

Community-Based Care Pilot Program
Annual Report 2008

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Executive Summary

The Louis de la Parte Florida Mental Health Institute (FMHI) at the University of South Florida (USF), is contracted by the Department of Children and Families (DCF) to provide an evaluation of the 3-year pilot program (July 1, 2006 to July 1, 2009) for the Community-Based Care (CBC) lead agencies serving Miami-Dade, Monroe, and Broward Counties (Circuits 11, 16, and 17) established by Ch. 2006-30, Laws of Florida. The key features of the pilot program are the provision of fiscal and administrative monitoring, and programmatic monitoring by independent, nongovernmental third party entities and the development of lead agency outcome measures by the programmatic monitor in conjunction with the lead agencies and the Department.

This report is the second and final annual evaluation report completed by FMHI-USF and covers the reporting period of December 2007 through December 2008. The evaluation includes a description of the implementation status of the pilot program and an examination of the benefits and costs associated with outsourced administrative, fiscal, and programmatic monitoring and outcome measures development. In addition, an analysis of safety and permanency outcomes was used to compare the performance of the lead agencies in the pilot program to the performance of lead agencies, not in the pilot program.

A fiscal and administrative monitor, Abel & Associates, and a programmatic monitor, Chapin Hall Center for Children of the University of Chicago (Chapin Hall), have been contracted by DCF through June 2009 to complete the external monitoring tasks required in the pilot program. The findings indicate that the necessary components of outsourced fiscal and administrative monitoring and programmatic monitoring have been implemented and both contracted entities have fulfilled the requirements of their contracts with DCF, at the time of this report.

Most stakeholders have been very satisfied with the fiscal and administrative monitoring conducted by Abel & Associates, and feel favorably about continuing to outsource these functions after the pilot ends in June 2009. Although overall satisfaction with outsourced fiscal and administrative monitoring was reported, disadvantages associated with the current outsourcing arrangement were also expressed. For example, making changes to the monitor's scope of work requires that all parties agree on a contract amendment, which can delay the implementation of new monitoring procedures. The findings also suggested that the existing arrangement could be improved by clarifying for all stakeholders when the monitor is accountable to DCF Central Office or Regional Office for specific facets of monitoring. An annual meeting at the beginning of each contract year to discuss key stakeholder (e.g., Abel &

Associates, each CBC, DCF Regional Office, and DCF Central Office) goals and expectations regarding fiscal and administrative monitoring for the current year may be beneficial.

Concerning the independent programmatic monitor, most stakeholders expressed an increased level of satisfaction with the work that has been done toward understanding data related to permanency, safety, and wellbeing and developing outcome measures based on the analysis of this data. In addition, specific changes have been made in an effort to improve the efficiency and usefulness of the programmatic monitoring process. The sampling process has been amended to include admission cases in addition to legacy cases and the case review instrument has been revised. One of the reported benefits of outsourced monitoring is the contribution made to DCF's Regional Quality Assurance model based on the model developed by the programmatic monitor. DCF Central Office reported that all of the key components of the pilot program's programmatic monitoring process have been incorporated into the DCF Regional QA model. In general, the reported perspective of the stakeholders is that the outsourced programmatic monitoring process has been a valuable learning experience, and the benefits that have been gained through outsourced monitoring can now be implemented internally by DCF, once the pilot program ends.

An analysis of six safety and permanency outcomes was completed by FMHI to compare the performance of the lead agencies in the pilot program, Our Kids of Miami-Dade & Monroe, Inc. (Our Kids) and ChildNet, Inc. (ChildNet), to the performance of lead agencies not in the pilot program (or Rest-of-State). Our Kids and ChildNet achieved better outcomes for the safety indicator, recurrence of maltreatment, when compared to the Rest-of-State. Both pilot sites had significantly lower proportions of children who re-entered out-of-home care and who experienced recurrence of maltreatment within 6 months after service termination. Furthermore, both lead agencies in the pilot had a lower proportion of children entering out-of-home care after receiving in-home services than Rest-of-State. However, the pilot sites were less effective in achieving permanency outcomes. Although their percent of children who exited into adoption within 24 months was equal to that of the Rest-of-State, their length of stay in out-of-home care was significantly longer and respectively the proportion of children exiting out-of-home care for reason of reunification and placement with relatives was much lower. Overall, Our Kids' performance was significantly more effective than Rest-of-State on preventing entry into out-of-home care, maintaining discharges from out-of-home care based on a low rate of re-entry, and reducing the recurrence of maltreatment.

Introduction

In 1996, the Florida State Legislature mandated that the Department of Children and Families (the Department) contract with community-based, not-for-profit entities to provide child welfare services including but not limited to prevention, child protection, licensing, placement, foster care, adoptions, and independent living. As of June 2005, the transition to a Community-Based Care (CBC) lead agency model was complete and currently the Department contracts with 20 lead agencies in 22 geographically defined service areas. In the CBC model, the Department remains the primary funder of services and maintains oversight and licensing responsibilities for the services being provided.

Background and Description of the Pilot Program

In June 2005 discussions began among the Community-Based Care lead agency, Our Kids of Miami-Dade & Monroe, Inc. and later, Child Net, Inc. of Broward County, their management staff, and board of trustees about how to address specific administrative challenges within the current model of Community-Based Care. The challenges, as reported by lead agency staff and outlined in the interim report provided by FMHI-USF (Sowell et al., 2007), included:

1. The complexity of the funding streams and fiscal structure of providing child welfare services requires that fiscal monitoring be conducted by independent, certified public accountants. The lead agencies were not satisfied with the level of oversight and monitoring provided by the DCF Contract Oversight Unit (COU).
2. The “use it or lose it” nature of the lead agency cost reimbursement contracts with the Department of Children and Families encouraged the agencies to spend money inefficiently. As a remedy, the agencies wanted fixed price contracts that allow unspent funds to be carried forward.
3. Restrictions on expenditures were too rigid and limited the agencies’ ability to conduct business.
4. Programmatic oversight provided by DCF was too focused on compliance; the lead agencies wanted oversight to be provided by a non-governmental entity with experts in the field of child welfare and to be based on quality improvement. It was intended that the experts would also assist in establishing performance measures that would be a meaningful reflection of the quality of service provided by the lead agencies.

These discussions led to a White Paper that outlined the lead agencies' concerns and their proposed changes to legislation. This resulted in a bill (House Bill 5011) that was signed into law in May 2006. Ch. 2006-30, Laws of Florida (http://laws.flrules.org/files/Ch_2006-030.pdf) established a 3-year pilot program for the Community-Based Care lead agencies serving Miami-Dade, Monroe, and Broward Counties to take effect July 1, 2006 and to end July 1, 2009. The law provided the following key changes to the child welfare system:

- Fiscal monitoring, administrative monitoring, and programmatic monitoring shall be conducted by independent, nongovernmental third party entities under contract with DCF and shall be conducted in a manner jointly agreed to by the lead agencies and the Department. The Department shall fund the cost of contracting these entities.
- The third party entity serving as programmatic monitor will work in conjunction with the lead agencies and the Department to develop new outcomes designed to determine the quality of service provided by the lead agencies. Programmatic performance of the lead agencies will be measured and monitored using the new outcome measures and outcome measures contained in their contracts with the Department.
- Lead agency contracts will be fixed price funded, allowing unspent state funds to be carried forward to the next fiscal year, and the lead agencies will be allowed greater flexibility in their spending of child welfare funds (Fixed price contracts and flexibility in spending as described in the legislation are in effect for the entire state).

Purpose of Evaluation

In addition to the specific oversight, contract, and funding related changes described above, Ch. 2006-30, Laws of Florida, mandates that the annual evaluation of Community-Based Care, required by s. 409.1671(4) (a), F.S., include an evaluation of the pilot program that compares performance and fiscal management of the Community-Based Care lead agencies in the pilot program to those that are not in the pilot program. DCF has contracted with the Louis de la Parte Florida Mental Health Institute at the University of South Florida (FMHI-USF) to fulfill this evaluation requirement. FMHI-USF submitted an interim report to the Department in February 2007 and an annual report in December 2007.

The current and final annual report provides 1) an evaluation of the implementation status, benefits, and costs related to outsourced fiscal, administrative and programmatic

monitoring, and outcome measures development, and 2) programmatic outcome analyses comparing the performance of the Community-Based Care pilot lead agencies to the lead agencies in Rest-of-State. Table 1 provides an overview of the key research questions and data sources.

Table 1

Key Research Questions

Key Questions	Data Source
1) What is the implementation status of the pilot program?	Stakeholder interviews, document review
2) What are the benefits and costs associated with the outsourcing of lead agency fiscal and administrative oversight to an independent entity?	Stakeholder interviews, document review
3) What are the benefits and costs associated with the outsourcing of lead agency programmatic oversight and outcome measures development to an independent entity?	Stakeholder interviews, document review
4) How do the safety and permanency outcomes for children and families involved in the child welfare system in the pilot program areas compare to those involved in non-pilot areas?	HomeSafenet and Florida Safe Families Network (FSFN) data

Implementation and Benefit/Cost Analysis

The implementation and benefit/cost analysis utilizes stakeholder interviews and document review data to answer the first three research questions: (1) What is the implementation status of the pilot program? (2) What are the benefits and costs associated with the outsourcing of lead agency fiscal and administrative oversight to an independent entity? And (3) What are the benefits and costs associated with the outsourcing of lead agency programmatic oversight and outcome measures development to an independent entity?

Method

The research team conducted interviews with key stakeholders including the DCF Regional Office staff, DCF Central Office staff, a representative of the fiscal/administrative

monitoring agent, a representative of the programmatic monitoring agent, and key administrative staff at both lead agencies. The interviews were audio recorded and transcribed. The transcriptions were used by the research team to provide an evaluation of stakeholder perspectives on the implementation status of the pilot and an analysis of the benefits and costs associated with the outsourcing of fiscal, administrative, and programmatic monitoring. A review of pertinent documents related to the pilot was also conducted. These included fiscal and administrative monitoring reports through June 2008, programmatic monitoring reports and outcome measures reports through July 2008, contracts between DCF and the Community-Based Care lead agencies, the independent fiscal and administrative monitoring agency, and the independent programmatic monitoring agency, and monitoring reports for the fiscal, administrative, and programmatic monitoring being conducted in non-pilot areas of the state.

Findings

Fiscal and Administrative Monitoring

Implementation Status

To provide the fiscal and administrative monitoring of the two pilot lead agencies, DCF contracted with Abel & Associates, effective August 1, 2006, through June 30, 2009. Abel & Associates is a Boca Raton-based certified public accounting firm that conducted fiscal monitoring of ChildNet, Inc. prior to the passage of the legislation establishing the pilot (since October 2003). Abel & Associates has sub-contracted with Maximus, a national company, to assist with completing some fiscal monitoring tasks for ChildNet related to adoption and IV-E subsidies.

Abel & Associates is required to complete and submit monthly monitoring reports for both lead agencies related to fiscal and administrative monitoring tasks outlined in their contract with DCF. These task categories include Expenditure Review, Procurement Review, Fiscal Review, Audits, Temporary Assistance to Needy Families (TANF), Title IV-E, AFDC, Title IV-A, Interim Child Welfare Information System (ICWIS), Client Trust Fund, Adoption Subsidy, Eligibility Factors, Safety, and Contract Monitoring. To complete these monitoring tasks, Abel & Associates conducts document reviews, site visits, and has 24-hour read-only access to the fiscal data systems of both lead agencies. The DCF Contract Manager for Abel & Associates reported that the monitoring report requirement has been met without exception since the first report was submitted in September 2006.

In August 2008, DCF amended the contract with Abel & Associates to allow for flexibility in the monitoring plan. If Abel & Associates determine that specific tasks do not require

monitoring during the current year, based on either sustained quality of performance by the lead agency or an alternative oversight method, they should indicate this in a revised monitoring plan that is submitted to DCF for approval. DCF has the final approval on the tasks included in the fiscal and administrative monitoring plan.

Benefit/Cost Analysis

Stakeholder interviews were completed and analyzed to evaluate the benefits and costs of outsourced fiscal and administrative monitoring as it is being conducted in the pilot program in Miami-Dade, Monroe, and Broward counties. Content analysis of the stakeholder interviews revealed key themes related to benefits and costs.

Stakeholder Experiences with Outsourced Fiscal and Administrative Monitoring

Stakeholders reported many benefits that can be attributed to the external fiscal/administrative monitor. Nearly all stakeholders indicated that Abel & Associates have successfully accomplished the monitoring tasks specified in their contract while also providing customized feedback to the CBCs that has gone beyond what is required in the monitoring contract. For example, one CBC stakeholder reported that Abel & Associates provided a very comprehensive review of agency policies and procedures. All stakeholders indicated that Abel & Associates' monitoring feedback is always presented in a constructive manner. All local stakeholders indicated that they valued the independent perspective an outsourced organization brought to the monitoring tasks. All local stakeholders also reported appreciating having ongoing contact, including monthly monitoring reports, with Abel & Associates.

The same stakeholders pointed out several disadvantages associated with the current outsourcing arrangement. Outsourcing monitoring requires a contract, which means significant changes require a contract amendment before they can be implemented. This process can delay the implementation of new monitoring procedures. For example, one of the CBCs requested that their fiscal monitoring become more risk-based. After discussions between DCF, the fiscal monitor, and the lead agency, a decision was made to not immediately change the tasks being monitored. According to DCF, this decision was based on the fact that the monitor only had one year of review and that during that year not all of DCF's functions had been fully transitioned. The request to move to a risk-based framework was reconsidered, and the fiscal monitor contract was amended in August 2008 to allow for risk-based monitoring and flexibility in the monitoring plan and schedule.

Another disadvantage to subcontracting is reduced control over the work being done by the monitor, and the potential consequences of reduced control. For example, it became apparent to DCF Central Office through routine auditing of CBC expenditures that one of the pilot CBCs had been inappropriately charging certain expenses to a federal fund source (instead of to a State fund source). While not a serious concern, inappropriate charges to federal fund sources could be uncovered in a routine federal audit. DCF Central Office said they believed Abel & Associates were responsible for monitoring appropriateness of fund source charges. Abel & Associates countered that this task was not included in their contract, and they believed that someone else had this responsibility. Having the monitoring function within DCF would make it easier to revise monitoring tasks quickly in order to maintain compliance with federal regulations.

There were other costs associated with the present outsourcing arrangement that were not specific to Abel & Associates. Some stakeholders reported a lack of clarity regarding to whom the external monitors are accountable. Although the monitoring contract is with the DCF Regional Office, DCF Central Office also provides significant guidance on the work being done by the external fiscal/administrator monitor. Some stakeholders also indicated that better coordination between DCF and the CBCs could increase the value of the monitoring for the lead agencies. An annual meeting at the beginning of each contract year to discuss key stakeholder (e.g., Abel & Associates, each CBC, DCF Regional Office, and DCF Central Office) goals and expectations regarding fiscal and administrative monitoring for the current year may be beneficial.

Other Potential Benefits and Costs Associated with Outsourced Monitoring

There are other potential benefits associated with using an external entity for fiscal and administrative monitoring of CBCs. There are financial incentives associated with strong performance by an external monitor, given that poor performance could lead to the non-renewal or termination of the monitoring contract. An external entity is also less likely than an internal monitoring group to be influenced by organizational politics that may compromise the integrity of the monitoring. Finally, outsourcing functions like fiscal and administrative monitoring are consistent with the Legislature's often stated desire to reduce the size of State government.

There are also other potential costs associated with the outsourcing of fiscal and administrative monitoring. While nearly all pilot stakeholders have been very satisfied with the intensive monitoring provided by Abel & Associates, expanding this type of monitoring to the rest of Florida would require a financial investment by DCF far beyond what the Department is

currently spending. DCF is spending \$300,000 annually for their fiscal/administrative monitoring contract in the pilot program. In the rest of Florida, the Department began DCF-CBC Rapid Fiscal Risk Assessment (RFRA), a new monitoring initiative, earlier in 2008. RFRA entails 1½- to 2-day CBC site visits by a team of four DCF Central Office staffers; the CBC contract manager also attends. The assessment, which builds off the quarterly Early Warning Indicator Score Card produced for each CBC, includes reviews of four areas: financial statements and accounting records, personnel and related issues, management and planning, and subcontracts. The final report compiled by the RFRA team includes a risk level (low, medium, high) for each of the four areas as well as an overall risk level for the CBC. The total resources being devoted by DCF to RFRA are similar to those for external monitoring in the pilot area, but the RFRA covers DCF Regions that serve more than 5 times as many children than are served in the pilot area (Armstrong et al., 2008). DCF's current plan is to conduct an RFRA at each lead agency once every two years unless conditions (e.g., risk level, change in CFO) warrant more frequent assessment.

Summary

Most stakeholders have been very satisfied with the fiscal and administrative monitoring conducted by Abel & Associates, and feel favorably about continuing to outsource these functions after the pilot ends in June 2009. There are opportunities to improve the existing arrangement. One improvement would be to clarify for all stakeholders which facets the monitor is accountable to the Regional Office for, and which facets the monitor is accountable to the Central Office for. Similarly, the inappropriate charges to federal fund source issue provides strong evidence that additional clarity regarding Department expectations of the external monitor may be needed. An annual meeting at the beginning of each contract year to discuss key stakeholder (e.g., Abel & Associates, each CBC, DCF Regional Office, and DCF Central Office) goals and expectations regarding fiscal and administrative monitoring for the current year may be beneficial.

Given the uncertainty about whether the Legislature will reauthorize the pilot and/or additional funding to sustain a contract for external fiscal and administrative monitoring, there are several considerations that determine the most cost-effective approach to fiscal/administrative monitoring. Although there are many advantages to effective fiscal monitoring of CBCs, perhaps the most important purpose of fiscal monitoring is to identify and correct lead agency financial problems before they turn into crises that impact the effectiveness of the lead agency and the children and families the agency serves. Although there are no

objective data to confirm this hypothesis, it is reasonable to believe that the more frequently fiscal monitoring activities are conducted, the more likely financial problems are to be identified at an early, non-threatening stage so that corrective action can be taken before the problem becomes severe.

There are numerous tradeoffs associated with the decision to subcontract fiscal/administrative monitoring versus keeping the function within DCF. Subcontracting facilitates more objective and independent monitoring. Maintaining fiscal/administrative monitoring as an internal function provides the Department with greater control and flexibility with the monitoring process. How DCF proceeds with fiscal monitoring in the pilot area and in the rest of Florida ultimately boils down to a tradeoff between the cost of monitoring and DCF's level of risk aversion. DCF leadership needs to determine whether a reduced financial investment in fiscal monitoring is worth the potentially increased risk of not quickly identifying fiscal problems in the lead agency system.

Programmatic Monitoring and Outcome Measures Development

Implementation Status

Chapin Hall Center for Children, based at the University of Chicago, is contracted for November 2006 through June 2009 to provide programmatic monitoring of the two pilot lead agencies, evaluate current contract performance measures, and develop new outcome measures in collaboration with the lead agencies and the Department. The Chapin Hall team consists of a Project Director and a locally based Project Manager. Chapin Hall has subcontracted a portion of the monitoring tasks to Foster Care Review, Inc., a Miami-based agency with a history of providing foster care case review and advocacy. Chapin Hall has also subcontracted with Dimas Consulting to provide analysis and consultation concerning the root causes of the lead agencies' performance on safety, permanency, and well-being outcome measures.

An Executive Steering Committee created by the programmatic monitor, DCF, and the pilot CBC lead agencies meets quarterly to discuss the structure and operation of the programmatic monitoring and outcome measures development. The Committee includes the DCF Deputy Secretary, DCF Assistant Secretary for Programs, DCF Southern Regional Director, DCF Southeast Regional Director, the Chief Executive Officer of each pilot CBC lead agency, and the Chapin Hall Program Director.

Programmatic monitoring in the pilot program utilizes a mixed method approach that includes case review, stakeholder interviews, and administrative data analysis. Using a random

sample of 25 cases per lead agency, per quarter, three types of case record reviews are conducted. Base reviews are completed by the CBC lead agency. Side-by-side peer reviews are conducted by the CBC, in conjunction with the programmatic monitor and a representative from the other CBC lead agency. Finally, in-depth reviews are conducted by the programmatic monitor and involve both a case record review and case-related interviews with children, parents, foster parents, caseworkers and other professionals involved with the case. The in-depth review utilizes the Federal Child and Family Services Review (CFSR) process. The programmatic monitor also conducts quality assurance reviews on a sample of base reviews and side-by-side reviews.

Prior to the May 2008 programmatic monitoring report, the pilot program case reviews used the DCF case review instrument that was used in the rest of the state. Data collection for the May 2008 report and subsequent reports utilized an instrument developed by the programmatic monitor. Using the DCF instrument, the programmatic monitor eliminated redundant questions, added new questions, and reorganized the instrument. The current instrument contains three primary components, (1) the safety module focuses on maltreatment, repeat maltreatment, and maintenance of child safety, (2) the process of care module follows the typical path of a case and includes assessment, case planning and case management, and links to services and follow up, and (3) the foster care module includes the placement process, visitation, stability, permanency, reentry, and permanency planning.

The case review sampling process is based on criteria defined by the programmatic monitor. Overall, the sampling criteria includes two categories based on service date, (1) cases that were in care on a specific date, known as a legacy sample, and (2) cases that entered care during a specific period, known as an admission sample (prior to the July 2008 programmatic monitoring report, only legacy samples had been reviewed). The samples are further defined by age range of the child and placement type. For each review period, the programmatic monitor randomly allocates cases from the primary sample of 25 for the three case review activities. Seventeen cases are allocated for the base reviews, the remaining eight cases are allocated to the side-by-side review process, and two cases from each side-by-side review sample are randomly selected for the in-depth reviews. In addition, four cases are selected from the base review sample for a quality assurance review by the programmatic monitor.

The DCF contract requires that the programmatic monitor complete quarterly monitoring reports for each pilot CBC lead agency. The finalization of these reports has been continuously delayed, primarily due to a lack of consensus between one CBC lead agency and the programmatic monitor about the sampling and case review methodology and findings of the

reports. However, the September 2008 programmatic monitoring report was finalized and disseminated within one month of the due date. The programmatic monitor is contracted to complete three additional quarterly reports by June 2009.

The programmatic monitor is also contracted by DCF to develop outcome measures that will be used to monitor the performance of the pilot CBC lead agencies. These outcome measures activities, as contracted, include an analysis of current outcome measures, recommendation of alternative outcome measures, and an annual analysis and reporting of outcome data for the CBC lead agencies in the State of Florida. As reported in the previous annual report (Sowell et al., 2007), during bi-monthly meetings between Dimas Consulting and the pilot lead agencies' executives, Dimas presents administrative outcome data comparing the pilot lead agencies' performance to the performance of the Rest-of-State. The data are used to discuss the root cause of the findings and variation of findings. As a part of this process, each pilot CBC lead agency in consultation with the programmatic monitor and Dimas Consulting identified strategic outcome measure goals that the lead agency will focus on meeting. ChildNet has selected four goals: increase the number of children that remain safe during services, decrease the number and percent of children re-entering out-of-home care within 12 months of reunification, reduce the time to permanency, and increase placement stability for children in out-of-home care. Our Kids has selected one goal: increase the rate of permanency for infants 1 day old to 30 days old that have entered out-of-home care. The lead agencies are in the process of implementing various procedural and practice changes that are intended to have a positive impact on reaching the strategic goals.

As required by contract, the programmatic monitor completed an initial Outcome Data Report that included analysis of administrative data for each CBC in the State of Florida and is contracted to submit a final Outcome Data Report to DCF in April 2009. The data report is being used by DCF in an effort to analyze and redesign the outcome measures for the State. The Chapin Hall Program Director presented the material to a group of statewide CBC and DCF stakeholders in October 2008 as part of a performance measures workgroup meeting. The programmatic monitor has also submitted all of the Performance Measures Development reports to DCF that are required by contract. These reports focus on the research, analysis, and recommendations made for the implementation of alternative outcome measures for the pilot CBC lead agencies, and baseline data for the recommended measures. The Chapin Hall Program Director has presented this material to child welfare stakeholders in the pilot area as part of a communitywide meeting to discuss improving care and resources and establishing benchmarks.

In summary, based on document review and stakeholder interview, the necessary components of outsourced programmatic monitoring have been implemented and the independent programmatic monitor has fulfilled the requirements of the contract, up to the time of this report. Some delays have occurred in the finalization of the programmatic monitoring reports over the course of the pilot program; however, the most recent report was finalized and disseminated in a timely manner. Since the initial annual evaluation report completed by FMHI-USF, the sampling process has been amended to include admission cases that can capture current CBC lead agency quality of practice. In addition, the case review instrument was revised by the programmatic monitor in an effort to increase the efficiency of the case review process and the usefulness of the findings.

Benefit/Cost Analysis

Stakeholder interviews were completed and analyzed to evaluate the benefits and costs of outsourced programmatic monitoring and outcome measures development as it is being conducted in the pilot program in Miami-Dade, Monroe, and Broward counties. Content analysis of the stakeholder interviews revealed key themes related to benefits and costs of the pilot program.

Contribution to the DCF Regional Quality Assurance Model

The majority of the DCF Central Office and Regional stakeholders stated that using what has been learned in the pilot program concerning quality assurance and applying it to the development of the DCF Regional Quality Assurance (QA) model has been a benefit of the pilot. DCF Central Office reported that all of the key components of the pilot program's programmatic monitoring process have been incorporated into the DCF Regional QA model including the sampling methodology, base case reviews, side-by-side case reviews, and in depth case reviews. It was stated that DCF Central Office has received positive feedback from people in the rest of the state who have begun to use the new quality assurance model, specifically related to the use of side-by-side case reviews. Furthermore, since the methodologies were field tested in the pilot program prior to statewide implementation, DCF stakeholders expressed an increased level of confidence concerning their use.

A related benefit is that pilot program lead agencies' staff members have been available to staff in the rest of the state to provide feedback about the use of specific programmatic monitoring methods, benefits, and challenges. As described by one DCF stakeholder, the pilot agency staff have provided peer-to-peer mentoring and tutoring for the rest of the state.

Sampling Methodology

The CBC lead agency stakeholders reported that one of the positive changes that has been made to the pilot program's programmatic monitoring process in the past year is that an admission sample is being monitored in addition to a legacy sample. It is the opinion of the CBC representatives that the admission sample is more reflective of current practice. A legacy sample considers all children that were in care on a specific date, regardless of the admission date. An admission sample only includes children that were admitted into care during a specific period. The CBC lead agency stakeholders expressed that this distinction is important when they are trying to present a complete story of practice and outcomes to the community.

Case Review Process

Some of the CBC stakeholders expressed dissatisfaction with the methods and instrument used to review case files. It was stated that the case review instrument does not give an accurate reflection of practice due to what some consider being a narrow definition of compliance and inconsistencies concerning the determination of compliance. Some CBC lead agency stakeholders also expressed that the monitoring instrument that has been used for case file reviews has been inconsistent. However, the changes that were made to the instrument were intended to improve the quality of the findings and the revisions to the instrument are now complete.

All stakeholders agreed that having consistent staff from the CBCs and the programmatic monitor perform and participate in monitoring activities is necessary. As mentioned in the implementation status section, disagreements about the content of the monitoring reports has resulted in delays in the finalization of the monitoring reports submitted by the programmatic monitor. Some of the stakeholders emphasized the importance of timely monitoring reports being a part of the process. Not only do delayed reports impact the usefulness of the findings, but an extended finalization process also requires additional time from all stakeholders including programmatic monitoring staff, CBC lead agency staff, and DCF Regional staff.

Using Data to Improve Practice

Stakeholders from both pilot CBC lead agencies reported at least one practice change that has been made based on information gained through data analysis meetings and outcome measures development. These changes include decreasing the amount of time between case staffings and refining the intake process for infants coming into care. As stated by one

stakeholder, “The consultant for data analysis has been valuable. The data analysis is fresh, forward thinking, strategic, interesting, out of the box...” As mentioned in the implementation status, both pilot lead agencies developed strategic measures based on findings discussed in the data analysis meetings.

In addition to using data analysis, the programmatic monitor has also used the case review findings to make recommendations to the lead agencies about quality of care practices. For example, the monitor recommended that one of the lead agencies undertake a review of its reunification procedures to understand why reentry rates might be higher in that service area. The monitor also recommended that one of the lead agencies complete a review of the risk assessment tools being used and establish a consistent model of practice if they find that one does not already exist.

Summary

Most pilot program stakeholders expressed an increased level of satisfaction with the work completed by the programmatic monitor. One of the reported benefits of outsourced monitoring is the contribution made to DCF’s Regional Quality Assurance model based on the model developed by the programmatic monitor. DCF Central Office reported that all of the key components of the pilot program’s programmatic monitoring process have been incorporated into the DCF Regional QA model including the sampling methodology, base case reviews, side-by-side case reviews, and in depth case reviews. A related benefit is that pilot program lead agencies’ staff members have been available to staff in the rest of the state to provide feedback about the use of specific programmatic monitoring methods, benefits, and challenges. Stakeholders also reported that the sampling methodology used in the pilot program has been improved to reflect current practice. This use of legacy cases and admission cases has also been incorporated into the sampling methods used by DCF. One of the stated challenges of programmatic monitoring was the case review process. Some stakeholders reported dissatisfaction with the case review instrument, what was perceived as inconsistent interpretation of case review findings, and an inability to capture practice improvements. A majority of the stakeholders were satisfied with the use of data to improve practice and the data analysis work that has been completed toward developing strategic measures.

Programmatic Outcome Analysis

The following indicators were selected and developed by FMHI-USF in collaboration with the Department of Children and Families (see Appendix A). These indicators reflect the Community-Based Care lead agency's effectiveness toward providing permanency and safety for children involved in the child welfare system. It is hypothesized that these outcomes will be affected by the outsourced fiscal, administrative, and programmatic monitoring provided by the pilot program in Miami-Dade, Monroe, and Broward Counties. They include:

- proportion of children whose cases were opened and who entered out-of-home care within 12 months,
- proportion of children exiting out-of-home care within 12 months for reasons of placement with relatives or reunification,
- median length of stay for children entering out-of-home care,
- percent of children who exited out-of-home care into adoption within 24 months of the latest removal,
- proportion of children who exited out-of-home care for reasons of reunification or placement with relatives and re-entered within 12 months, and
- proportion of children who were maltreated within 6 months after termination of services.

Study Design

The study design consisted of three sets of comparisons. The first set compared the pilot CBC lead agencies, Child Net and Our Kids, to all other lead agencies referred to as Rest-of-State. The second set of comparisons included only Child Net versus Rest-of-State. Finally, the third set of comparisons consisted of Our Kids versus Rest-of-State. The latter two comparisons were made in order to uncover any differences that might be attributable to either ChildNet or Our Kids.

For this report, FY06-07 cohorts were examined for indicators that required 12 months follow-up and a FY07-08 cohort was used for the indicator proportion of children exiting out-of-home care into adoption. No statistical comparison between cohorts was conducted for this report due to the state's transition from HomeSafenet (HSn) to Florida Safe Families Network (FSFN) and the subsequent challenges related to the calculation of analogous indicators across the two systems.

Data Sources

The primary source of data for the quantitative child protection indicators used in this report was Florida Safe Families Network (FSFN). The secondary data source was the Child Welfare Information System for the State of Florida until June 2007– HomeSafenet (HSn). These data sets were merged based on HSn person sequence number in cases where this number was provided and based on child social security number, last name, first name, date of birth, and gender in cases where HSn person sequence number was unavailable.

Analytic Approach

All above mentioned indicators were calculated for ChildNet, Our Kids, Our Kids and ChildNet combined, and the Rest-of-State. The data used spans FY05-06 through FY07-08. The last date of data collection was June 30, 2008. Statistical analyses consisted of Life Tables– a type of event history or survival analysis¹, and Cox regression analyses (Cox, 1972)², and multiple regression.

Findings

Measure 1.

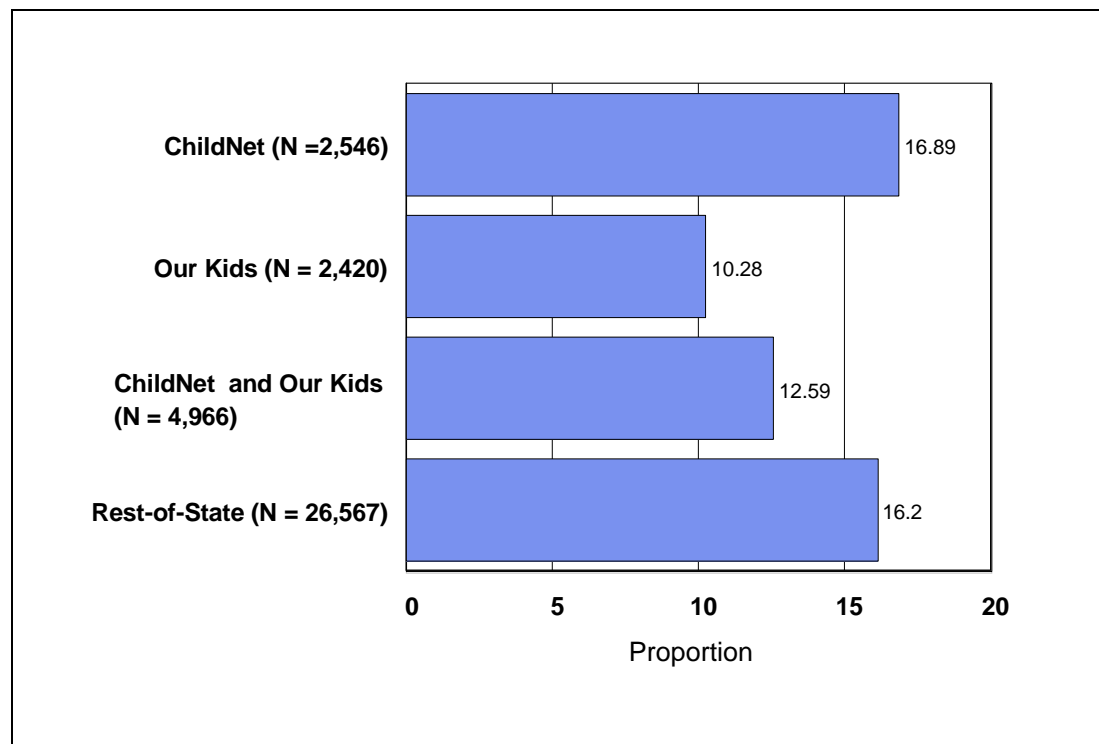
Proportion of Children Whose Case Was Open in FY06-07 and Who Entered Out-of-Home Care Within 12 Months

This indicator is related to the effectiveness of the examined sites at maintaining child permanency and providing effective prevention services. The proportion of children who entered out-of-home care was based on the FY06-07 entry cohort and therefore includes all children whose case was opened during FY06-07 (see a detailed description of this indicator in Appendix A, Measure 1).

¹Survival analysis, referred to here as event history analysis, is a statistical procedure that allows for analyzing data collected over time as well as for utilizing information about cases where the event of interest did not occur during data collection (e.g., children who did not exit out-of-home care during the 12-month period). This technique allows for calculation of the probability of an event occurring at different time points (e.g., in 12 months after entering out-of-home care).

² A type of event history analysis that allows for inclusion of predictor variables or factors that were hypothesized to affect the outcomes.

Figure 1. Proportion of Children Whose Case Was Open in FY06-07 and Who Entered Out-of-Home Care Within 12 Months



The proportion of children entering out-of-home care based on the FY06-07 cohort are shown in Figure 1. As shown in Figure 1, the proportion of children entering out-of-home care within 12 months after their case was open was higher for ChildNet compared to Our Kids. When both pilot sites were compared to Rest-of-State, a statistically significant difference was found. Specifically, ChildNet and Our Kids combined had significantly lower rates of children entering out-of-home care within 12 months after their cases were opened, as compared to Rest-of-State.

When children entering out-of-home care for ChildNet was compared to Rest-of-State, no statistically significant difference was found. However, Our Kids had significantly lower rates of children entering out-of-home care within 12 months after their cases were opened, as compared to Rest-of-State (see Appendix B, Table 1).

Measure 2.

Proportion of Children Who Entered Out-of-Home Care in FY06-07 and Were Discharged for Reasons of Reunification or Placement With Relatives Within 12 Months

The proportion of children who entered out-of-home care and were discharged for reunification or placement with relatives within 12 months after entry was calculated for the

FY06-07 entry cohort. The following reasons for discharge were included in the calculation of this indicator if a case was opened in HomeSafenet: (a) long-term custody to relatives, (b) guardianship to relatives, and (c) reunification with parents or original caregivers. Due to changes in coding in FSFN “Reunification with parents or primary caretakers,” “Living with other relatives” and “Guardianship” were included in the calculation of this indicator if the case was opened in FSFN (see a detailed description of this indicator in Appendix A, Measure 2).

Figure 2. Proportion of Children Who Entered Out-of-Home Care in FY06-07 and Were Discharged for Reasons of Reunification and Placement With Relatives Within 12 Months

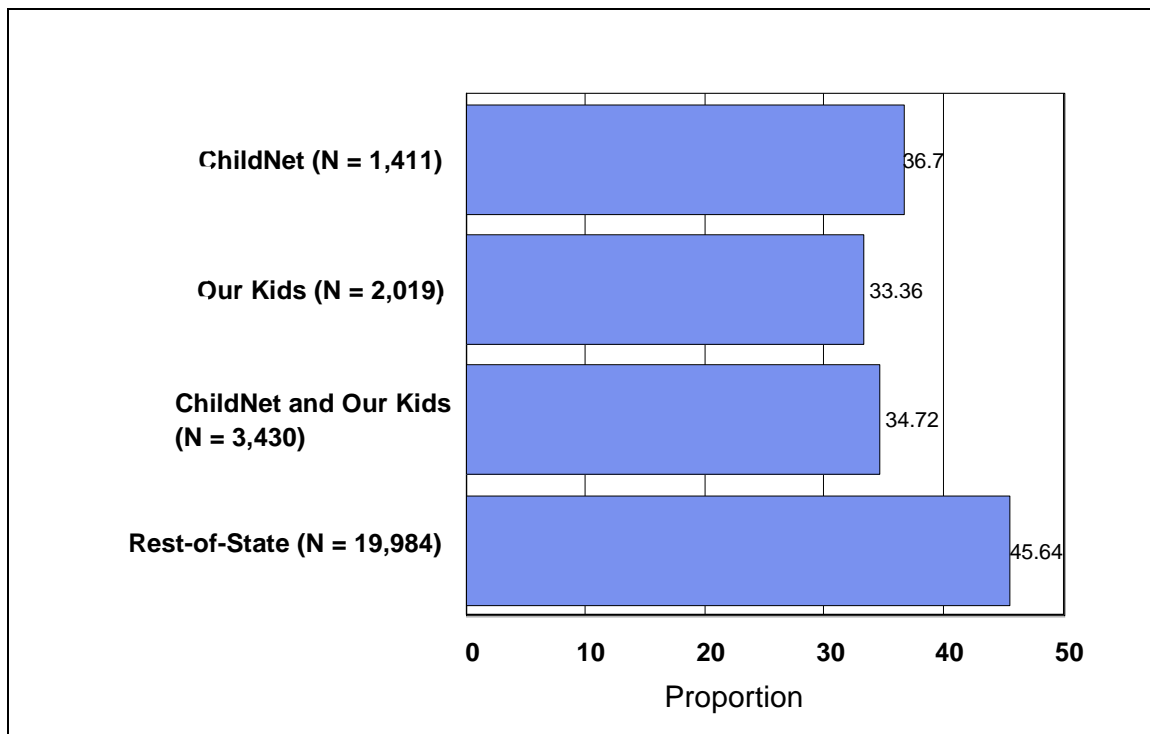


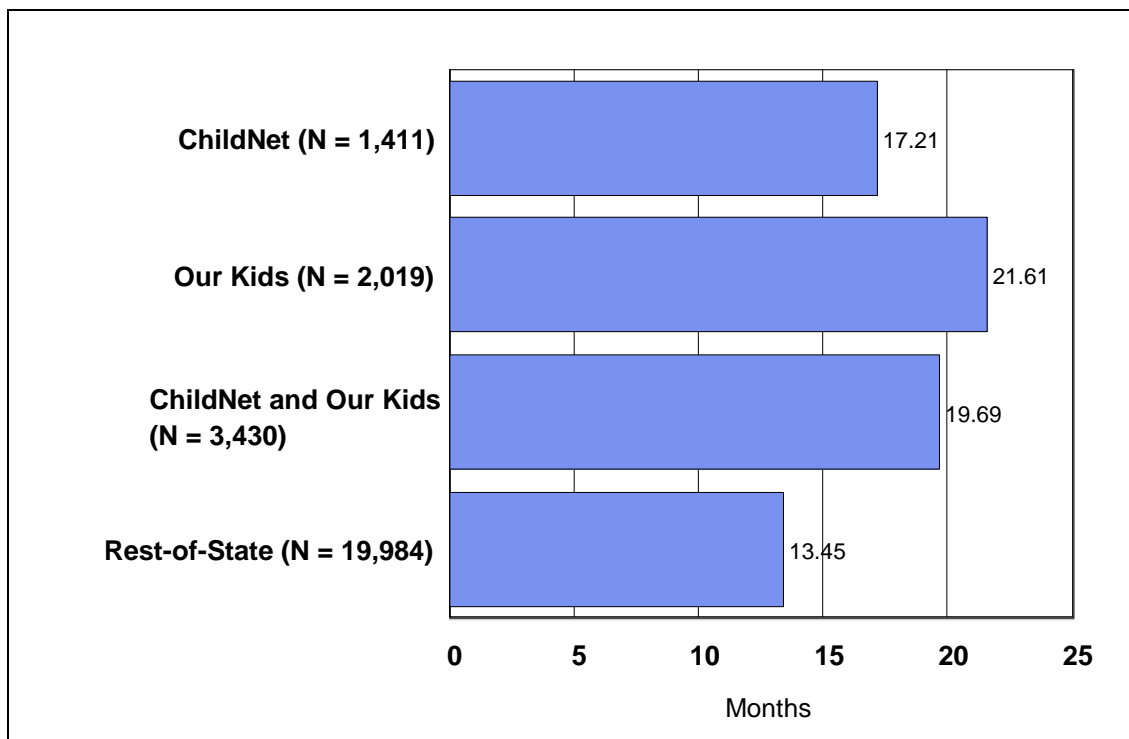
Figure 2 shows the proportions of children who entered out-of-home care in FY06-07 that were discharged for reasons of reunification or placement with relatives within 12 months. Our Kids had the lowest proportion of children who were discharged within 12 months because they were either reunified or placed with relatives. The results of statistical analyses indicated that the pilot sites combined had a significantly lower proportion of children exiting into reunification or placement with relatives within 12 months compared to Rest-of-State (see Appendix B, Table 2). Furthermore, the proportion of children exiting into reunification or placement with relatives within 12 months for ChildNet was significantly lower compared to Rest-of-State. Similarly, compared to Rest-of-State, Our Kids had a significantly lower proportion of children exiting into reunification or placement with relatives.

Measure 3.

Median Length of Stay of Children Who Entered Out-of-Home Care in FY06-07 and Exited for Reasons of Reunification and Placement With Relatives Within 12 Months

The median length of stay in out-of-home care or an out-of-home care episode for children who were discharged for reasons of reunification or placement with relatives was also calculated based on entry cohort FY06-07 (see a detailed description of this indicator in Appendix A, Measure 3).

Figure 3. Median Length of Stay of Children Who Entered Out-of-Home Care in FY06-07 and Exited for Reasons of Reunification or Placement With Relatives by Site



As shown in Figure 3, Our Kids had the longest median length of stay for children exiting into permanency (approximately 21 months). The median length of stay for ChildNet was approximately 17 months. Children in the pilot sites combined had approximately 20 months of stay in out-of-home care. Compared to ChildNet and to Our Kids separately and compared to both lead agencies combined Rest-of-State had a significantly shorter median length of stay in out-of-home care before exiting into permanency (approximately 13 months).

Measure 4.

Percent of Children Who Exited Out-of-Home Care in FY07-08 into Adoption Within 24 Months of the Latest Removal

The calculation of this indicator was based on exit cohorts of children whose adoption was finalized (i.e., children who exited their first out-of-home care episode during SFY07-08 because of adoption). Children who exited from out-of-home care with adoption finalized and who were removed 24 or fewer months before they were discharged from out-of-home care were included in the numerator (see a detailed description of this indicator in Appendix A, Measure 4).

Figure 4. Percent of Children Who Exited Out-of-Home Care in FY07-08 into Adoption Within 24 Months of Latest Removal

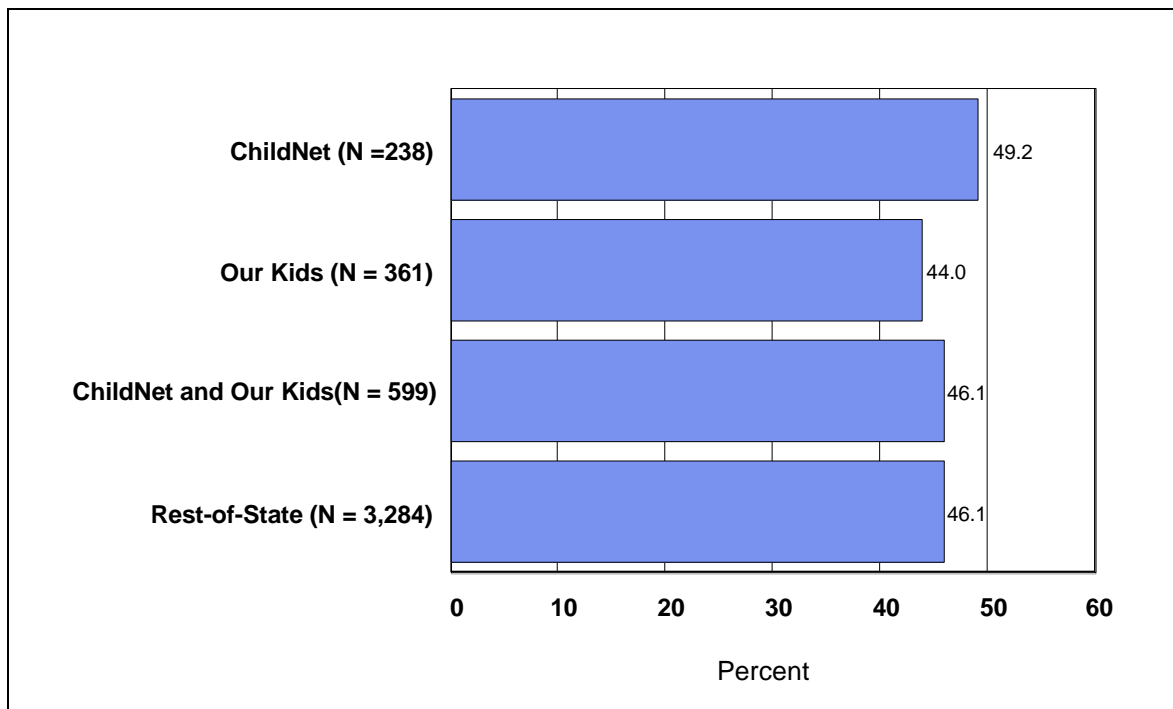


Figure 4 shows the percent of children who exited out-of-home care in FY07-08 into adoption within 24 months of the latest removal. As shown in Figure 4, ChildNet had the highest percent of children who exited with adoption finalized within 24 months of removal. The percent of children who exited in FY07-08 with adoption finalized within 24 months of the latest removal for the pilot sites combined was equal to the percent for the Rest-of-State. When Our Kids and ChildNet were compared to Rest-of-State separately, no statistically significant difference was found (see Appendix B, Table 3).

Measure 5.

Re-entry into Out-of-Home Care

The calculation of this indicator was based on exit cohorts of children who exited their first out-of-home care episode during FY06-07 or who had a discharge date during this fiscal year. Only children who exited out-of-home care for reasons of reunification or placement with relatives during FY06-07 were included in the analysis. These children were followed for 12 months to determine if they re-entered out-of-home care (see a detailed description of this indicator in Appendix A, Measure 5). Re-entry was identified if the child (a) had a previous removal date or (b) had two different removal dates and a discharge date for the first removal. Children were determined to be the same if they had the same HSN, or FSN number, or the same social security number, or the same date of birth, last name, first name, and gender.

Figure 5. Proportion of Children Who Exited Out-of-Home Care for Reasons of Reunifications or Placement With Relatives During FY06-07 and Re-entered Within 12 Months

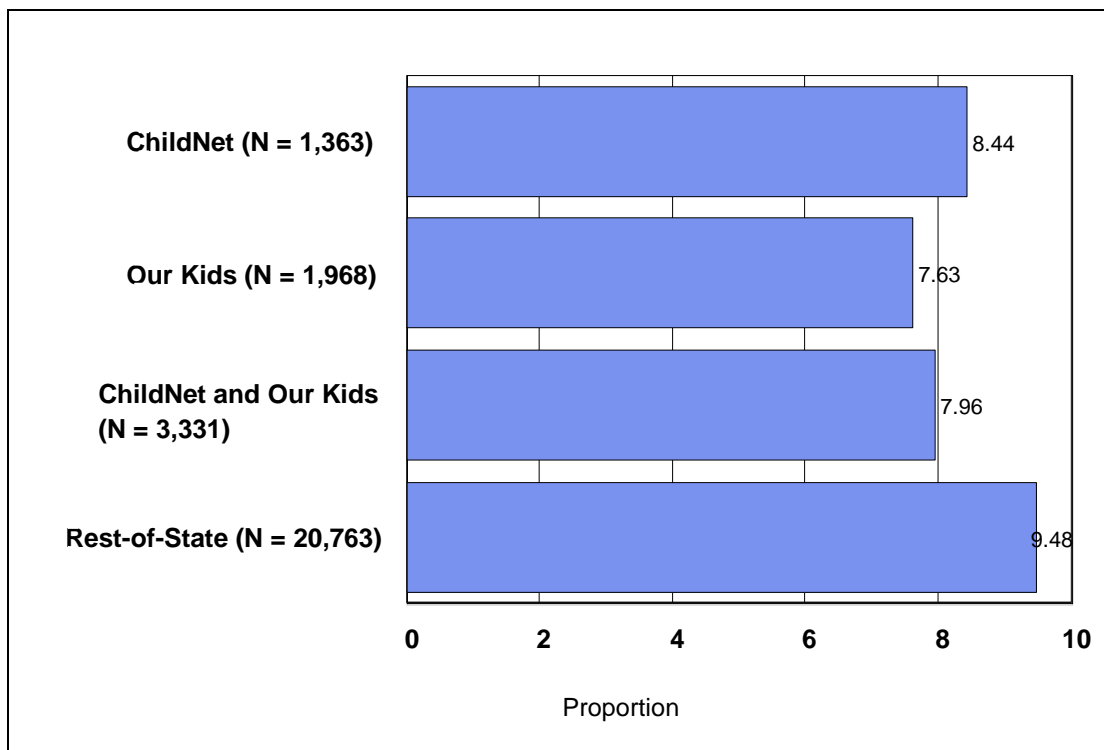


Figure 5 shows the proportion of children reunified or placed with relatives during FY06-07 who subsequently re-entered out-of-home care within 12 months after exit. Compared to ChildNet and Our Kids combined, Rest-of-State had a higher rate of re-entry, and this difference was statistically significant. When ChildNet was compared to Rest-of-State, no significant

difference was found, but compared to Rest-of-State, Our Kids had a significantly lower percent of re-entry into out-of-home care within 12 months after exit (see Appendix B, Table 4).

Measure 6.

Maltreatment Within 6 Months After Services Were Terminated

The calculation of this indicator was based on an exit cohort of children: children whose cases were closed during FY06-07 or who had a “Dependent end date” during FY06-07 in HSn and the last date for services in FSFN. These children were followed for six months to determine if they were subsequently reported as being maltreated. Only cases with some indication of maltreatment or with verified maltreatment were included in the analysis (see a detailed description of this indicator in Appendix A, Measure 6).

Figure 6. Proportion of Children Who Were Maltreated Within 6 Months After Services Were Terminated in FY06-07

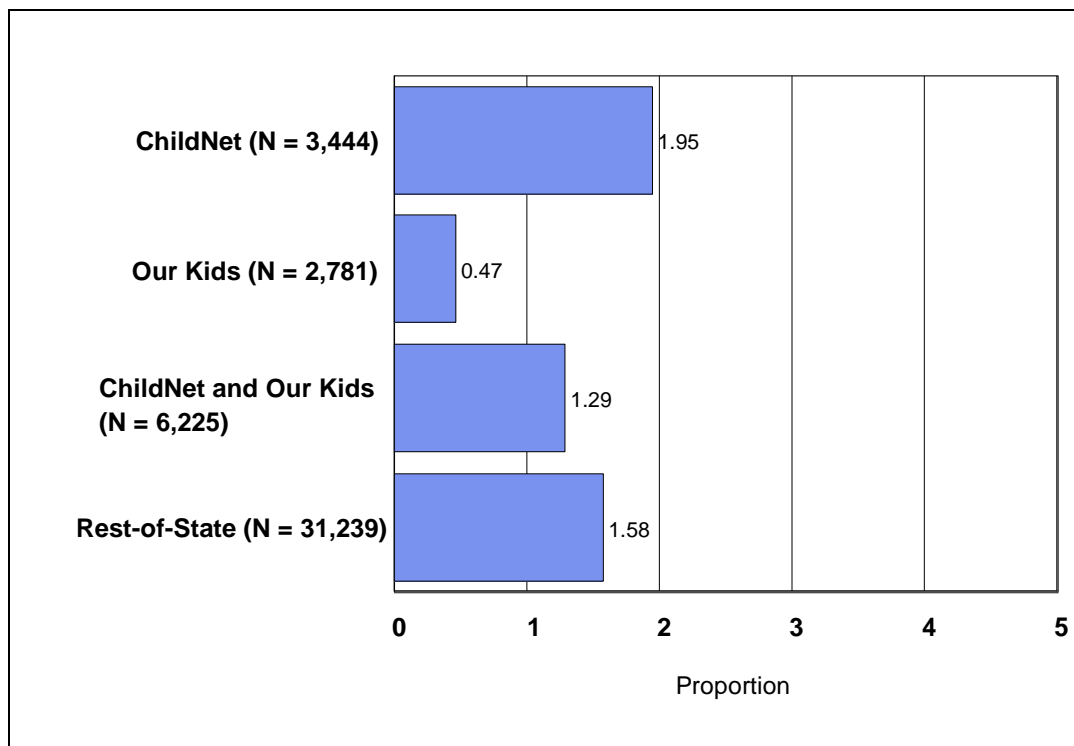


Figure 6 shows the proportion of children who experienced maltreatment within six months after their services were terminated. When the proportion of children who experienced maltreatment within six months after their services were terminated for children served by ChildNet and Our Kids combined was compared to Rest-of-State, no significant difference was found. Similarly, no significant difference was found when the proportion of children who

experienced maltreatment within six months after their services were terminated for children served by ChildNet was compared to Rest-of-State. However, compared to Rest-of-State, the proportion of children who experienced maltreatment within six months was significantly lower for Our Kids (see Appendix B, Table 5).

Conclusions

Our Kids and ChildNet achieved better outcomes for the child safety indicator, recurrence of maltreatment, compared to Rest-of-State. Both pilot sites had significantly lower proportions of children who re-entered out-of-home care and who experienced recurrence of maltreatment within 6 months after service termination. Furthermore, both lead agencies in the pilot had a lower proportion of children entering out-of-home care after receiving in-home services than Rest-of-State. However, the pilot sites were less effective in achieving permanency outcomes. Although their percent of children who exited into adoption within 24 months was equal to that of Rest-of-State, their length of stay in out-of-home care was significantly longer and the proportion of children exiting out-of-home care for reason of reunification and placement with relatives was much lower. Overall, Our Kids' performance was significantly more effective than Rest-of-State on preventing entry into out-of-home care, maintaining discharges from out-of-home care based on a low rate of re-entry, and reducing the recurrence of maltreatment.

Discussion

This report includes a description of the implementation status of the pilot program and an examination of the benefits and costs associated with the outsourcing of administrative, fiscal, and programmatic monitoring. An analysis of child safety and permanency outcomes was also completed to compare the performance of the lead agencies in the pilot program to the performance of the lead agencies not in the pilot program.

Based on the findings, the necessary components of outsourced fiscal and administrative monitoring and programmatic monitoring have been implemented and both contracted entities have fulfilled the requirements of the contract with DCF, at the time of this report. As discussed, to provide the fiscal and administrative monitoring of the two lead agencies, the Department of Children and Families contracted with Abel & Associates, effective August 1, 2006 through June 30, 2009. Abel & Associates sub-contracted some of the fiscal monitoring tasks related to adoption and IV-E subsidies to Maximus. Chapin Hall Center for Children was contracted for November 2006 through June 30, 2009 to provide the

programmatic monitoring of the two lead agencies, evaluate current contracted performance measures, and to develop new outcome measures in collaboration with the lead agencies and the Department. Chapin Hall has sub-contracted a portion of the monitoring tasks to Foster Care Review, Inc. and outcome measures development tasks to Dimas Consulting.

Most stakeholders expressed satisfaction with the fiscal and administrative monitoring conducted by Abel & Associates, and feel favorably about continuing to outsource these functions after the pilot ends in June 2009. Disadvantages associated with the current outsourcing arrangement were also expressed. For example, making changes to the monitor's scope of work requires that all parties agree on a contract amendment. This process can delay the implementation of new monitoring procedures. Opportunities for improvement include clarifying for all stakeholders when the monitor is accountable to DCF Central Office or Regional Office for specific facets of monitoring. An annual meeting at the beginning of each contract year to discuss key stakeholder (e.g., Abel & Associates, each CBC, DCF Regional Office, and DCF Central Office) goals and expectations regarding fiscal and administrative monitoring for the current year may be beneficial.

Most stakeholders expressed an increased level of satisfaction with the independent programmatic monitor and the work that has been done toward understanding data related to permanency, safety, and wellbeing and developing outcome measures based on the analysis of this data. In addition, specific changes have been made in an effort to improve the efficiency and usefulness of the programmatic monitoring process including revising the sampling methodology and the case review instrument. While the majority of the stakeholders are satisfied with the external programmatic monitoring, the overall view expressed was that the benefits that have been gained through outsourced monitoring could now be implemented internally by DCF, once the pilot program ends.

The programmatic analysis revealed that the pilot program CBC lead agencies, Child Net and Our Kids performed better on some outcomes of safety and permanency when compared to Rest-of-State. Specifically, Our Kids and ChildNet had a lower proportion of children entering out-of-home care after receiving in-home services, lower rates of recurrence of maltreatment, and lower proportions of children who re-entered out-of-home care. The pilot lead agencies performed as well as Rest-of-State on the permanency outcome related to adoption. However, their length of stay in out-of-home care was significantly longer and respectively the proportion of children exiting out-of-home care for reason of reunification and placement with relatives was much lower when compared to Rest-of-State.

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Appendix A
Description of FMHI Measures

Measure 1. Proportion of Children Whose Cases Were Opened in FY06-07 and who Entered Out-of-Home Care Within 12 Months

Methodology

Definitions	Children whose case was opened was defined based on the dependent begin date in HS _n or on the first day of service as indicated in FSFN.
Algorithm	This measure is expressed as a percent generated by Life Tables, which is a type of Event History Analysis. ³ In this instance, because every child had 12 months follow-up data this measure is identical to a percent. The numerator is the subset of the number of children in the denominator who were removed from their primary caregivers and placed into out-of-home care during the 12 month period following the date when the case was open. The denominator is the number of children whose cases were open during a given fiscal year.
Data Sources	Data were extracted from the HS _n and FSFN.

Measure 2. Proportion of Children who Entered Out-of-Home Care in FY06-07 and Were Discharged for Reasons of Reunification and Placement With Relatives Within 12 Months

Methodology

Definitions	<p>“Out-of-home care” means care for children in an active removal episode (between removal date and discharge date), regardless of placement type or custodian, including those in licensed board-paid foster care and kinship (relative and non-relative) care.</p> <p>“Reunification” means the return of a child who has been removed to the removal parent or other primary caretaker;</p> <p>“Placement with relatives” means long-term custody to relatives, or guardianship to relatives as indicated in HS_n or “Living with other relatives” as indicated in FSFN.</p>
Algorithm	This measure is expressed as a percent generated by Life Tables, which is a type of Event History Analysis. ⁴ In this instance, because every child had 12 months follow-up data this measure is identical to a percent where the numerator is the number of children who were discharged from out-of-home care for reasons of reunification or placement with relatives. The denominator is all children who entered out-of-home care at any time during a specific fiscal year (as indicated by the removal date in HS _n or FSFN).
Data Sources	Data were extracted from the HS _n and FSFN.

³ Event history analysis is a statistical procedure that allows for analyzing data collected over time as well as for utilizing information about cases where the event of interest did not occur during data collection (e.g., children who did not have second maltreatment during the 12-month period). This technique allows for calculation of the probability of an event occurring at different time points, such as in 12 months after the first maltreatment incident (Allison, 1984). This technique was chosen over a percent because (a) it represents the state of art for analyzing longitudinal data, (b) it allows to efficiently dealing with complex data, and (c) it allows estimating the probability of an event to occur beyond the study period.

Measure 3. Median Length of Stay of Children who Entered Out-of-Home Care in FY06-07 and Exited for Reasons of Reunification and Placement With Relatives

Methodology

Definitions	“Out-of-home care” means care for children in an active removal episode (between removal date and discharge date), regardless of placement type or custodian, including those in licensed board-paid foster care and kinship (relative and non-relative) care.
Algorithm	This measure is presented in number of months. An estimate of the median number of months spent in out-of-home care is generated by Life Tables, which is a type of Event History Analysis. ⁴ This measure reports the number of months at which half of the children are estimated to have exited out-of-home care for reasons of reunification or placement with relatives.
Data Sources	Data were extracted from the HSn and FSFN.

Measure 4. Percent of Children who Exited Out-of-Home Care in FY07-08 into Adoption within 24 Months of the Latest Removal

Methodology

Definitions	“Out-of-home care” means care for children in an active removal episode (between removal date and discharge date), regardless of placement type or custodian, including those in licensed board-paid foster care and kinship (relative and non-relative) care. “Adoption” means adoption finalized, that is when the Court enters the verbal order finalizing the adoption
Algorithm	This measure is expressed as a percent. The denominator is all children who exited out-of-home care at any time during a specific fiscal year and were adopted (as indicated by the discharge date in HSn or in FSFN). The numerator is the number of children who exited out-of-home care at any time during a specific fiscal year and were adopted within 24 months of the latest removal.
Data Sources	Data were extracted from the HSn and FSFN.

Measure 5. Proportion of Children Re-entering Out-of-Home Care Within 12 Months After Exit in FY06-07 for Reasons of Reunification or Placement Relatives

Methodology

Definitions	“Out-of-home care” means care for children in an active removal episode (between removal date and discharge date), regardless of placement type or custodian, including those in licensed board-paid foster care and kinship (relative and non-relative) care.
Algorithm	This measure is expressed as a percent generated by Life Tables, which is a type of Event History Analysis. ⁴ In this instance, because every child had 12 months follow-up data this measure is identical to a percent where the numerator is the number of children who entered out-of-home care within 12 months after exit for permanency reasons only. Only children who exited out-of-home care for reasons of reunification and placement with relatives were included in the analysis. The denominator is all children who had a Discharge Date in HSn or FSFN during a specified fiscal year (i.e., exit cohorts) and who were discharged for reasons of either reunification or placement with relatives. The measure is based on children who exited their first episode of out-of-home care.
Data Sources	Data were extracted from the HSn and FSFN.

Measure 6. Maltreatment Within 6 Months After Services Were Terminated

Methodology

Definitions	Abuse and neglect are defined by Chapter 39, F.S. and include both actual harm and threatened harm.
Algorithm	This measure is expressed as a percent generated by Life Tables, which is a type of Event History Analysis. ⁴ In this instance, because every child had 6 months follow-up data this measure is identical to a percent where the numerator is the number of children whose cases were closed and who had findings of "verified" or "some indicators" of maltreatment within 6 months after services terminated (i.e., after the dependent end date). The denominator is the number of children whose case whose cases were close during a specific fiscal year
Data Sources	Data were extracted from the HSn and FSFN.

Appendix B

Programmatic Outcomes Tables

Table 1. Results of Cox Regression. Children Whose Case Was Open in FY06-07 and who Entered Out-Of-Home Care by Site

	Children Entering Out-of-Home Care (N =26,567)		
	B	$\chi^2(1)$	Odds Ratio
Child Net	- .07	1.11	.94
Our Kids	- .47	55.64*	.63
ChildNet and Our Kids	- .29	39.96*	.75

Note. * $p < .05$.

Table 2. Results of Cox Regression. Children who Entered Out-Of-Home Care in FY06-07 and Exited for the Reasons of Either Reunification or Placement With Relatives by Site

	Children Entering Out-of-Home Care (N = 23,414)		
	B	$\chi^2(1)$	Odds Ratio
Child Net	- .24	35.90*	.78
Our Kids	- .39	121.43*	.68
ChildNet and Our Kids	- .33	143.45*	.72

Note. * $p < .05$.

Table 3. Results of Chi-Square Test. Children who Exited Out-Of-Home Care in FY07-08 for the Reasons of Adoption within 24 months of the Latest Removal by Site

	Children adopted within 24 months of the latest removal (N = 3,883)	
	χ^2	df
Child Net	.85	1
Our Kids	.54	1
ChildNet and Our Kids	.99	1

Note. * $p < .05$.

Table 4. Results of Cox Regression. Children who Exited Out-Of-Home Care in FY06-07 and Re-entered Within 12 Months by Exit Cohort

	Children Reentering Out-of-Home Care (N = 25,421)		
	B	$\chi^2(1)$	Odds Ratio
ChildNet	- .11	1.61	.89
Our Kids	- .23	8.02*	.80
ChildNet and Our Kids	- .18	8.44*	.84

Note. * $p < .05$.

Table 5. Results of Cox Regression. Children Whose Case was Closed in FY06-07 and who were Maltreated Within 6 Months After Services were Terminated.

	Children Exited Child Protection System (N = 37,464)		
	B	$\chi^2(1)$	Odds Ratio
ChildNet	.19	2.48	1.21
Our Kids	- .96	18.68**	.38
ChildNet and Our Kids	- .18	2.81	.84

Note. * $p < .05$.