



Annual Quality Assurance Report FY 2017-2018

Introduction:

Eckerd Connects Community Alternatives (ECCA) is the lead agency for foster care and adoption related services in Pinellas, Pasco, and Hillsborough Counties. The ECCA system of care provides a full array of services to all children referred through investigations including diversion programs, dependency, out of home care, adoptions, post adoptions supports, and independent living. Pinellas and Pasco Counties comprise of Judicial Circuit 6 and Hillsborough County comprises of Circuit 13. ECCA encompasses two of the four lead agencies in the Suncoast region (Circuit 12 and 20 also encompass the Suncoast region). ECCA has held the lead agency contract since 2008 in Circuit 6 and 2012 in Circuit 13. Each circuit is subcontracted by The Department of Children and Family Services (DCF) individually having their own contract. The protective investigation function is conducted by the Pinellas, Pasco, and Hillsborough County Sheriff's Offices. Children's Legal Services (CLS) represents the state in Dependency proceedings in Circuit 6 and The Office of Attorney General represents Circuit 13. In Pinellas and Pasco Counties the Guardian Ad Litem Program is overseen by Mariela Ollsen the Circuit Director, Evelien Still in Pasco County and in Hillsborough County is overseen by Theresa Lambert.

The ECCA model is operated at a county level for each circuit. ECCA provides an administrative functionality to each service location. ECCA has three service locations in Hillsborough, Pasco, and Pinellas counties, supported by a centralized administrative support center located in Clearwater FL. In all service counties, case management services are subcontracted to community providers: Pinellas: Directions for Living and Lutheran Services of Florida; Pasco: Youth and Family Alternatives; Hillsborough: Devereux, Gulf Coast Jewish Family Centered Services, and Directions for Living. ECCA contracts Diversion programs that work jointly with each county's child protection units. In Circuit 13 diversion services are subcontracted to Gulf Coast Jewish Family Centered Services Safe at Home and Gracepoint Family Net program. In Circuit 6 the contracts for diversion services are through Directions for Living Family Works in Pinellas, and Gulf Coast Jewish Family Centered Services Safe at Home in Pasco.

Functionality and Capacity Breakdown:

Eckerd Connects restructured the leadership within each ECCA to further align with the stature of the Eckerd Connects Business Model. Each ECCA is structured with an Executive Director, Associate Executive Director, and Five Senior Directors. Each Senior Director is assigned to one of the following spokes; Growth and Transformation, Quality, Staff, External Relations, and Finance. The duties and responsibilities of each Spoke within the ECCA circuits are outline as follows:

- **Staff Spoke** – Handles/processes all background screenings for potential caregivers, eligibility determination, Medicaid eligibility and re-determination of benefits, provides document requests, and manages the switchboard.
- **Quality Spoke** – Provides ongoing support, assessment and retention of Child Placing Agencies. Handles requests and issues with missing children. Completed identified reviews both within the scope of normal duties as well as through special requests from outside constituents. Processes and trends incident reports. Ensures that provider agencies receive technical support necessary to meet child welfare outcomes for the children and families served, providing ongoing support, assessment and retention of licensed foster parents. Provides data analysis and trending of systemic issues to accompany direct accountability with the CMO agencies. Completes corresponding DCF reporting. Tracking and overseeing Psychotropic medications and 5339 compliance. Attends subcommittee meetings such as; Adoption Applicant Review Committee, Foster Home QA Committee, Separated Sibling Staffings, Match Meetings for potential adoptive families. Facilitates Child Exit survey data and trending, as well as follow up on concerns listed in submitted surveys. Ongoing support, training, and consultation with Direct CMO field staffing and leadership.
- **External Relations Spoke** – Responsible for identifying, actively recruiting, assessing, training, and licensing prospective foster parents. They are also responsible for recruiting adoptive parents, managing client relations and community engagement.
- **Finance Spoke** – Responsible for the initial and subsequent placement of children in licensed care settings, the processing of requests for supportive services to children in out-of-home care, and the coordination of placements of children in residential and foster home settings that provide mental health therapy and treatment to those children. Also, monitors out-of-home care expenses, reviews services to ensure the best use of available resources, and monitors treatment and progress of children in mental health placements. For Pre-Paid Mental Health, reviews pre-authorizations and ongoing services, and assist in appeals. Also maintains client records and the flow of information from Case Management for update into FSFN and contract management.
- **Growth and Transformation Spoke** – Responsible for managing the operational concerns including case specific problems, systemic issues and additional data analysis. Evaluates FSFN data to assess agency compliance with outcomes to target areas requiring technical assistance and oversight. Also, manages and coordinates all requests to re-open cases and provide support. Facilitates lifelong family connections by providing intensive training and coaching to case managers. Responsible for managing all activities related to post adoption support. Responsible for the oversight of Lead Agency programmatic functions, and organizes, manages and evaluates the delivery of diverse program services. Inclusive of handling requests to place a child within or outside the circuit, and issues related to courtesy supervision and adoption. Also, responsible for management of services and resources designed to enhance the independent living system and support foster youth. Engages the community in primary, secondary and tertiary prevention/diversion efforts. Also works with CPID to mitigate the risk of removal of children by providing information, support and services in order to keep families together. Provides awareness and training on child safety, family and community wellbeing, and facilitates

community dialogues to resolve issues. Develop connection with community stakeholders to engage them in keeping children safe and supporting families.

Quality Team Specifics:

ECCA’s Quality Management team conducts case reviews utilizing the Windows into Practice Model on a quarterly basis. Each Circuit has a Senior Director of Quality. In Circuit 13 there are a total of six QM Specialists who each report to the QM Supervisor. Circuit 6 has five QM Specialists who each report to the QM Supervisor. The results of the reviews are analyzed to identify trends, anomalies, areas in need of improvement, and areas of high performance. Analysis includes performance in achieving safety, permanency, and well-being; practice trends; areas of excellence; and opportunities for improvement. Enhanced funding would allow for capacity to assess qualitative and quantitative outcome and performance metrics across the entire system of care. Such assessments would provide in depth understanding of currently known barriers, providing insight into possible change agents directly related to found root causes.

The below chart outlines the workload capacity during FY 17-18

Annual workload capacity during FY17/18								
ECCA	In-Home Children	Out-of-home	Total	Florida CQI Reviews			DCF RSF	Eckerd RSF
				File Review	In-Depth Review	PIP Monitored		
Pinellas/Pasco (c6)	772	2163	2935	50	0	10	40	598
Hillsborough (c13)	886	2395	3281	44	0	12	40	873
Totals	1658	5444	6216	94	0	22	80	1471
Total Reviews Completed								1667

Performance Improvement:

This section includes information regarding the Agency’s systematic process to review practice trends and performance along with performance improvement strategies. Additionally, this section will include outcomes and measures routinely reviewed and with what frequency. During fiscal year 2017-2018, Eckerd Connects Community Alternatives (ECCA) wrapped up the fiscal year serving the second and third largest populations of youth and young adults in the state. As of the end of June 2018 ECCA

Hillsborough was providing services to more than 3600 children and young adults, while ECCA Pinellas Pasco was serving almost 3200 children and young adults.

Quality Management Activities:

- **DCF Rapid Safety Feedback Reviews:** DCF RSF reviews are completed in accordance with the Windows into Practice Model on a quarterly basis. Each circuit is responsible for 10 reviews per quarter that are selected at random from the stratified sampling method with the required DCF RSF parameters to ensure that all CMO's are represented. These reviews are submitted into the Qualtrics system portal. If, during the course of the review, a reviewer notes a safety concern, a staffing is requested with frontline staff within one business day. An action item is developed jointly with the case management staff, and tracked to completion by the Quality Specialist.
- **Eckerd Rapid Safety Feedback Reviews (ERSF):** In both circuits, one hundred percent of the children in-home with a parent under the age of 3 are reviewed for this process at least one time per quarter. A re-review of the case will continue to be completed on the case at minimum of one time per quarter until the focus child no longer meets the above criteria. Additionally, cases are re-reviewed within 48 business hours in the event that a baby is born into the case, a new investigation is initiated, or if a critical incident report is submitted. Each question on the tool aids in the identification of systemic issues. Cases are reviewed based on nine domains of critical thinking including supervision, and staffed within one business day to address any safety concerns. In the staffing, concrete action items are jointly developed by the reviewer and the CMO and then monitored to completion by Eckerd Connects Quality staff. The sample size for this review process varies on systemic ebbs and flows, but remains a focal point for the quality team throughout each quarter.
- **Safe Return Reviews:** Eckerd Connects developed a review process using predictive analytics designed to specifically identify children at high risk of re-entry into care after reunification. The Safe Return process is similar to that of ERSF, wherein it contains a file review using a standard questionnaire and a case consultation following the completion of the review.
- **Discretionary and/or Special Reviews:** Discretionary, or special reviews, are conducted by Eckerd Connects Quality Department or other approved staff when requested. Requests for discretionary reviews can be made by Executive Management, DCF Administration, or stakeholders. Prior to conducting the review, Eckerd Connects QM staff determines the purpose of the review in conjunction with the requestor. Results are shared with ECCA leadership and the requesting party. These reviews are child specific and/or topic specific. For example, Eckerd Connects QM staff has previously completed reviews for missing children, adoption permanency, abuse reports on open cases, and inspector general reports.
- **Incident Reporting:** Completion of an incident report is required by all Eckerd Connects staff and contracted providers when an incident or accident occurs. This provides Eckerd Connects with an early notice of an unusual situation or circumstance which may jeopardize the health, safety,

or well-being of a child or person receiving services under the supervision of a contracted provider. Additional entries are made into the state database for those incidents that meet the criteria of reportable incidents. ECCA Quality Department dedicated a position specific to the Incident Reporting process to review a subset of identified Incident categories for deep dive trend analysis. The reviewer utilizes the child's file and historical information from previous reports to provide an overall trend summary to ECCA, CMO leadership, and assigned staff.

- **Trend Identification and Analysis:** Trends are identified through various case reviews on several levels, including CFSR/CQI, ERSF, Operations reviews, special reviews, Safe Return Reviews, and the Eckerd Connects weekly data packet, etc. Communication of trends is paramount to ongoing quality success. Each ECCA holds leadership and stakeholder meetings that function to develop and evaluate counter-measures for identified trends. ECCA leadership in Circuit 6 meets weekly to discuss emerging systemic trends. Circuit 6 also meets with the CMO Program Directors on a bi-monthly basis. In Circuit 13 ECCA Leadership, program directors from each CMO, Hillsborough County Sheriff's Office, Judiciary, Guardian program, and community stakeholders meet weekly. Within each ECCA, the Senior Directors from each spoke meet internally one time per week. Emerging trends are discussed as part of both meetings. In Circuit 13 the Quality Department led by the Senior Director of Quality Management holds a monthly Performance Quality Improvement (PQI) meeting with CMO Directors, Assistant Directors, and Supervisors. Evaluation of the effectiveness of counter-measures is done through various file reviews, as indicated above in the identification of the trends, as well as through constant review of raw data.
- **Watchlist:** Eckerd Connects is strategically moving away from the weekly/monthly performance calls and embracing a more systemic approach to driving system improvements. ECCA instituted a new practice surrounding performance and scorecard measures to enhance communication and accountability throughout both circuits. This process, dubbed "Watchlist," provides current systemic challenges, strategies, and action steps to enhance projected performance related to identified challenges. This reporting feature is disseminated to program leaders from ECCA, in addition to leadership from its CMO contracted providers. Each CMO receives two documents that outline performance. One document highlights collective performance across our Judicial Circuits. The second document captures the specific performance areas in which an identified agency's performance has fallen below the target mark. In Circuit 6 a monthly "Watchlist" meeting is held with leadership from each CMO once per month to ensure accountability for each identified challenge. In Circuit 13 the functionality of the "Watchlist" is the equivalent, however it is discussed during the monthly PQI meeting with each case management organization.
- **Open Service Staffings:** This process was instituted to increase overall communication between case management and child protection agencies when an abuse investigation is initiated on a case receiving services through dependency case management. This process adds an additional layer of oversight and understanding of contract measures related to rates of abuse in open case, rate of abuse for in-home cases, and re-removal after permanent placement. Cases eligible for this process are investigations initiated in which an immediate removal of the child/children is

not warranted. Staffings are requested from the child protection agency when appropriate. A SPOA for the quality team schedules, facilitates, and tracks each staffing. During the staffing CPI, CPIS, CM, and CMS are brought to the table. The CPI or CPIS begins the discussion with their current progress of the investigation. It is a round table format in which information about the case and family is shared. Follow up tasks for each participant are formulated at times, and tracked to completion. Any additional communication between all the parties can be facilitated through closure of the investigations.

- **Child Exit Interviews:** The ECCA QM Department is responsible for the oversight of child exit interviews (feedback). Results are aggregated on a macro level for system improvements. If an issue is identified on the form, the ECCA QM Specialist follows up with the internal licensing department, the Licensing Provider, or ECCA Contracts Department for follow-up with the residential providers. The results of the interviews are shared with leadership, case management organizations, Licensing, and stakeholders.

Outcome Measures & Performance Metrics through FY17-18:

Data Tracking and New Communication:

ECCA utilized multiple processes across both circuits to monitor and improve performance. These processes included developing and disseminating data packets, conducting data calls with community partners, and instituting watchlists for each case management organization (CMO). ECCA publishes a weekly data packet that provides a streamlined overview of key performance indicators for both circuits. These key performance indicators align with the CFSR and Scorecard measures statewide. In addition to statewide comparison, the data packet breaks down each measure with comprehensive listings of agency specific data sets for deeper comparison. Both Circuits continue to hold collaborative calls with internal stakeholders to address these publications. In Circuit 6 a bi-monthly data call is held on the second and fourth Monday of every month. In Circuit 13, the call was initially held monthly. Due to systemic changes, the call was temporarily discontinued in February of 2018, but is due to begin again under a streamlined format in September of 2018. In addition, ECCA instituted a new practice to enhance communication and accountability throughout both circuits. On a monthly basis watchlists are developed and provided to each CMO identifying challenges to be addressed based on performance through the end of the previous month. Each CMO then provides a response identifying strategies and action steps to improve performance and provide projected performance for the next three months. The watchlists are discussed by ECCA leadership and program directors from each case management organization. In Circuit 6 a monthly watchlist meeting is held with each CMO once per month to ensure accountability for each identified challenge. In Circuit 13 the watchlists are discussed during monthly PQI meetings with each case management organization. The data packets are available at:

<http://www.ECCA.org/programs-services/system-of-care-management/ECCA-community-alternatives-hillsborough/success-metrics/weekly-data-reports/>

<http://www.ECCA.org/programs-services/system-of-care-management/ECCA-community-alternatives-pasco-pinellas/success-metrics/weekly-data-reports/>

The tables below outline a performance trend for each circuit from June of 2013 to present time. The first column illustrates the target mark for each measure with an arrow immediately to the right that depicts the target achievement area. For example column one has a target of 8.50. To meet or exceed this target, performance measurement would have to be 8.50 or below. Arrows in the final column demonstrate the overall increase or decrease toward the target during the six year span for each measure.

Circuit 13:

Measure	Target	Red Zone	Jun-13	Jun-14	Jun-15	Jun-16	Jun-17	Jun-18	
Rate of abuse or neglect per day while in foster care. Rolling 12 month period. (Federal Measure)	8.50 ↓	8.844	10.82	12.11	10.49	10.05	10.80	10.03	↓
Number of children with finalized adoptions between 7/1 and 6/30 (YTD)	N/A	N/A	298	270	288	297	275	304	↑
Children exiting foster care to a permanent home within twelve (12) months of entering care (YTD) (Federal Measure)	40.5% ↑	36.4%	51.74%	50.79%	52.37%	44.66%	48.37%	41.72%	↓
Children who do not re-enter foster care within twelve (12) months of moving to a permanent home (YTD) (Federal Measure)	91.7% ↑	90.9%	86.21%	88.53%	85.33%	86.16%	90.98%	88.38%	↓
Children's placement moves per 1,000 days in foster care. Rolling 12 month period. (Federal Measure)	4.12 ↓	4.532	4.40	4.51	4.74	4.74	5.30	6.83	↑
Percent of children in out of home care who have received medical services within the last twelve (12) months (YTD)	95.0% ↑	89.9%	96.35%	95.53%	99.12%	98.30%	99.32%	92.85%	↓
Percent of children in out of home care who have received dental services within the last seven (7) months (YTD)	95.0% ↑	89.9%	95.29%	92.88%	96.48%	96.68%	96.58%	79.13%	↓
Percent of young adults in foster care at age 18 that have completed or are enrolled in secondary education. Rolling 12 month period.	80.0% ↑	69.9%	84.09%	87.65%	95.83%	87.36%	95.83%	92.94%	↑
Percent of children achieving permanency in 12 months for children in foster care 12 to 23 months (Federal Measure)	43.7% ↑	39.3%	63.71%	63.76%	60.14%	52.01%	50.39%	46.58%	↓
Permanency in 12 months for children in care 24 months or more (Federal Measure)	30.3% ↑	25.0%	38.34%	36.34%	41.29%	50.49%	43.88%	50.82%	↑

Circuit 6:




















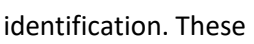
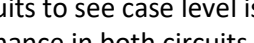
Measure	Target	Red Zone	Jun-13	Jun-14	Jun-15	Jun-16	Jun-17	Jun-18	
Rate of abuse or neglect per day while in foster care. Rolling 12 month period. (Federal Measure)	8.50 ↓	8.844	10.82	13.26	9.46	10.36	7.50	6.88	↑
Number of children with finalized adoptions between 7/1 and 6/30 (YTD)	N/A	N/A	306	370	348	297	319	319	↑
Children exiting foster care to a permanent home within twelve (12) months of entering care (YTD) (Federal Measure)	40.5% ↑	36.4%	46.81%	59.20%	53.69%	51.29%	47.17%	38.46%	↓
Children who do not re-enter foster care within twelve (12) months of moving to a permanent home (YTD) (Federal Measure)	91.7% ↑	90.9%	85.66%	88.53%	90.21%	87.24%	88.00%	90.76%	↑
Children's placement moves per 1,000 days in foster care. Rolling 12 month period. (Federal Measure)	4.12 ↓	4.532	4.23	3.40	3.57	3.66	4.46	4.64	↓
Percent of children in out of home care who have received medical services within the last twelve (12) months (YTD)	95.0% ↑	89.9%	97.47%	98.35%	98.35%	99.00%	98.76%	99.16%	↑
Percent of children in out of home care who have received dental services within the last seven (7) months (YTD)	95.0% ↑	89.9%	96.40%	96.06%	97.66%	96.50%	96.56%	96.93%	↑
Percent of young adults in foster care at age 18 that have completed or are enrolled in secondary education. Rolling 12 month period.	80.0% ↑	69.9%	87.50%	93.85%	93.65%	94.20%	88.31%	86.25%	↓
Percent of children achieving permanency in 12 months for children in foster care 12 to 23 months (Federal Measure)	43.7% ↑	39.3%	57.03%	65.64%	59.44%	55.56%	54.61%	49.80%	↓
Permanency in 12 months for children in care 24 months or more (Federal Measure)	30.3% ↑	25.0%	46.76%	51.46%	54.34%	41.70%	42.39%	48.44%	↑

In addition to general scorecard performance, “Roll-ups” of data from ECCA QM specialist assigned reviews are completed and discussed with leadership from Eckerd Connects and the CMOs on a monthly basis, with a breakdown per agency, per agency unit, and at times per tool. Data from reviews such as: ERSF, Safe Return, CQI, and DCF RSF are utilized for systemic trending providing a large window into the current case practice. For example, Eckerd Rapid Safety Feedback represents the largest Quality Assurance sample completed in the state of Florida by any Community Based Care Organization or Region. It is the primary focus of ECCA Quality Management Staff. In fiscal year 2017-2018 Circuit 13 completed over 850, with Circuit 6 approaching 600. In combination, both circuits accounted for almost 1500 individual reviews. Staffings with frontline case management staff were completed in conjunction with these reviews in accordance with the Eckerd Rapid Safety Feedback practice model. This provides for a substantial data subset that is incorporated into case practice enhancements. It also allows for the

quality team to play an active role in ongoing coaching of front line case management staff during the staffing process.

The below tables illustrate the CQI data trending from the last three fiscal years. The color coding below outlines areas of needed improvement (75.0% and below) areas that need to be considered as they approach ANI (75.0% to 80.0%) and Green indicates areas of high performance (95.0% and above).

Circuit 6: three year trending				
Performance Item or Outcome	FY 15-16	FY 16-17	FY 17-18	Change
Item 1	96.67%	100.00%	100.00%	
Item 2	100.00%	91.28%	92.25%	
Item 3	80.88%	74.48%	79.20%	
Item 4	90.03%	77.78%	92.85%	
Item 5	85.83%	89.58%	90.98%	
Item 6	90.88%	93.75%	88.10%	
Item 7	100.00%	82.30%	89.58%	
Item 8	84.73%	86.28%	73.93%	
Item 9	90.55%	84.53%	87.30%	
Item 10	76.28%	82.58%	75.05%	
Item 11	80.43%	79.73%	66.23%	
Item 12	68.30%	69.10%	61.35%	
Item 12A	89.13%	85.18%	84.73%	
Item 12B	72.65%	75.63%	62.15%	
Item 12C	98.23%	84.65%	87.30%	
Item 13	73.10%	80.20%	73.13%	
Item 14	91.88%	86.25%	82.45%	
Item 15	59.73%	57.25%	45.48%	
Item 16	80.70%	86.33%	76.68%	
Item 17	86.03%	86.10%	83.90%	
Item 18	89.70%	78.28%	64.93%	

Circuit 13: three year tending				
Performance Item or Outcome	FY 15-16	FY 16-17	FY 17-18	Change
Item 1	96.97%	86.05%	100%	
Item 2	92.31%	100%	100%	
Item 3	77.27%	94.74%	94.74%	
Item 4	81.13%	88.89%	88.24%	
Item 5	81.13%	86.67%	76.47%	
Item 6	86.79%	95.56%	88.24%	
Item 7	94.87%	94.12%	92.59%	
Item 8	89.36%	73.17%	80.65%	
Item 9	88.46%	86.67%	82.35%	
Item 10	81.13%	55.81%	82.35%	
Item 11	78.57%	62.86%	74.19%	
Item 12	63.64%	78.95%	78.95%	
Item 12A	89.39%	94.74%	96.49%	
Item 12B	69.64%	78.79%	81.13%	
Item 12C	94.23%	100%	91.18%	
Item 13	87.10%	71.43%	63.16%	
Item 14	90.91%	86.84%	92.98%	
Item 15	50.88%	60%	67.92%	
Item 16	76.47%	82.22%	77.78%	
Item 17	81.36%	74.58%	83.33%	
Item 18	70%	69.44%	76.47%	

CQI reviews are now tracked and trended for an additional layer of focal point identification. These reviews included with information learned from the PIP have helped both circuits to see case level issues that have the greatest effect on overall performance. As depicted, our performance in both circuits has seen some ebb and flow. As a quality department, we discuss our reviews quarterly to ensure interrater reliability as well as to continue to grow as a team. We have found that through continuing education in this capacity as well as from additional trainings over the last fiscal year, our ratings have declined in many areas. Continued familiarization with the tool and incorporating additional considerations have led to many of the percent changes +/- 5%. Areas with a red or yellow indicator are focal points for performance improvement initiatives.

ECCA's vs State FY 17-18			
Performance Item or Outcome	State	C6	C13
Item 1	91.00%	100.00%	100.00%
Item 2	91.00%	92.25%	100.00%
Item 3	73.00%	79.20%	94.74%
Item 4	82.00%	92.85%	88.24%
Item 5	83.00%	90.98%	76.47%
Item 6	73.00%	88.10%	88.24%
Item 7	84.00%	89.58%	92.59%
Item 8	63.00%	73.93%	80.65%
Item 9	75.00%	87.30%	82.35%
Item 10	80.00%	75.05%	82.35%
Item 11	54.00%	66.23%	74.19%
Item 12	63.00%	61.35%	78.95%
Item 12A	86.00%	84.73%	96.49%
Item 12B	66.00%	62.15%	81.13%
Item 12C	89.00%	87.30%	91.18%
Item 13	60.00%	73.13%	63.16%
Item 14	61.00%	82.45%	92.98%
Item 15	37.00%	45.48%	67.92%
Item 16	81.00%	76.68%	77.78%
Item 17	76.00%	83.90%	83.33%
Item 18	71.00%	64.93%	76.47%

For the above table; Green indicates performance above the statewide average, red indicates performance below the statewide average. Findings from both circuits continue to be positive as only Item 16 has fallen below the statewide average in both Circuits. In addition, six of the metrics have performance 15 or more percentage points above the state averages.

Safety related data from items 1-3 indicate an above average performance level. This is in part to ongoing safety planning trainings and strategies that have been implemented across all of ECCA. Safety plan creation and monitoring continue to be addressed in both Circuits as trends from each review identified areas for improvement here.

Permanency continues to be an area of struggle despite being above the state averages in many of the categories. During the year, Reviews for length of stay with our in-home population revealed issues of case movement once reunification or judicial in-home services were initiated. This was deemed to be a systemic issue and addressed through work with our judicial partners. Additionally, engagement with the parents was a substantial puzzle piece to closing out these cases successfully. Many parents were found to be disengaging with their providers once the children returned home. This lack of engagement was also found when children were placed with a non-maltreating parent. In many instances due to the child being considered “safe” the engagement with the maltreating parent waned along with progress toward the permanency goal of reunification.

Findings:

Circuit 13 Transition

During the last fiscal year, Eckerd Connects became aware of case management practices that led to the eventual discharge of a subcontracted case management organization in February of 2018. ECCA set forth a three month transition period that would transition the contracted caseload to the new sub contracted provider. During that time, leadership from ECCA supported transitional services to ensure that the youth under supervision of the case management agency were provided with appropriate oversight. As attrition of frontline staff began to rise, ECCA provided support through primary case management services to 274 children, as well as provided additional staff for facilitation of permanency staffings. ECCA continued to provide this service through the remainder of the fiscal year, as capacity for the newly contracted agency was increased.

DCF deployed a team of respected child welfare professionals from around the state to Circuit 13 for an independent review of the system of care. The Peer Review Team was charged with assessing the full scope of the Hillsborough County child welfare system of care and developing recommendations to improve its effectiveness in keeping children safely at home whenever possible and providing adequate care for children who must be placed in out of home care. The Peer Review Team produced a comprehensive report in June of 2018 which detailed focal points of current systemic gaps, and provided recommendations for program implementation. This report was utilized by ECCA to create a corrective action plan (CAP) that would be implemented during FY 2018-2019. The CAP was created with detailed action steps to address each finding from the Peer Review Team. The plan was approved by DCF and is currently being implemented.

Safety

Safety continues to be a critical focus for both circuits. During the last fiscal year, Circuit 6 exceeded the federal standard (8.5) and the statewide average (8.95) in the Federal Rate of Abuse measure coming in

at 6.88. Both Circuits performed above those target standards in measure 2 (seeing a decrease in abuse during in-home services. Notably Circuit 13 finished the fiscal year ranked 3rd among all CBC's in the state. Additionally, ECCA quality staff has been able to focus more on development and monitoring of safety plans with front line staff. As a lead agency ECCA continues to perform in the top tier for children seen every 30 days, exceeding the statewide averages and leading the Suncoast region.

The focal point of the negative correlation with overall safety was around development and ongoing monitoring of safety plans. This was evident as to the data collected from the Florida CQI reviews, and through an accumulation of review data from other assigned duties. Front line staff was struggling with completing safety plans in conjunction with the family, identifying safety monitors through support mapping, and outlining specific safety action steps that the identified monitor/support was assigned. In addition, updating the safety plan at critical junctures and ensuring to complete collaterals with the safety monitors identified on the safety plan. Circuit 13 has been struggling with the Measure 1, which is rate of abuse per day in foster care. A deep dive revealed that 33 percent of the verified abuse instances were for Inadequate Supervision by a caregiver. Most often the caregiver was allowing contact with the parent(s) and not following the level of contact determined by the CMO/court system.

Permanency

In addition to declining scorecard performance in permanency related measures, CQI data collected provided insight into the issues for both circuits. Overall performance in; children returning home within 12 months, Children exiting foster care to a permanent home within 12 months of entering care, and Children who do not re-enter foster care within 12 months of moving to a permanent home all saw a decline during the fiscal year. Direct effectors on these measures were found to be related to overall family engagement, case management turnover rates, judicial delays, provider waitlists, and general documentation delays.

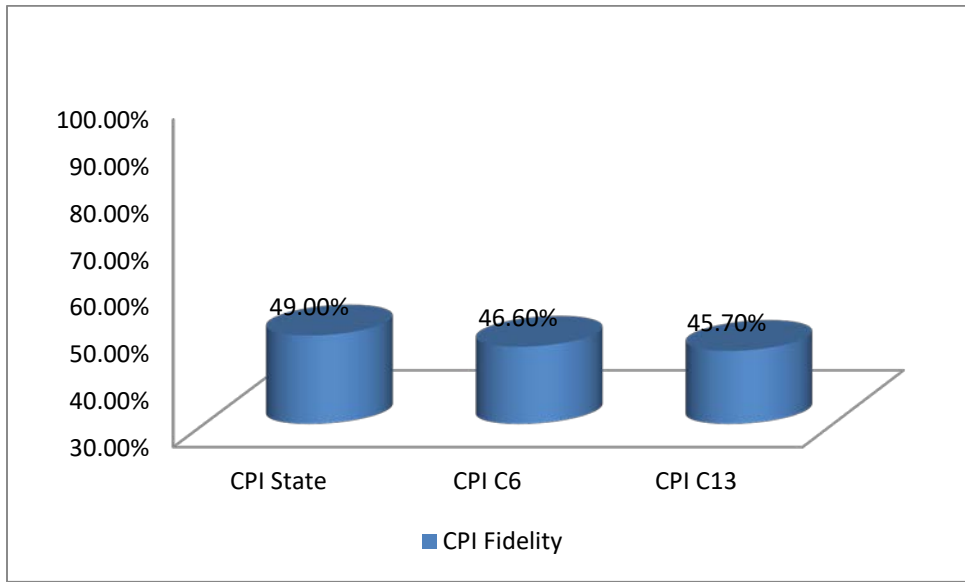
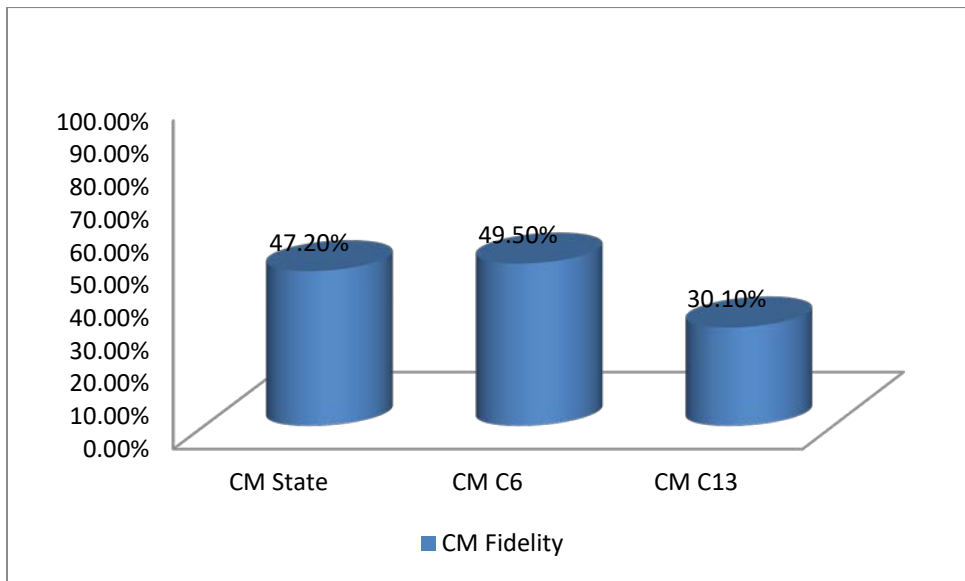
Parent Engagement - Both Circuits declined in parent engagement stats overall. From the CQI, PIP, and ERSF reviews completed during the year; it was determined that In-home judicial cases in which a child is placed with a non-maltreating parent, most often lacked parent engagement of the maltreating parent. This was leading to increased length of judicial oversight due to lack of sufficient efforts by the case management organization to link the maltreating parent with the services necessary to achieve their case plan outcomes.

Removal Rates vs Foster Bed Capacity – Continuing to struggle across the state, ECCA also felt the impact of having one of the highest removal rates recorded. Information from the June 2018 Statewide Monthly Key Performance Indicators report outlined that from 1/1/18 to 3/31/18, in Circuit 13 removal rates were as high as 8.0 per 100 alleged Victims. Foster home capacity was taxed with separation of siblings, night to night placements, and continued usage of bed waivers. Although statistically Circuit 13 out recruited the state in licensing new foster homes, the licensing capacity of the new homes was not correlated with the needs of the system.

Supervision: Another area of high need was identified at the case management supervisory level. The quality and quantity of overall supervision was found to be sub-par and needing augmentation. Due to

the high turnover rates and the Transition in C13, field experience and general education was lacking at the supervisory level. Many supervisors had not been exposed to data tracking and trending on a unit level. Permanency and Safety planning follow up was a reoccurrence in documentation, but often rolled month to month without resolution. Lastly, caseload size and high turnover, often times had the supervisor working in the field to maintain ongoing supervision of families.

General Understanding of Safety Decision Making Methodology –



Ongoing practice understandings coupled with barriers to judiciary acceptance have created additional systemic issues. New CFOP and FAC were rolled out throughout the year. These changes have been slow

to intake and require high levels of communication. According to stats pulled from Tableau, Circuit 13 Child Protection is practicing at 45.7% Fidelity to the practice model, while case management is at 30.1%. Circuit 6 Child Protection is at 46.6%, with Case Management at 49.5%. This has been an ongoing dilemma with both circuits as adjustments to the documentation and case progression has been slow and hindered by historical practices still in place. In comparison though, State wide averages are similar to our results with Case management at 47.2% and Child Protection at 49.0%.

Well-being

Circuit 6 and Circuit 13 remained above the standard for Medical Services the entire fiscal year. This is in part due to a self-imposed standard of 99% in which ECCA holds the case management providers contractually accountable for. At present time, countermeasures have been implemented in both circuits to improve overall dental numbers. Circuit 6 saw 3 months of performance in the yellow, but were able to gain momentum in June achieving the target mark of 95.0%. In Circuit 13 there was a steady decline that began during the transition of case management organizations from February 2018 to present time. One particular area of highlighted performance would be the percent of young adults in foster care who have completed or are enrolled in secondary education or vocational school. This is focused through our independent living programs and extended foster care providers that work directly with youth in this cohort.

CQI data was able to provide a better picture into our provider linkages through Items 16, 17, and 18. We were able to determine that follow up appointments were a large portion of the performance issues presented in the CQI reviews. These, in combination with delays in provider linkage, were areas of focus for our circuits moving through the year.

Performance Improvement Strategies

Statewide PIP reviews are now being debriefed with frontline staff once completed to ensure that results and areas of improvement are communicated in real time. Additionally statistical analysis of performance from the CQI data is addressed every other quarter with the case management provider leadership during PQI meetings in C-13 as well as during program director meetings held monthly in C-6. To supplement the above interventions, performance measures directly related to the identified gaps from the PIP and CQI reviews are included in the monthly Watchlist and discussed with each CMO agency. These information sharing strategies have opened additional lines of communication and brought case level insight to the front line. Ongoing educational resources and trainings directly related to the information presented have increases staff awareness of areas where we can improve systemically. Feedback from the CMO agencies has been positive up and to this point. Staff indicated that they were not aware of the connections between case level work and scorecard performance. To enhance this linkage, data trainings have been offered in both circuits. These trainings begin with the forward facing data packet that ECCA compiles each week, and drills down each cohort and possible countermeasures. These trainings have been offered to supervisory level CMO staff and above. Additional training to ECCA staff has been incorporated in C6 due to a recognized gap in data

understanding at the supervisory level for the lead agency. This was to enhance Supervisory discussion across the agency and promote creative team work for further progress.

As an added level of expansion over the last year, QM Specialists have also made themselves available for individual, unit, and agency trainings. Each quality specialist provides at least one half day per week on sight aid at the various CMO locations. The specialists are not assigned to a specific agency at this time allowing for them to forge additional relationships and connections across the circuit. For example, the Circuit 13 QM team completed a full orientation style training for the new hire staff at Directions for Living Hillsborough. This training encompassed all aspects of the QM team, review processes, incident reporting, and child exit survey completion. Both Circuits have also completed trainings that were requested by Case Management Supervisors specifically for their units. These trainings vary and typically surround case management practices. They are usually created upon request so that they can be individualized to the need of the supervisor and workers.

Family Reunification Team (FRT) – In Circuit 13 we re-signed the contract with Gulf Coast Jewish Family Centered Services to continue implementation of the Family Reunification Team program as a major service provider to our In-home population. FRT's Reunification Support Services are designed to complement case management services by providing intensive in-home, family engagement, through case management and therapeutic services. Referrals for the program can be submitted as soon as reunification is projected. Family Reunification Team (FRT) serves families that have a reunification date within 12 months from their last date of entry into the Child Welfare System. Services can initiate with the family up to 30 days PRIOR to reunification, but no LATER than 10 days after reunification. For FRT to initiate services, the CMO must have the option for reunification and have begun working transition plan with a reunification date expected within 30 days. All families are seen by an FRT staff member within 2 business days of receiving referral. FRT is in the home initially 2-3 times a week and decreasing as families are making progress to prepare them for service closure. Initial FRT staffing is held within 10 days of receiving referral to develop goals, identify family strengths, and plan for a safe and successful reunification. Bi-weekly staffing's are held to ensure collaboration is occurring and that all of the family's needs are being met, as well as discuss any barriers or obstacles the family may unexpectedly face. Provide linkage to families prior to closure if there are continued needs. 24 hour 7 days a week on-call for families to contact in case they have questions or concerns in the evening or on the weekends.

FRT tracks their performance in relation to the statewide contract measures pertaining to maltreatments during in-home services, re-removals, and practice trends by utilizing the data collected through independent verification specific to their service cohort. Below is the most recent data from the last Fiscal year

Performance Measures	Target	Actual	Actual %
Children will not be neglected or abused during service provision as measured by independent verification with Florida Safe Families Network (FSFN)	95.00%	356	98.89%
Children will not be involved in an Out-of-Home placement during service provision as measured by independent verification with Florida Safe Families Network (FSFN)	95.00%	349	96.94%
Children will not be involved in an Out-of-Home placement within 12 months of the end of the program as measured by independent verification with Florida Safe Families Network (FSFN)	95.00%	290	90.06%
Families will achieve at least 75% of their Service Plan goals at discharge	90.00%	85	100.00%

Rapid Reunification Team - Circuit 6 began a contract with the case management providers to dedicate funding and develop Rapid Reunification Teams for each CMO agency. FY 17-18 and FY 18-19 additional funding was dedicated for two FTE Reunification personnel members (Licensed Therapists) that are to be hired by the Case Management Organization. Much like FRT in Circuit 13, Reunification Support Services are designed to work along with case management services by providing intensive in-home family engagement services in order to ensure a safe and permanent reunification of the child. These intensive in-home family engagement services are designed to respond to individual situations that may be impacting family’s ability to provide a safe environment for the child, which include but are not limited to: mental health illness of parents and/or their children; substance abuse; and/or incidents involving domestic violence in the home. The major program goals for these teams are to ensure the safety, permanency and well-being of all children under the protective supervision or legal custody of the Department, to seek permanency for all children through timely, integrated, family-centered services designed to meet the unique needs of the family and capitalize on their strengths.

Reunification Support Services: Population to be served shall be identified by Case Management. Priority of service shall be as follows:

1. Children in Residential Out-of-Home Care
2. Children in foster care

3. Children in relative/non relative care

Point of entry into the program shall be determined by the Provider based on each family's needs. Point of entry is no later than unsupervised visits AND shall not be less than thirty (30) calendar days prior to reunification. Total time of service shall be no less than thirty (30) calendar days and no more than 120 calendar days. Any exceptions to this standard must be approved in advance by the Eckerd Connects C6 Senior Director of Growth and Transformation. Services cannot be provided past fifteen (15) months from the primary child's date of entry into care.

The Rapid Reunification Programs initiated services during the last fiscal year. At this time they have not been operating long enough to have qualitative data to review for effectiveness, but continued data collection and assessment for trending and program success rates be a priority moving FY 18-19 to maintain ongoing contract funding.

Kinship Support Program: This program is designed to complement case management services by providing direct support to non-licensed caregivers (relatives and non-relatives) of children in the Hillsborough County child welfare system. Services are provided in the caregivers' homes and local communities. The program utilizes direct family involvement to develop an individualized support plan to address necessary service needs such as counseling, crisis intervention, advocacy, case management assistance, caregiver benefit assistance, and peer support. Kinship services provide caregivers the support and guidance they need so that children remain with family or close loved ones, preventing placement in foster care whenever possible. Length of stay is determined on a case by case basis, typically ranging from 60-90 days. Kinship is designed to serve 150 families per year. Staff includes program director and 3 Kinship Counselors

This service is outlined for acceptance under the following criteria:

Children and their relative and non-relative caregivers placed in a relative or non-relative full time placement located within Hillsborough County, FL, who are experiencing a crisis as defined by the following criteria: Child experiencing significant emotional or behavioral distress; disruption; and/or violent behaviors posing a risk to stability of the placement; Caregiver in need of enhanced parenting support and guidance to prevent placement disruption; Concerns for safety of children or caregivers in the home; Caregiver's problem solving capacity diminishing/caregiver compassion fatigue.

Outcomes for the program are rated to stabilizing the home and prevention of abuse and neglect. Over the past FY Measurements include a 95% rate for children that did not experience a placement disruption during service provision and a 100% benchmark for children served did not experience abuse or neglect during service provision.

Intake/Removal/Diversion/Mapping Process: In Circuit 13, ECCA staff began to work with the Hillsborough County Sheriff's Department to map out the current process of; intake, removal, and diversion referrals. This joint venture was to evaluate this process to determine what changes need to be made in conjunction with the financial viability plan for the circuit to show continued efforts to reduce cost in out of home care. As a support to the CPI unit, ECCA staff will assist with the diligent search efforts and urgent home study capability to identify relatives and non-relatives prior to placement in licensed care. Currently ECCA has 4 Resource Specialists co-located with CPID. The Resource Specialists are able to assist CPID with family finding during a shelter, by researching FSFN, running accurints, making phone calls to any identified relatives to discuss placement and obtain demographic information for the CPIs. The current process will be evaluated taking into account the changes in the Unified Home study process to determine what support the Resource Specialist can provide the CPIs at time of shelter. As an additional layer to the partnership, ECCA staff work with the Diversion providers to identify any training needs for family mapping. ECCA will continue to work with CPID on an escalation protocol when CPID is requesting an OTI home study at time of shelter and the OTI County is unable to complete it the same day of shelter.

Family Finding Program: Last year ECCA saw an overall increase in children coming into care in both circuits. We began to look at specifics that were within our control as a lead agency. One identified area of focus was length of stay in out of home care. To impact this increase ECCA focused efforts on achieving permanency timely by reviewing children from this population to determine possible safe reunifications or step down into relative/non-relative care. Circuit 13 procured funding for an additional unit in July 2017. This unit was modeled after the evidenced based practice of "Family Finders". The Family Finding model offers methods and strategies to locate and engage relatives of children living in out of home care. This unit was instituted with the goal to reduce the number of children in Out of Home Care by locating and engaging relatives/non-relatives and successfully transitioning children to the care of their family.

Turnover/USF/ Preservice Training Expansion: Both circuits have been directly impacted by front line staff turnover rates. This has been a critical focus across all of Eckerd Connects Community Alternatives, attempting to improve retention of staff across both circuits. In efforts to aid the case management organizations, ECCA has partnered with the University of South Florida to provide additional pre-service training classes and amended the training schedule to acclimate new staff into the field. Although this has not decreased the overall turnover rates in each county, it has aided in overall staffing ratio stabilization. CMO agencies have also developed incentive programs for case management staff to promote staff retention and aid in mitigation of the cost for lost FTE's in the first 6 months of service. Programs for incentive are individualized to each CMO provider, but most commonly involve monetary compensation for time spent and/or caseload size.

Dependency court improvement program monthly (DCIP)/Brown Bag – In efforts to streamline the court process and discuss common barriers, leadership from community stakeholders and the judiciary are meeting in both circuits. These meetings have been productive in decision making for known barriers and at times identifying case specifics that were able to help achieve permanency. Additionally continued efforts to address fidelity to the statewide Methodology are made to ensure linkage between the field work and the courtroom. These meetings have also prompted work groups locally and in conjunction with the Guardian Ad Litem programs to educate and promote system processes.

C13 Yale professor Dr. Joyce Taylor – During the C13 transition ECCA was able to partner with Dr. Joyce Taylor to obtain feedback on the current practices in place throughout the circuit. She was able to provide valuable feedback that ECCA has utilized in development of the current Corrective Action Plan in Circuit 13. In addition to her feedback for the fidelity of the Circuit, she has also partnered with the case management organizations to provide coaching and mentoring to supervisory staff.

Safety Plan Trainings – Both quality teams have provided onsite safety plan trainings to front line staff. These trainings were directly related to findings from the review processes and incorporated language and education surrounding the development, implementation, and monitoring of safety plans. ECCA was also able to partner with the University of South Florida Training Consortium to provide additional safety trainings in both Circuits through various formats. To expand upon the trainings, both Circuits QM Specialists and USF trainers provide ongoing coaching in Unit meetings as well as on an individual basis. Overall safety planning has increased as per the most recent CQI data presented. Although documentation continues to be an issue, an increase in active safety planning and overall ability to articulate the importance has been evident.

Caregiver court engagement: Education was forwarded out to all caregivers in an effort to enhance participation in court hearings and open lines of communication. This process was initiated in FY 2017-2018 and continues to be in place. The educational tools are now housed online, and information surrounding the direct link to this material is provided to new caregivers upon placement of children.

Supervisor Level Key Competencies: Over the last year, we experienced many transitions across the board. Both circuits saw above average turnover rates for frontline and supervisory staff. During deep dive conversations with leadership from the case management agencies, it was determined that the Supervisor position needed to be a focal point for enhancement and education. Across both circuits we utilized the initial proficiency training program “Supervising for Excellence” (SFE) for case management and lead agency leaders. This program is taught through the USF training consortium. In addition, USF offers Learning Circles in each circuit that addresses common practice gaps and allows for a free flowing conversation. These learning Circles are held each month, and are opened to all of the CMO and Lead agency supervisors. Supervision numbers are pulled and discussed as part of the Watchlist/PQI meetings held with each CMO’s leadership. To help supervisors in Circuit 13, we have also opened up our ERSF

and Safe Return staffing process to allow them to complete supervision in conjunction with the staffing. During this time we continue to model the process model for ERSF and Safe Return, but allow the CMS to interject needed information and questions relating to supervision and case plan outcomes. We have found that supervisors who utilize this process provide positive feedback and indicate that it has been helpful to them.

Targeted Recruitment: To mitigate the trends that were found through the dive into foster home bed capacity, both circuits began a targeted recruitment process to expand licensure of sibling placements by ensuring recruitment specialists targeted homes that would be licensed for multiple bed capacity (2 or more). A second focus was to recruit homes that would be licensed specifically to place teens. This has been an ongoing process for both circuits as there was a growing number of teen

Foster Parent Mentoring and Liaison: In 2017-2018 ECCA Circuit 13 procured funding several new positions. In efforts to enhance support for ECCA staffing and foster parents, this program was created with three mentor positions and one Liaison. The purpose of this Foster Parent Liaison is to support Eckerd Connects and Liaison's shared goals of increasing the overall retention rate of foster parents, increasing placement stability in foster homes, and to educate foster parents on how to successfully navigate through the Eckerd-Hillsborough System of Care. Liaison agrees that mentoring provides an opportunity to contribute to the quality of fostering practice by helping newly licensed and re-licensed foster parents to improve their skills and knowledge, also aiding in the retention of foster parents. The Liaison will also oversee the Foster Parent Mentor program, guiding them in their own growth and development. Foster parent mentors positions are designed to reach the shared goals of increasing the overall retention rate of foster parents, increasing placement stability in foster homes, and to educate foster parents on how to successfully navigate through the Eckerd Connects' System of Care. Mentor agrees that mentoring provides an opportunity to contribute to the quality of fostering practice by helping newly licensed foster parents improve their skills and knowledge, also aiding in the retention of foster parents. It is also an opportunity to help Mentors in their own growth and development.

Targeted Documentation and policy Workgroups- To continue education and development of the case management organizations, ECCA has begun to institute workgroups to specifically address policy and process updates for case management. This is to enhance overall understanding of FSFN documentation and required case level meetings. As an example, 170-1(9) new child policy and procedure was rolled out during the year. This policy was created to align practice with the requirements outline in the CFOP 170-1(9) for children that are born, or enter an open case. This process has reorganized the process and aided case managers with completion of adequate assessments, as well as enhanced Currently a process to streamline permanency staffings is underway and anticipation of a roll out through January of 2019.

Open Service Case Staffings- This process was instituted to increase overall communication between case management and child protection agencies when an abuse investigation is initiated on a case receiving services through dependency case management. This process adds an additional layer of oversight and understanding of contract measures related to rates of abuse in open case, rate of abuse for in-home cases, and re-removal after permanent placement. The process was formatted through an MOU between ECCA and the Hillsborough County Sheriff's Office Child Protection Unit. The current process is under evaluation for overall effectiveness, as there have been issues with scheduling and communication. ECCA will continue to partner with the HCSP CPU to revamp the process for continued effectiveness.

Parent Advisory Council - As part of our Community Café initiative, Casey Family Programs has partnered with Eckerd Connects, the Guardian Ad Litem's program, and community-at-large, to launch Hillsborough's very first Parent Advisory Council (PAC). The PAC includes parents who have successfully navigated the dependency system and achieved reunification with their children. These parents have made a commitment to work with current dependency parents who have had their children removed to assist with ensuring the timely and successful return of their children back to their care /custody. These meetings are held monthly, and continue to receive positive feedback from group members.

Continued Quality Improvement:

Over the last fiscal year, ECCA has continued its model of leadership through creativity and innovation. We have launched many initiatives designed to support the systemic challenges we have been faced with: the penetration rate of youth entering the system, placement stability for youth served in licensed foster care, support for foster families and front-line case managers, and ensuring all our youth achieve timely permanency. ECCA believes that we have a strong grasp of current system barriers and remains committed to operating a system of care that promotes a child-, youth-, and family- centered culture of practice.