

# RBA Pilot Project: DCF Family Preservation and Support Programs

**Interim Report: October 8, 2009**

Program Review & Investigations Committee

# Project Background

- Results-Based Accountability Approach
  - Appropriations Committee using since 2005
- PA 09-166
  - Requires PRI pilot study of selected human service programs based on RBA principles

# RBA Principles: Basic Concepts

- Problem-solving process to improve:
  - Quality of life in a community
  - Performance of programs, agencies, service systems
- Focus on end results (outcomes)
- Use data to measure progress and identify corrective actions

# RBA Principles: Levels of Responsibility

- Population Accountability
  - Well-being conditions of whole population
  - Success depends on broad partnerships
  - Indicators (quality of life results)
- Performance Accountability
  - Well-being of clients
  - Program managers responsible for improvement
  - Measures (client results)

# RBA Principles: Indicators & Measures

- Baseline
  - History and forecast – trends
- Story behind the baseline
- Turn the curve (improve trend line)

# RBA Principles: Taking Action

- What will happen if we don't do something different?
- What would it take to achieve success? How do we do better?
- What actions – including low-cost/no-cost ideas – will make a difference (turn the curve)

# RBA Framework: Components

## ***Population Level:***

- Desired population results (statement)
- Indicators of progress (3-5)
- Strategies to achieve
- All partners with a significant role

## ***Program Level:***

- Programs that contribute
- Measures of performance
  - *How much*
  - *How well*
  - *Anyone better off*

# Pilot Project Topic

- Department of Children and Families
  - Mission: protect children; improve well-being of children and families
  - \$914 million budget; 3,600 staff
  - Child welfare caseload: 17,525 cases
- Family Preservation and Support (FPS)
  - DCF “front-end” programs – prevent or reduce time in out-of-home placements

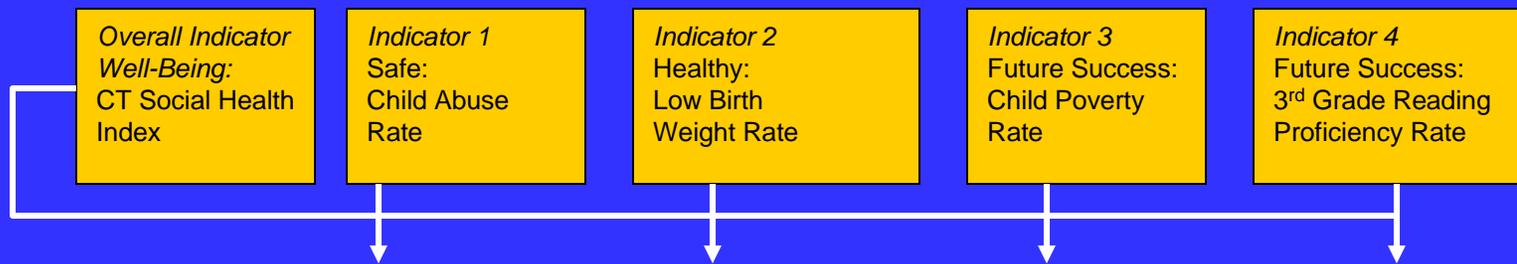
# RBA Framework: PRI Project

## Population Accountability

### Quality of Life Results Statement

**"Connecticut children grow up safe, healthy, and ready to lead successful lives."**

### Results Statement Population Indicators



### Major Strategies and State Government Partners Contributing to Results Statement



### Non-Governmental Partners

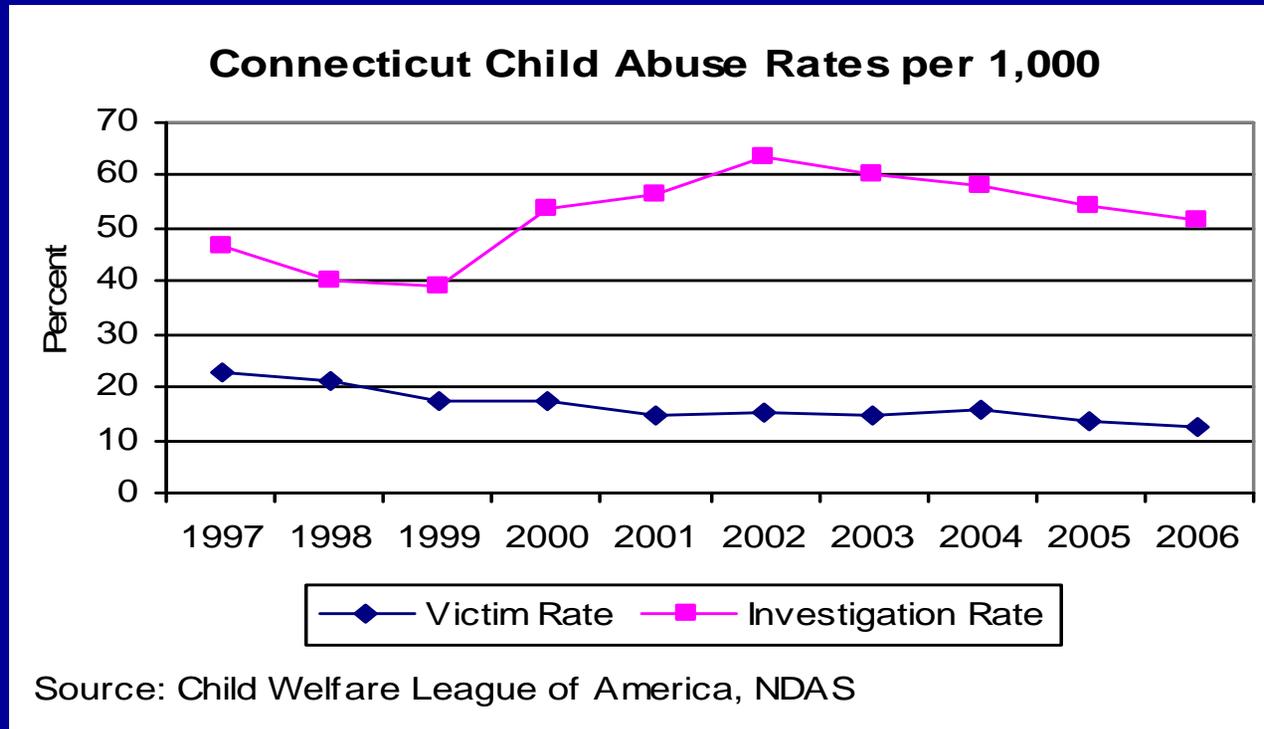
Caretakers & relatives  
 Child advocacy organizations  
 Community members & organizations  
 Healthcare professionals & providers  
 Private child & family services providers  
 Schools & child care providers

# RBA Framework: PRI Project

## Key Indicators

- Quality of life results statement:  
*“Connecticut children grow up safe, healthy, and ready to lead successful lives.”*
- Key Indicators
  - Safety
  - Health
  - Future success
  - Overall Social Well-Being

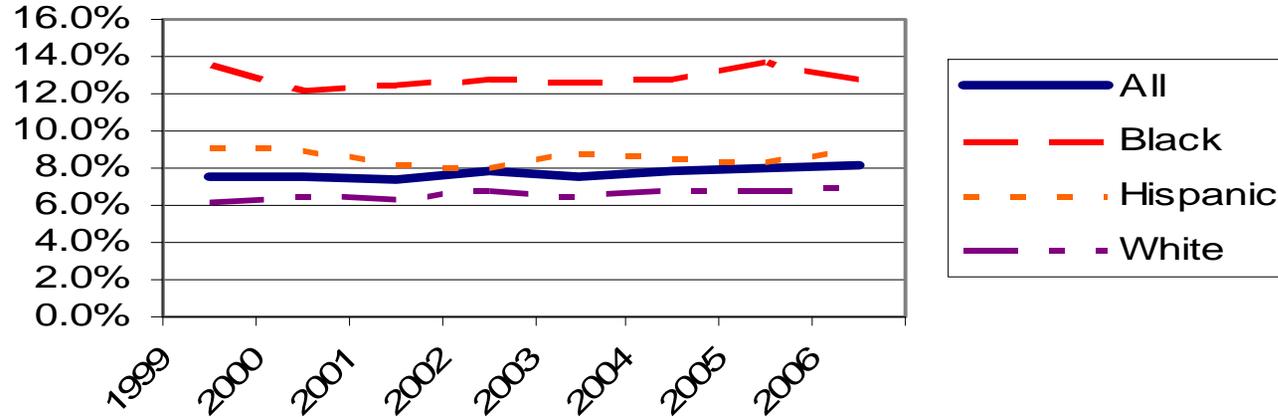
# Children are safe



- Rates declining in recent years but child abuse still a serious problem

# Children are healthy

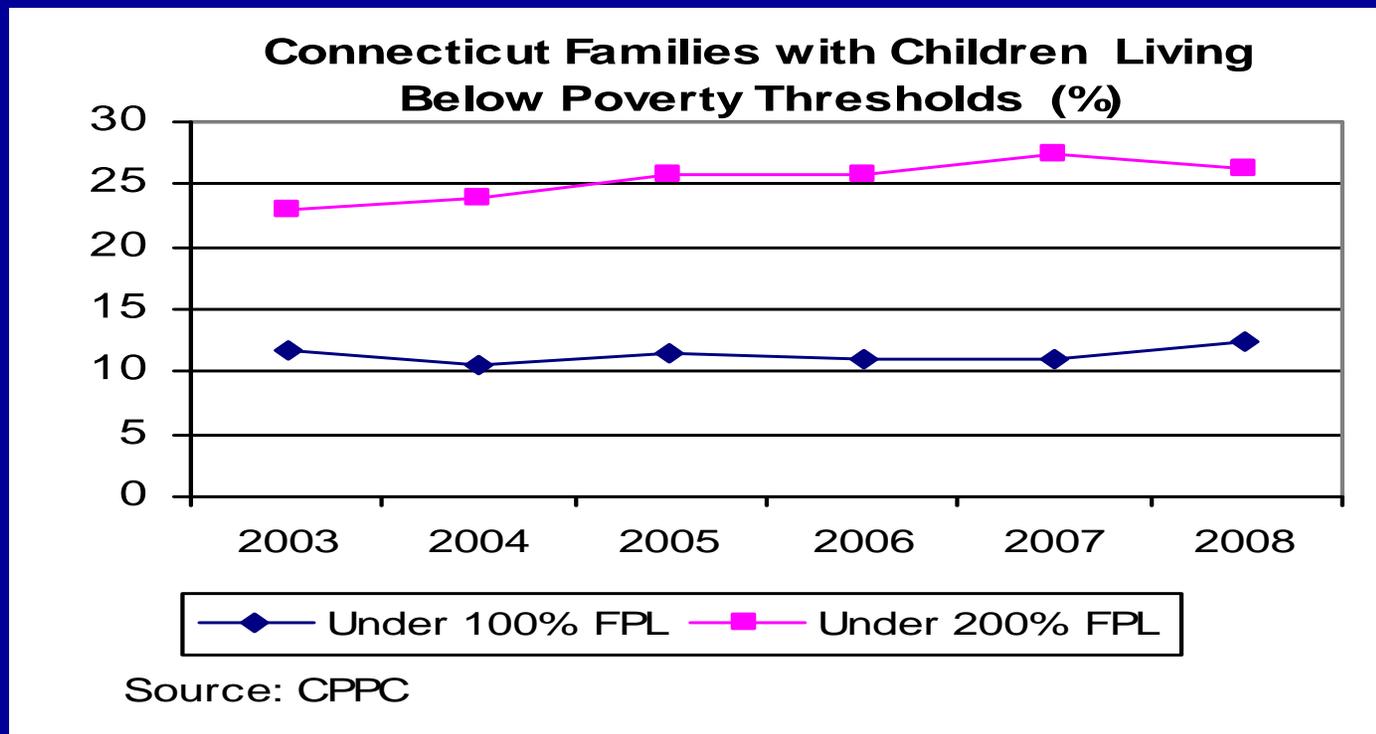
**Percent of Low Birth Weight Babies in Connecticut**



Source: DPH

- Recent increase in prevalence of low birth weight plus racial/ethnic differences troubling

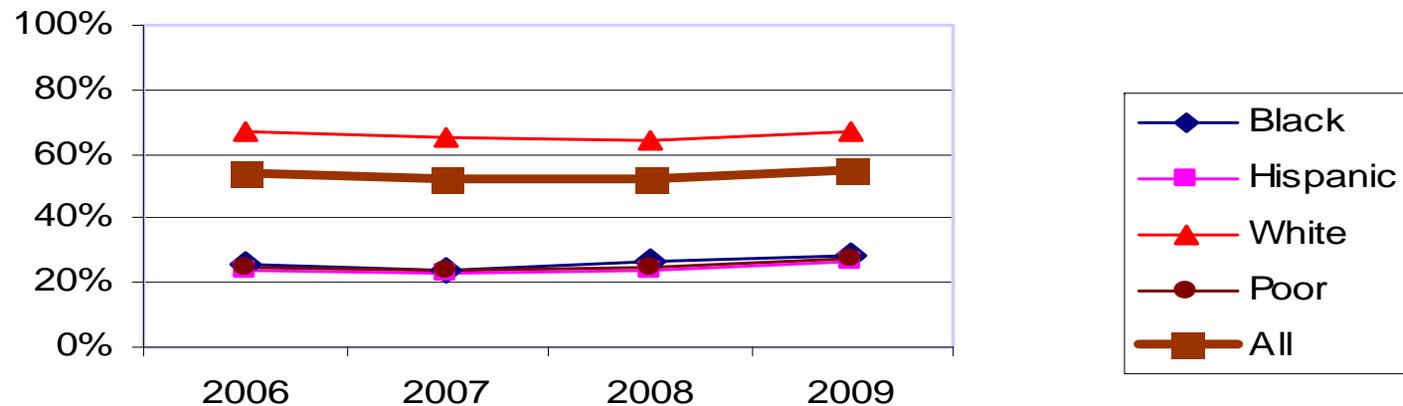
# Children's basic needs are met



- Recession contributes to recent sharp rise in child poverty rate while portion of low income families persists above 25%

# Children are proficient learners

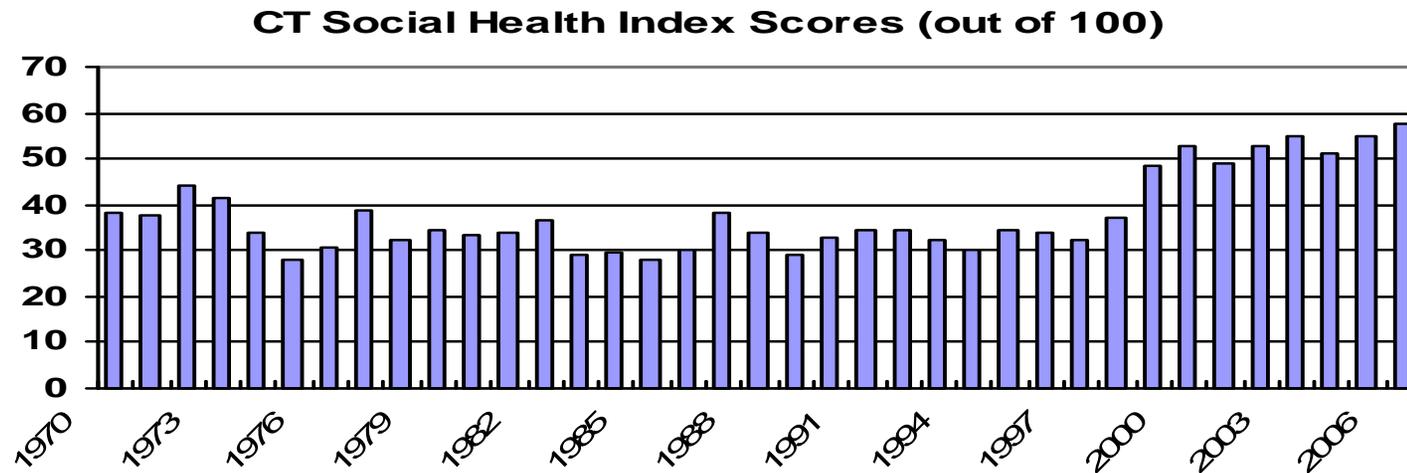
**Percent of Connecticut Third Graders Who Mastered Reading**



Source: SDE

- Recent small improvements across nearly all subgroups but achievement gap remains a challenge

# Child and Family Well-Being



Source: The Social State of Connecticut 2008

- At highest level to date but well below best score
- Trends for index components vary, e.g., in past five years:
  - Infant mortality, child abuse, high school drop outs, teen births, average weekly wage, violent crime improved; no health insurance same
  - Youth suicide, affordable housing, unemployment, income variation worsened

# RBA Framework: PRI Project

## Program Accountability

*“Connecticut children grow up safe, healthy, and ready to lead successful lives.”*

### DCF’s Contribution to Results Statement: Main Roles and Related Agency Programs

#### Keep Children Safe

*Work with partners to prevent maltreatment of any child*  
*When necessary, provide quality out-of-home care for DCF-involved children*

- DCF Prevention Services
- Hotline (central A/N report intake)
- Out-of-Home Care
  - Foster Care
  - Congregate Care
- Adoption

#### Meet Health Needs

*Implement integrated, comprehensive, behavioral health care system for all children*  
*Ensure children in DCF care receive all necessary health services*

- DCF Behavioral Health Services
  - KidCare System (BHP)
  - Riverview Hospital
- DCF Medicine

#### Help Achieve Stability

*Maintain children safely in family when possible;*  
*Strengthen capacity of DCF-involved families to meet child’s needs through effective casework practice and quality services*

- **Family Preservation and Support**
  - Intensive In-home Services/Casework
  - Flexible Funding
- Differential Response

#### Support Development

*Work with partners to ensure children in DCF care and custody receive appropriate services to meet educational and developmental needs*

- DCF Education
- Juvenile Services (for delinquents)
  - CJTS & Parole
- Adolescent Services
  - Transition to Adulthood

#### **Key FPS Program Performance Measures:**

- Repeat Maltreatment Rate
- Out-of-Home Placement Rate
- Improved Family Functioning

# RBA Framework: PRI Project

- DCF one of many partners contributing to results statement
  - Responsible for safety and well-being of children and families that come to its attention
- FPS one of many department program areas contributing to results statement
  - If programs working, children and families served are better off
  - Key measures: safe, stay together, stronger capacity to meet needs

# Family Preservation and Support Programs: Overview

- Goal: Keep families together – both preserve and reunify
- 20 programs plus Flexible Funding
  - 10 primarily for families with confirmed or potential maltreatment
  - 10 primarily for children with behavioral health issues

# FPS Programs: Overview

- Three DCF bureaus oversee
- Programs operated by contracted providers

# FPS Programs: Highlights

- Size varies widely – cost and clients served
  - Highest cost to DCF: Flexible Funding (\$26.6m; 9,281 families) and Outpatient Psychiatric Clinics for Children (\$11.8m; 13,837 families)
  - Lowest cost to DCF: Two programs at about \$200k each
  - Median program: Capacity of 424 clients and DCF cost of almost \$1.5 million

# FPS Focus Programs: Overview

<u>Program</u>	<u>Target Population</u>	<u>Risk of Child Out-of-Home Placement</u>
<b>Intensive Family Preservation (IFP)</b>	Families w/ A/N case	Moderate-high
<b>Parent Aide</b>	Families w/ A/N case	Low-moderate
<b>Supportive Housing for Families</b>	Families w/ A/N case	Moderate-high (housing is a main problem)
<b>Flexible Funding</b>	All types of DCF clients	Varies – serves range (including those out-of-home)
<b>Intensive In-Home Child and Adolescent Psychiatric Clinics (IICAPS)</b>	Children w/ serious psychiatric problems	High (hospitalization or residential treatment)

# Focus Programs: Report Contents

- Program Performance Profile for each program
  - Brief background
  - The 3 RBA program questions:
    - I. How much did we do?
    - II. How well did we do it?
    - III. Is anyone better off?

# Focus Programs: Report Contents

- Data: Preliminary
  - Mostly *what* but not *why*
  - Much is not readily available (common across state agencies)

# Focus Programs: Performance Profiles

## I. How *Much* Did We Do?

- Performance measures:
  - Clients served
  - Dollars spent

# Focus Programs: Performance Profiles

## I. How Much Did We Do? (below: FY 09)

<b>IFP</b>	1,290 slots	\$5.8 million
<b>IICAPS</b>	1,595 served	\$3.0 million <i>excluding Medicaid</i>
<b>Parent Aide</b>	1,991 slots	\$4.3 million
<b>Supportive Housing</b>	760 in program at end of FY	\$7.0 million <i>excluding DSS housing</i>
<b>Flex Funds</b>	9,281 cases served	\$26.6 million

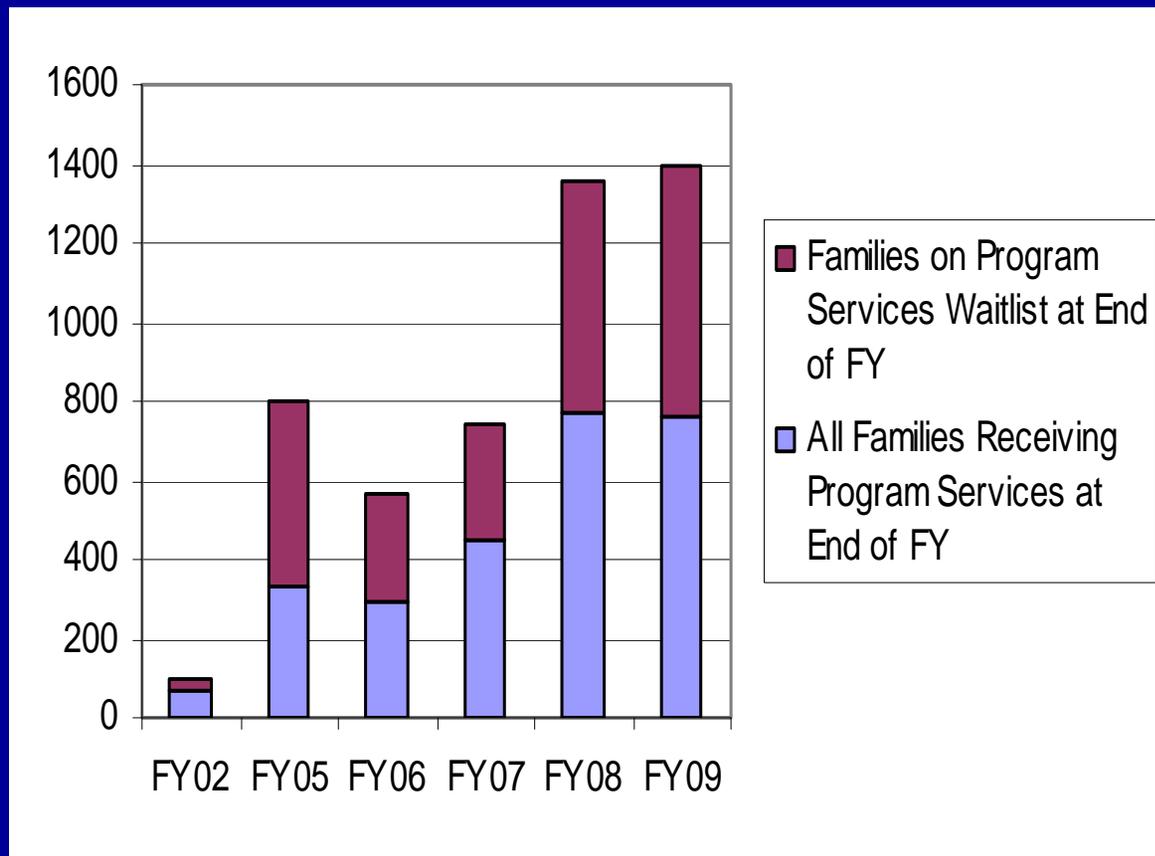
# Focus Programs: Performance Profiles

## II. How Well Did We Do It?

- Performance measures:
  - Met demand
  - Met service standards (duration, volume, etc.)
  - Completion rates and non-completion reasons
  - Cost (per-client)
  - Client satisfaction
  - Provider satisfaction
  - Provider variation

## II. How Well Did We Do It?

### Supportive Housing: Met Demand for the Program (p. 42)



Trend: Fluctuating but consistently not meeting demand (worse)

Story Behind the Baseline: Ability to meet demand is determined by program and DSS funding

# Focus Programs: Performance Profiles

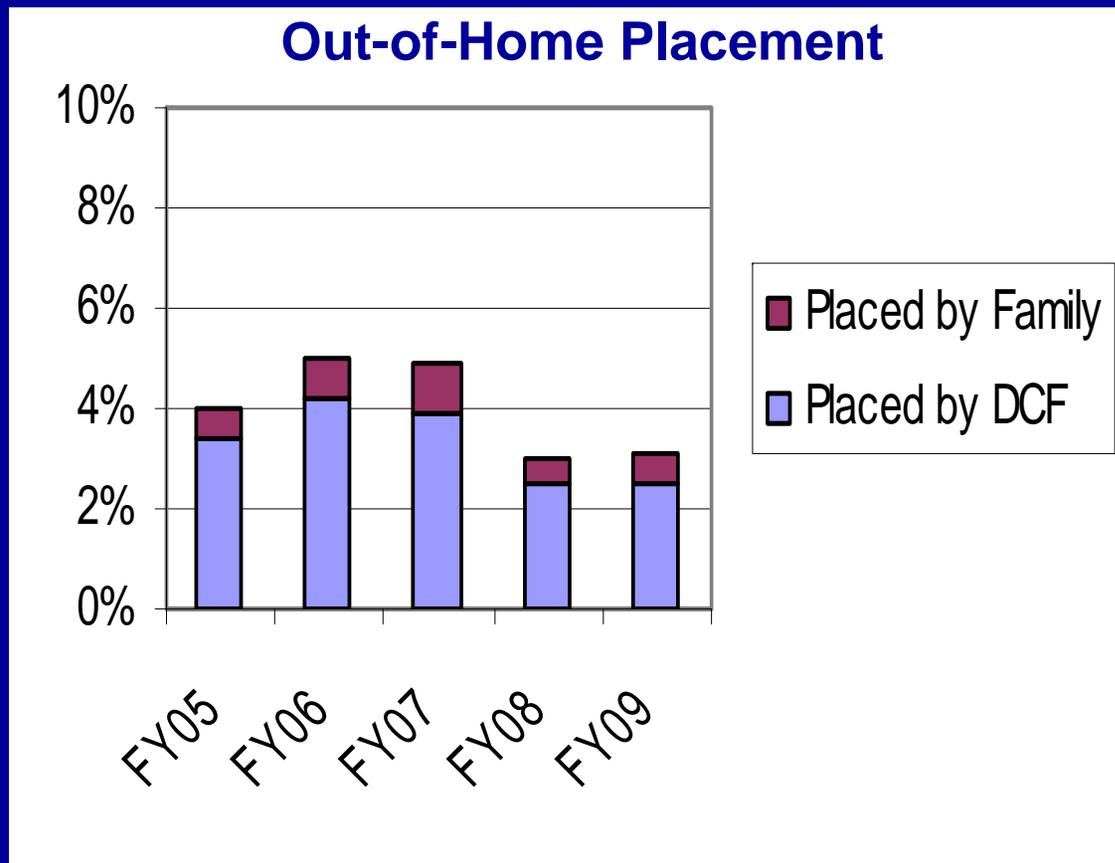
## III. Is Anyone *Better Off*?

- Performance measures:
  - Children are free from repeat maltreatment
  - Children remain in-home or are reunified
  - Family functioning is improved
- Additional measures possible, depending on program

## III. Is Anyone *Better Off*?

### Parent Aide: Children remain in their homes

(i.e., avoid out-of-home placement) (p. 38)



Trend: Lower in last two years (better)

### Story Behind the Baseline:

Explanations will be included in the final report.

# Next Steps

- Continue data collection and analysis, including provider feedback

# Next Steps

- Examine some issues that cross programs
  - Area office variation
  - DCF central office oversight differences
  - Contract management

# Next Steps

- Examine some issues specific to the programs
  - Cooperation across state agencies
  - Comparison to other states' models
  - Data tools' usefulness for program monitoring
  - Whether are substantial differences among providers of a service

# Next Steps

- Recommendations (focusing on no- and low-cost) to improve performance

# Next Steps: Final Report Contents

- **Report Cards** (brief summary documents) for population (state overall) and program (each focus program) levels
- **Program Performance Profiles** (completed) as supplementary documents
- **Evaluation of project**: What worked with RBA approach and recommendations for future PRI RBA work

## Next Steps: Final Report

PRI Committee's final report is due  
January 15, 2010 to the  
Appropriations Committee

# RBA Pilot Project: DCF Family Preservation and Support Programs

**Interim Report: October 8, 2009**

Program Review & Investigations Committee