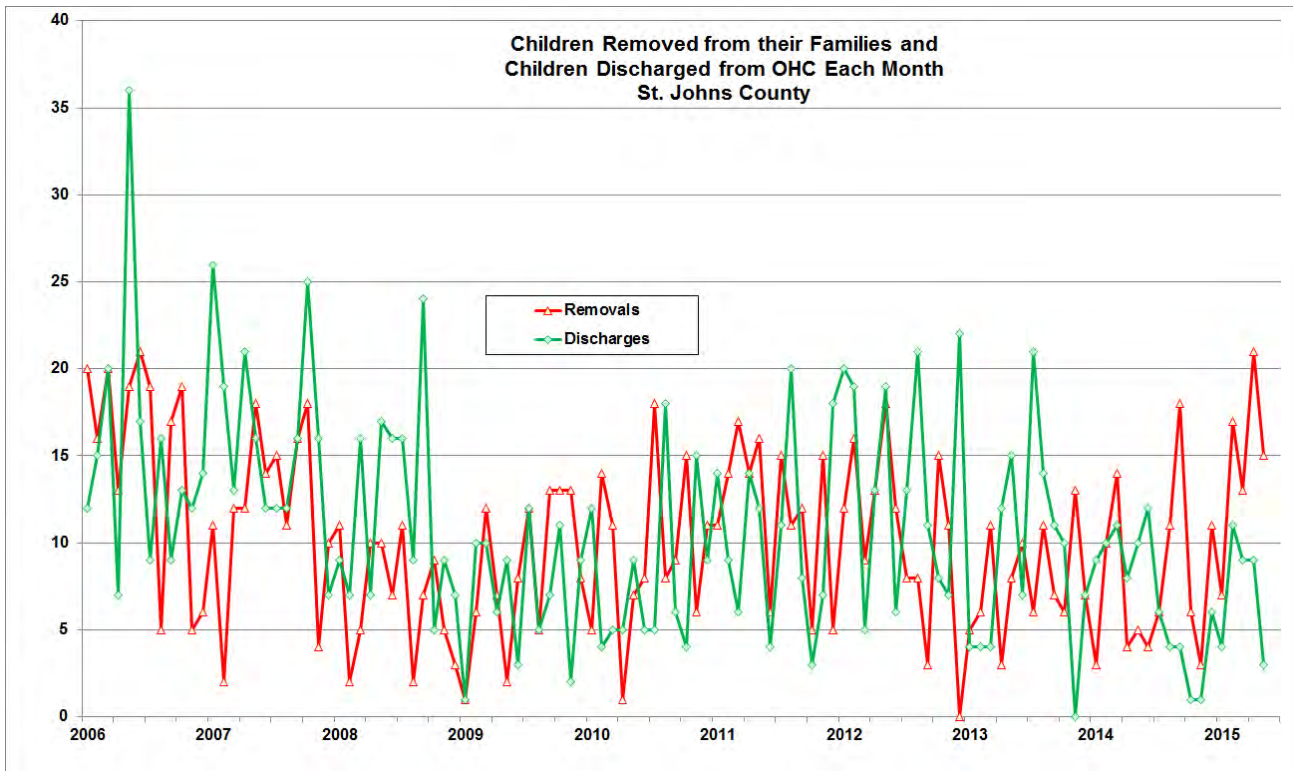
St. Johns County, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

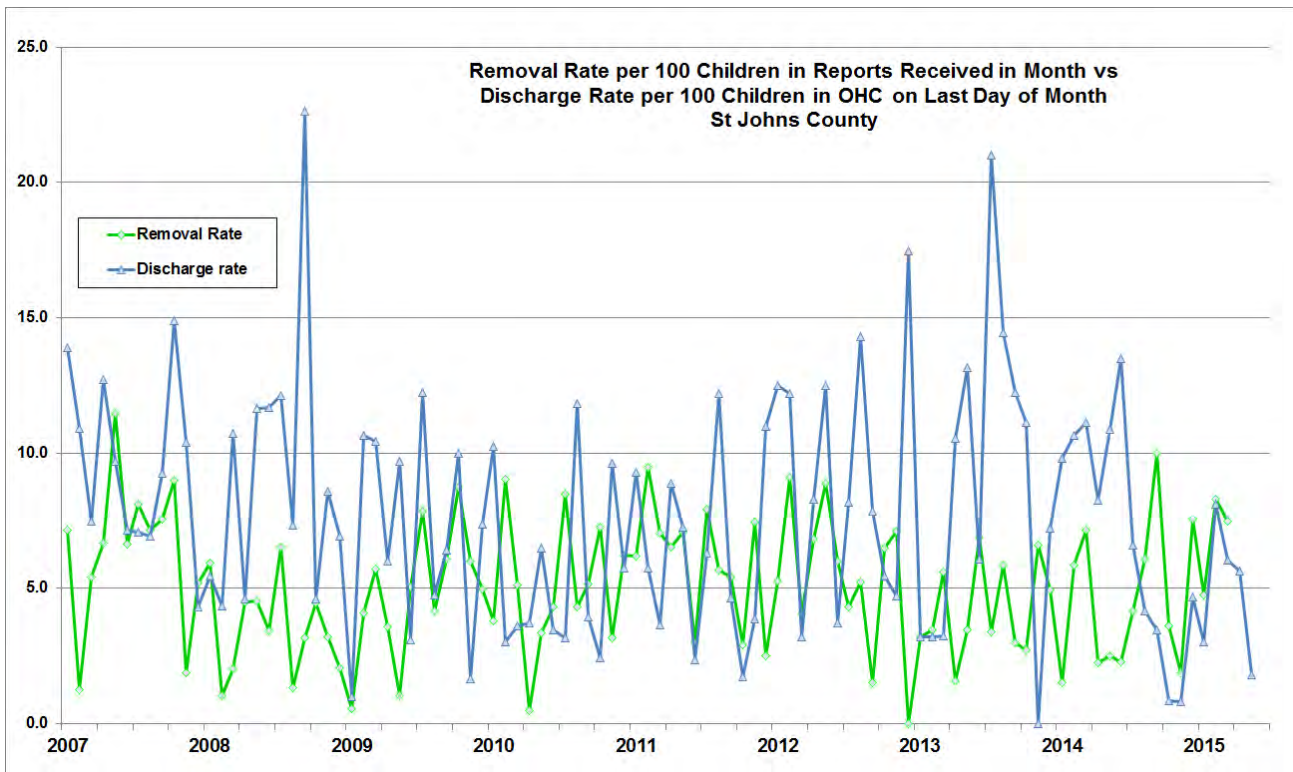


St. Johns County, 2

Removals vs Discharges

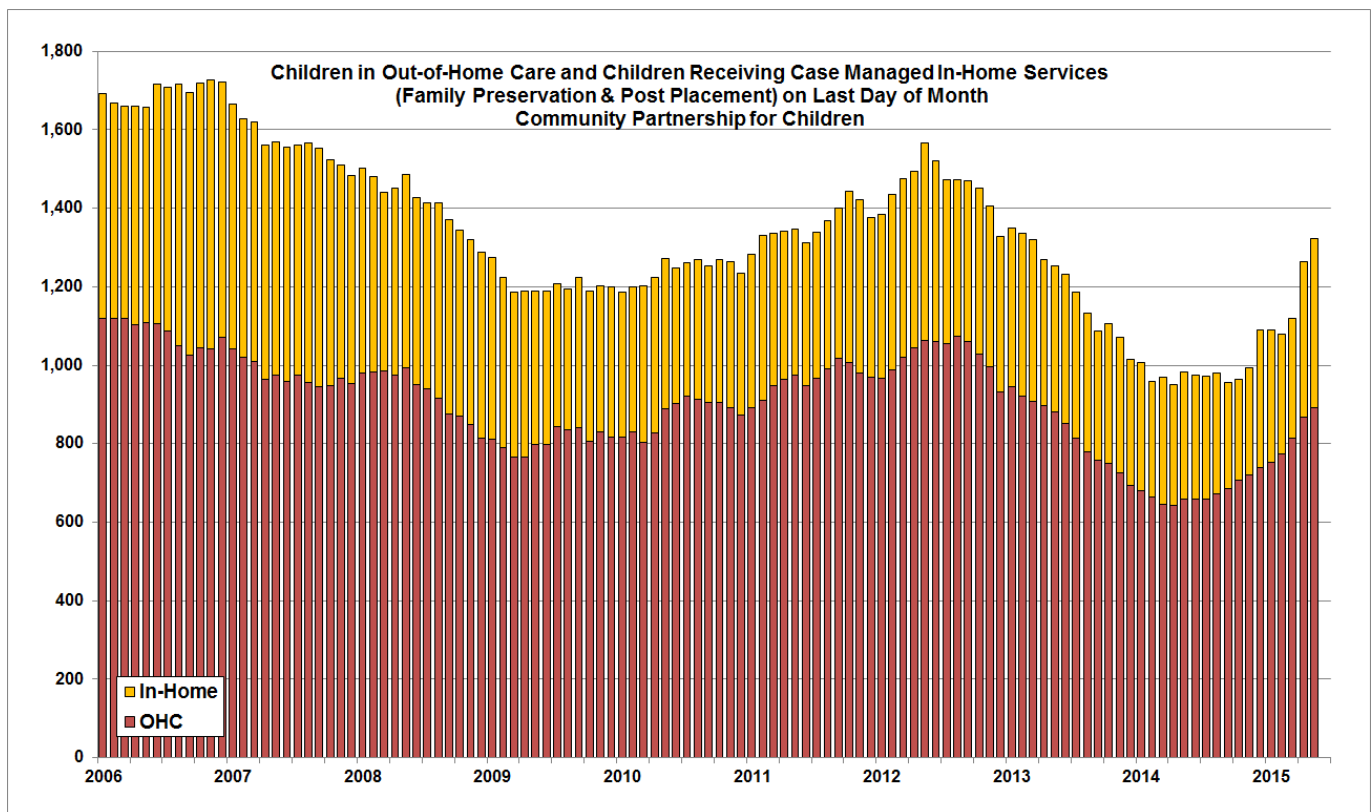
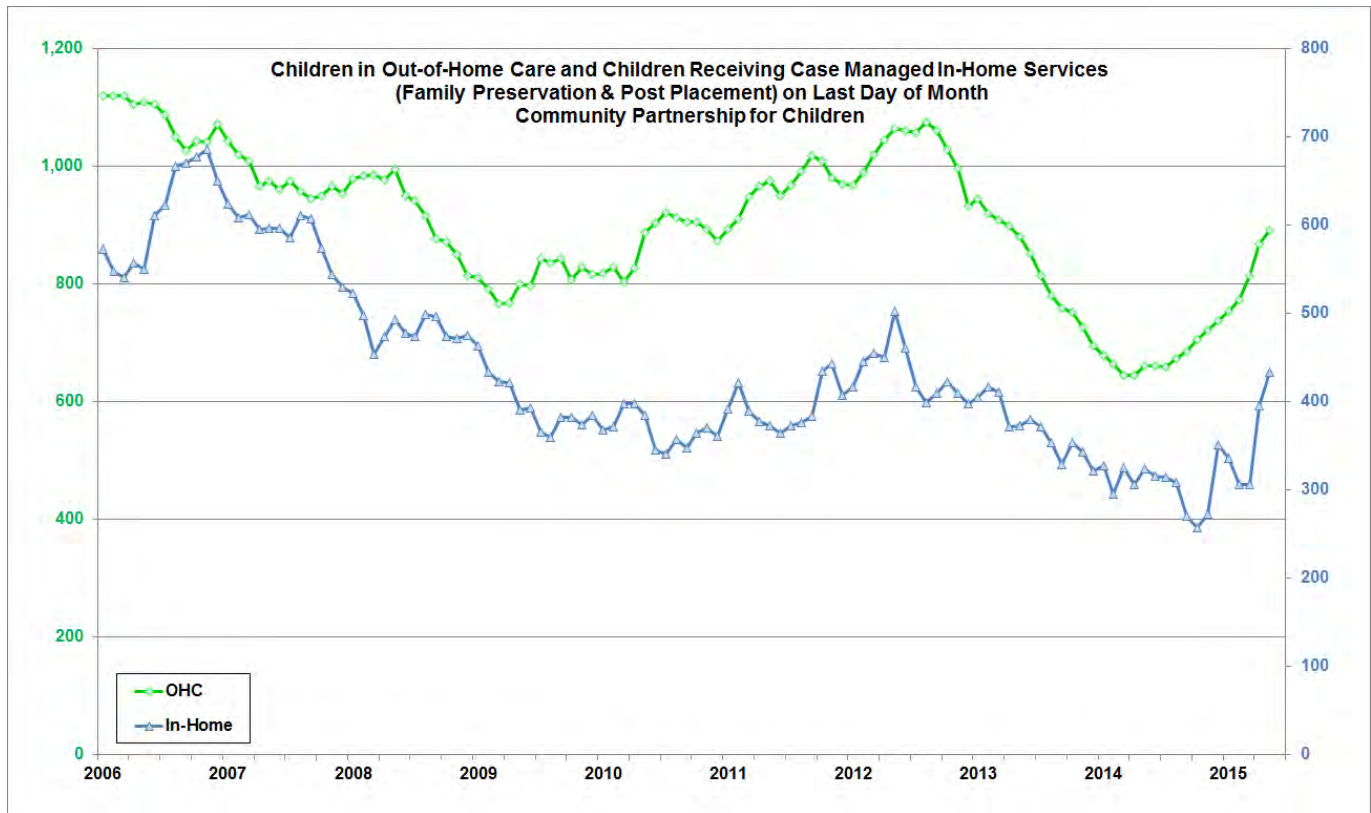


Removal Rate vs Discharge Rate



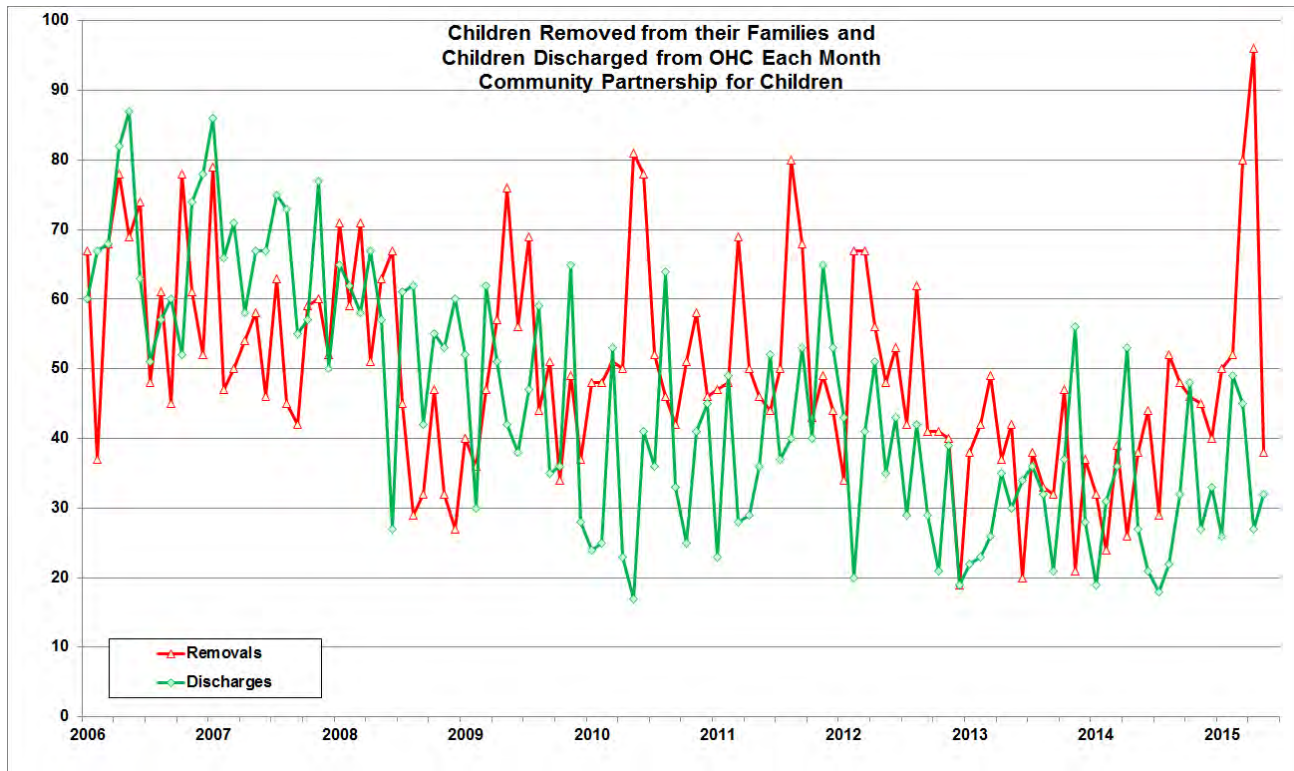
Community Partnership for Children, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

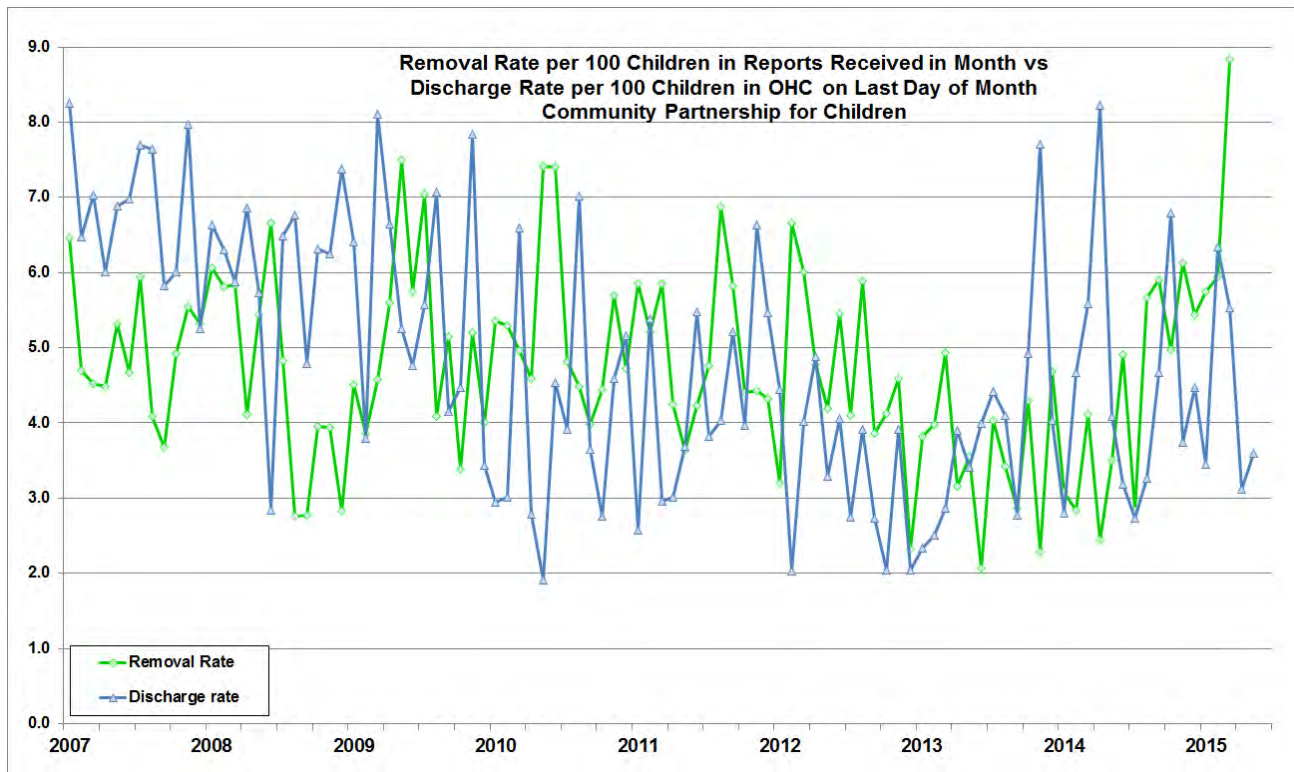


Community Partnership for Children, 2

Removals vs Discharges

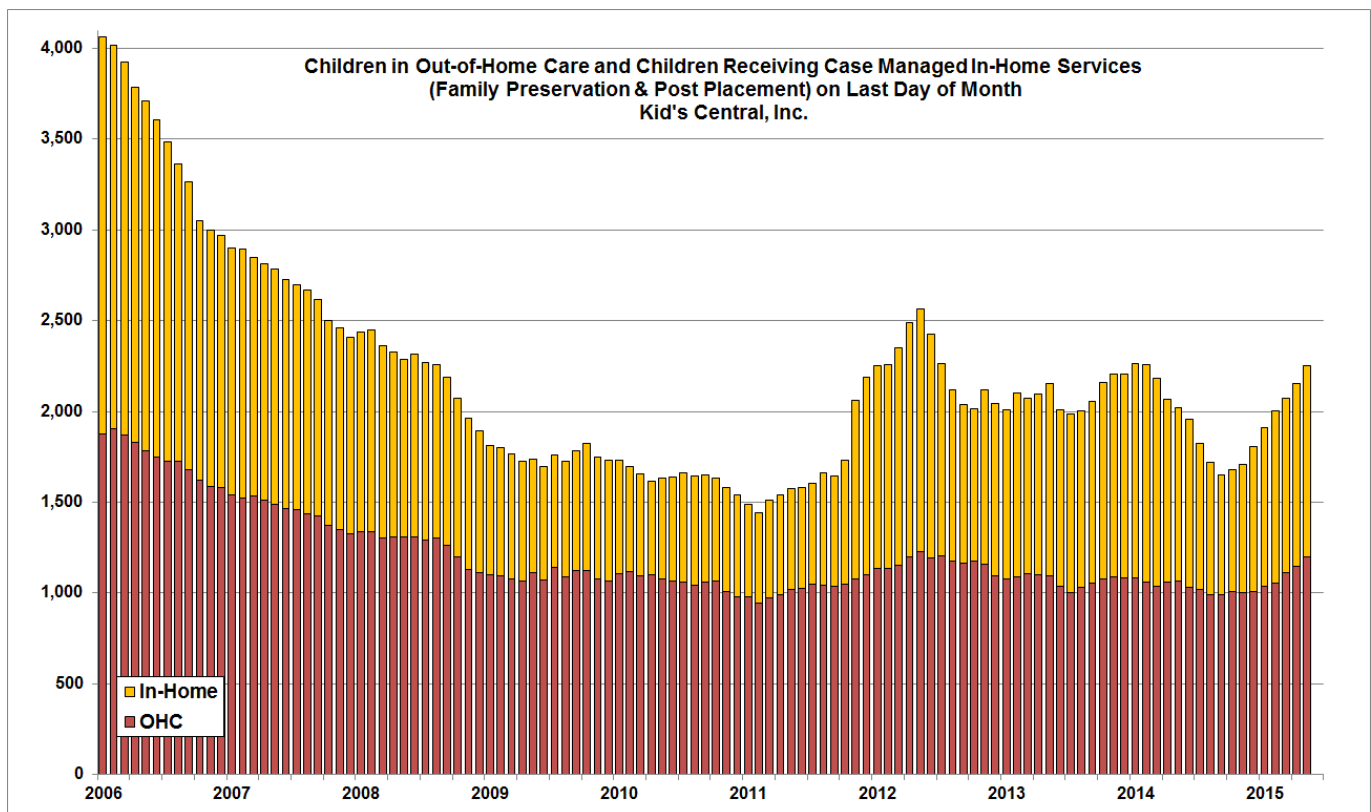
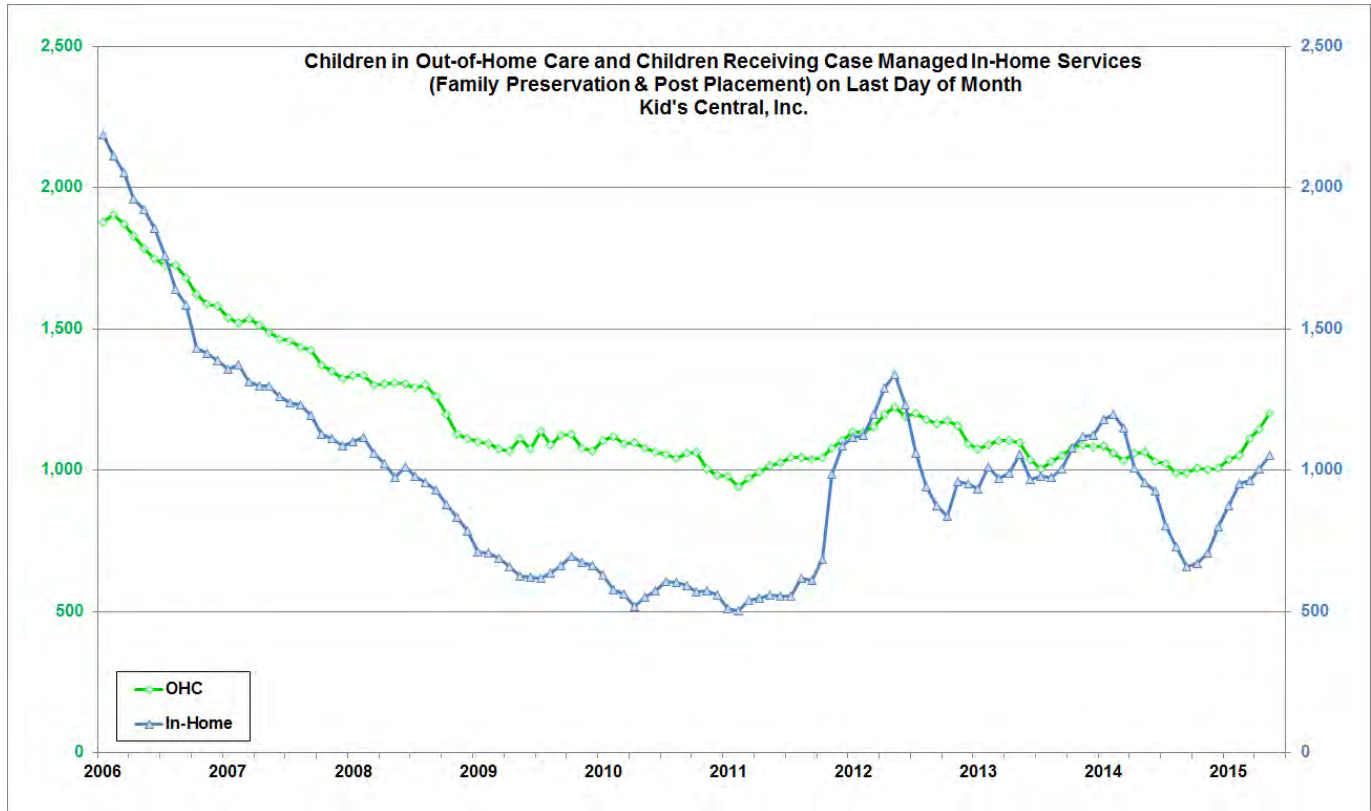


Removal Rate vs Discharge Rate



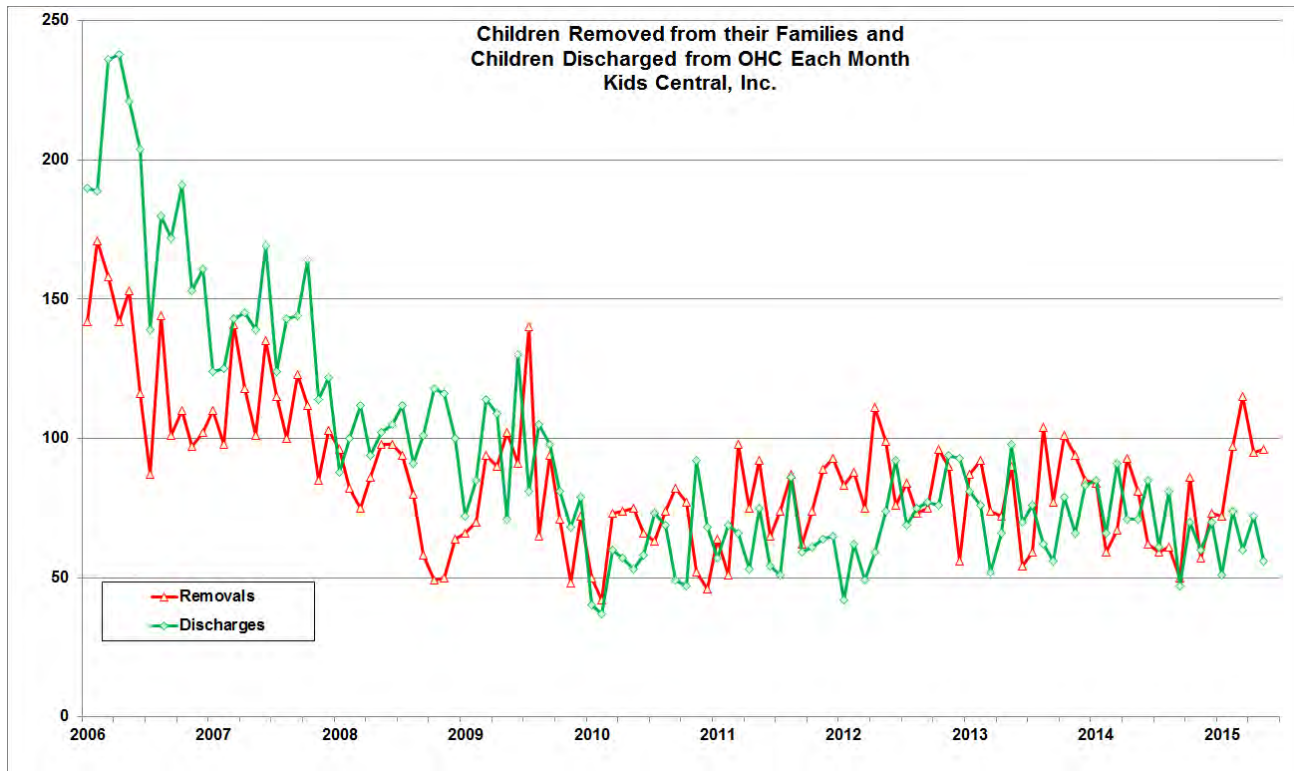
Kids Central, Inc., 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

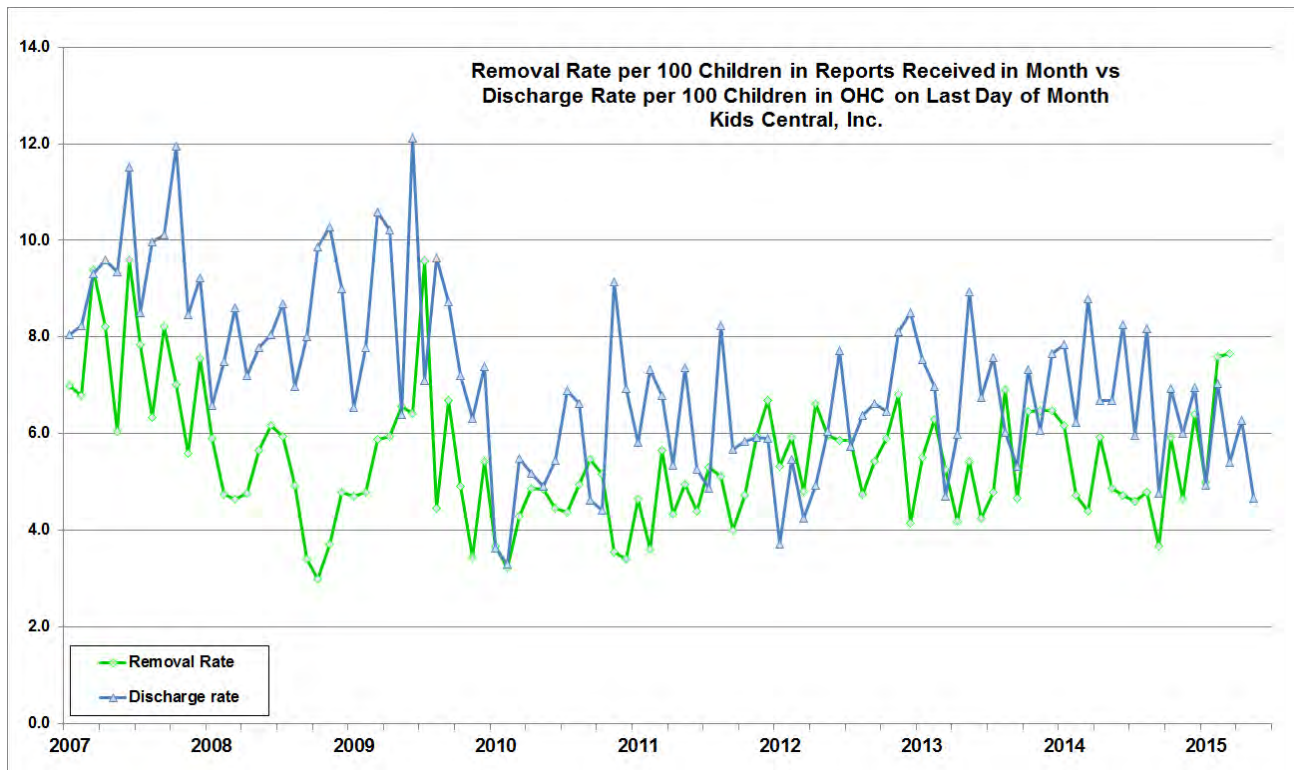


Kids Central, Inc., 2

Removals vs Discharges

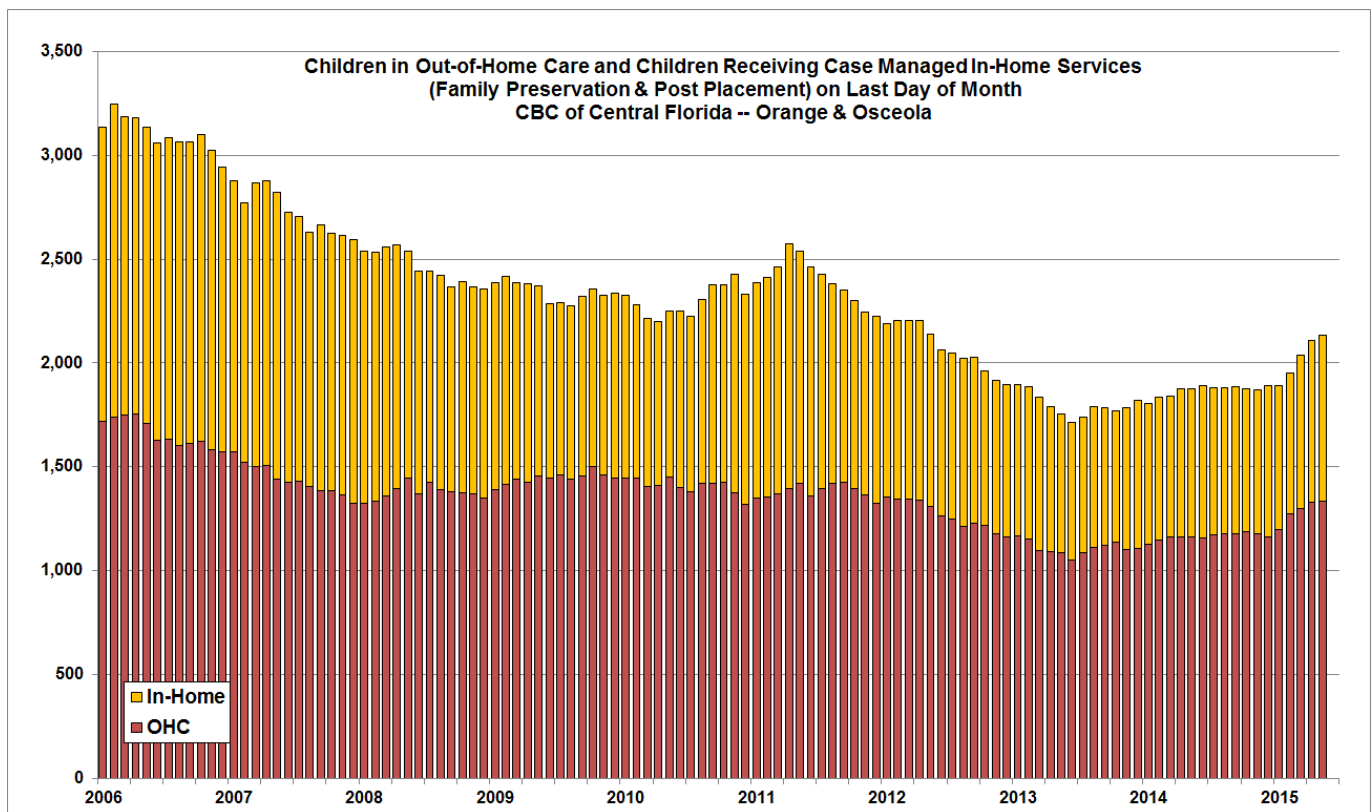
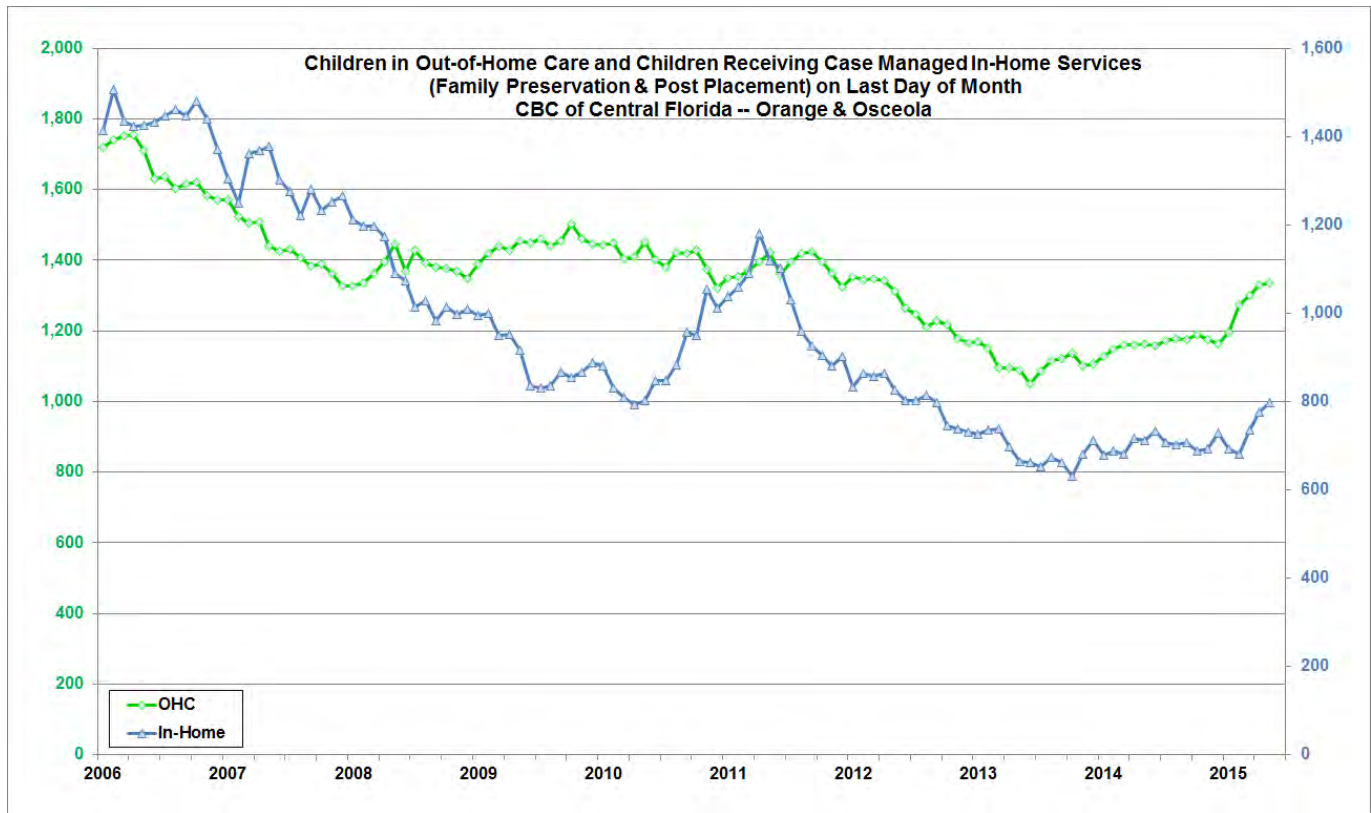


Removal Rate vs Discharge Rate



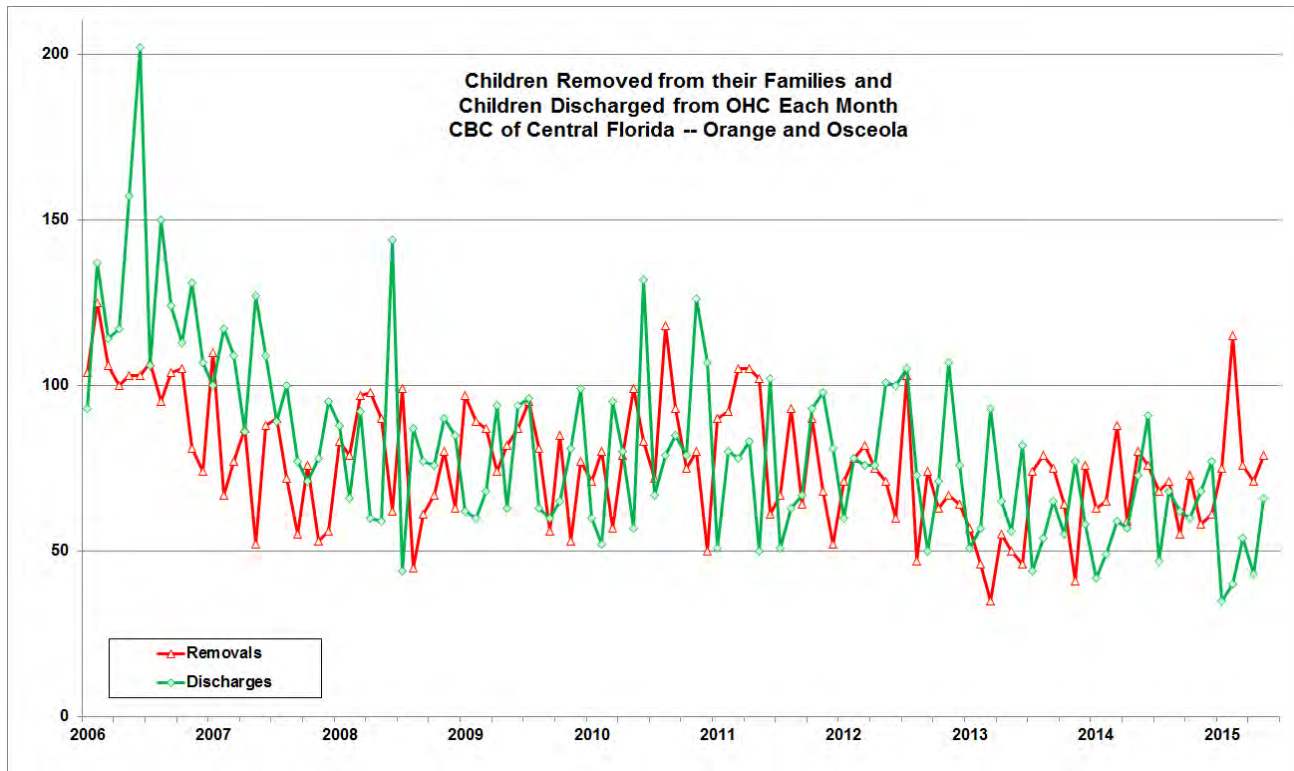
CBC of Central Florida – Orange & Osceola, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

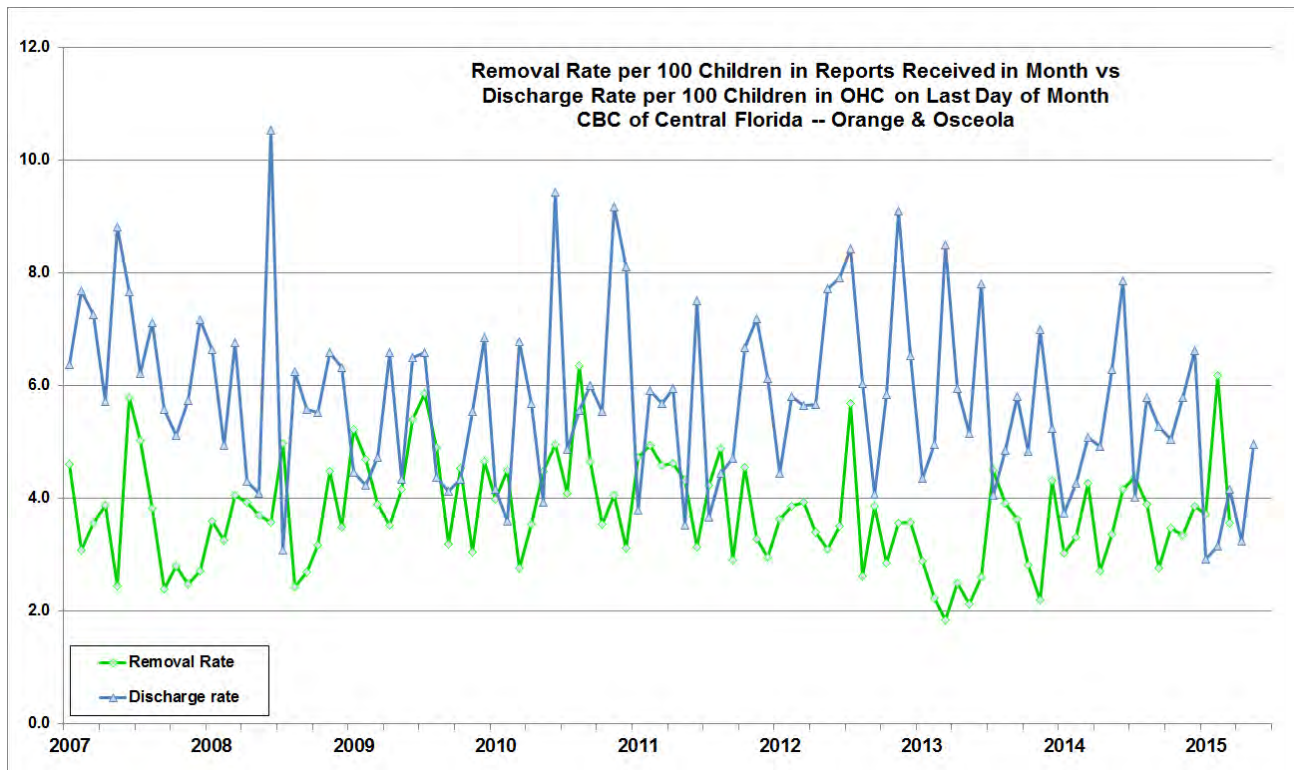


CBC of Central Florida – Orange & Osceola, 2

Removals vs Discharges

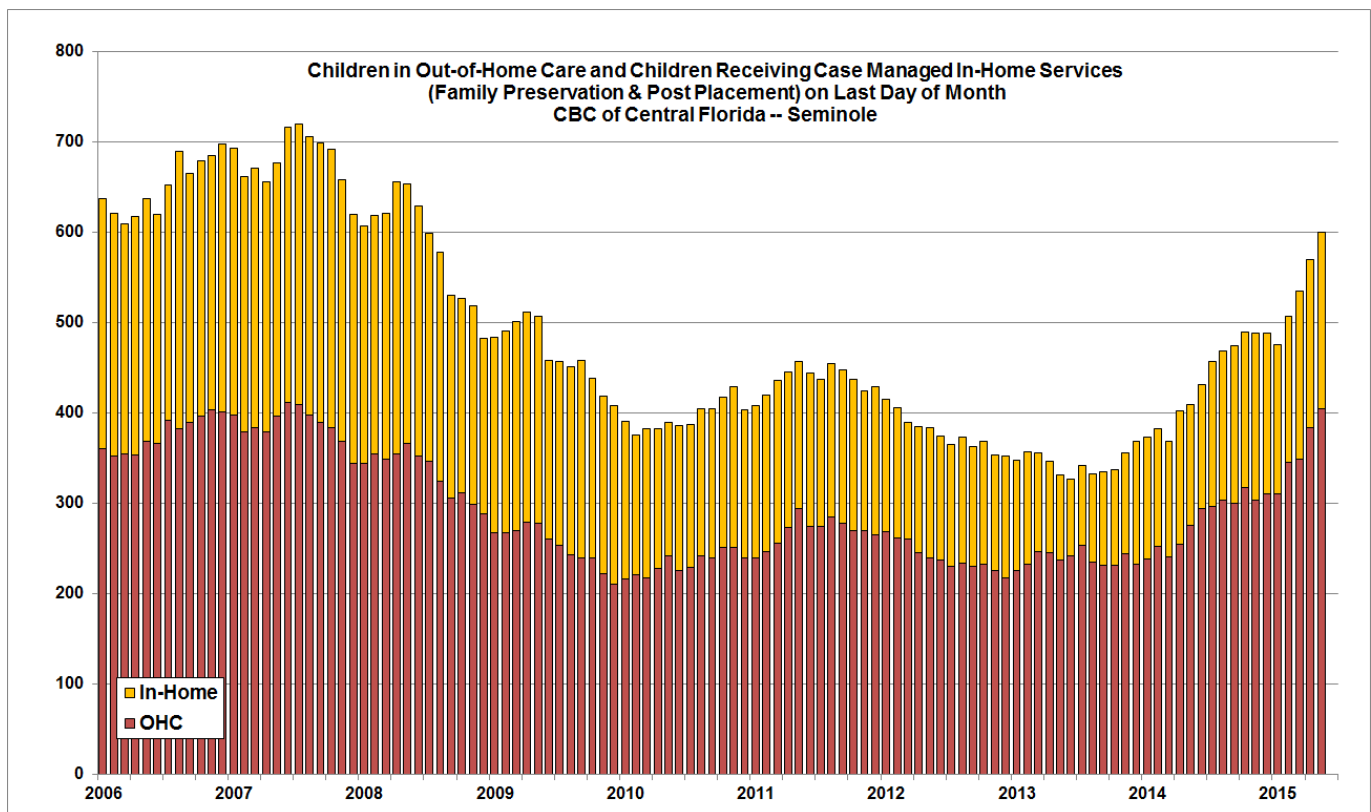
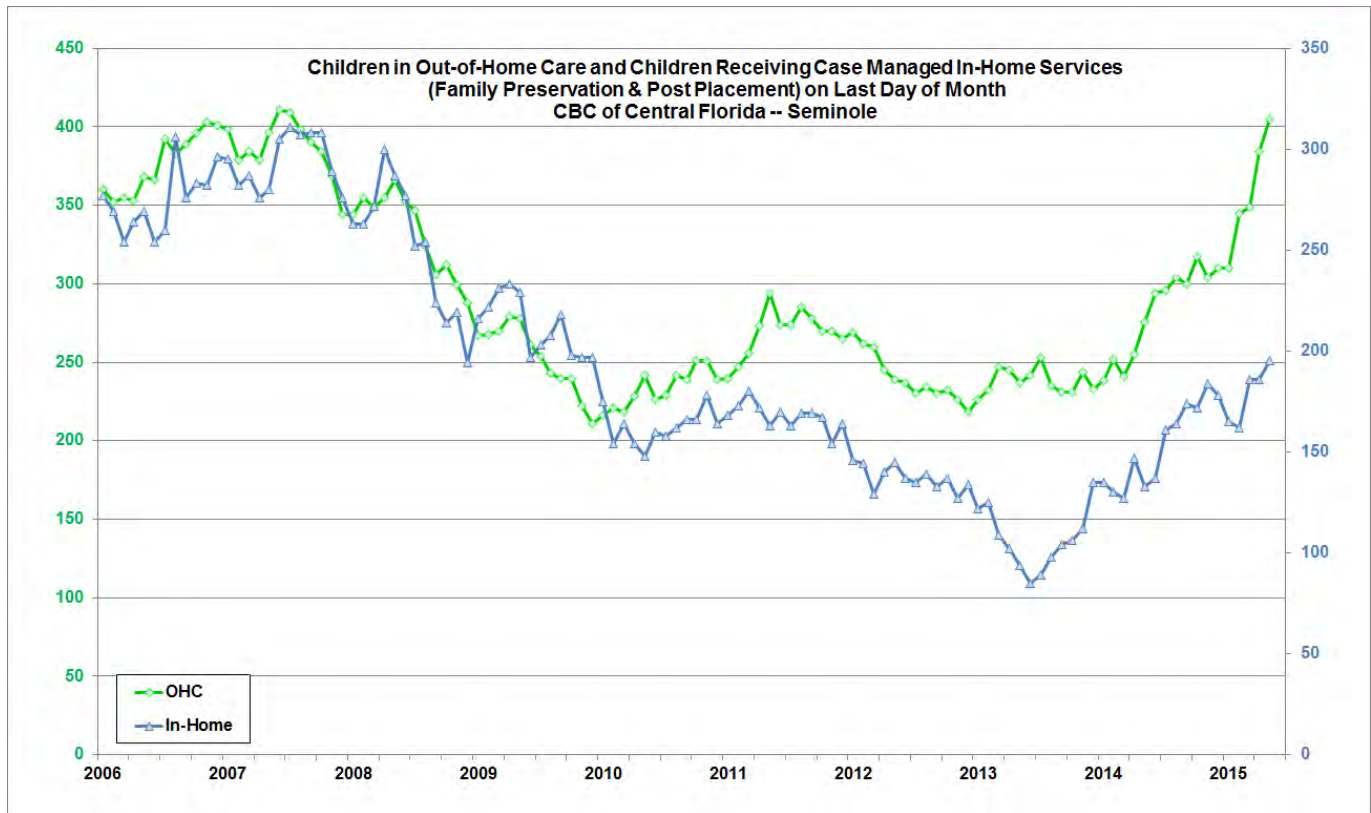


Removal Rate vs Discharge Rate



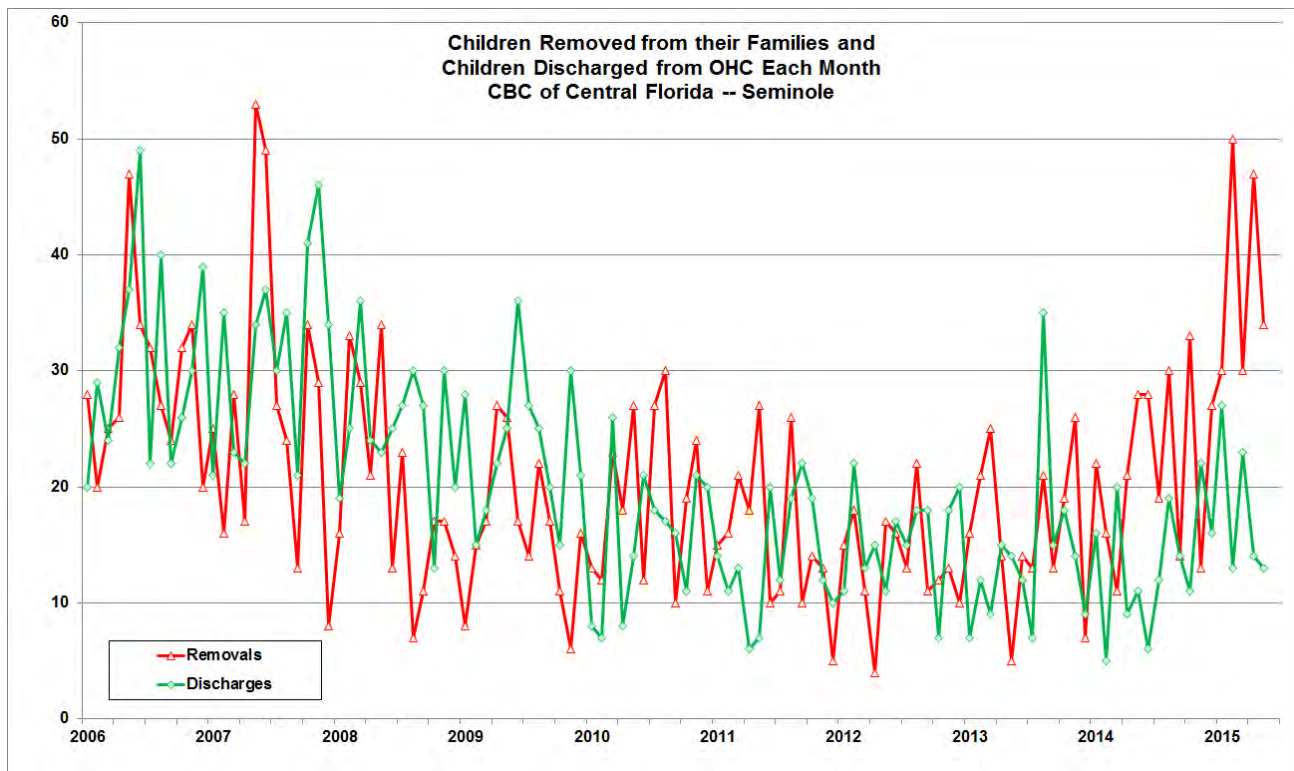
CBC of Central Florida—Seminole, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

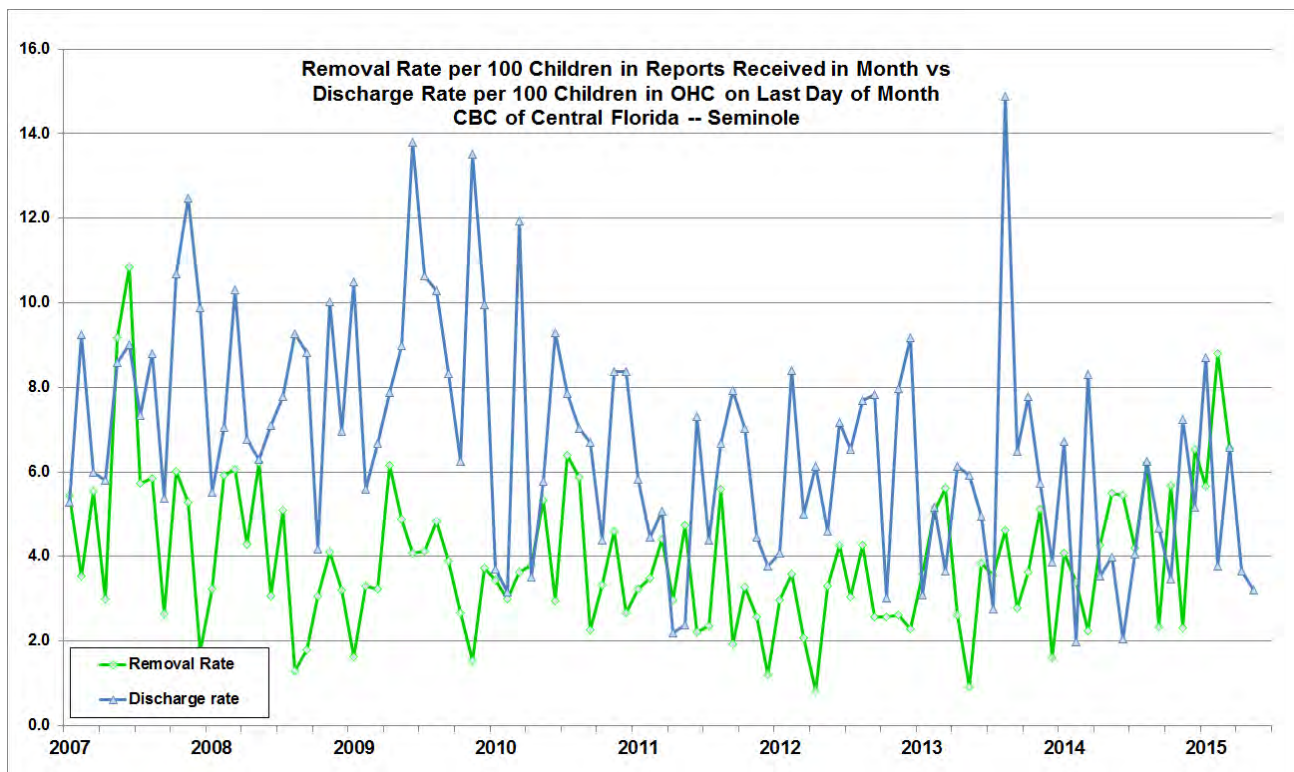


CBC of Central Florida—Seminole, 2

Removals vs Discharges

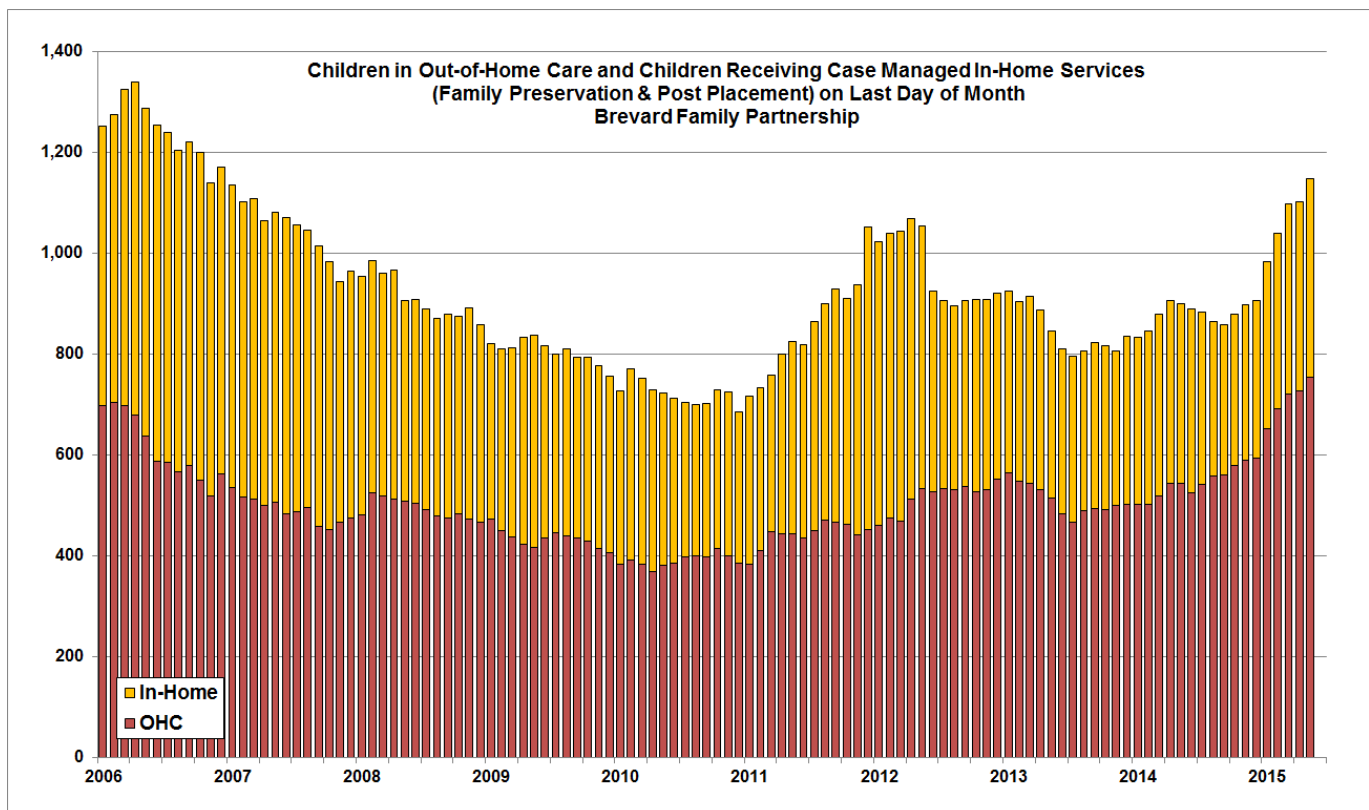
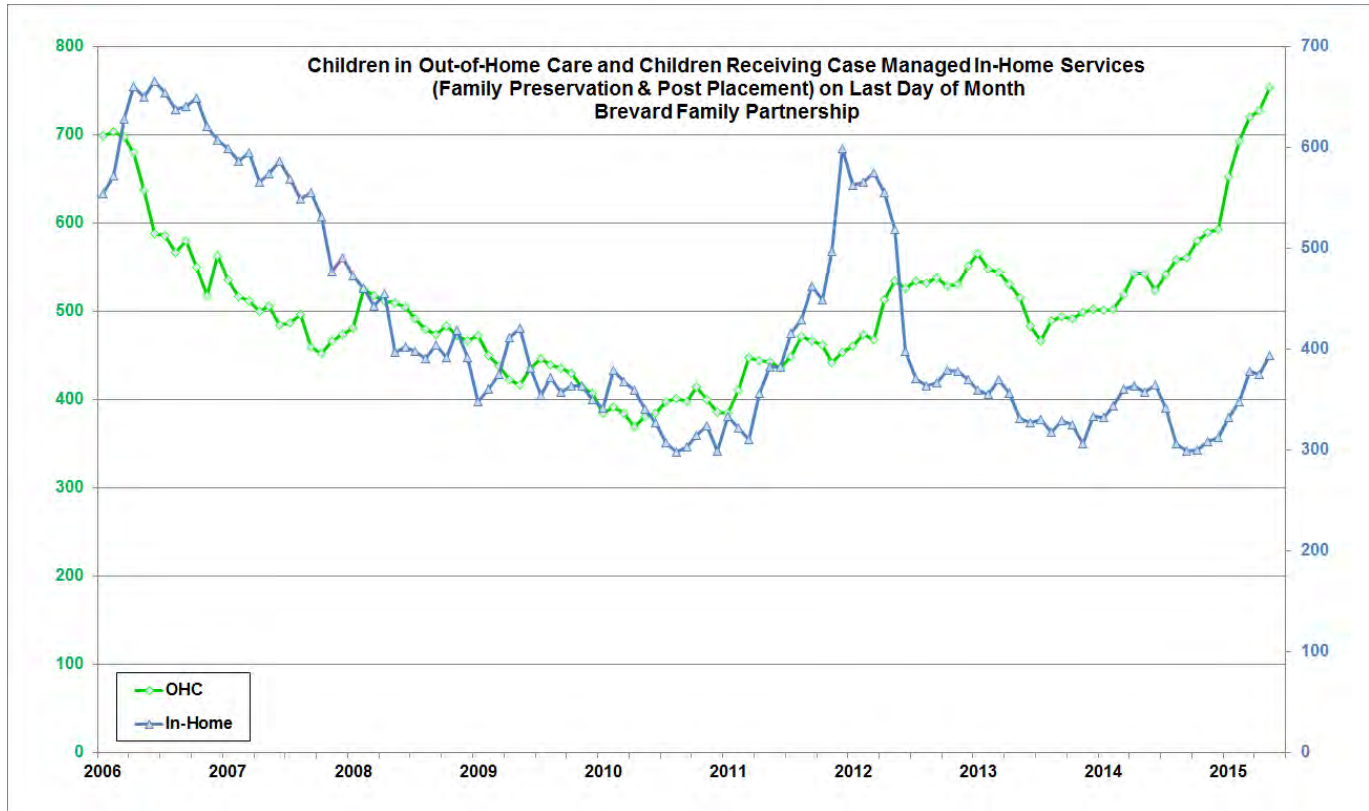


Removal Rate vs Discharge Rate



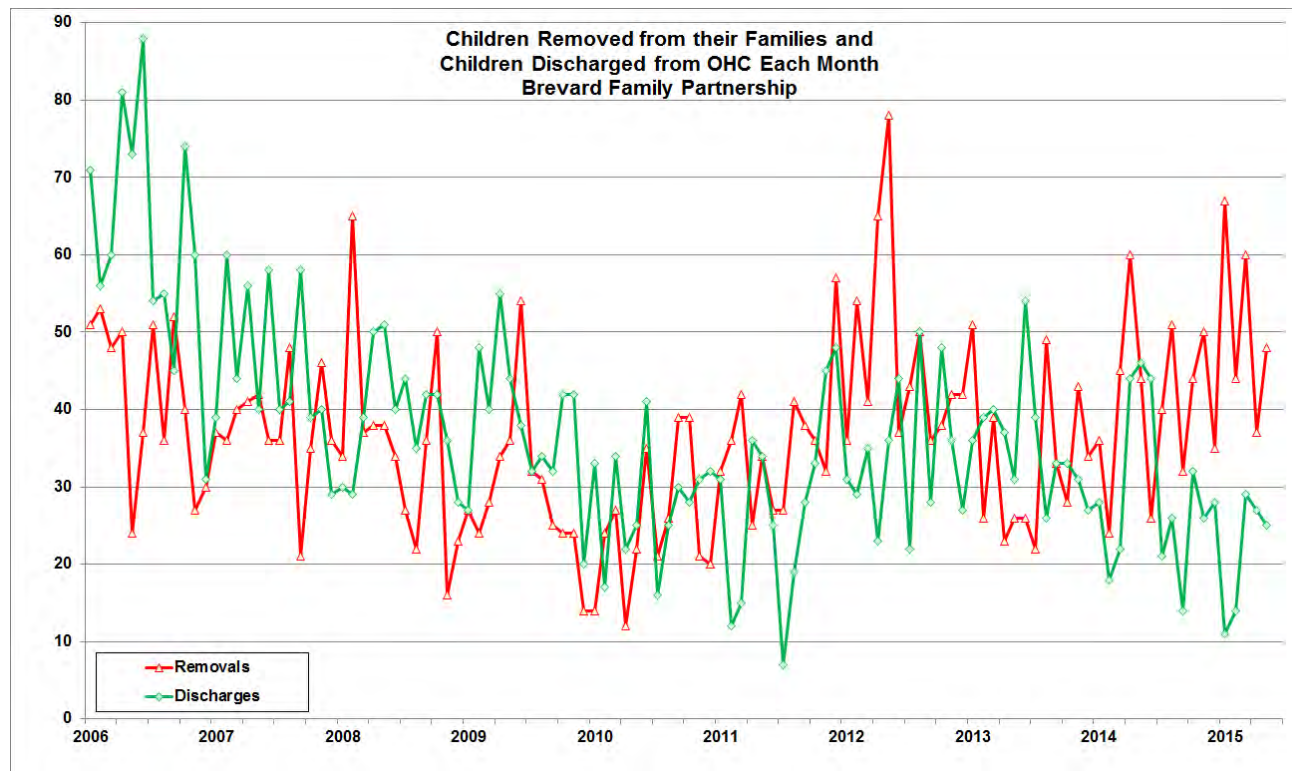
Brevard Family Partnership, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

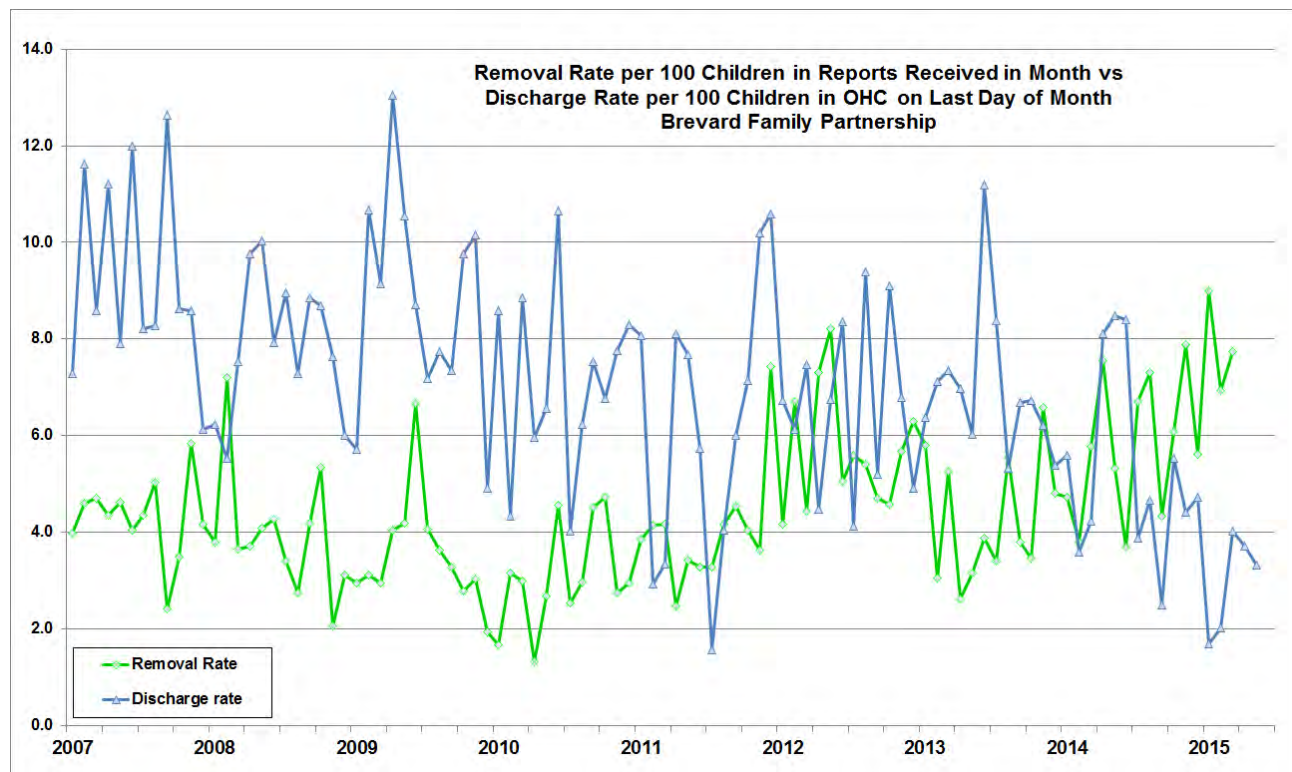


Brevard Family Partnership, 2

Removals vs Discharges

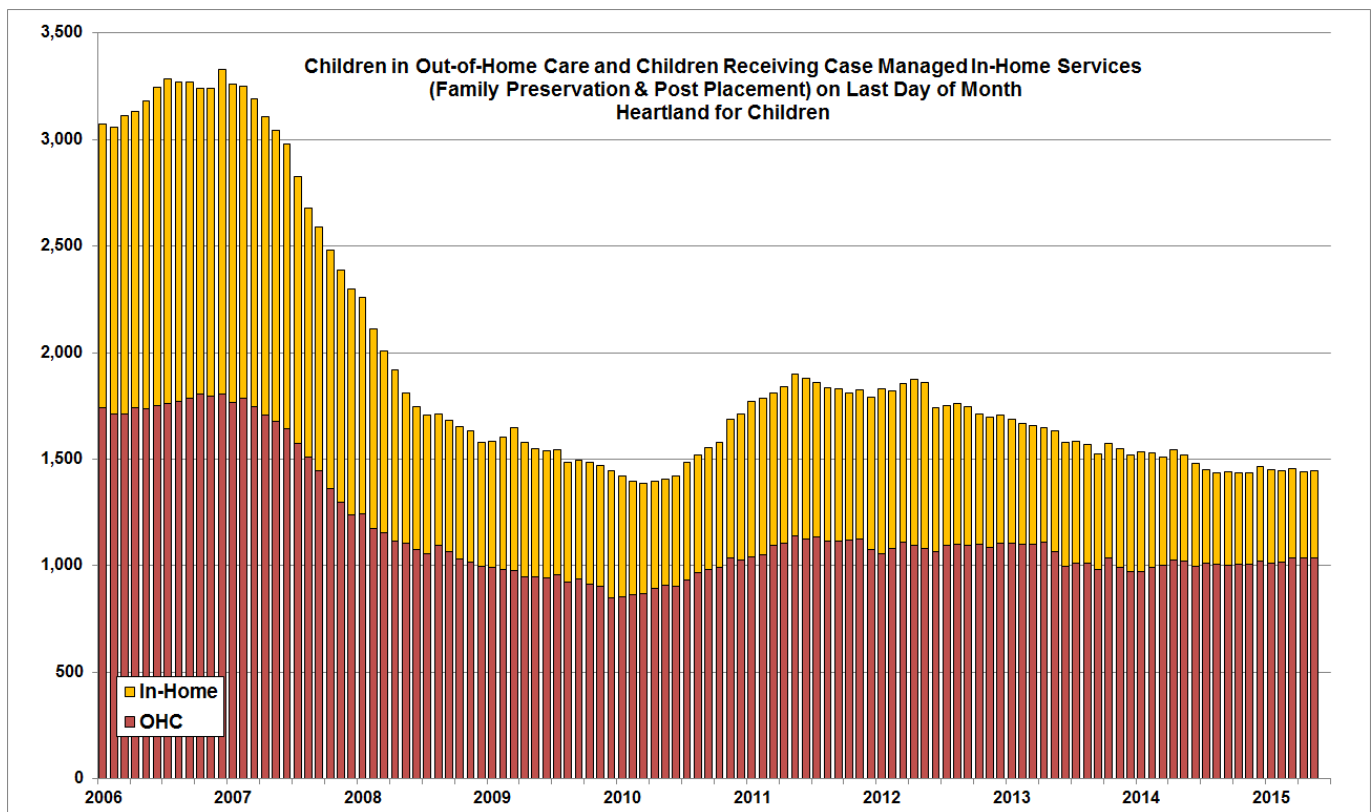
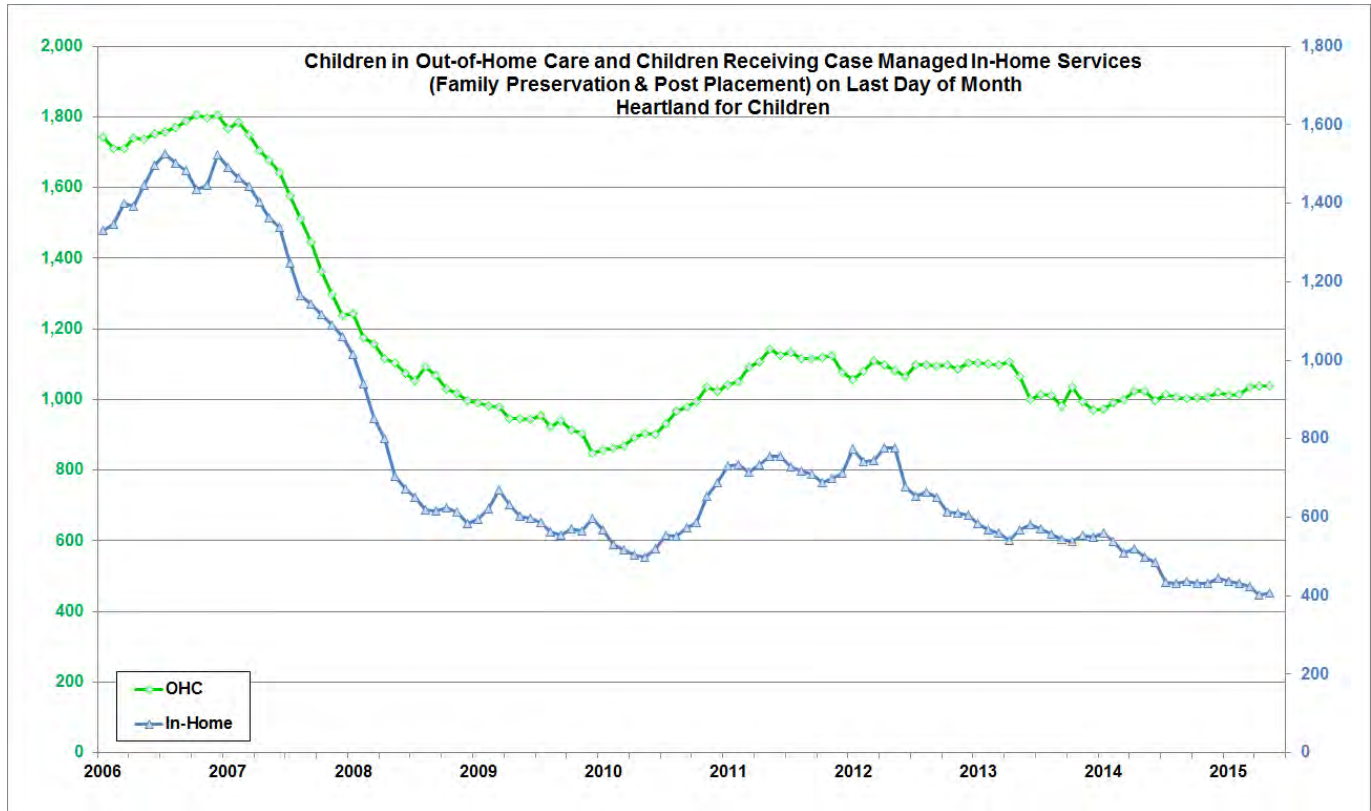


Removal Rate vs Discharge Rate



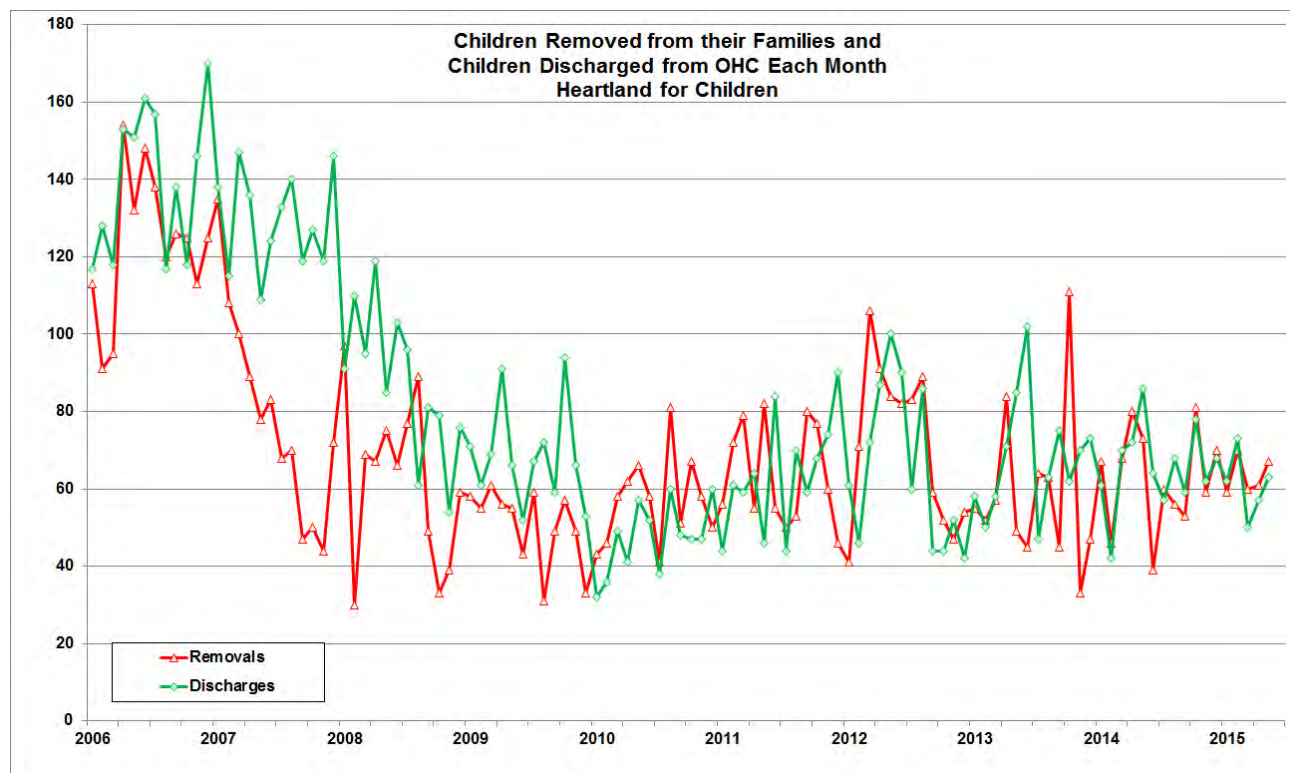
Heartland for Children, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

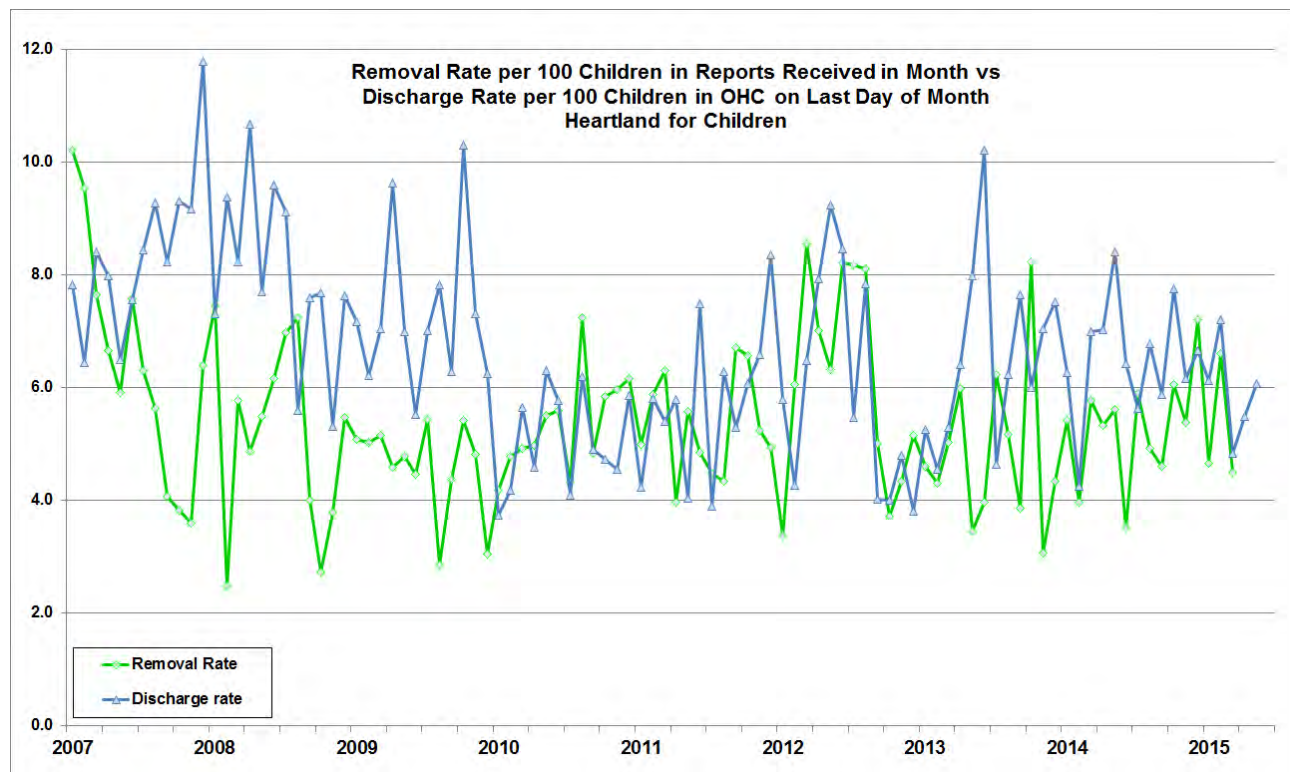


Heartland for Children, 2

Removals vs Discharges

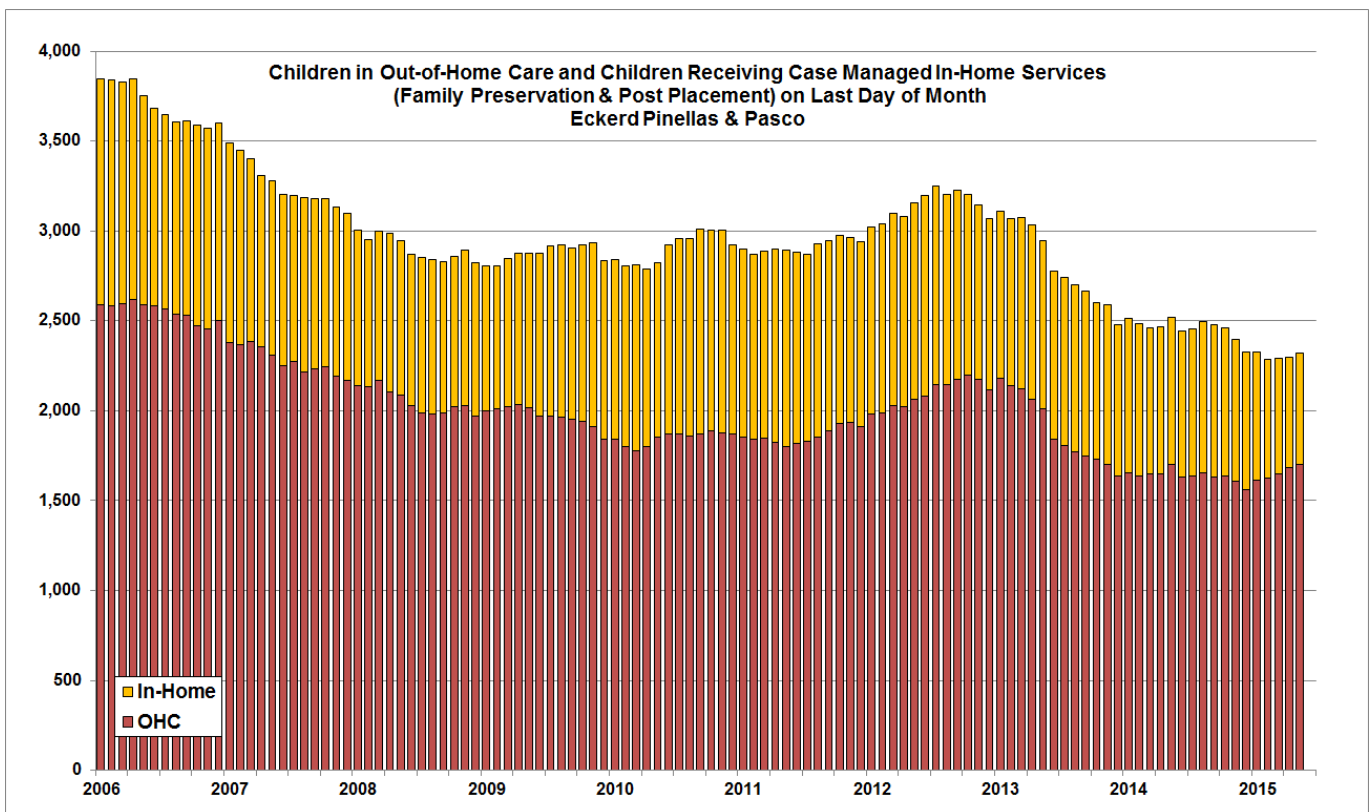
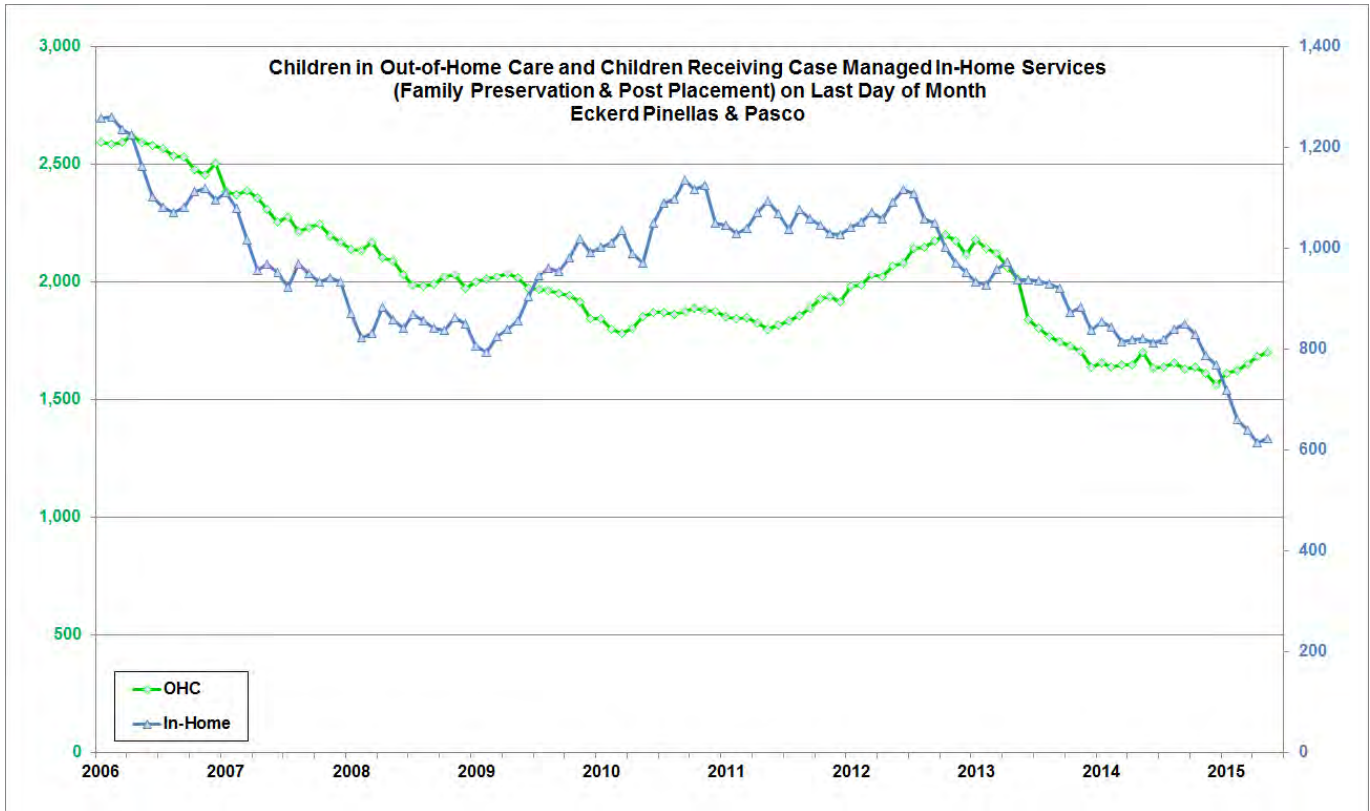


Removal Rate vs Discharge Rate



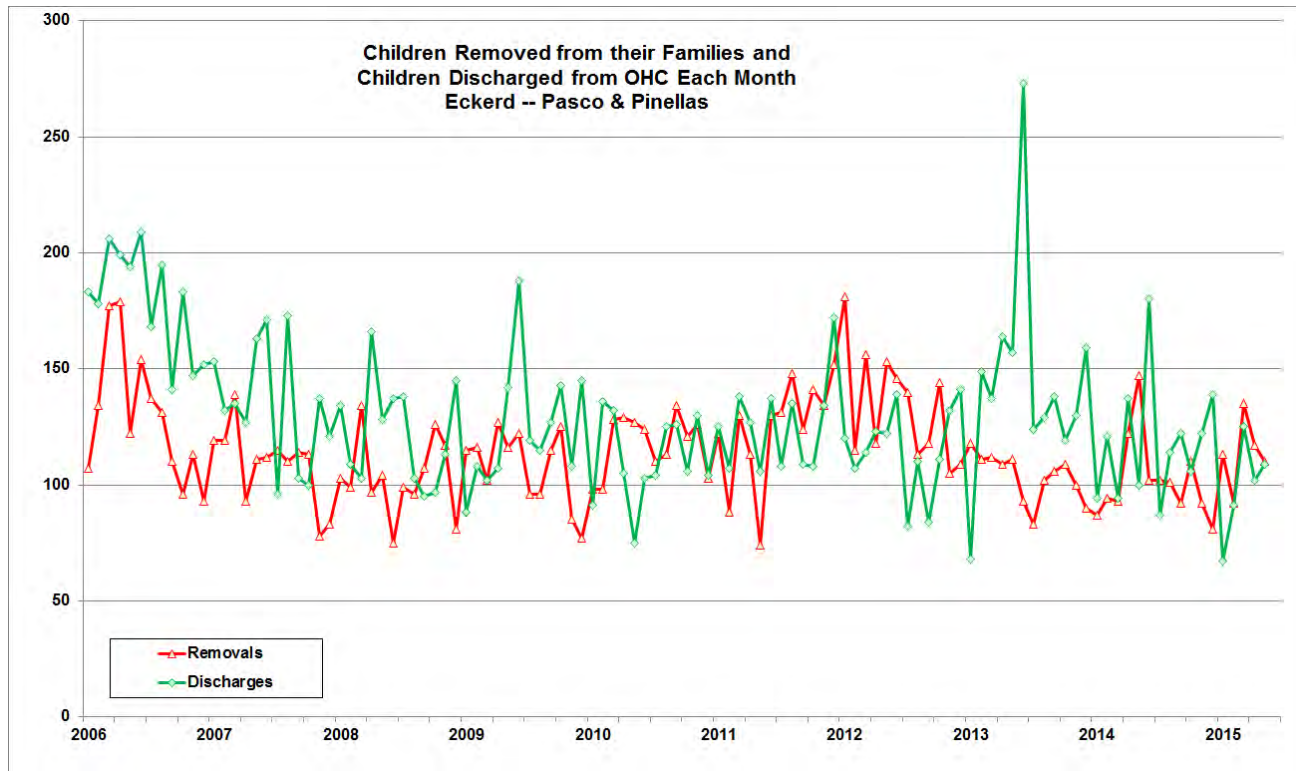
Eckerd Pinellas & Pasco, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

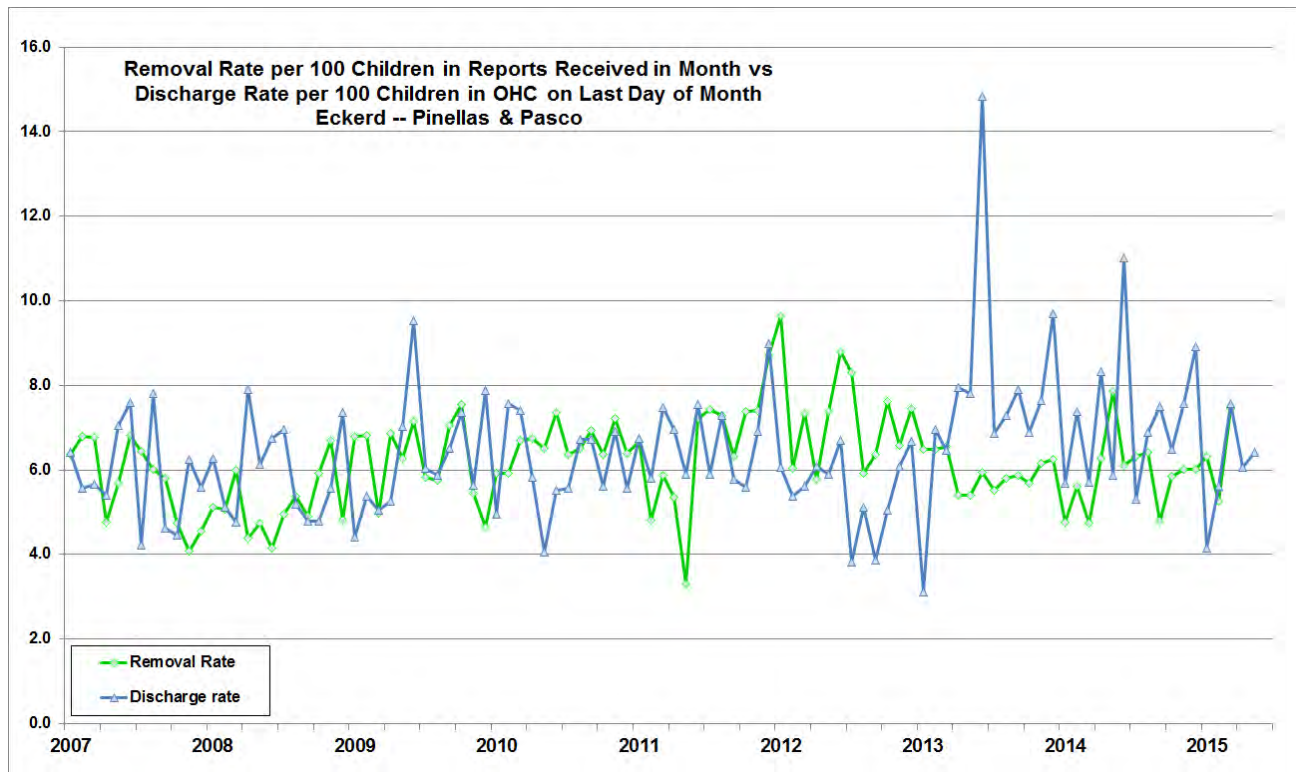


Eckerd Pinellas & Pasco, 2

Removals vs Discharges

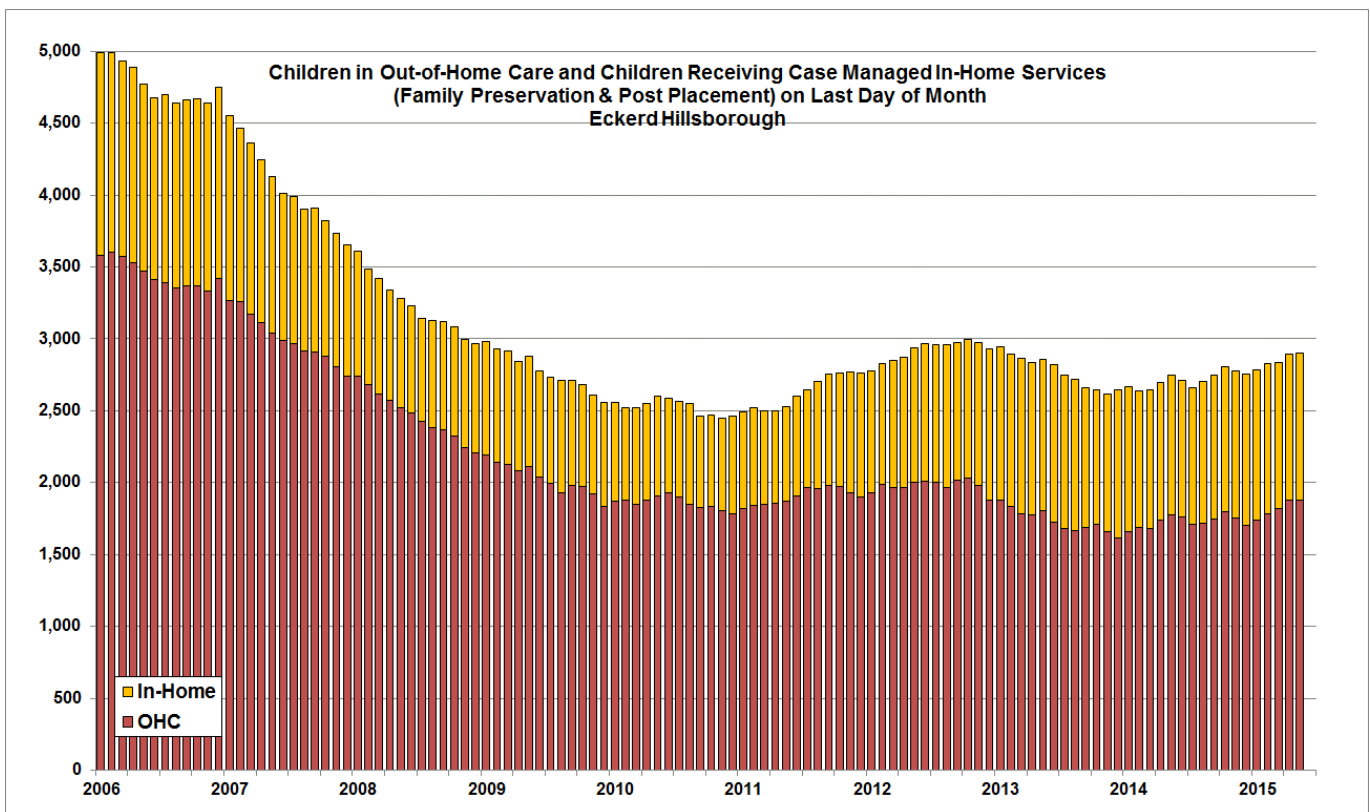
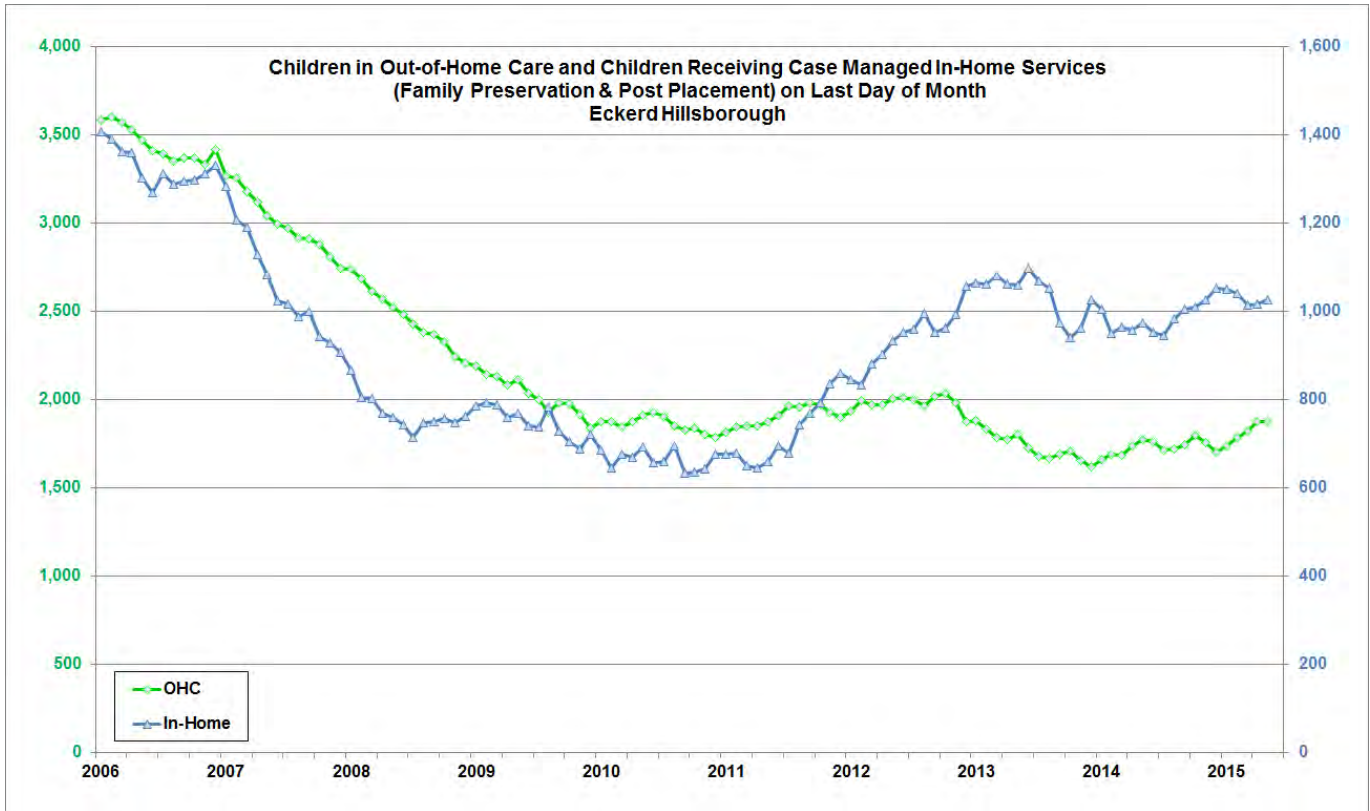


Removal Rate vs Discharge Rate



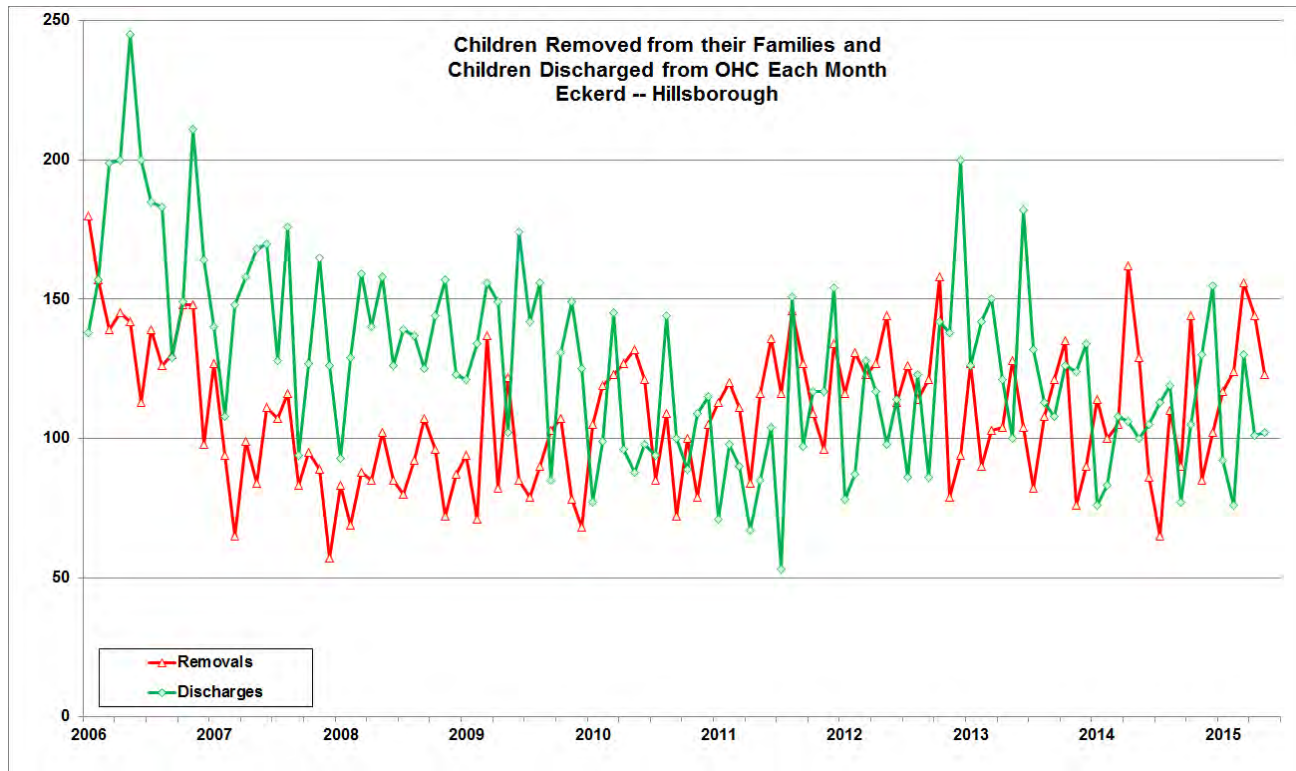
Eckerd Hillsborough, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

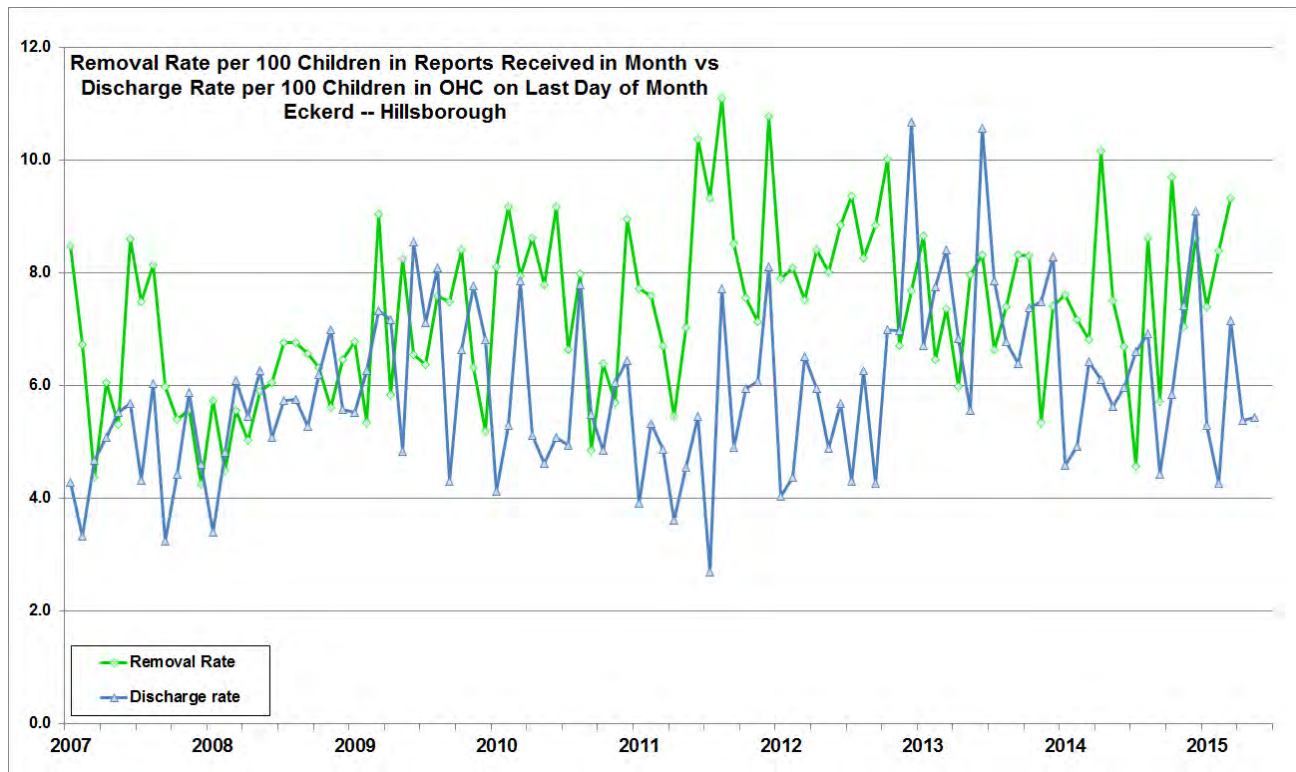


Eckerd Hillsborough, 2

Removals vs Discharges

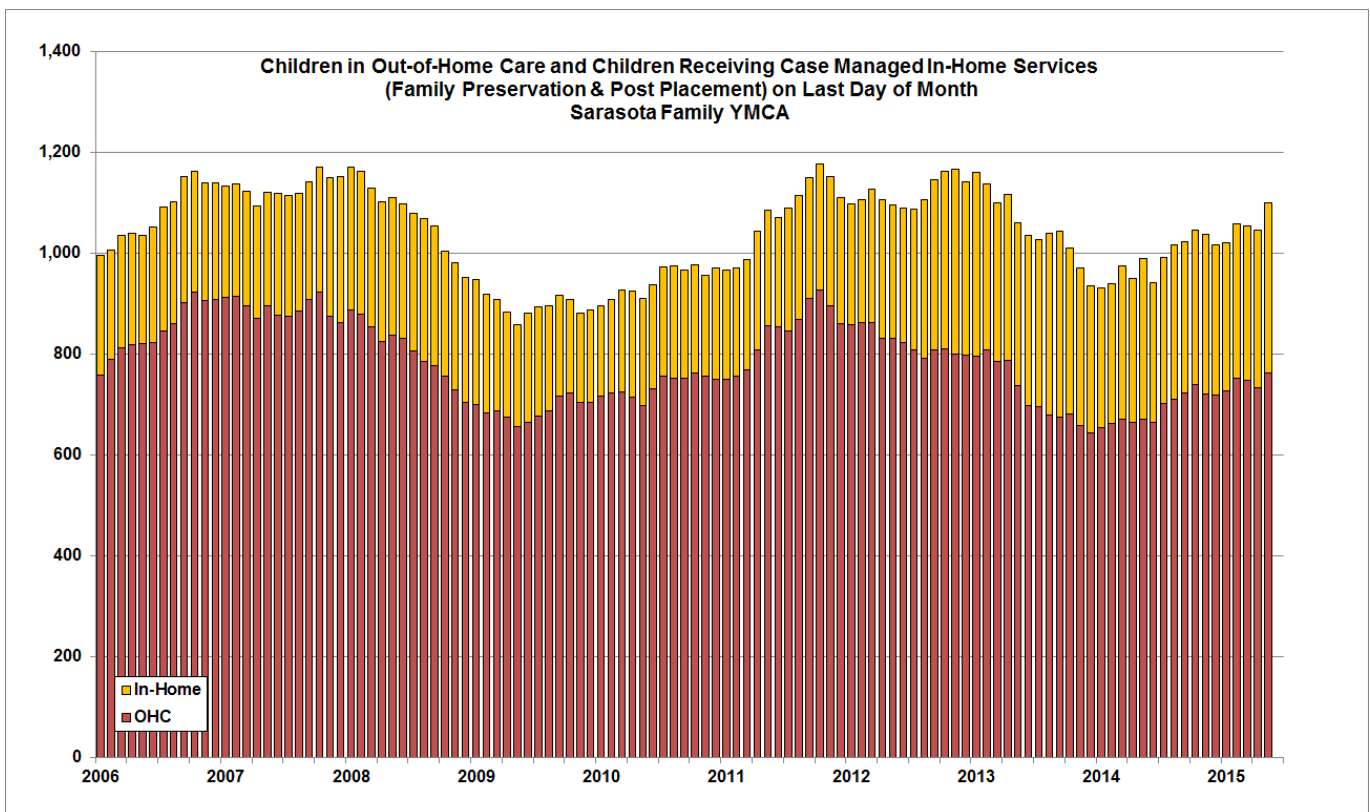
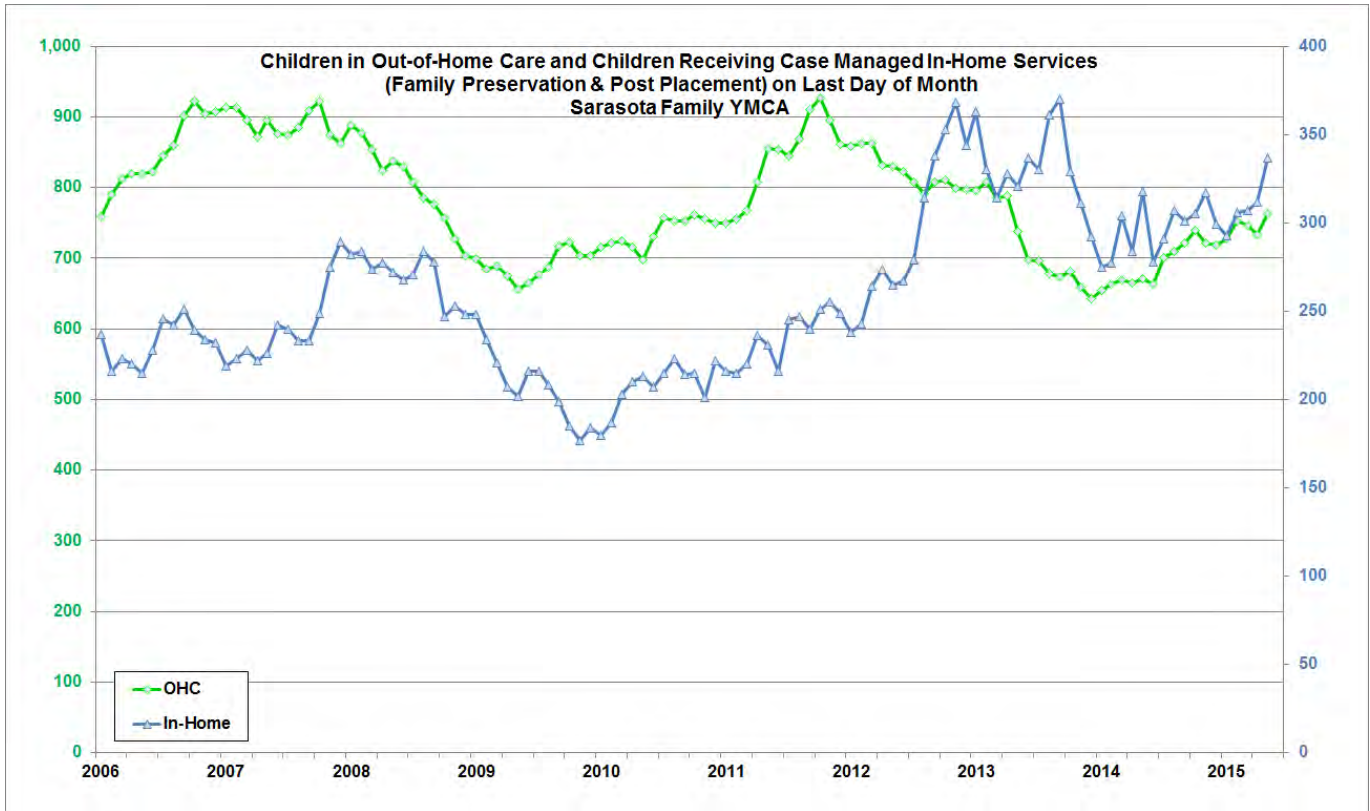


Removal Rate vs Discharge Rate



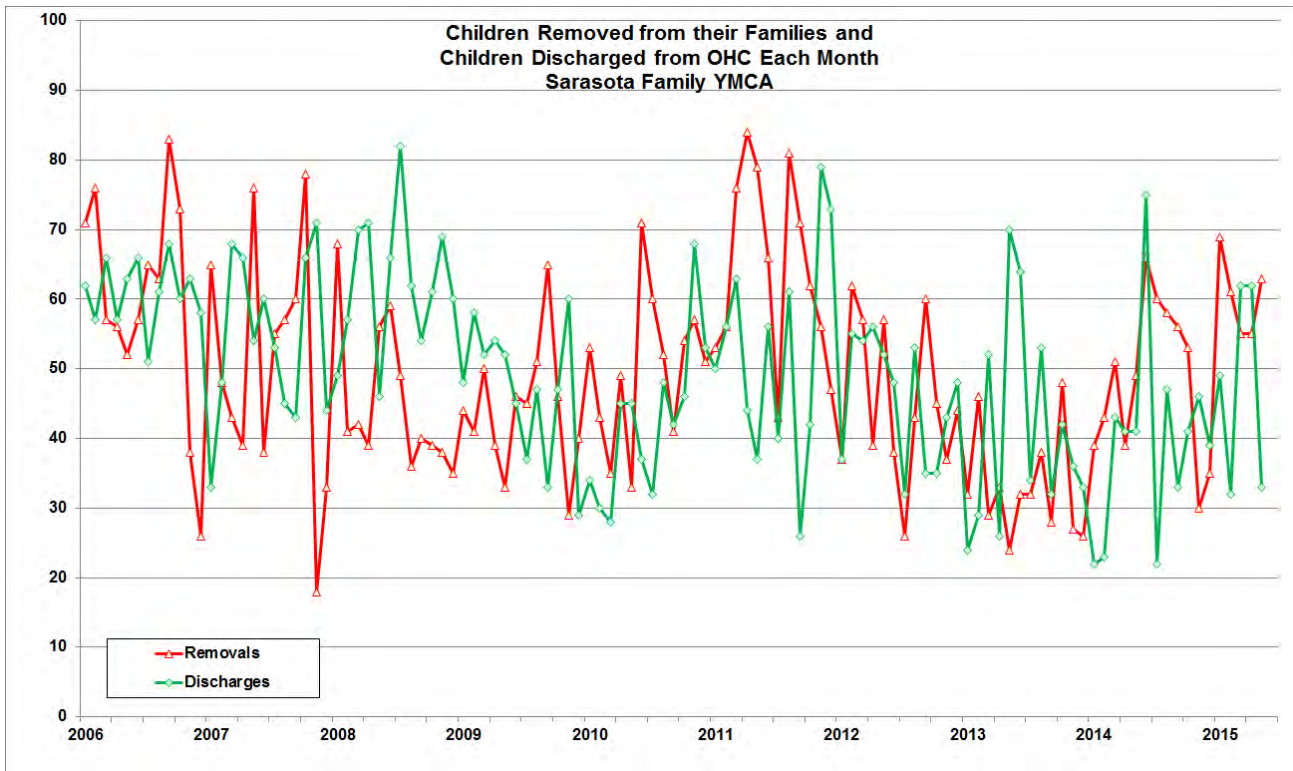
Sarasota Family YMCA, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

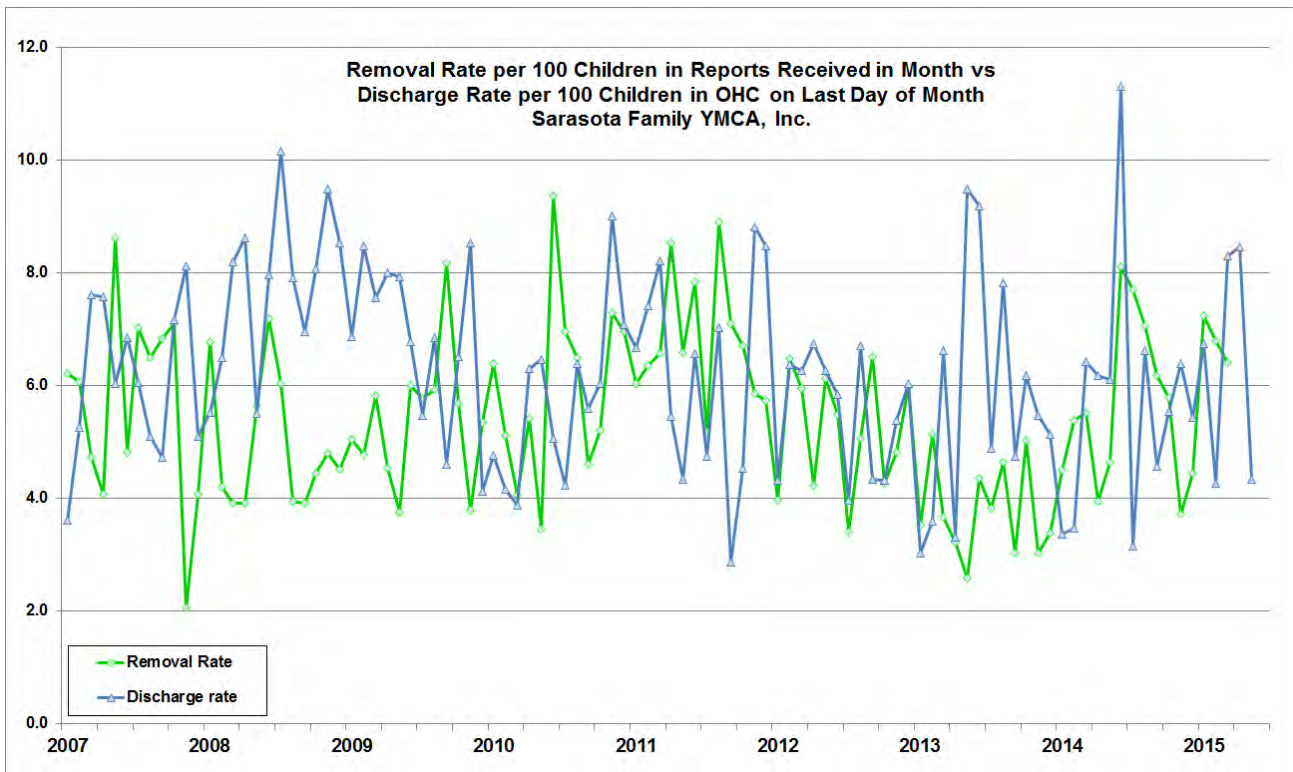


Sarasota Family YMCA, 2

Removals vs Discharges

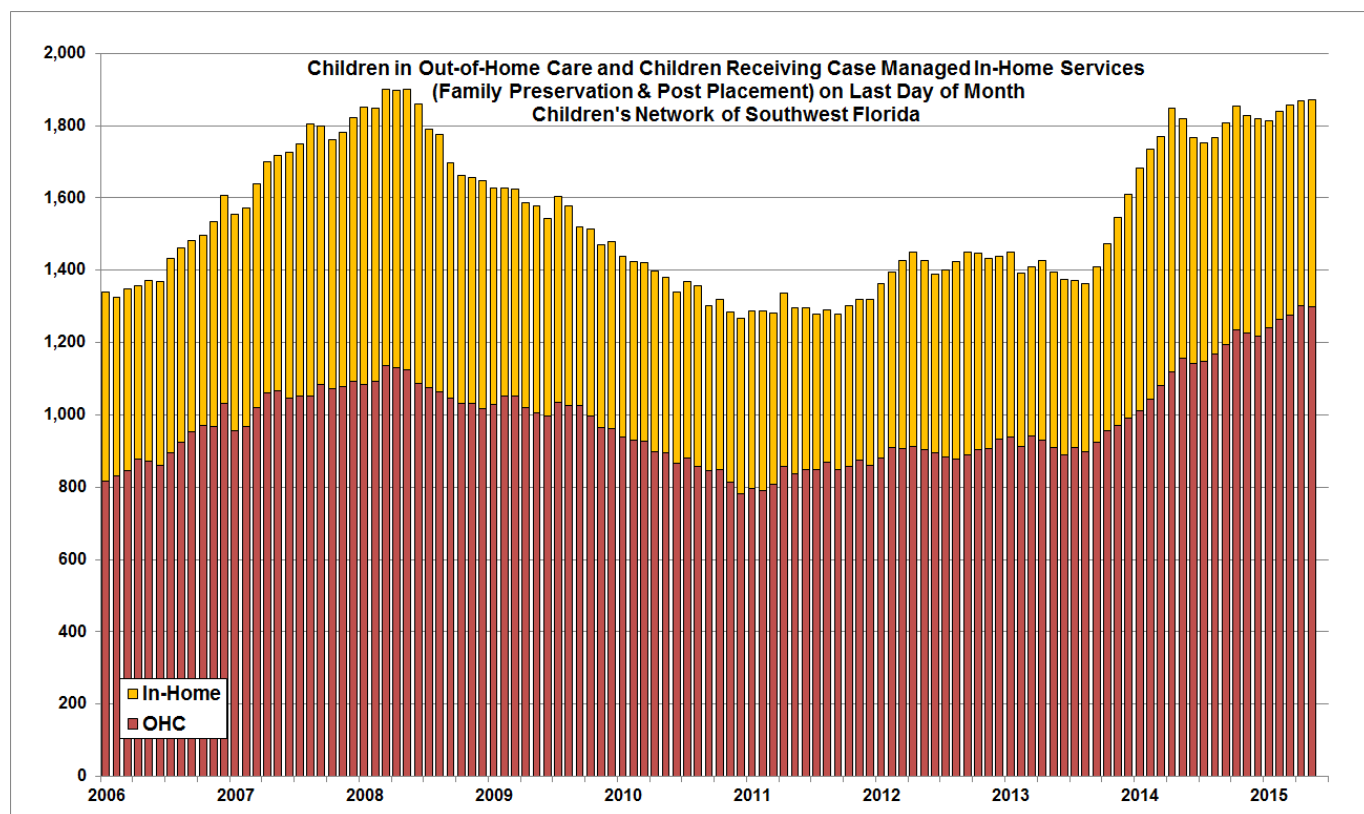
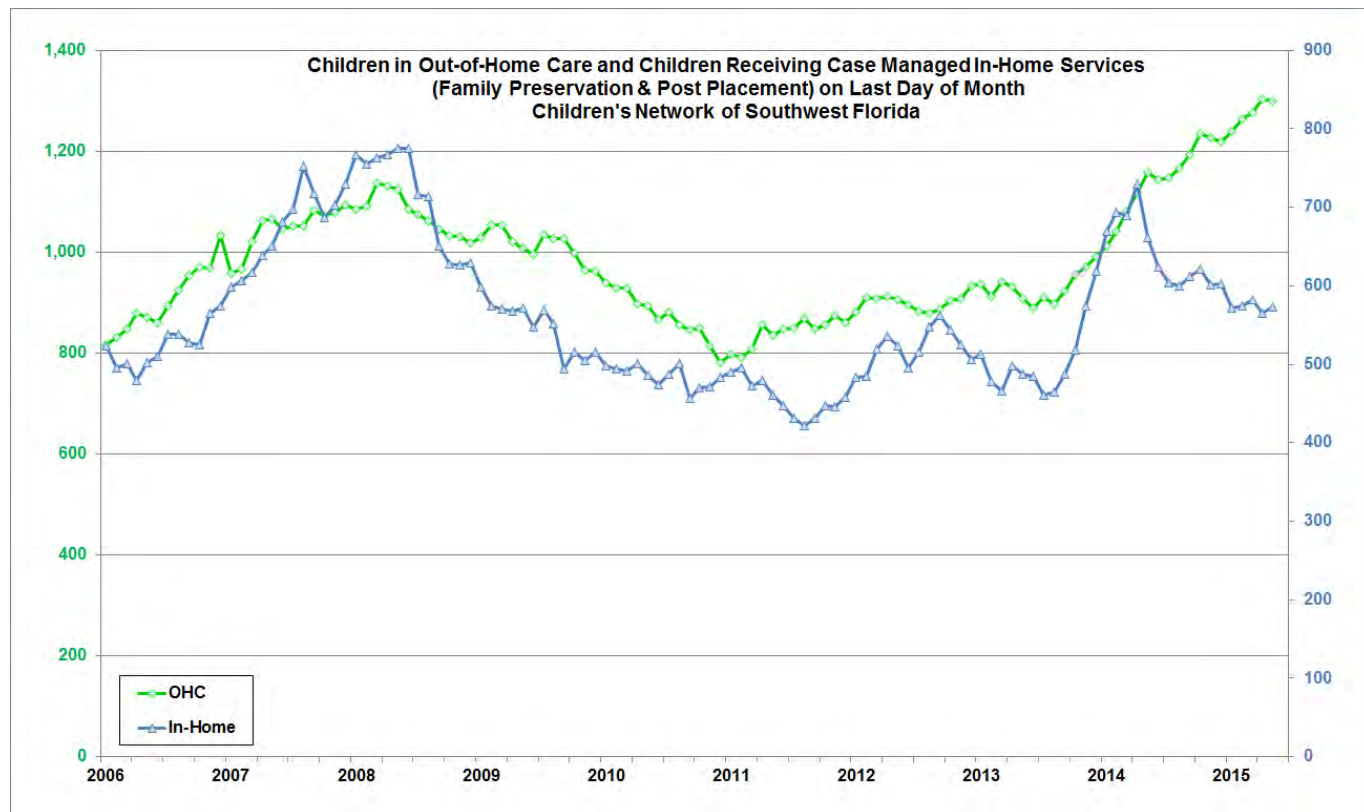


Removal Rate vs Discharge Rate



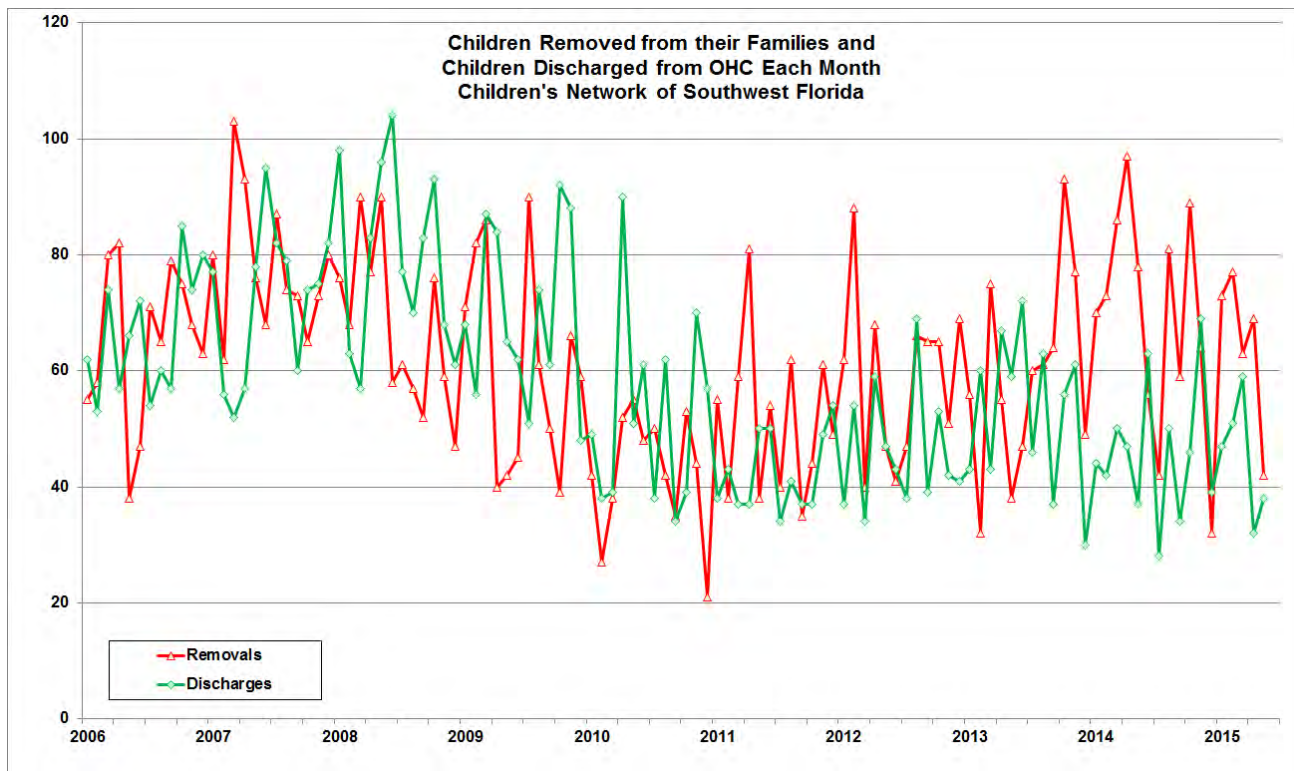
Children's Network of SW Florida, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

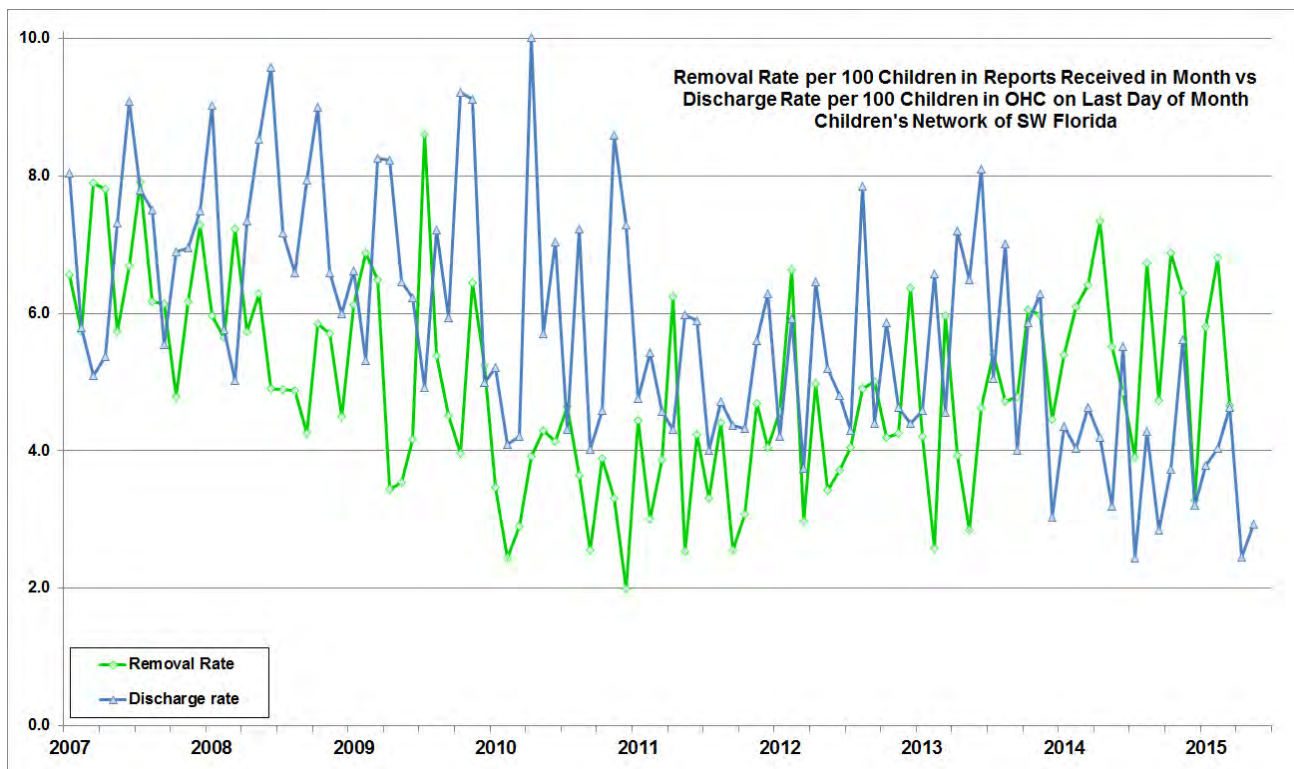


Children's Network of SW Florida, 2

Removals vs Discharges

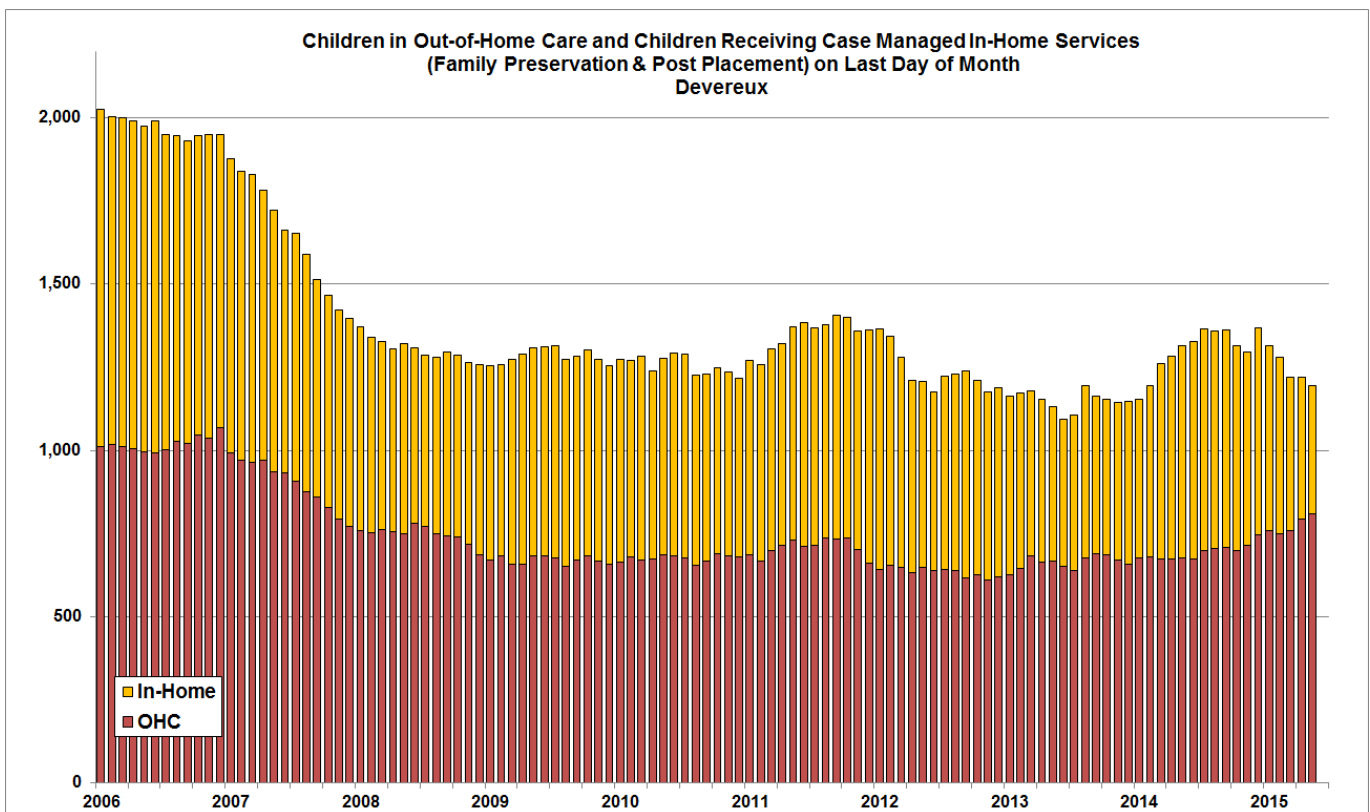
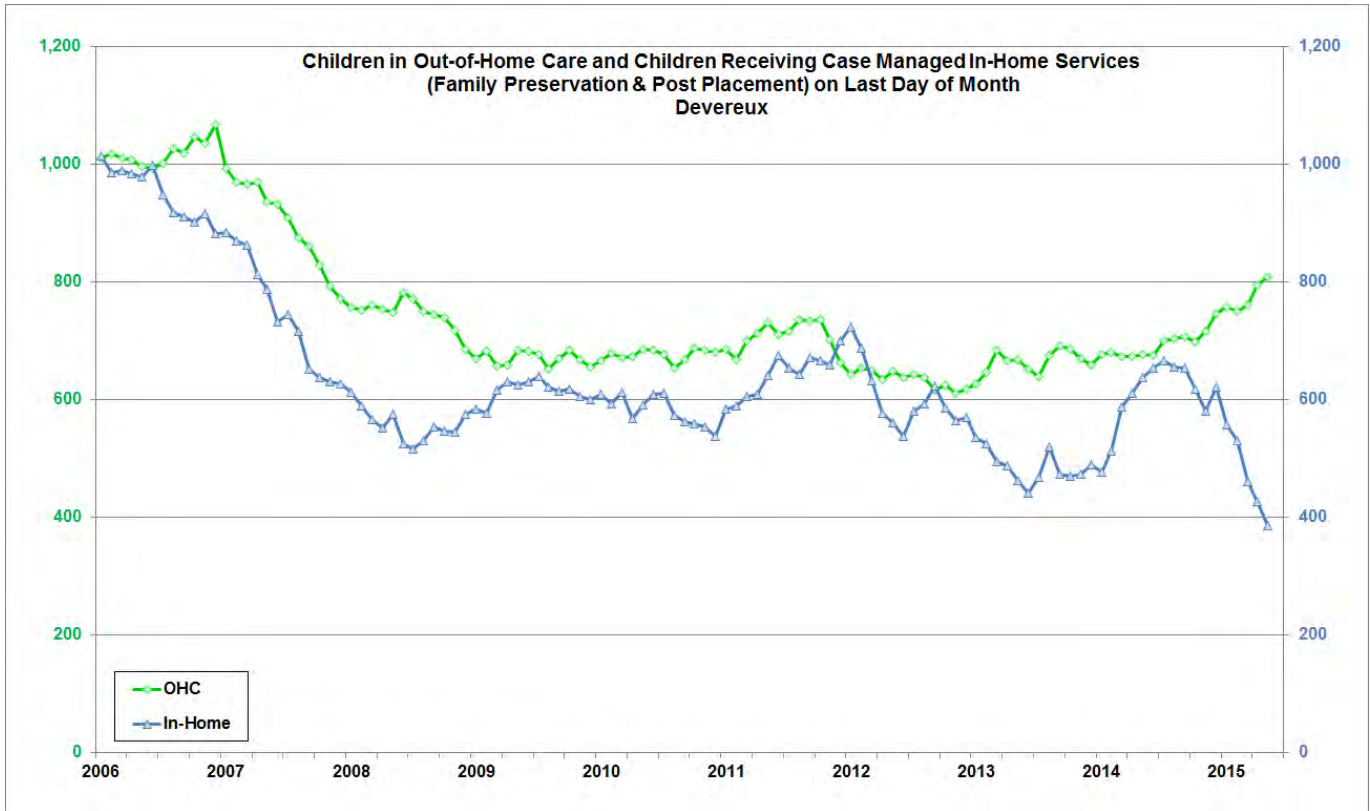


Removal Rate vs Discharge Rate



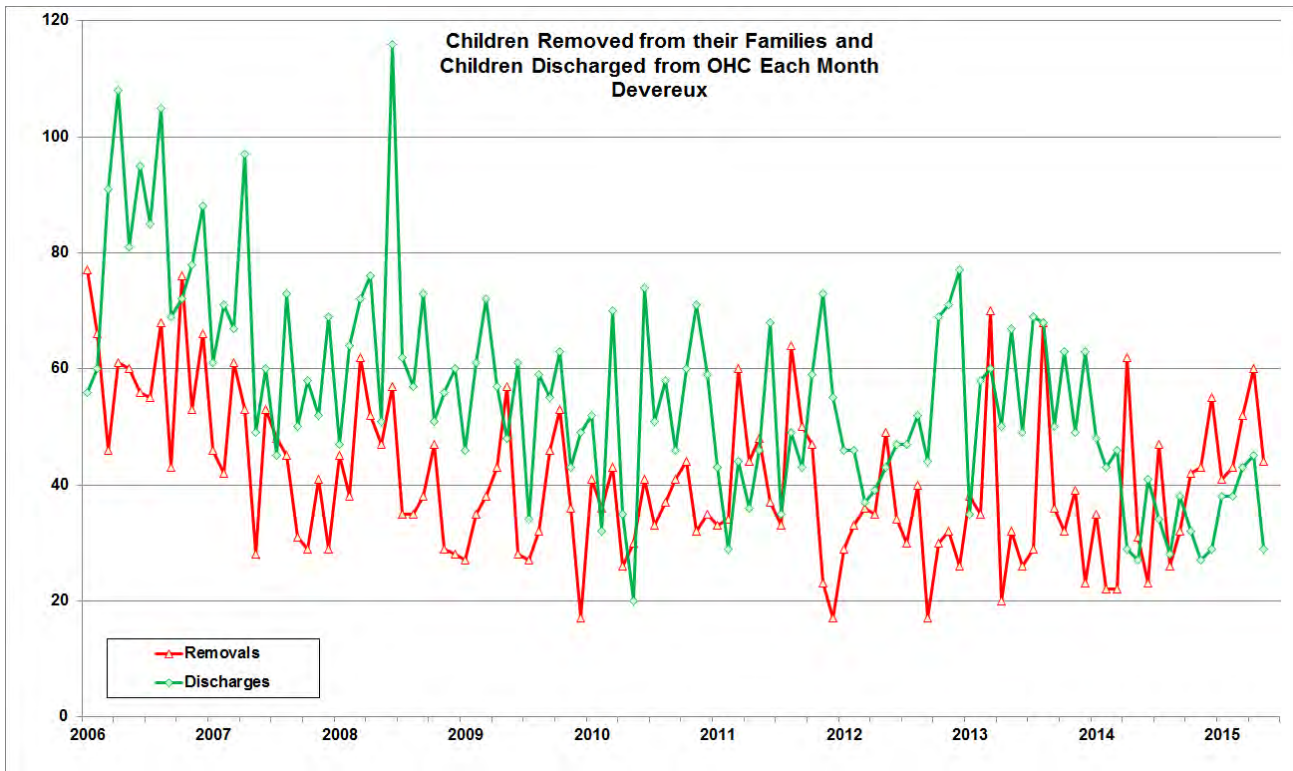
Devereux CBC, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

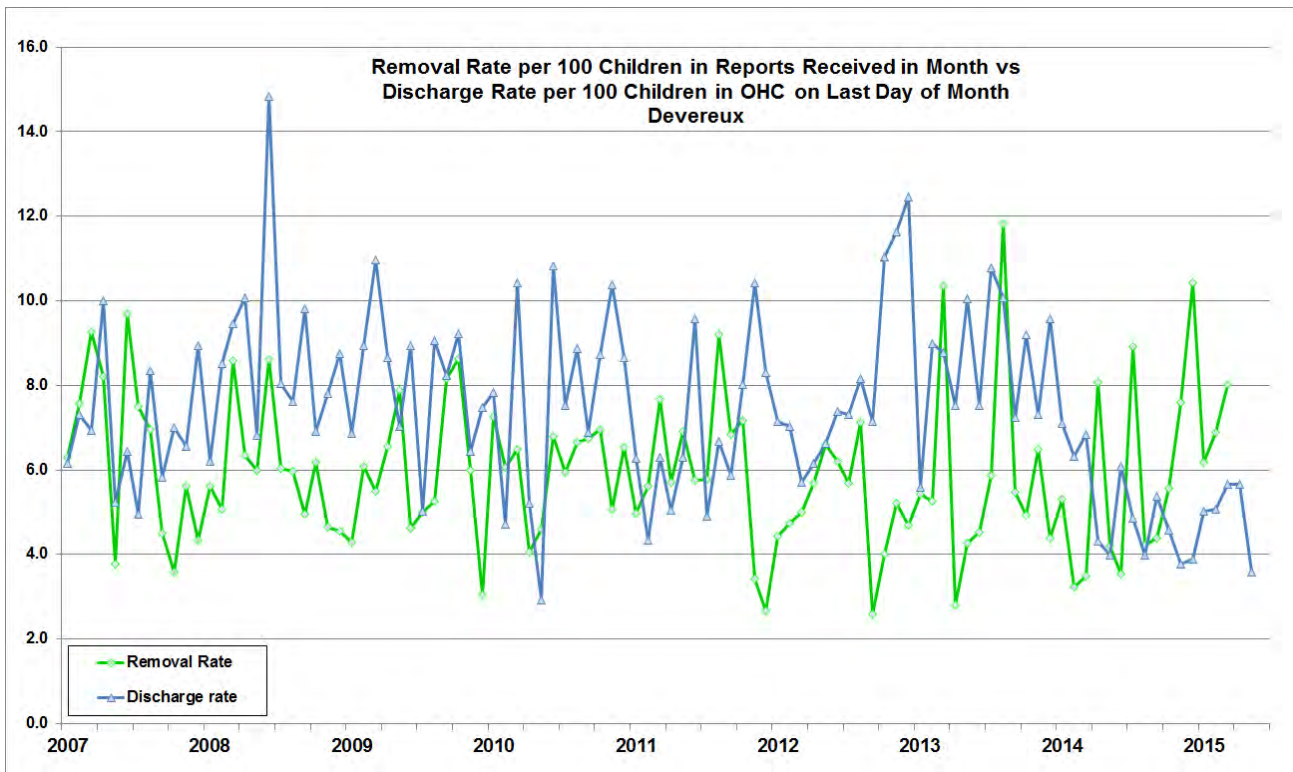


Devereux CBC, 2

Removals vs Discharges

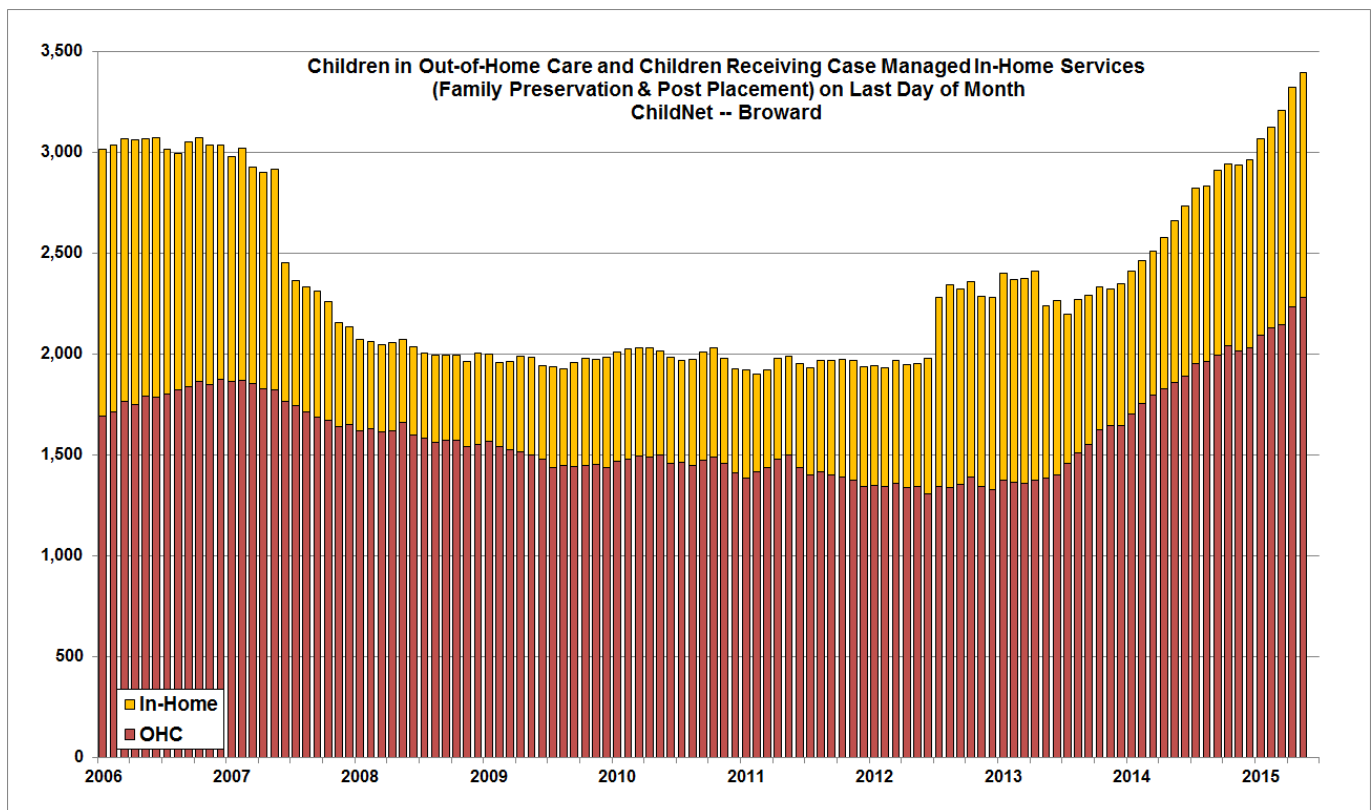
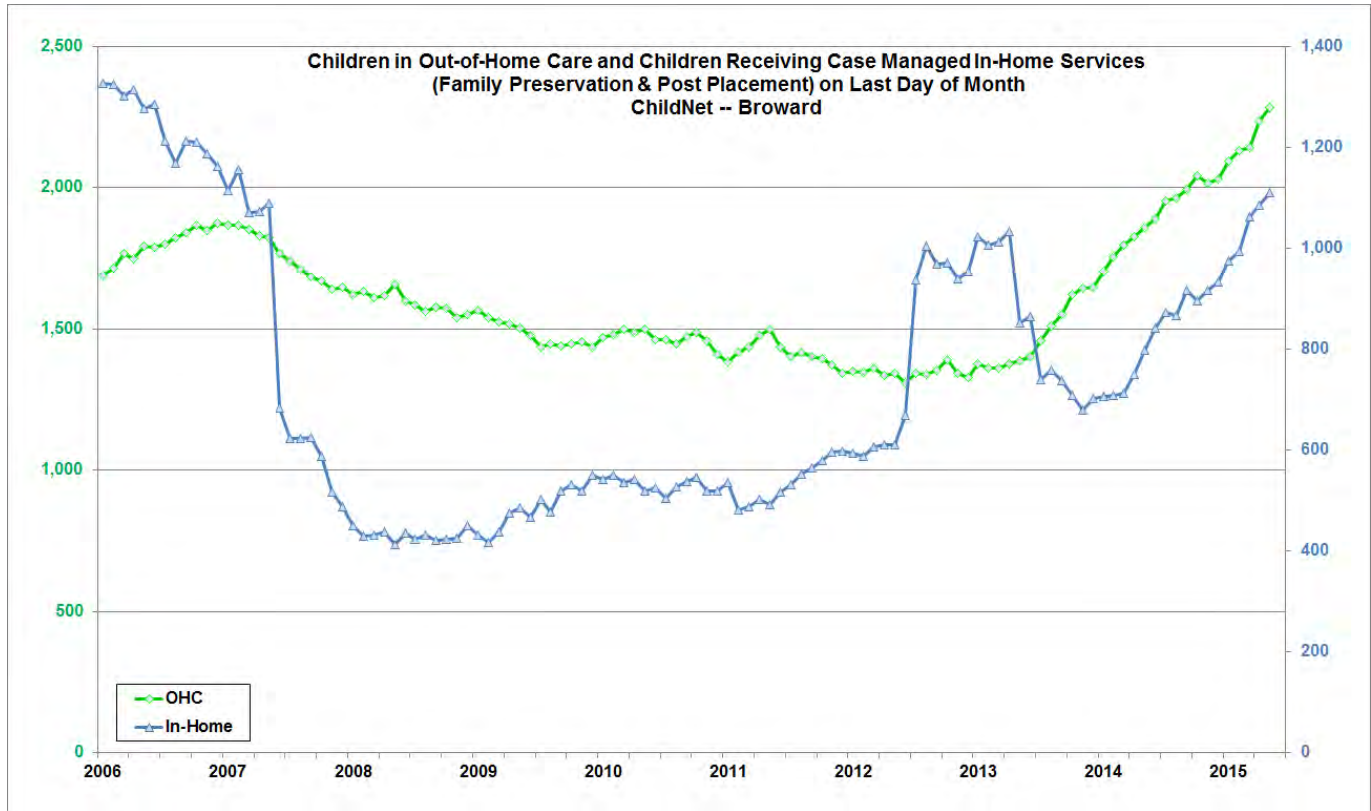


Removal Rate vs Discharge Rate



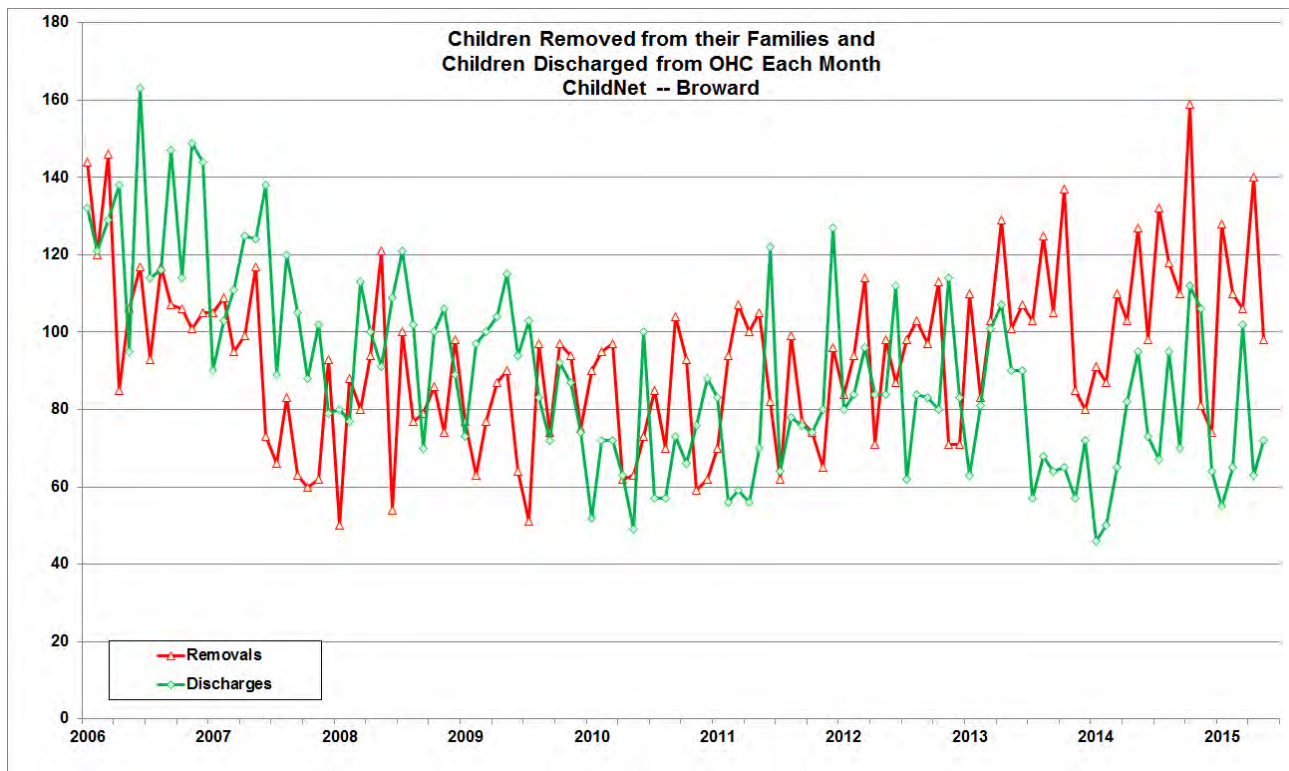
ChildNet – Broward, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

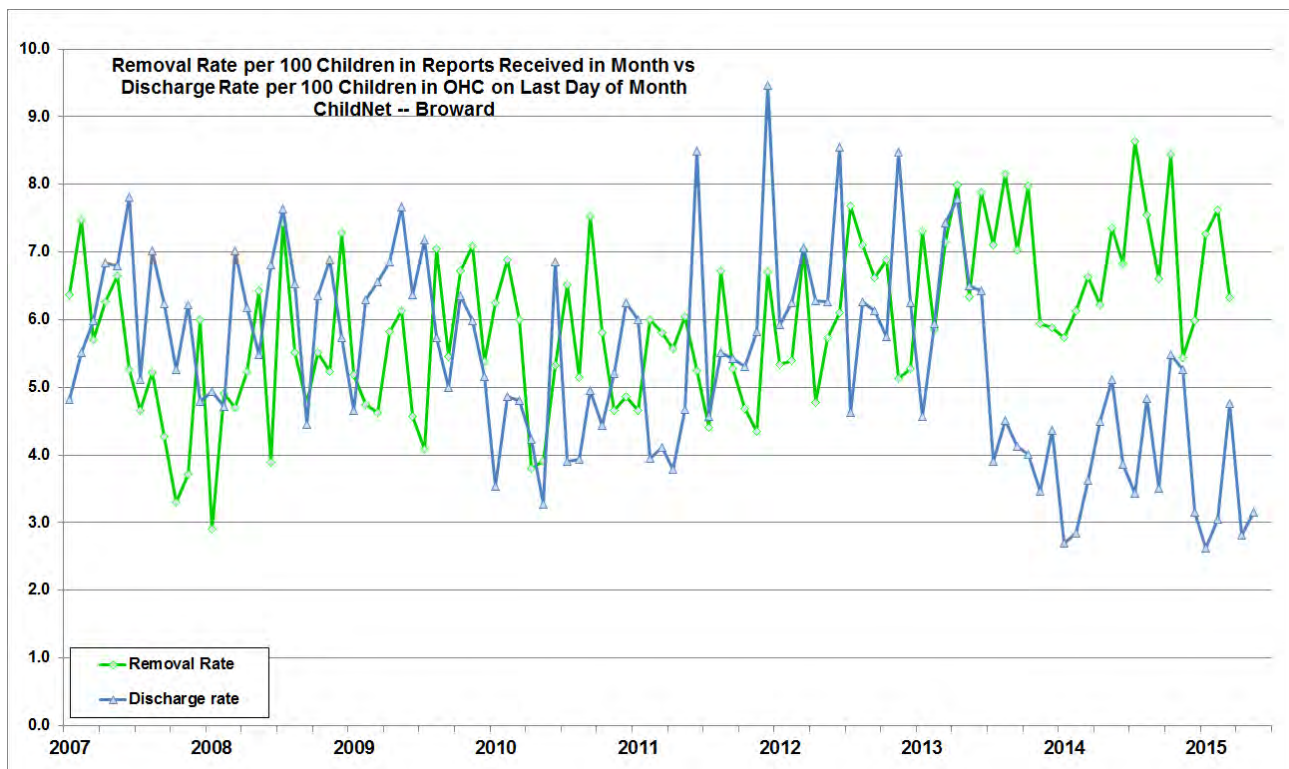


ChildNet – Broward, 2

Removals vs Discharges

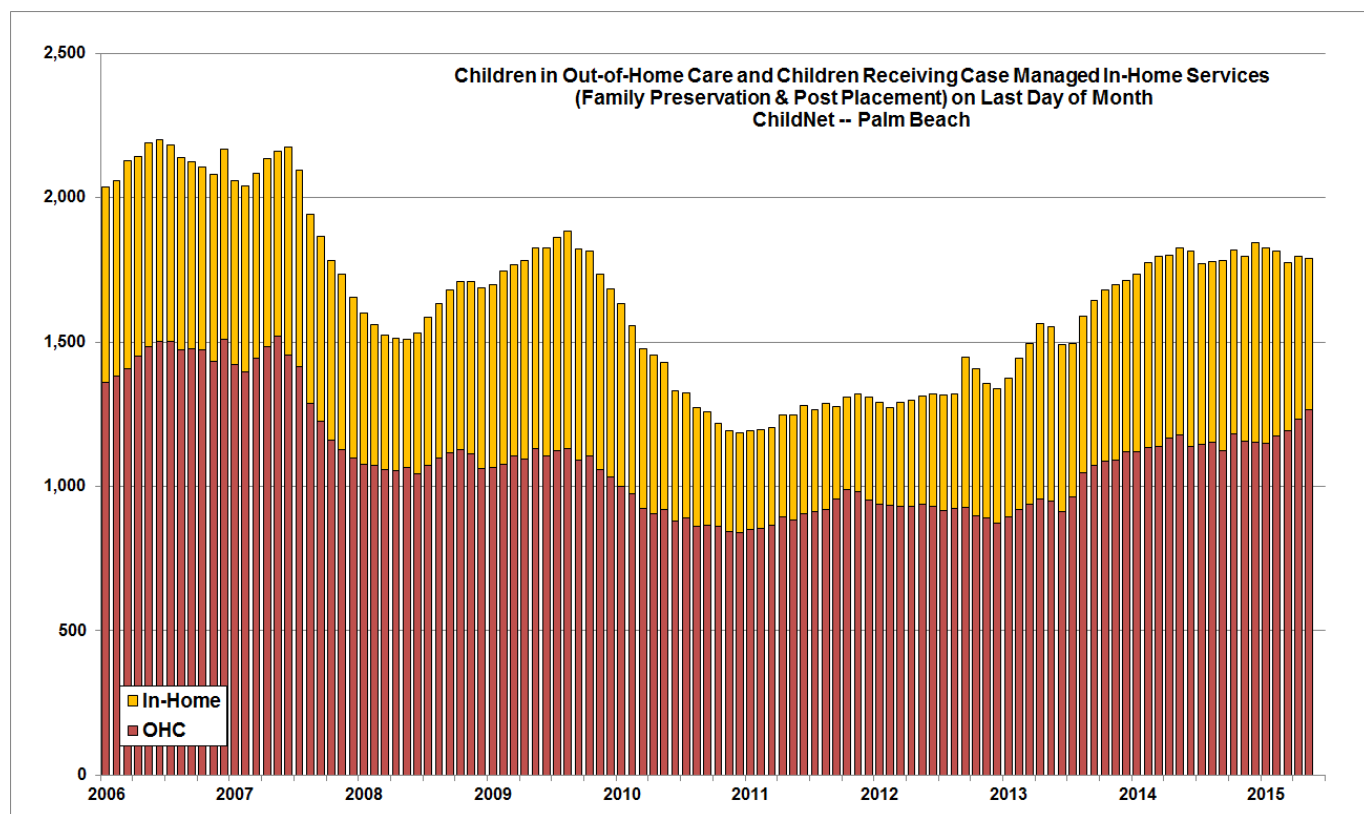
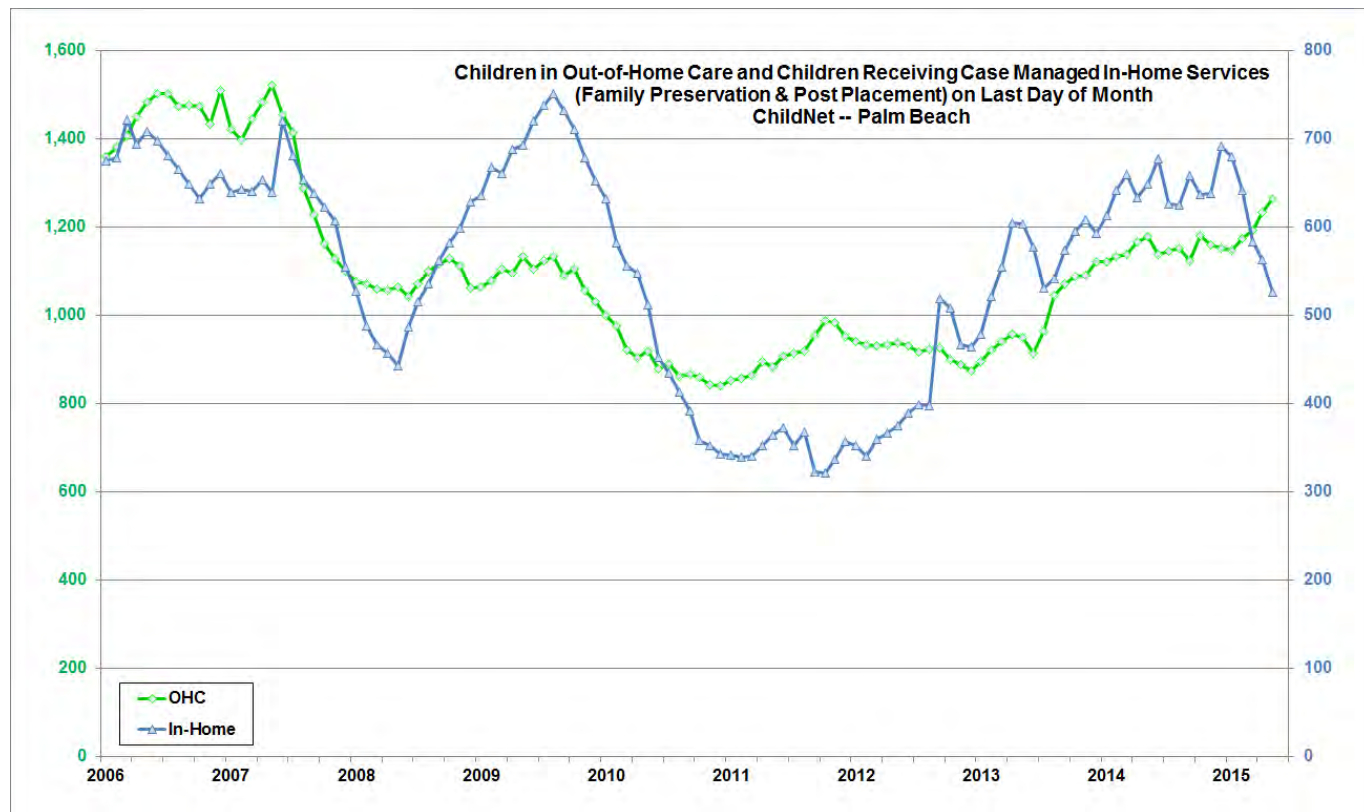


Removal Rate vs Discharge Rate



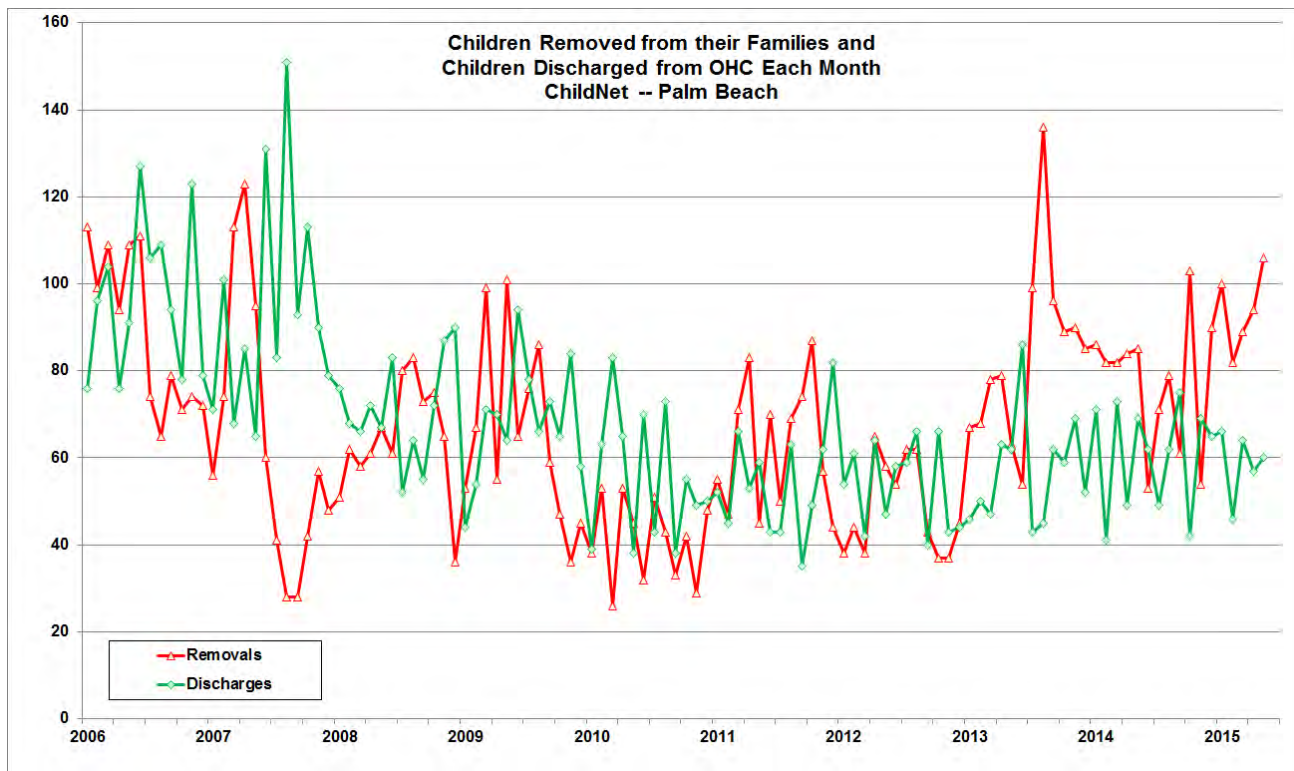
ChildNet -- Palm Beach, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

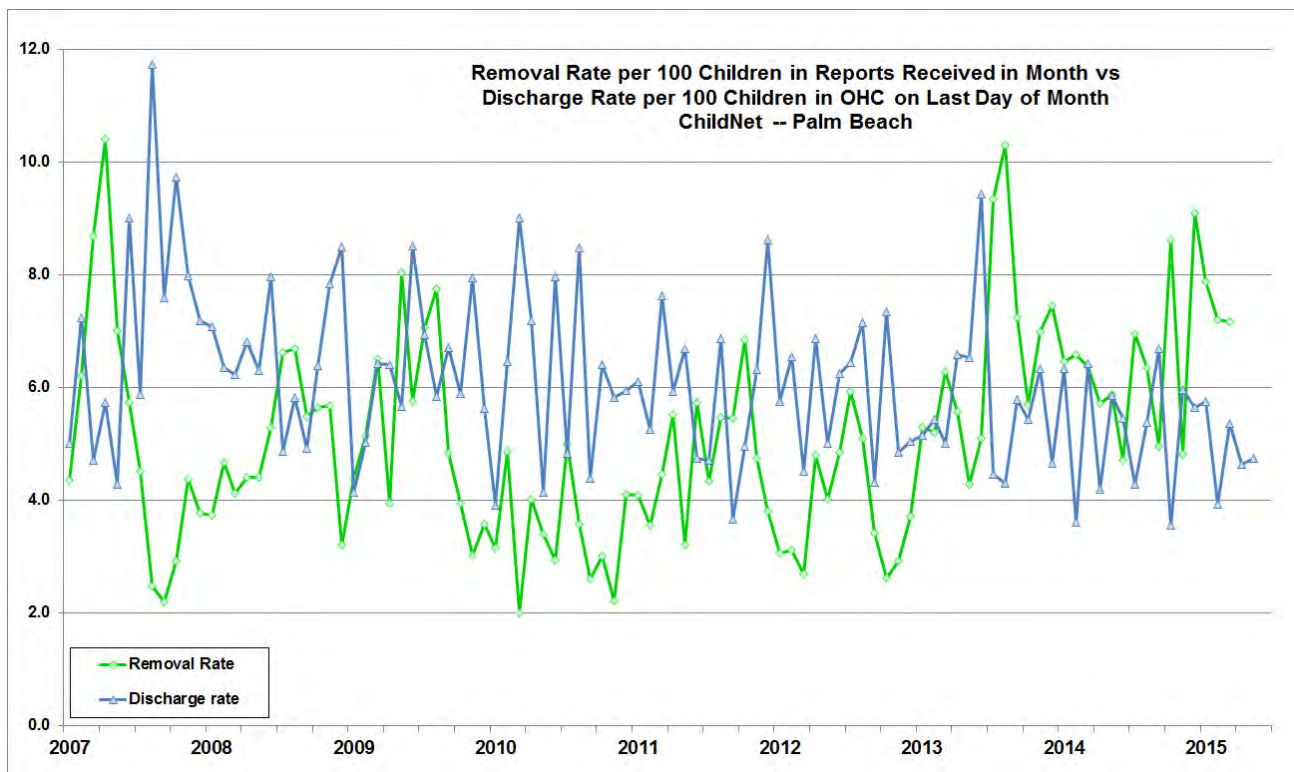


ChildNet -- Palm Beach, 2

Removals vs Discharges

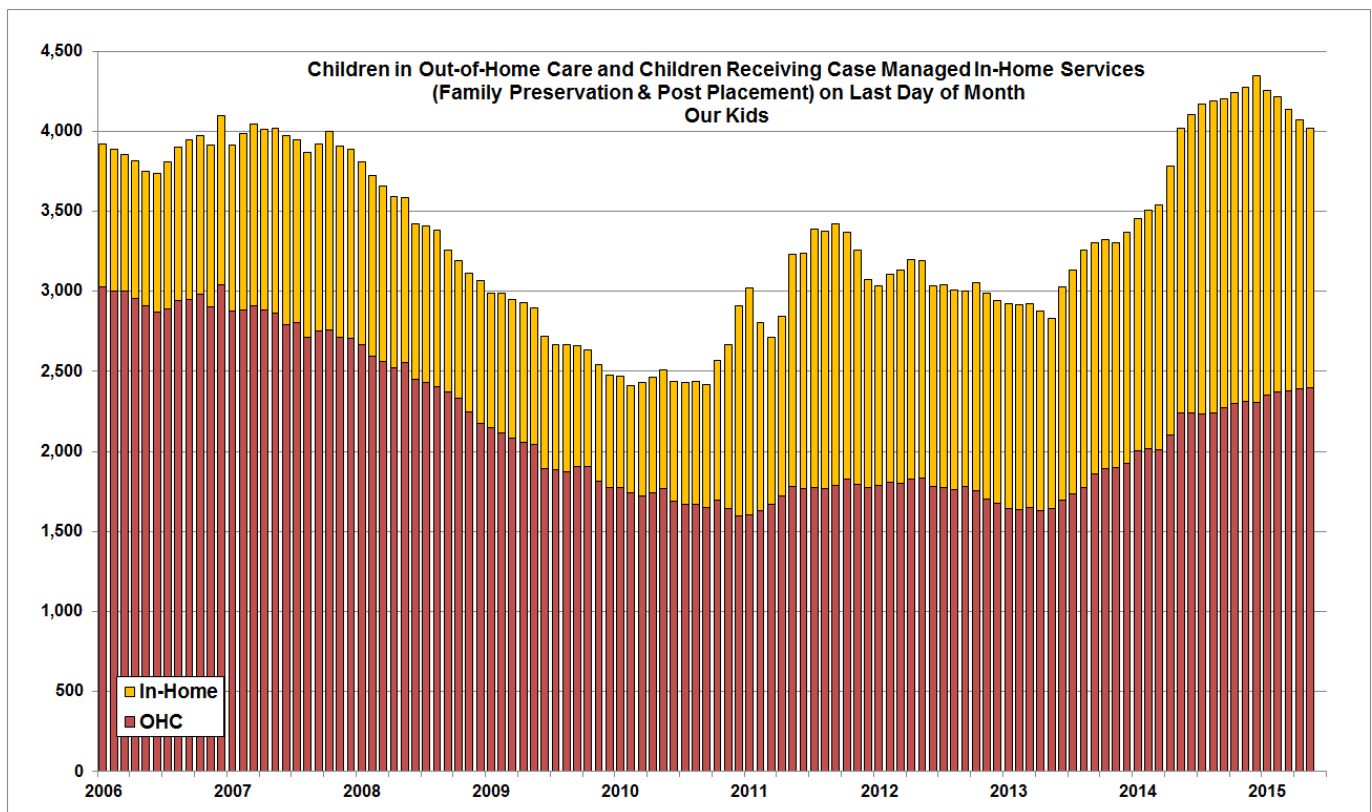
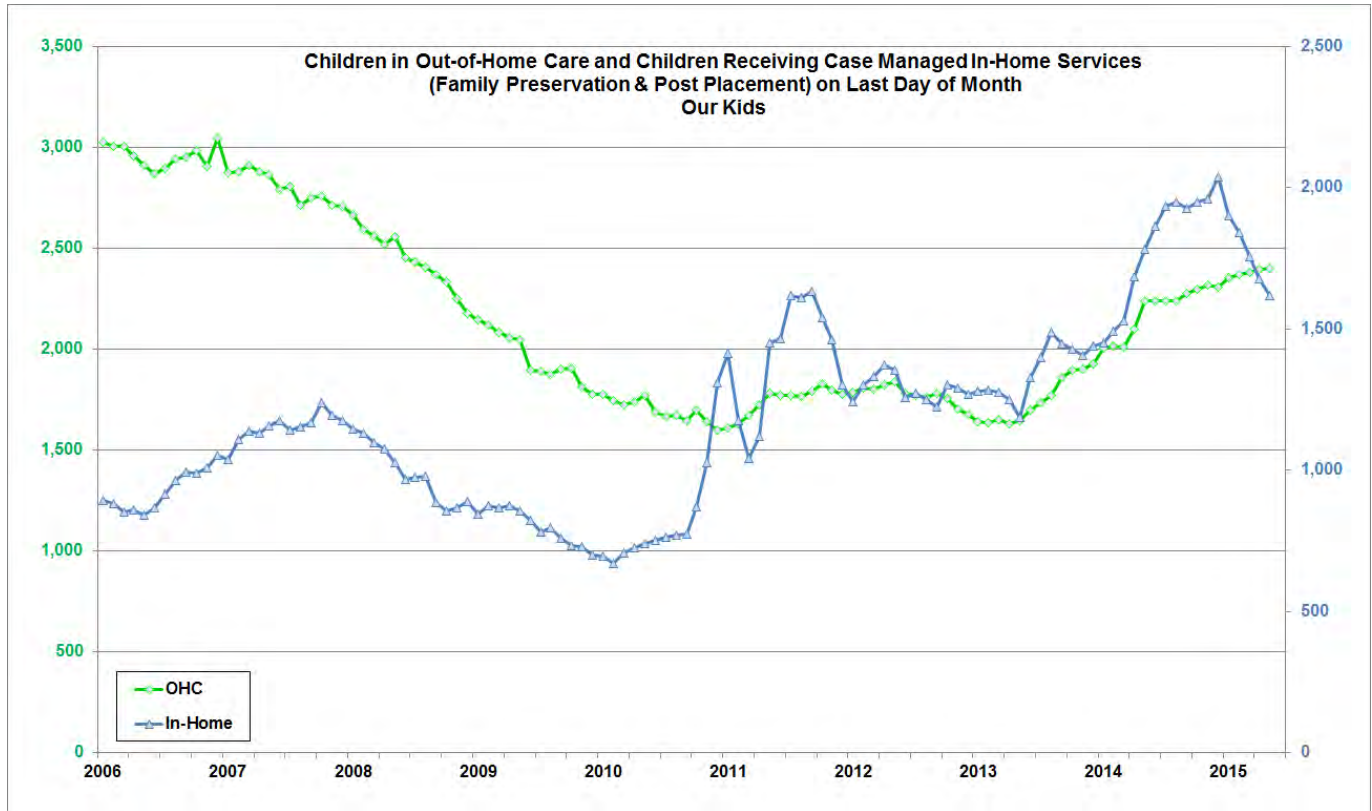


Removal Rate vs Discharge Rate



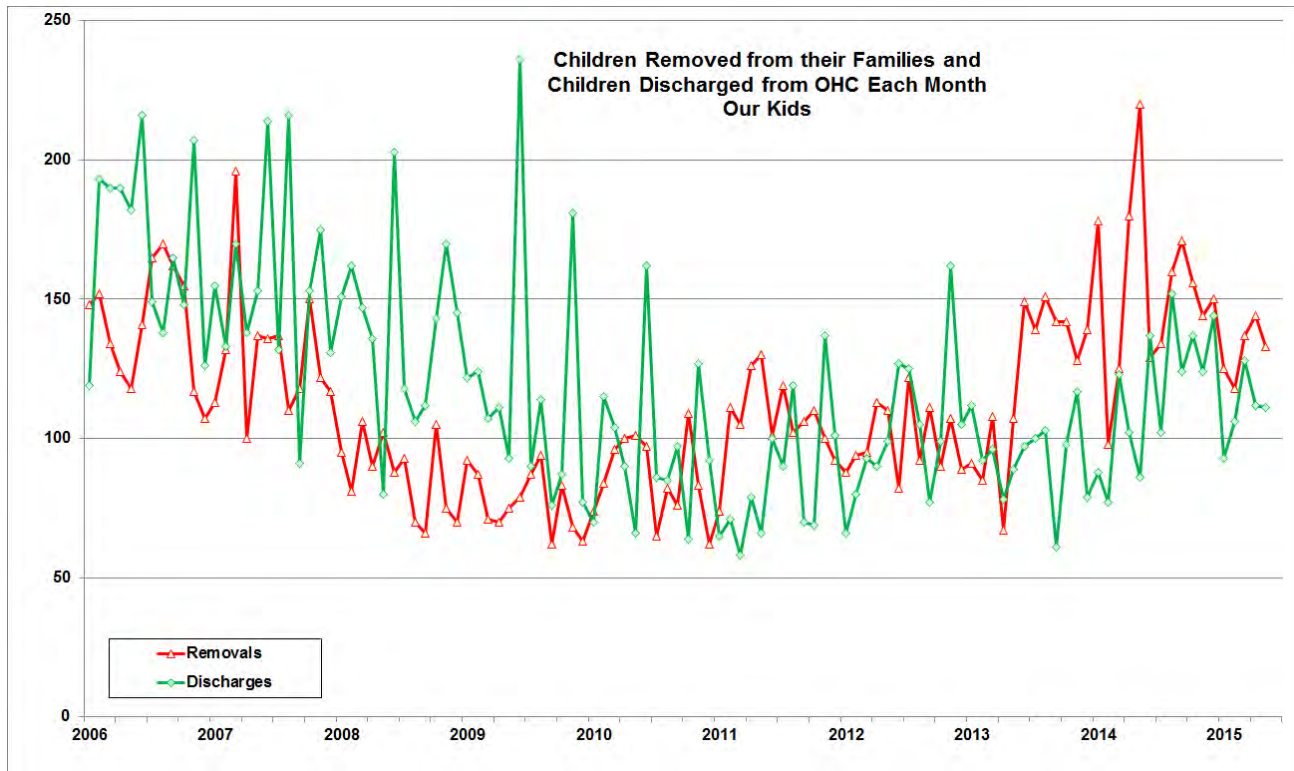
Our Kids of Miami-Dade/Monroe, 1

Out-of-Home Care vs In-Home Services (Family Preservation and Post-Placement Supervision)

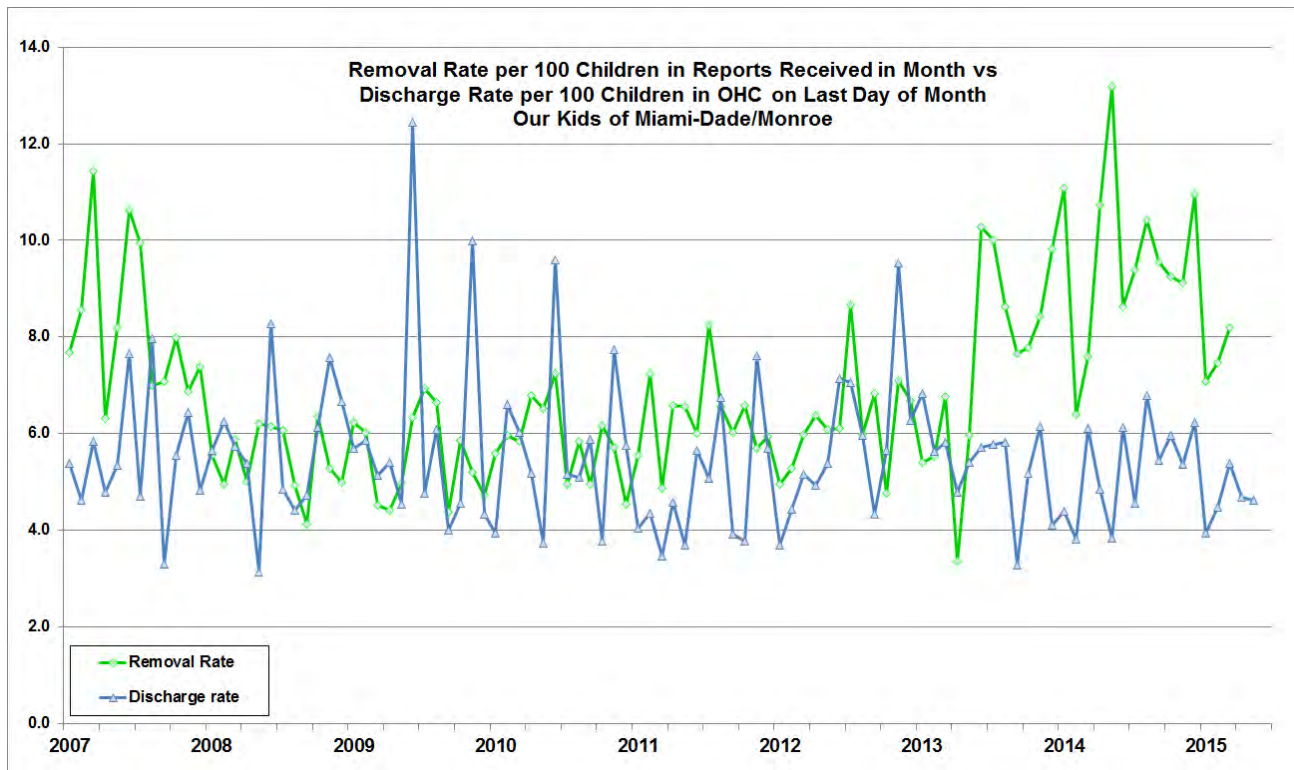


Our Kids of Miami-Dade/Monroe, 2

Removals vs Discharges



Removal Rate vs Discharge Rate





Appendix 4. Out-of-Home Care

Florida Proposed Study of Out-of-Home Care

Florida Proposed Study of Child Placement Trends

Statement of Need

In order to monitor the performance of the system of care during the implementation of the Safety Methodology, the Florida Department of Children and Families (DCF) has reviewed statewide and circuit trends related to active investigations and child placements. Trends in investigations were examined as part of a Child Protection Investigator (CPI) workload analysis. Regarding investigations (based on the DCF report, *Recent Increase in Number of Active Child Protective Investigations*, issued in June, 2015), the following was learned:

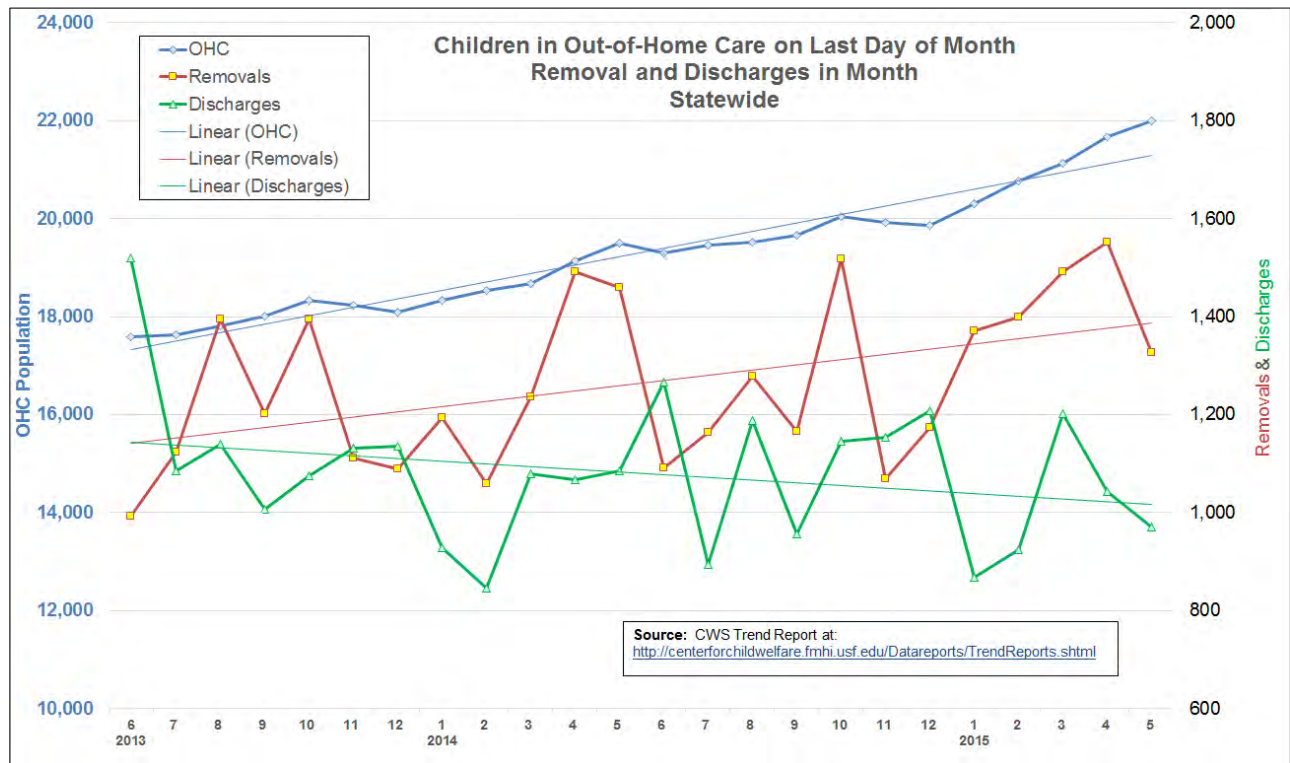
1. The average number of active investigations per CPI has increased since January, 2015.
2. Investigations not completed within 60 days have increased.
3. There has been a decline in the number of alleged victims seen within 24 hours.
4. There is variation across the circuits.

Preliminary analysis of the trends in investigations was conducted in order to identify “root causes” of the observed changes. Some of the factors explored were increases in incoming workload (new investigations), caseworker turnover and vacancies, caseworker inexperience, variation in the implementation of the Safety Methodology, allocation of CPIs by region and circuit that might not be meeting new caseload increases, and workload management from assignment through completion.

Child placement trends were presented in a report entitled, *Community Based Care Lead Agency Trends and Comparisons: Caseloads and Use of Placement Resources* (dated June 26, 2015). The following observations were developed by DCF based on this set of trend data:

1. Sharp increase in removals and out-of-home care (OHC) population over last 24 months
2. The OHC population is now back to the 2008 level
3. The OHC population increase is driven by both an increase in removal rates and a decrease in discharge rates
4. Removal rates and discharge rates are variable across the state, thus geographic targeting of strategies is essential
5. Circuits and lead agencies vary in terms of how often they protect children in their own homes vs. using out-of-home care, which can be more expensive
6. Circuits and lead agencies vary in terms of how often they place children in kinship care versus placing them in a licensed foster care, which is often more expensive.
7. Circuits and lead agencies in terms of how often they place children in foster family homes vs. more expensive group care

The graph below displays three of the trends of interest: 1) out-of-home care, 2) removals and 3) discharges.



Due to the increases in out-of-home care observed statewide since June 2013 and the variations observed across circuits, DCF is interested in expanding this area of inquiry. DCF would like to continue the review and analysis of data available in FSFN and collect additional information from CPIs and other child welfare professionals in the system of care. A more comprehensive approach that includes quantitative and qualitative research methods will provide an opportunity to confirm preliminary reviews and analyses of trend data and gain valuable insights from child welfare practitioners. The development of recommendations based on the information collected and analyzed will be an additional component that will strengthen future actions throughout the system of care to meet the needs of the families served in the child welfare system.

Project Coordination

Casey Family Programs will contract with the Ounce of Prevention Fund of Florida to conduct research activities outlined in this proposal to support these efforts by DCF. The project will be guided by an advisory committee that will be co-chaired by Ginger Griffith of DCF and Dr. Mary Kay Falconer, Senior Evaluator with the Ounce of Prevention Fund with representatives from the DCF Office of Child Welfare Performance and Quality Management team, Casey Family Programs, Community Based Care (CBC) organizations, the medical community, a juvenile court judge, an attorney and the director of the FSU Institute of Child Welfare and others. In addition, Research staff from Casey Family Programs will provide technical evaluation oversight and advice for the study; and Casey Data Advocacy will consult on the use of FSFN data by OUNCE for any special analyses.

Expected Outcomes

1. DCF will better understand the factors that have contributed to increases in out-of-home care, with a special focus on entries statewide and within smaller geographic areas of the state (regions and circuits). (Resources permitting, the project team will examine increases in the number of children in care due to delayed exits from foster care—those youth in care for 2 years or longer, a goal of adoption with parental right terminated.)
2. The research capacity of the DCF Office of Child Welfare Performance and Quality Management team will benefit from participation in this research project. Specifically, by working with the project team, the DCF Office will develop new strategies for exploring the data to address recent trends.
3. The ability of DCF to collaborate with child welfare system partners to develop and focus resources efficiently will be strengthened in light of the research findings.
4. The development of recommendations to safely address increases in the number of children in out-of-home care will guide next steps for improving the system of care.

Research Questions to be Addressed

What are some of the root causes and systemic factors in Florida in the last 24 months that are related to increased numbers in out-of-home care?

What strategies can be adopted by DCF, CBCs and other partners to safely address the number of children in out-of-home care and improve the system of care?

Research Plan

Research Methods to be Employed

1. Review evaluation documents available for two other states that have implemented a practice model similar to the *Action for Child Protection Model* and examined changes in out-of-home care after implementation. If significant changes in child placements occurred in these states after implementation of the practice model, this review would inquire if there were recommendations developed to address these changes. Appropriate contacts in child welfare agencies or departments in the two states will be interviewed for this review.
2. Review Action for Child Protection's and Children's Research Center case reviews that were recently completed for DCF to compile added insights about the appropriateness of worker decision-making and if the application of practice is in any way a factor in the rising number of out-of-home care placements.
3. Conduct an analysis of entries to out-of-home care in Florida in the past 24 months using quantitative and qualitative research methods to identify root causes and systemic factors that have had an impact on increases in out-of-home care placements. (Resources permitting, the project team will examine increases in the number of children in care due to delayed exits from foster care.)

a. Quantitative Methodologies/Analyses (Data source: FSFN)

- 1) Continue review of trend reports by regions, circuits and CBCs available on the Center for Child Welfare website.
- 2) Based on the availability of data, conduct multivariate statistical analyses (multiple regression, latent class analysis or cluster analysis, for example) that include possible factors related to levels of in-home/out-of-home cases by region and selected circuits. Potential categories of factors include but are not limited to the following:
 - a) Assessments (present and impending danger, family functioning assessments)
 - b) Safety plans (completed/not completed within expected time frames and level of sufficiency)
 - c) Professional experience of CPIs (length of time employed as CPI, length of time implementing Safety Methodology), using data obtained through DCF’s Human Resource Data System
 - d) Safety management service capacity (in-home and out-of-home care available), using county data obtained through the *Florida Child Welfare Services Gap Analysis* (conducted by USF and funded by Casey Family Programs in April 2014) and a Service Array Survey of CBCs conducted by DCF in December 2014.
 - e) CPI workload/ service capacity and possibly some measure of the quantity/ quality of training, coaching and consultation received by CPIs and CPI supervisors to support them in learning and applying the new methodology

Note that while the analysis focuses on factors related to the increase in out-of-home care, the list of potential categories above all relate to the front end of the system, not the back end. This reflects the primary focus of the study. As mentioned above, if time and staffing resources permit, the project team will add potential categories related to exits.

Table 1. Data Source Table

Data Category	Specific Data Items	Source
Assessments (PDA, IDA, and FFA)	Dates Completed Items or danger threats specified; specific content included in FFA domains	FSFN
Safety Plans	Dates Completed/Amended Items identified as appropriate for this analysis	FSFN

Data Category	Specific Data Items	Source
CPI Experience and Workload	Date Hired as CPI Date started Implementing SM Workload/service capacity Training/Coaching	DCF Internal Human Resource Data
Safety Management Services	Number of Programs/Providers Capacity	Service Array Survey of CBCs (December 2014) Gap Survey (USF, Casey Family Programs, April 2014)

b. Qualitative Methodologies (Focus Groups with CPIs, CPI supervisors, case managers, case manager supervisors, Children’s Legal Services (CLS) attorneys, CBC Operational Managers, dependency court judges and other key child welfare professionals by region/selected circuit)

- 1) Develop questions for the qualitative methodologies that will provide a basis for identifying policy or practices that are believed to have increased levels of out-of-home placements by region/selected circuit and formulating recommendations to safely reduce the number of out-of-home cases by DCF region/circuit:
 - a) Based, in part, on the reviews listed above and the quantitative analysis findings
 - b) Based on input from the DCF advisory committee described above that will be formed for the coordination of this project
- 2) Select a representative group of participants for the focus groups for six regions and selected circuits consisting of CPIs, case managers, Children’s Legal Services (CLS) attorneys, judges and other key child welfare professionals. Guidelines for selection of focus group participants will be shared in order to ensure a broad representation of child welfare professionals in their practice experience. Conduct Webinar focus groups in each of the six DCF regions.
- 3) Conduct additional focus groups in circuits that are identified as having unique trends related to out-of-home care.
- 4) Time permitting, include a focus group with Hotline counselors and supervisors.
- 5) If needed, conduct an online survey of dependency court judges, and of CPIs, case managers and their supervisors since more feedback would be received and possibly more honest responses due to anonymity

Project Activities, Deliverables and Time Fame

The following table illustrates the anticipated timeline for the completion activities related to this project.

Project Timeline						
	2015					2016
Activities	Aug	Sept	Oct	Nov	Dec	Jan
Formation of a project advisory committee						
Advisory Committee meeting						
Quantitative analysis						
Develop focus group protocols						
Recruit focus group participants						
Conduct focus groups						
Generate a thematic analysis from focus group data by region/circuit						
Submit a final report that is co-authored with the DCF Office of Child Welfare Performance and Quality Management team that documents the purpose, research design, methodologies, results of root cause analysis of the increase of children entering out-of-home care and recommendations related to policy, practice, and resources.						
Report Draft for review by the DCF leadership, project Advisory Committee, and Casey Family Programs staff (December 15, 2015)						
Final Report (January 15, 2016)						



Appendix 5. Regional Site Visits

