Risk Pool Funding Application SFY 2022-2023

Please complete all items, sign and date the application, consult with your Regional Managing Director, and submit electronically to the Barney Ray, Director of Revenue Management & Partner Compliance at <u>hqw.cfo.cbc.me.accountability@myflfamilies.com</u>

Lead Agency Name: Children's Network of Hillsborough, LLC

Region: C-13

Contract No.: QJ015

Address: 9393 North Florida Ave., Suite 1100, Tampa, FL 33612

Lead Agency Contact: Terri Balliet	Phone No.: 813-894-0040
Contract Manager: Holly Way	Phone No.: 727-401-0587

This request is submitted in response to a projected deficit at 6/30/2023 inclusive of all currently available funding.

Financials:

- State the amount of funding requested from Risk Pool funds and the amount of the projected deficit at the end of Fiscal Year 2022-2023: Projected Deficit: \$5,564,929 Amount of Risk Pool Funds Requested: \$5,564,929
- 3) State specifically how the Lead Agency would qualify for Risk Pool funds based upon the requirements in s. 409.990(8)(c), F.S. (Appendix A):

The Children's Network of Hillsborough, LLC ("CNHC") qualifies for Risk Pool funds in accordance with 409.990 (8)(c), F.S. The state statute lists three purposes which the risk pool funds may be used by a community-based care organization and CNHC will qualify under all three purposes.

The first qualifying purpose is for CBC's that experience significant changes in the number or composition of clients eligible to receive services and the second qualifying purpose is when a CBC experiences significant changes in the services that are eligible for reimbursement. On July 1, 2022, CNHC began as the Community Based Care Lead Agency in Circuit 13, Hillsborough County. As a new lead agency CNHC had to implement a team of providers and organizational infrastructure to service the children in Hillsborough County prior to the contract start date. This resulted in the need to increase and provide services to eligible clients from the contract start date which started

at 0 clients being served for CNHC to providing services to over 3,200 children and families as of today. As Children's Network of Hillsborough County (CNHC) was not a previously established and funded lead agency, services began without the advantage of previous carry forward funding and/or grant or donated funds which was a significant change to the composition of the prior lead agency. Funds that were not expended by the previous lead agency were not transferred to CNHC at the time of inception and therefore startup costs were incurred at a deficit.

The third qualifying purpose relates to whether the CBC will experience problems with continuity of care in the event of a failure or discontinuance of service. CNHC believes a significant funding deficit in the first year would result in problems of continuity of care and discontinuance of service.

4) Please attach a narrative explaining how the deficit occurred, what steps have been taken to address the cause(s), and how the Lead Agency will work within its allocated core funding in the future. The narrative should not exceed five pages.

See attachment

5) Please provide a detailed proposal that addresses how you will use these funds to address or correct the underlying cause of the shortfall?

The funds will be utilized to support the implementation and expansion of IFST to continue to reduce removals. Providing services to families in home, keeping them out of increases service levels and higher cost placements is a benefit to families as well as the overall system. Through the reduction of removals, placement options increase in traditional homes and reduce the dependence on Residential Group Care.

Children whose parents have had their parental rights terminated prior to July 1, 2022, will be reviewed monthly and a permanency plan developed. Children who are in an identified placement will be prioritized to reduce the number of children pending finalization in their permanent home. Through the Adoption Overlay unit, all children whose parents' rights will be terminated post July 1, 2022, will be assigned an Adoption Overlay case manager in order to finalize any child in an adoptive placement within ninety (90) days. The additional focus on these children will reduce the number of children in out of home care as well as reduce the workload of case management.

Ongoing reviews of all children in Residential Group Care will occur to safely step them down into a family like setting and develop a plan for permanency.

Recruit and retain qualified staff to stabilize the workforce and reduce caseloads thereby increasing timely permanency.

Ensuring children who are eligible for a higher level of care have additional oversight through the Behavioral Health unit to reduce the time waiting for an appropriate placement option.

Increasing revenue through CBCIH plan enrollment for dependent children.

Increase placement stability through the expansion of foster homes and stabilizing teens through the utilization of temporary group home placements operated through CNHC.

Ongoing review of all adopted contracts to reduce costs and streamline where applicable.

Risk pool funds will be dedicated to increasing permanency for children. Continued reduction in removals through the implementation of IFST will provide relief for the system of care. As removals decrease, CNHC will continue prioritizing strategies to reduce the total number of children in out of home care through targeted measures such as:

- Targeted reviews for children in out of home care fifteen (15) months or more with a goal of reunification
- Family Team conferencing
- Permanency Barrier Breaker meetings
- Workforce Stabilization
- Placement Stabilization through expanded licensed bed capacity
- 6) Please provide a detailed budget projection for FY 2022-2023 using the CBC Quarterly Budget Projection Template FY 2022-2023 on the CBC contract documents incorporated by reference at: <u>https://www.myflfamilies.com/service-programs/community-based-care/cbc-fiscal-attachments.shtml</u>.

Included as a separate file

Lead Agency Name: Children's Network of Hillsborough, LLC

Region:	C-13
---------	------

Contract No.: QJ015

Lead Agency CEO/ED Name: Terri Balliet	
Please confirm the following:	
Did the Lead Agency receive Risk Pool funding in SFY 2021-2022? □ Yes If Yes, please attach a status update on the recommendations mad Committee.	⊠ No le by the Risk Pool
<u> Terri Balliet</u>	<u>11/23/2022</u>
Lead Agency CEO/ED Signature	Date

Exhibit A

Section 409.990(8), Florida Statutes:

(a) The department, in consultation with the Florida Coalition for Children, Inc., shall develop and implement a community-based care risk pool initiative to mitigate the financial risk to eligible lead agencies. This initiative must include:

1. A risk pool application and protocol developed by the department which outlines submission criteria, including, but not limited to, financial and program management, descriptive data requirements, and timeframes for submission of applications. Requests for funding from risk pool applicants must be based on relevant and verifiable service trends and changes that have occurred during the current fiscal year. The application must confirm that expenditure of approved risk pool funds by the lead agency will be completed within the current fiscal year.

2. A risk pool peer review committee, appointed by the secretary and consisting of department staff and representatives from at least three nonapplicant lead agencies, which reviews and assesses all risk pool applications. Upon completion of each application review, the peer review committee shall report its findings and recommendations to the secretary, providing, at a minimum, the following information:

a. Justification for the specific funding amount required by the risk pool applicant based on the current years' service trend data, including validation that the applicant's financial need was caused by circumstances beyond the control of the lead agency management.

b. Verification that the proposed use of risk pool funds meets at least one of the purposes specified in paragraph (c); and

c. Evidence of technical assistance provided in an effort to avoid the need to access the risk pool and recommendations for technical assistance to the lead agency to ensure that risk pool funds are expended effectively, and that the agency's need for future risk pool funding is diminished.

(b) Upon approval by the secretary of a risk pool application, the department may request funds from the risk pool in accordance with s. 216.181(6)(a).

(c) The purposes for which the community-based care risk pool shall be used include:

- 1. Significant changes in the number or composition of clients eligible to receive services.
- 2. Significant changes in the services that are eligible for reimbursement.

3. Continuity of care in the event of failure, discontinuance of service, or financial misconduct by a lead agency.

4. Significant changes in the mix of available funds.

(d) The department may also request in its annual legislative budget request, and the Governor may recommend, that the funding necessary to effect paragraph (c) be appropriated to the department. In addition, the department may request the allocation of funds from the community-based care risk pool in accordance with s. 216.181(6)(a). Funds from the pool may be used to match available federal dollars.

1. Such funds shall constitute partial security for contract performance by lead agencies and shall be used to offset the need for a performance bond.

2. The department may separately require a bond to mitigate the financial consequences of potential acts of malfeasance or misfeasance or criminal violations by the service provider.

Attachment Q4 - Please attach a narrative explaining how the deficit occurred, what steps have been taken to address the cause(s), and how the Lead Agency will work within its allocated core funding in the future. The narrative should not exceed five pages.

Upon execution of the contract on July 1, 2022, CNHC met with both internal and external stakeholders to develop a comprehensive system to qualitatively serve the children and families in Circuit 13. Several initiatives were implemented to address prevention, safety, permanency, and well-being. Additionally, to transition all previous contracted providers as seamlessly as possible, existing contracts were adopted in their current state. Hillsborough County also historically has experienced challenges related to children requiring a higher level of care which resulted in placement challenges.

Hillsborough County has historically experienced a higher than state average rate of removal over a sustained period of time. These removals lead to reductions in timely permanency, higher caseloads for case management, and increased length of stay in licensed care. Upon contract execution, CNHC implemented Intensive Family Services Teams (IFST) to work in collaboration with the Hillsborough County Sheriff's Office Child Protective Investigations Division (CPID) in order to reduce the number of children being removed from their families. The implementation of these teams was a phased roll out and therefore previous contracted providers for In Home Non-Judicial cases remained intact. Since the inception of the IFST in Circuit 13 there has been a marked reduction of children being removed from their home. Q1 2022 reduced removals by 112 children from Q1 2021. The CPID has provided favorable feedback regarding IFST and CNHC anticipates continued reduction in removals.

Children free for adoption were experiencing extended periods of time in out of home care, causing an ongoing financial impact. CNHC developed and implemented Adoption Overlay Teams who are assigned at the time of Termination of Parental Rights to reduce the time from TPR to adoption finalization. To support this initiative positions were created specifically to meet this initiative. Additionally, case management remains with number of children who are available for adoption and supports are needed with adoption home studies and child studies to finalize these adoptions.

The average length of stay for children in out of home care has been steadily increasing for the children of Hillsborough County. Permanency can be linked to case manager stabilization and caseloads. To recruit and retain qualified staff, CNHC increased salaries of case management staff as staff as well as Lead Agency staff. These increases are competitive with other agencies in the area to reduce staff from changing agencies due to pay.

Prior to CNHC becoming the lead agency, the responsibility for Comprehensive Behavioral Assessments (CBHA), suitability assessments, and reviews for higher levels of care were contracted through another agency. CNHC made the decision to develop and implement an Integrated Behavioral Health Unit to reduce repeated assessments, streamline information as well as be compliant with CBCIH to incur funding through the plan. Upon execution of the contract on July 1, 2022, CNHC met with both internal and external stakeholders to develop a comprehensive system to qualitatively serve the children and families in Circuit 13. Several initiatives were implemented to address prevention, safety, permanency, and well-being:

- Intensive Family Services Teams
- Adoption Overlay Unit
- Workforce Stabilization
- Integrated Health
- Expansion of Placement options

Additionally, to transition all previous contracted providers as seamlessly as possible, existing contracts were adopted in their current state. Hillsborough County also historically has experienced challenges related to children requiring a higher level of care which resulted in placement challenges.

Hillsborough County has historically experienced a higher than state average rate of removal over a sustained period of time. These removals lead to reductions in timely permanency, higher caseloads for case management, and increased length of stay in licensed care. Upon contract execution, CNHC implemented Intensive Family Services Teams (IFST) to work in collaboration with the Hillsborough County Sheriff's Office Child Protective Investigations Division (CPID) in order to reduce the number of children being removed from their families. The implementation of these teams was a phased roll out and therefore previous contracted providers for In Home Non-Judicial cases remained intact. Since the inception of the IFST in Circuit 13 there has been a marked reduction of children being removed from their home. Q1 2022 reduced removals by 112 children from Q1 2021, and an over 40% reduction in removals in the month of October 2022 as compared to October 2021. The CPID has provided favorable feedback regarding IFST and CNHC anticipates continued reduction in removals.

Children free for adoption are experiencing extended periods of time in out of home care, causing an ongoing financial impact. CNHC developed and implemented Adoption Overlay Teams who are assigned at the time of Termination of Parental Rights to reduce the time from TPR to adoption finalization and increase performance for children exiting the system between 12 and 23 months. To support this initiative positions were created to support case management through a secondary assignment to complete adoption related tasks and reduce the time to finalization. As this initiative was implemented as of July 1, 2022, case management remains assigned to several children who are available for adoption. To increase finalizations and achieve permanency for these children, additional supports are needed with adoption home studies and child studies to finalize these adoptions through funding private agencies to perform these tasks.

The average length of stay for children in out of home care has been steadily increasing for the children of Hillsborough County. Permanency can be linked to case manager stabilization and caseloads. To recruit and retain qualified staff, CNHC increased salaries of case management staff as staff as well as Lead Agency staff. These increases are competitive with other agencies in the area to reduce staff from changing agencies due to variances in the rate of pay.

Prior to CNHC becoming the lead agency, the responsibility for Comprehensive Behavioral Assessments (CBHA), suitability assessments, and reviews for higher levels of care were contracted through another agency. CNHC made the decision to develop and implement an Integrated Behavioral Health Unit to reduce repeated assessments, streamline information as well as be compliant with CBCIH to incur revenue through the plan.

A major contributor to the overall stress of the system on Circuit 13 is related to the availability of adequate and appropriate placement options for children. CNHC has prioritized this challenge through the creation of two (2) residential group homes who are able to house children who may not have other placement options. Additionally, CNHC is expanding foster homes specifically designed to manage children who meet the needs for a higher level of care due to the lack of availability of SIPP placements.