Submission to the Florida Legislature: Evaluation of the Florida Department of Children and Families Community-Based Care Initiative in Manatee, Sarasota, Pinellas and Pasco Counties

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EXECUTIVE SUMMARY

Objective

The Department of Children and Families (DCF) contracted with the University of South Florida’s Louis de la Parte Florida Mental Health Institute (FMHI) to conduct an evaluation of the four counties in which Community-Based Care (CBC) was operational in FY 2000-01: Sarasota, Manatee, Pinellas, and Pasco Counties.

The CBC Evaluation Plan developed by FMHI has been designed in keeping with the legislative intent for CBC and the goals of the Adoption and Safe Families Act (ASFA) to promote quality performance, outcome measurement, and cost effectiveness and efficiency. Because Florida’s CBC initiative is still quite new in most counties, it is too soon to conclude whether the reform has succeeded. Consequently, this evaluation focuses on the potential advantages and disadvantages of privatization as it has been implemented in Florida thus far. This report’s goal is to provide policymakers with concrete information and recommendations about next steps and mid-course corrections.

There are four major components to this evaluation plan, which together provide an integrated evaluation of the CBC initiative: (1) an outcome analysis using child protection administrative data; (2) a qualitative study examining the context around CBC implementation and monitoring of CBC sites; (3) a cost analysis component, and (4) a quality service review looking at child, family, and system level outcomes using semi-structured interviews and a file review protocol. In accordance with the evaluation plan submitted to DCF, only the initial phases of the first three components were undertaken during November-December 2001 and are reported on here.

Findings

The results of this initial evaluation of Community-Based Care in the Sarasota/Manatee and Pinellas/Pasco County CBC sites indicate that the CBC sites are making steady progress towards accomplishing the goals set out by the Florida Legislature and DCF for transitioning to a more locally-based child protection system. If these programs are not yet unqualified successes, it is because DCF Central Office staff, Regional staff, and the lead agencies are still implementing the complex system changes inherent in the initiative. Considerable learning has taken place in this cooperative effort and we anticipate that the implementation of CBC in future county sites will consequently be smoother. While many of the difficulties inevitable in a complex systems change have been resolved, there are still many challenges that remain as CBC is implemented statewide. As the implementation is now shifting from a handful of sites to a statewide effort, these issues need to be addressed through mid-course corrections based on initial experiences with the CBC system.
We looked at 7 major outcome indicators: (1) the percentage (%) of children exiting foster care within 6 months; (2) the % re-entering foster care within 11 months; (3) the % transitioned from protective supervision to foster care; (4) the % returned to parents and legal guardians after exiting foster care; (5) the % returned to relatives after exiting foster care; (6) total expenditures for child protective services; and (7) average expenditures per child served. In analyzing the programmatic outcomes, the results are mixed. There were few differences in outcomes between the CBC and non-CBC counties on the major quantitative indicators. In our expenditure analysis, CBCs appeared to be more cost-efficient because their expenditures on direct services were lower than for non-CBC sites.

The qualitative study showed four major issues that need to be addressed: the nature of the relationship between DCF and the lead agency and its provider network; the role of the regional office; the duplicative nature of the program monitoring and auditing process; the interface between the lead agency and DCF management information system, data collection, and reporting processes.

In sum, the CBC counties generally did as well on the outcome indicators as the comparison counties and they accomplished them while spending fewer dollars on direct child protective services, and at the same time, successfully achieving major systems change. Pasco County, was the only county which did not do as well on the outcome indicators and, not surprisingly, it only recently implemented CBC. The qualitative component to this evaluation indicated that despite some major inter-organizational issues that remain to be resolved, there is strong leadership support at all levels and the changes have been achieved through a negotiation process involving the mutual respect of all parties. As DCF is currently in the process of implementing the legislative mandate to expand CBC statewide it is important to capitalize on what has been learned from the initial CBC projects.

We suggest a number of mid-course corrections which reflect the shift from a few demonstration programs to a statewide program. These include:

- Develop training and written products about CBC and its implementation utilizing the staff and materials developed by the current CBCs.
- Commit sufficient resources to provide technical assistance and start-up funds for new sites and adopt a more realistic estimate of the time required for full implementation of new CBC sites.
- Create a statewide policy/governance CBC forum to discuss emerging issues and policy decisions/changes that are needed.
- Continue the development of stakeholder groups to advise local CBCs and clarify their role with respect to the Community Alliances.
- Enhance efforts to accelerate the organizational cultural changes at the regional and district office levels of DCF. Such acceleration will help resolve the major organizational and process problems described above and further facilitate the statewide transition to CBC.
INTRODUCTION

The Department of Children and Families (DCF) contracted with the Louis de la Parte Florida Mental Health Institute, University of South Florida (FMHI) to conduct an evaluation of the four counties in which Community-Based Care (CBC) was operational in FY 2000-01: Sarasota, Manatee, Pinellas, and Pasco Counties. The YMCA, Children, Youth and Family Services, Inc., designated as the lead agency in Sarasota County, began to provide services in January 1997 and reached full implementation in June 1997. The contract amendment for Manatee County was signed May 1999, operations began in June 1999, and they were fully operational by February 1, 2000. The Family Continuity Program, the lead agency in Pinellas and Pasco Counties, took a different approach and organized services around 5 geographic service centers. The first of three service centers located in Pinellas County began operations on June 30, 2000, the second on January 5, 2001 and the third on February 2, 2001. In Pasco County, the two remaining service centers began operations on April 6, 2001. The contract for both counties was effective on June 30, 2000.

The CBC Evaluation Plan developed by FMHI has been designed in keeping with the legislative intent for CBC and the goals of DCF to promote quality performance, outcome measurement, and cost effectiveness and efficiency. Previous experience nationally with the implementation of privatization and lead agencies has been inconsistent. In some cases they have been successful while in others they have failed. Similarly they have not always achieved the promised benefits of privatization such as increased flexibility or reduced cost, depending on local conditions and the implementation strategies that were used. In most cases, such efforts took longer than expected (Gibelman & Demone, 1998). Because Florida’s CBC initiative is still quite new in most counties, it is too soon to conclude whether the reform has succeeded or failed. Consequently, this evaluation focuses on preliminary outcomes and the potential advantages and disadvantages of privatization as it has been implemented in Florida thus far. This report’s goal is to provide policymakers with concrete information and recommendations about next steps and mid-course corrections.

Based on the conceptual framework described below (see Appendix 1 for the actual model), the evaluation plan uses a mixed-method approach to investigate all of the domains of the conceptual framework. There are four major components to the plan (see Table 1), which together provide an integrated evaluation of the CBC initiative: (1) an outcome analysis using existing administrative child protection data; (2) a qualitative study examining the context around CBC implementation and monitoring of CBC sites; (3) a cost analysis component and (4) a quality service review looking at child, family, and system level outcomes using semi-structured interviews and a file review protocol.
In accordance with the evaluation plan submitted to DCF, only the initial phases of the first three components were undertaken during November-December 2001 and are included in this report.

The results of this initial evaluation of Community-Based Care in the Sarasota/Manatee and Pinellas/Pasco County CBC sites indicate that the CBC sites are making steady progress towards accomplishing the goals set out by the Florida legislature and DCF for transitioning to a more locally-based child protection system. If these programs are not yet unqualified successes, it is because DCF Central Office staff, Regional staff, and the lead agencies are still implementing the complex system changes inherent in the initiative. The CBC counties generally did as well on the outcome indicators as the comparison counties and they accomplished them while spending fewer dollars on direct child protective services, and at the same time, successfully achieving major systems change. Pasco County, was the only county which did not do as well on the outcome indicators and, not surprisingly, it only recently implemented CBC. Considerable learning has taken place in this cooperative effort and it can be expected that the implementation of CBC in newer sites will consequently be smoother. While many of the difficulties inevitable in a complex systems change have been resolved, there are still many challenges that remain as CBC is implemented statewide. As the implementation is now shifting from a handful of sites to a statewide effort, these issues need to be addressed through mid-course corrections, based on initial experiences.

**BACKGROUND**

Ensuring the safety and well-being of children in the child welfare system has proven to be a long term and complicated national problem. Ongoing issues identified in a recent report included: escalating costs; more families coming under care with more severe problems (e.g., substance abuse, family violence and the severity of abuse and neglect); increased public scrutiny of child welfare agencies and litigation against the system (Malm, Bess, Leos-Urbel, Geen, & Markowitz, 2001). Fragmented and uncoordinated services with little accountability to the state and local community were also commonplace.
One proposed solution to providing more effective and efficient services has been privatization, known in Florida as Community-Based Care (CBC). The use of privatization has steadily accelerated and can no longer be seen as a passing fad but rather as standard government practice (Daley, 1996; Greene, 1996). The potential benefits of privatization are considered to be: (1) increased flexibility, particularly with respect to "red tape" and personnel matters; (2) greater competition and enhanced consumer participation; (3) better quality and more effective service; (4) enhanced coordination with other local agencies leading to greater continuity of care; (5) increased cost effectiveness and administrative efficiency; (6) increased professionalism; (7) the promotion of innovation; (8) greater ability to alter or terminate programs; and (9) local investment in the governance process facilitating the adaptation of the service system to local circumstances along with greater local accountability (Paulson, 1988; Gibelman & Demone, 1998).

However, the more than thirty years of privatization efforts have also revealed possible disadvantages to privatization, which mirror the advantages. They have included such experiences as: (1) decreased public accountability and control; (2) difficulties in establishing, maintaining and monitoring performance standards and contractual obligations; (3) unrealized cost savings (partially caused by greater monitoring and contracting costs); (4) declines in service quality and the "skimming" of clients so that the most difficult and needy clients do not receive services; (5) unreliable and ineffective contractors; (6) the subjecting of private agencies to public policy shifts and budget cuts which threaten the viability and stability of the agency; and (7) dramatic price increases as government loses the ability to provide the service itself (Gibelman & Demone, 1998, Paulson, 1988; Fixler & Poole, 1987).

The history of privatization efforts includes both major successes and major failures (Gibelman & Demone, 1998). While there has been an ongoing broadening of the kinds of services being privatized, the privatization of human services represents a relatively small percentage of the total efforts and has proven to be more problematic (Fixler & Poole, 1987; Paulson, 1998). Unfortunately, there have been very few empirical examinations of these privatization efforts making the evaluation of such programs all the more important (Gibelman & Demone, 1998). Furthermore, a recent study of child welfare privatization activities by the Child Welfare League of America showed that there is no correlation between the assumptions about costs and actual performance (CWLA, 2000). Local circumstances and the implementation processes have been key factors in the success and failure of such efforts.

As part of this privatization strategy, states and localities are increasingly turning to a model where a single agency is charged with identifying and providing all services. This reduces the need for families to negotiate a maze of individual agencies, improves the likelihood that there is a match between needs and services, increases access to services, and assumes that families will be more accepting and trusting of local community agencies than services run by the State (U.S. Government Accounting Office, 2000; CWLA, 2000). This lead agency design has been the most common approach of state governments in the field of child welfare (CWLA, 2000).
In Florida, just such a strategy was adopted by the 1996 legislature. Section 409.1671 of the Florida Statute called for pilot CBC projects with the intent of strengthening the local communities’ support and commitment to the “reunification of families and care of children and their families,” as well as to increase the efficiency and accountability of services. The move to Community-Based Care was accelerated by the passage of the federal Adoption and Safe Families Act in 1997 (ASFA), which sought to achieve seven major outcome goals in all states:

- “Reduce the reoccurrence of child abuse and/or neglect
- Reduce the incidence of child abuse and neglect in foster care
- Increase permanency for children in foster care
- Reduce time in foster care to reunification without increasing reentry to foster care
- Reduce time in foster care to adoption
- Increase placement stability
- Reduce placements of young children in group homes or institutions” (U.S. Department of Health and Human Services, 1998)

The responsibilities of CBCs, as defined by the original statute, were to:

- “Coordinate, integrate, and manage all child protective services in the community while cooperating with child protective investigations,
- Ensure continuity of care from entry to exit for all children referred,
- Provide directly or through contract with a network of providers all child protective services,
- Accept accountability for achieving the federal and state outcome and performance standards for child protective services,
- Have the capability to serve all children referred to it from protective investigations and court systems,
- Be willing to ensure that staff providing child protective services receive the training required by the Department of Children and Families.” (Falcoor, Cash & Ryan, 2001)

Subsequently in 1999, the Florida Legislature amended the original CBC bill to expand CBC statewide and include changes to bring the state into compliance with ASFA. The Community-Based Care Implementation Plan, issued in July 1999 by the Florida Department of Children and Families, embraced the ASFA goals and the move to local community-based systems of care.

In most privatization arrangements across the country, lead agencies have been financed through capitation or case rate payments that reflect the actual number of persons the agency is serving or likely to serve. Florida is the only state using a global budget transfer, that is, giving a fixed amount of money to the lead agency and making it responsible for providing all services needed to all children who enter the child welfare system (CWLA, 2000). This means that the financial stability and viability of the lead agencies and their provider networks must be evaluated as well. One of the few studies of privatization of child welfare services was in Washington D.C. This effort proved to be a failure in large part because the fiscal crises in the district government led to
budget cuts and severe delays in the payment of lead agencies and providers (Gibelman, 1998).

The conceptual model guiding the evaluation will be explained in the following section. The next section describes the overall research questions, the evaluation questions, and the indicators based on the CBC Conceptual Model. The final section presents the results of the evaluation thus far.

**CBC CONCEPTUAL MODEL**

Appendix 1 depicts the conceptual model used for this evaluation. The left side of the model highlights the conditions existing before CBC implementation and the justification for the legislation establishing Community-Based Care. These conditions summarize the issues facing child welfare agencies discussed in the background section. The CBC implementation strategies depict the processes expected to lead to enhanced quality performance as well as the basic indicators of performance quality. This part of the model is based on the prior discussion of the potential advantages of privatization and the evolving public policy expectations for child welfare services as expressed in ASFA and Florida state statutes. Finally, the expected results of the privatization initiative are outlined on the right side of the model. This model provides the theoretical underpinning for the evaluation, which is designed to address most of the items in the latter two stages of the model.

The evaluation uses mixed methods (i.e., qualitative and quantitative study designs) to enable as much triangulation (i.e., to compare the consistency of results across methods) as possible in answering the research and evaluation questions. The qualitative study explores CBC implementation strategies in the context of the prototype region, while the other three components address the various expected results of Community-Based Care. Specifically, the qualitative study looks at the system relationships, local direction, and community involvement components of the conceptual model. The quality service review (to be conducted in Spring 2002) will evaluate the quality performance, satisfaction with system, and well-being of children following: The quantitative component, in conjunction with the quality service review and the implementation study, is responsible for evaluating the effectiveness of the child protection system as well as the well-being of children. The cost analysis component evaluates the cost effectiveness and cost efficiency component of the CBC model. Again, the qualitative study will provide the context in which to interpret the findings of the individual components and to integrate them into a coherent whole.
RESEARCH AND EVALUATION QUESTIONS

The following three tables (Tables 2) detail the research questions in our evaluation, the evaluation questions related to these research questions, the indicators that will be used to answer these questions, the main source of data for the indicators, and the report date by which the evaluation question will be addressed for this current cycle.

*Table 2. Research and Evaluation Questions*

<table>
<thead>
<tr>
<th>Research Question</th>
<th>Evaluation Question</th>
<th>Indicator</th>
<th>Source</th>
<th>Report Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>How do total expenditures for child protective services (CPS) in the CBC sites pre- and post-CBC compare with expenditures in the non-CBC counties?</td>
<td>Total expenditures for child protective services</td>
<td>Expenditure data</td>
<td>1/31/02</td>
<td></td>
</tr>
<tr>
<td>Are there cost-efficiency or cost-effectiveness differences between the CBC and non-CBC sites?</td>
<td>Average expenditures per child served Average expenditures per foster care day Average expenditures per foster care episode</td>
<td>Expenditure data Administrative data</td>
<td>06/30/02</td>
<td></td>
</tr>
<tr>
<td>Has the implementation of CBC facilitated a more effective child protective system compared to the state run system?</td>
<td>Quality of relationships between state, regional prototype and CBC and prototype region in the study counties</td>
<td>Qualitative data</td>
<td>01/31/02</td>
<td></td>
</tr>
<tr>
<td>What has been the role of the prototype region in the implementation of CBC in the study counties?</td>
<td>Improved service accessibility</td>
<td>Qualitative data</td>
<td>01/31/02</td>
<td></td>
</tr>
<tr>
<td>Is Community-Based Care an effective child protective system?</td>
<td>Appropriate contracting and quality assurance systems are in place in CBC</td>
<td>Qualitative data</td>
<td>01/31/02</td>
<td></td>
</tr>
<tr>
<td>Has CBC effectively established accountability and contracting? What has been the role of the prototype region in the implementation of CBC in the study counties?</td>
<td>Changes in funding and service priorities</td>
<td>Expenditure data</td>
<td>01/31/02</td>
<td></td>
</tr>
<tr>
<td>How has the prototype region affected the accountability and contracting functions of community-based care? Do the lead agencies and provider networks have sufficient financial stability and viability?</td>
<td>Changes in ratio of expenditures to income</td>
<td>Qualitative data</td>
<td>01/31/02</td>
<td></td>
</tr>
<tr>
<td>Research Question</td>
<td>Evaluation Question</td>
<td>Indicator</td>
<td>Source</td>
<td>Report Date</td>
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</table>
| Are adequate assessments of children and their families conducted upon entering the protective service system? | Are child and family service plans comprehensive? | As evidenced by review of the documents, child and family service plans address:  
- the issues that brought the family to DCF,  
- the underlying causes of concern,  
- continuing safety risks, and  
- desired functional outcomes for individuals and the family as a whole? | Based on interviews with key players in a child’s life, there is evidence to suggest that services are provided to the child and family in a way that is coordinated across disciplines and child serving agencies. Further, there is evidence to suggest that there is a lack of unnecessary service interruptions. | QSR 06/30/02 |
<table>
<thead>
<tr>
<th>Research Question</th>
<th>Evaluation Question</th>
<th>Indicator</th>
<th>Source</th>
<th>Report Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does Community-Based Care ensure the safety and well being of children?</td>
<td>What is the length of stay of children in foster care in the CBC sites (Manatee, Pasco, Pinellas, and Sarasota counties) pre- and post-CBC and in the comparison counties?</td>
<td>Length of stay in foster care</td>
<td>Administrative data</td>
<td>01/31/02</td>
</tr>
<tr>
<td></td>
<td>What is the percent of children who do not re-enter foster care at 3 months, 6 months, and one-year post-discharge in the CBC sites pre- and post-CBC and the comparison counties?</td>
<td>Percentage of children that remain out of foster care after discharge</td>
<td>Administrative data</td>
<td>01/31/02</td>
</tr>
<tr>
<td></td>
<td>What is the percent of children who are re-abused while in care in the CBC sites pre- and post-CBC and the comparison counties?</td>
<td>Percentage of children that experience a recurrence of maltreatment while in care</td>
<td>Administrative data</td>
<td>01/31/02</td>
</tr>
<tr>
<td></td>
<td>What is the percent of children in protective services that end up in foster care in the CBC sites pre- and post-CBC and the comparison counties?</td>
<td>Percentage of children that transfer from Protective Supervision to Foster Care</td>
<td>Administrative data</td>
<td>01/31/02</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Percentage of children returned to parents or legal guardians after discharge from care</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Percentage of children returned to relatives after discharge from care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are children safe from manageable risk?</td>
<td></td>
<td>Based on interviews with key players in a child’s life, there is evidence to suggest the child is free from imminent harm in their living, educational, and recreational settings.</td>
<td>QSR</td>
<td>06/30/02</td>
</tr>
<tr>
<td>Are children residing in stable and permanent placements?</td>
<td></td>
<td>Based on interviews with key players in a child’s life, there is evidence to suggest the child is living in a setting that will endure until the child becomes independent.</td>
<td>QSR</td>
<td>06/30/02</td>
</tr>
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</table>
QUALITATIVE STUDY OF THE IMPLEMENTATION OF CBC AND Prototype Region

Rationale

This component of the evaluation relates primarily to the research question “Is Community-Based Care an effective child protective system?” and the implementation strategies portion of the CBC Conceptual Model. The American system of government is characterized by checks and balances, in addition to multiple jurisdictions, which make the implementation of inter-governmental programs extremely complex. The first study of program implementation demonstrated that even when many of the common implementation problems have been alleviated, the implementation of complex programs is extremely difficult and time consuming (Pressman & Wildavsky, 1979). Consequently, even when programs are well conceived, have sufficient resources, and have political and administrative support at multiple levels they are still likely to face substantial implementation problems because of the complexities of system change. This would be particularly true when dealing with difficult problems like child protective services. System change takes a long time even under the best of circumstances (Pressman & Wildavsky, 1979). Even in the case of Sarasota County, where the earliest of the lead agencies got started, the department’s reorganization and subsequent creation of the SunCoast Region makes privatization a more complex endeavor.

It is important, therefore, not just to evaluate whether CBC is working but rather to understand the implementation issues and the context in which the lead agency is operating and services are being provided. Looking at outcome data in isolation can lead to a distorted picture of reality, as there may be multiple interpretations of the same results. For example, if costs increase, there may be multiple causes: the lead agency was less efficient; the contracting, monitoring and data management costs have been greater than anticipated; or, it could be that a higher level of services are being provided to individuals who had not had access to such services before. Similarly, lower costs to the State may be a function of multiple causes: the lead agency found ways to increase local or federal revenues, the lead agency shifted costs to other systems (either through enhanced cooperation or by referring to another agency), etcetera. Are better client outcomes a result of more effective services or because more difficult clients are being screened out or shifted to other systems (e.g., mental health or substance abuse)? In this case, the potential for shifting is not applicable because the Lead Agency must take all clients referred from the Protective Investigators and courts (Florida Statute 409.1671(1)(b)(2)). In other words, understanding the contextual issues is crucial to interpreting the data in ways that enable policymakers to make good decisions. Additionally, since the implementation process involves multiple stakeholders with different agendas, the process is highly political. The best approach for studying these implementation issues is a qualitative methodology involving semi-structured, theory-driven interviews with multiple stakeholders.
Methodology

This study uses general framework for looking at implementation issues that is based on the work of leading implementation researchers (Elmore, 1980; Paulson, 1981, 1987; Pressman & Widavsky, 1979; Van Meter & Van Horn, 1975; Williams, 1976). There are five different domains, each relating to a separate set of implementation issues:

1. Policy issues
2. Characteristics of the implementing agencies
3. The disposition of the implementers
4. The complexities of joint action
5. Interorganizational communication and enforcement activities

Using the general framework mentioned above, the specific questions under each domain were modified based on initial discussions with Department staff. Additional questions relevant to understanding the overall history and context of CBC implementation were also included. Because of the short time frame and limited resources available for this legislative report, the evaluators were only able to interview eight stakeholders for the first phase of the evaluation. From the Department, the Director of the Office of Mission Support and Planning (and former Director of the CBC office), the Director of the CBC office, another key member of the CBC program office staff, the SunCoast Region Director and Assistant Director were interviewed. In addition, the CEOs of the two CBC sites and providers from Pinellas and Sarasota Counties were also interviewed. Interviews with providers in Pasco and Manatee Counties are in the process of being scheduled, so the results presented here are only a partial picture of the provider perspective. For each domain, the responses of the stakeholders were analyzed to identify critical themes and the similarities and differences of each of the major perspectives. Because the implementation of the prototype region itself was evaluated by Competitive Government Strategies (CGS) (Stitt, Olsen, & Certo, 2001) and involved interviews with many of the same stakeholders, CGS and FMHI have agreed to share information on an ongoing basis and to ensure that there is no duplication of effort or additional burden placed on the respondents.

Findings

There are two major contextual issues to keep in mind when interpreting the results of the interviews and evaluating the progress of CBC implementation. After the first few interviews it was clear that the change process was even more complicated than what is reflected in the CBC Conceptual Model. This was because there were other system changes that occurred during the program start-up that impacted CBC implementation in the two sites. These changes included the addition of another county to the Sarasota site, a change in the lead agency in the Pinellas/Pasco site, and the creation of the SunCoast Region and the Community Alliances, which affected both CBC sites. Each of these involved major changes in relationships, roles, and responsibilities and led to adjustments in implementation timetables and strategies.
For example, Devereux held the lead agency start up contract in Pinellas and Pasco Counties during the initial transition year to Community-Based Care (they never actually provided services). Concerns at Devereux’s corporate headquarters regarding their exposure to risk at the CBC site and its impact on the rest of their programs resulted in Devereux’s withdrawal as a lead agency. The Intent To Negotiate was reissued and Family Continuity Programs (FCP), an agency from the existing provider network, was awarded the lead agency contract. FCP then engaged in a planning process similar to the one Devereux had undergone in order to fully implement and manage direct service provision via the provider network agencies.

Similarly, the Community Alliances were mandated to “provide a focal point of community participation and governance of community-based services “ (Florida Statute 20.196a). The Alliances, although unique to each community, were designed to consist of a broad spectrum of community stakeholders. The Alliances’ duties were to include needs assessment, setting priorities, planning for resource utilization, determining locally-driven outcomes to supplement state–required outcomes, and community education. The scope of the Community Alliances was designed to include Community-Based Care issues, in addition to broader human service areas. However, the Alliances were not mandated until two years after the original CBC legislation when CBC advisory groups were already well established in both of the CBC study sites. Naturally, the addition of a new advisory group raised issues of turf, power, and influence and a concern that the focus on CBC would be lost. There was also a sense that the CBC advisory groups represented a more community driven planning approach whereas the Alliance was mandated by State government. Therefore, the role of existing CBC advisory groups had to be reconciled and merged with the new Community Alliances.

The second major issue was the reality that these CBC sites were, in fact, demonstration programs with very few, if any, examples of this level of privatization of a child welfare system anywhere in the country. While the CBC sites were seen as very important by DCF, they were, nevertheless, only a small part of the agency’s overall operation. Consequently, policies, procedures and structures evolved as the need arose through a negotiated process rather than as a more organized “roll-out” that might be required in a statewide effort. As might be expected, the majority of issues occurred in the second domain (i.e., interorganizational relationships). We will discuss this domain last as it is the most complicated and most relevant to the interpretation of the data and recommendations for mid-course corrections.

Accomplishments

1. **Policy Issues Domain**: The policy issues domain concerns many of the issues in the systems relationship component of the CBC Conceptual Model. This domain explores the characteristics of policy and program design as they relate to the specific target population and problems to be addressed. In particular, it is important that there is a shared understanding of these characteristics, a way to measure the programs against this understanding through specified standards, and that the resources allocated are realistic for this type of program and the population being served. It is also important to evaluate whether the fiscal incentives, performance measures, or the consequences
for clients receiving or not receiving services result in “gaming” the system, which leads to distortions or irregularities involving clients or services. There were no policy issues that surfaced during the interviews that would inhibit the further implementation of CBC.

With respect to CBC, specific issues might be the extent to which there was a shared common understanding of the nature of CBC and the child protective services it was expected to provide. Similarly, were the standards for measuring success and performance clear and mutually understood and were they reasonable for the nature of the population being served and the resource constraints? Were adequate resources provided? Did the design of the services provided fit the nature of the population being served and reflect such elements as difficulty in reaching and engaging clients? Was the correct mix and intensity of services provided to meet their needs appropriate for the degree of behavior change required (e.g., reductions in substance abuse, family violence, child abuse and neglect)?

All respondents had a clear understanding of the purposes and objectives of Community-Based Care and its major components. The purposes of CBC were consistently described as:

- Creating community ownership over child welfare issues,
- Improving the safety and well being of children,
- Privatization of child welfare services,
- Creating a more integrated and comprehensive child protective service system,
- Achieving cost efficiencies and more flexible management of resources.

There were no major changes in the project’s design that caused confusion. Instead, there was an evolutionary process in response to issues that arose during implementation and were then addressed collaboratively. There was agreement that there is sufficient funding of the CBC sites, although several stakeholders mentioned that it was too soon to tell whether current funding levels would be sufficient for future needs as CBC matures. Performance measures were considered clear and adequate, but there was unanimity that they could be improved and supplemented with other information to more effectively evaluate the performance of the system. The provision of start-up funds and a planning year before service delivery actually started were perceived as critical to the success of CBC.

There was a shared definition of the role of the lead agency in providing leadership and accountability for community involvement as well as the planning and coordinating of child protective services. However, as will be described later, there was disagreement about what the exact nature of the relationship between the lead agencies and DCF should be. It was also apparent that the CBC sites had made considerable progress in creating a more coordinated and comprehensive child protective service system than what had existed before CBC. There was generally a shared vision of what this system should look like, and agreement that there was an appropriate match between the design of the lead agency and the needs of the children and families in the child protection system.
2. Characteristics of Implementing Agencies Domain: Many of the assumptions of privatization’s strength are examined under the domain that assesses the characteristics of the implementing agencies. This relates to the local direction component of the CBC Conceptual Model. The most basic question with regard to the lead agency and the provider network is whether there are adequate personnel in terms of both quantity and quality. It would also be important to know whether, as a result of privatization, implementing agencies show increased flexibility in recruiting and hiring personnel and in using financial resources such that new and innovative services, as well as traditional services, are being provided. The last set of characteristics considered under this domain are essential to successful implementation of CBC: whether adequate administrative control mechanisms, information systems, fiscal policies, and reporting procedures are in place.

This domain also explores whether the appropriate mechanisms for general policy and personnel oversight exist. For successful implementation of a program such as CBC, the implementing agencies must have the capacity and capability to carry out their roles and responsibilities. They also need to be successful in developing the appropriate management structures and policies to ensure the smooth operations and accountability of the program. No major issues emerged around the capabilities of the leadership and the quality of the staff at the CBC sites, or regional and central DCF offices. People were generally satisfied with the quality of the leadership at all levels. While they did not agree on all issues, there was a sense of mutual respect and appreciation of the hard work and commitment that had been required at all levels to establish the programs. There was a recognition, however, that at all levels, the organizations had to make do with less than optimal staffing levels. While this had been made up for by commitment and hard work, there was concern that as CBC matures and the systems take on more responsibilities, the quantity and skills of the staff needed to deliver and monitor services may be inadequate in the long term.

The two major staffing concerns related to the transition of DCF staff from the role of providing or supporting direct services to one of a purchaser of services/outcomes are a need to increase the skill levels of individual staff, and overall staff retention. The skill sets needed for the new roles (e.g., fiscal auditing, statistical analysis of performance data) do not yet exist in sufficient numbers. At both the regional and CBC level there was an initial shakeout period as staff and managers needed to determine whether working in Community-Based Care was an appropriate match for them. Similarly, retention has been an issue, since there is only a finite pool of workers to draw from with child welfare expertise. The need for workers to be certified created an additional delay in finding new workers. Furthermore, the change process itself and the job insecurity is very difficult for many people who may decide to avoid the uncertainty and move on to other job opportunities. Until the workforce becomes more familiar with the CBC model and their role in the new system of care, the perception is that staff retention problems will remain.

No questions were raised about the quality of training and technical assistance focused specifically on CBC. However, it was felt that the Professional Development Centres (PDC) had their hands full meeting the training needs of the Department in its service
delivery role and that training offered by the PDCs was not very relevant for staff operating in the CBC model because it focused mainly on safety issues. Respondents suggested that PDC include more content on clinical issues, a more holistic “child well-being” approach, and the coordination of care among community agencies.

With respect to the management processes, there were no concerns expressed with the initial contracting process, both for the lead agency and between the lead agency and its subcontracted provider networks. Similarly, there was agreement that the organizational procedures and structures had been established to ensure the smooth operation of the lead agency and its working relationships with other child serving agencies. This is not to say that all of the problems that have historically affected cooperation between different categorically funded systems have been resolved. In particular, concerns were expressed about the access to and integration of mental health, substance abuse, and juvenile justice services.

With respect to the lead agencies and their provider networks, the information systems, fiscal policies, reporting procedures, and quality assurance processes are in place and as well developed as could be expected at this stage in the process. Both lead agencies (YMCA Children, Youth and Family Services, Inc. and The Family Continuity Program) have obtained accreditation from the Council on Accreditation for Children and Families (COA), an independent organization set up by the Child Welfare League of America that rigorously evaluates all aspects of the agency’s operations. COA accredits more than 1400 organizations, evaluating each organization against best practice standards in both management and clinical areas. In particular, the quality assurance/quality improvement processes must involve all key stakeholders on a regular basis and highlight feedback on each contract agency’s performance measures, thus creating incentives to perform well and show continual improvement. A focus of the CBC evaluation has been the quality of the foster care system. Both lead agencies have put into place training and support systems for foster parents. In Pasco/Pinellas Counties new foster care coordinator positions were created and a regular foster parent support group was created.

Two caveats are in order. First, all of the parties agreed that the systems are adequate, but they were unanimous in stating that further improvements could be made. Secondly, these observations only refer to the systems in place within the CBC. There were major issues regarding the lead agencies and DCF, some of which have already been detailed in the CGS report to the Legislature on the prototype region and which will be discussed later.

All parties seemed to be well informed about the operation of child protection services in the two CBC sites. Not surprisingly, there was a sense that the further DCF staff were from the field, the less they appreciated the operational issues involved with carrying out service delivery and the less they understood what it takes to implement CBC. On the other hand, there was also a sense that the closer one was to service delivery, the less the appreciation for the policy implications of a particular decision on the agency as a whole or for state policy in general. With respect to the capacities of the key elements of the system, there was almost unanimous confidence in their abilities
to carry out their roles and responsibilities to the project, notwithstanding some major disagreements as to what some of these roles and responsibilities should be.

3. Disposition of the Implementers Domain: Another domain relates to the disposition of the implementers and addresses both the system relationships and community involvement components of our CBC Conceptual Model. As countless implementation studies have shown, the support of leaders and constituents is key for successful program implementation. It is important to understand the nature of the commitment and leadership skills of the implementing officials at all levels (e.g., DCF, SunCoast Region, and lead agency) who are associated with CBC.

Everyone felt that there was a shared commitment to CBC on the part of leadership at each level and that the leadership had done as much as possible to facilitate the process within their operational constraints. This support was continual throughout the implementation process. There was, however, a concern that some of the other systems such as mental health and substance abuse were not as committed to the CBC concept and were not willing to collaborate to the degree necessary. This is partially due to the pre-existing problem of categorical funding with different reimbursement mechanisms, reporting, and regulatory requirements.

4. Complexities of Joint Action Domain: Even if all of the necessary elements for successful implementation are present in the other domains, there are often pragmatic and political reasons why stakeholders who share the same goals are unable or unwilling to cooperate fully. These issues are addressed in the fourth domain, the complexities of joint action, which corresponds to the system relationships, local direction, and community involvement components of our CBC Conceptual Model. Some of these reasons may include:
   1. Direct incompatibility with other commitments
   2. No direct incompatibility, but a preference for other programs
   3. Simultaneous commitments to other projects
   4. Dependence on others who lack a sense of urgency in the project
   5. Differences in opinion on leadership and proper organizational roles (also with interorganizational communication)
   6. Legal and procedural differences
   7. Agreement coupled with lack of power

Even though participation in CBC required a shift in priorities and business procedures of participating agencies, it was felt that such shifts had generally taken place. In addition to the systems just mentioned, the two kinds of participants for whom such shifts have been most difficult were the traditional providers who would have to change their service delivery model, funding, and reporting relationships as well as DCF, who had to change roles and responsibilities and look at service delivery in a different way. The major issue in this domain was the fact that DCF did have another major priority: the ongoing operation of child protective services in the remainder of the state. While respondents acknowledged this was not a problem in their interactions with DCF’s CBC leadership staff, several respondents reported difficulties in their interactions with DCF personnel not primarily involved with CBC. Respondents indicated that non-CBC
DCF staff (e.g., contracting and budget office staff) were not responsive enough to their needs. This lack of responsiveness may be attributable to the relatively small role CBC plays in DCF’s overall provision of child protective services.

5. Interorganizational Communication and Enforcement Activities Domain: The domain that has the greatest potential for implementation problems is the one that concerns interorganizational communication and enforcement activities across multiple jurisdictions. It addresses the system relationships and, to a lesser extent, the local direction aspects of the CBC Conceptual Model. For example, is there sufficient hierarchical integration with and among the implementing organizations such as DCF, the SunCoast Region, the lead agencies and the provider networks? Is there a governance or coordinating structure to facilitate implementation? Are there clear and consistent communication channels among all of these entities so that the necessary information is shared among all of the appropriate parties in a timely manner? Have conflict resolution mechanisms (either formal or informal) been established to address disputes that might arise such as differences over interpretations of performance standards or the format in which data needs to be submitted?

As expected, this was the area where the greatest disagreement existed; the primary areas of disagreement are discussed in the following section. Our system of government with its checks and balances has a natural tension built into the interaction of persons in different roles. The challenge is to find the correct balance so that there is sufficient agreement and clarity on the various roles, and areas of agreement and disagreement so the tension is creative and not destructive.

To their credit, despite some major philosophical differences on how CBC should be implemented, there was a clear sense of ongoing negotiation, give and take, and mutual learning and respect among most of the key stakeholders in the implementation of CBC. For example, a readiness assessment tool was developed to determine when a CBC site was ready to take full responsibility for service provision. There was general agreement that the key players were involved in policy decisions around CBC and that they felt their opinions were heard. When disputes occurred they were negotiated, and a general acceptance of the fact (although not always without some resentment) that if a decision was not seen as satisfactory at one level, a party could take it to the next level including the legislature or executive branch. Furthermore, whenever there were any questions or concerns about CBC, everyone was able to name someone to whom they could go to for help, advice, or answers.

One source of confusion that has been somewhat resolved in the two CBC sites, but that could be problematic in other areas of the State, is the role of the Community Alliance, compared to a stakeholder advisory group more narrowly focused on Community-Based Care. Each of the sites had well-functioning stakeholder coalitions when the Community Alliance legislation was passed. After some initial confusion the two have been merged, or the original CBC group has been organized as a subset or sub-committee of the larger Community Alliance, which depending on each county, may cover a much wider range of human service issues.
Ongoing Issues, Areas of Disagreement, and Dilemmas

Despite all of the accomplishments listed above, there are four major issues that need to be resolved:

- The nature of the relationship between DCF and the lead agency and its provider network.
- The role of the regional office.
- The program monitoring and auditing process.
- The management information system, data collection, and reporting processes.

Three of these issues are discussed in detail in the Competitive Government Strategies (CGS) report¹. However, even though we purposely did not duplicate any of the CGS questions, these issues surfaced in almost all of our interviews and therefore bear reinforcement. A unique feature of CBC was that DCF was being asked to divest itself of direct service delivery in a few locations (with the potential of implementing the change department wide) and assume a completely different role as a purchaser of services, while at the same time having to provide services in other counties in the very same administrative district. While this phased demonstration process made eminent sense, it also created fertile ground for inevitable confusion and tension. As the prototype region review pointed out, this was nothing short of a major cultural change, and old habits die hard.

Perhaps the most intractable and pervasive disagreement that surfaced in our study regards the nature of the relationship between DCF and the lead agencies. To put it most starkly, are the lead agencies simply an extension of DCF or are DCF and the lead agencies equal business partners? In the latter case, the purchaser sets the specifications, purchases the services, checks to see that the supplier has the required mechanisms in place to ensure quality control (without specifying what these mechanisms must look like), and then monitors the outcomes. One cannot expect not-for-profits to act more business-like and then not treat them as a business. We concur with the CGS assertion that there is no point in privatizing a service if the new providers are expected to act in the same manner as government employees. It was clear that the major source of confusion about CBC or any lack of confidence in one party’s ability to carry out its role with respect to CBC, centered on these different views of the nature of the relationship and how they impacted the implementation of Community-Based Care.

The creation of the region during CBC implementation was a source of frustration for everyone in the SunCoast Region. Irrespective of whether it was a good decision, the creation of the new region in the midst of the CBC implementation in the two sites caused serious delays that must be taken into account when evaluating their outcomes. The two sites had a history of good working relationships with their former districts. At

the same time, some functions were centralized in Tallahassee so that the new region could not just be viewed as a “mega-district.” Trust between the sites and the region had to be established, previous agreements renegotiated, and former understandings re-created. There was also a substantial period of time before the region had permanent leadership and was staffed and organized. There was consensus that, at least in the short run, the creation of the prototype region did set back the timetable for the ongoing development of the CBC sites.

Of greatest concern to all parties was the authority of the regional office staff. Several stakeholders said that DCF needs to either give the regional office the authority to negotiate contracts and agreements and make decisions, or eliminate the regional offices. Without this authority or a clear role, it creates frustration and confusion for everyone. In fairness to the central DCF office, both the prototype region and CBC were new. Issues would emerge which had not been anticipated, and the consequences affected the entire department and therefore needed to be discussed at that level. What makes sense in a local area might not be good policy at the department level, particularly since the majority of the department resources are still going to the direct provision of services.

If the State is going to move ahead with regionalization and the statewide implementation of CBC, then clarification of the role and authority of the regional office must be a high priority. It is important move decision-making into the community (within clear parameters set by central office), if two of the major purposes of CBC, local ownership of child welfare issues and an integrated system of child welfare services adapted to local conditions, are to be facilitated.

The duplicative and overlapping auditing and program monitoring functions were discussed extensively in the CGS report. We also found it to be a major concern to everyone, including DCF, which has established a work group to try and streamline this process. The fact that we were shown a document containing 43 pages of audit activities speaks for itself. One issue that was not highlighted pertains to the accreditation of the lead agencies. While COA accreditation is seen as worthwhile, it is an expensive and time consuming process. Site visits cover all aspects of fiscal and program operations including extensive examination of staff credentials, quality assurance/improvement processes and outcome measurement. If accreditation is required, then the findings of the accreditation process should also be used as data and/or coordinated with the State’s monitoring process. For example, the State could send an auditor to work in conjunction with the accreditation team, so that the duplicative nature of these audits could be reduced. We also need to reiterate our study’s findings that the focus should be on monitoring outcomes (e.g., improvements in child well being, safety, family reunification and permanency) rather than processes (which forms were used, the number of contact hours), and that the current focus on how agencies were conducting their business is a major source of contention. This does not negate the fact that DCF has a responsibility to ensure that the federal and state standards, which are frequently very prescriptive, particularly those for due process protections, are adhered to by the CBC agencies. It needs to be acknowledged that a major part of the problem is the
newness of the shift in roles for DCF staff, and how long it takes to effect changes in organizational culture and practice.

Lastly, there were universal concerns with the management information system and the collection and reporting of data. Without getting into the merits and capability of HomeSafenet (HSn), which we did not evaluate, the concerns are closely related to the other three issues. The system was designed in part to shape the way services were delivered. While this may make sense for DCF as long as it is providing services, it is again telling agencies how they must practice.

Best practices in MIS systems indicate that ideally there should be an interface between the contractor systems and DCF systems, since no one system can meet the specific needs of all of the lead agencies with different demands for record keeping, accounting, outcome measurement, their service provider network, and the Department. Short of that, there should be an agreement on the data needed, the format for the data, and then the agency should be able to submit the data electronically. The current system requires double entry of data (the internal system and the state system), which is a considerable waste of resources and doubles the possibility of error. It also makes the line workers do additional data entry, which is both an inefficient use of their time and a source of error. It would make more sense to concentrate resources on building the analytic and reporting capabilities of the DCF system so that it can use the information in a meaningful way to monitor outcomes.

However, the MIS problem is a perfect example of the problems involved with delivering services in a multi-jurisdictional context. Federal regulations have mandated the use of HSn and require that it be the single, statewide data entry system for the data required by the Federal Government. DCF, therefore, has had to invest considerable time and resources developing a system that can be used state-wide. If DCF violates this policy, the State would have to return the money the federal government has provided for the development of this system. On the other hand, the lead agencies have also invested substantial resources in creating a system which meets their specific management needs. There have been discussions with the lead agencies regarding DCF allowing the lead agencies to download data from HSn into their MIS systems, therefore reducing the need for duplicate entry. Clearly this is an area that will require considerable collaborative problem solving to come up with a solution that will maximize the usefulness of the MIS systems for the providers, lead agencies, DCF, and the federal government.

The qualitative study asked key informants for their perspective on the CBC site performance on some global outcomes inherent in the CBC initiative. There was consensus on the positive nature of these results. The lead agencies have been able to be more flexible in their use of resources although they feel that state and federal regulations have hampered their ability to be more flexible. They were able to establish sufficient provider networks and change the number and types of services offered. The lead agencies also developed new, more innovative services such as the creation of emergency response teams, the development of an agency to oversee and support Kinship Care programs, and the enhancement of prevention and diversion services. While some progress had been made in the professionalization of staff through
credentialing processes, most felt it was too soon to tell. In all of these areas, however, respondents acknowledged that the development of CBC was a work in progress and there was still room for improvement. Most respondents felt that CBC had helped children and their families, improved communication and coordination among child-serving agencies in the SunCoast Region, and that CBC had begun to bring about positive systems change. Again, all believed that these results could and would improve over time as CBC matured in the two sites.
PROGRAMMATIC OUTCOMES

More concrete information on the performance of the CBC sites came from our analysis of existing administrative child protection data. This part of the evaluation focused on Community-Based Care’s ability to ensure the safety and well being of Florida’s foster care children by examining indicators of placement decision-making. For example, placement stability was investigated by examining the proportions of children who were transferred from protective supervision placements into foster care. The timeliness of permanency decision-making was considered by examining the durations of children’s episodes (i.e., length of stay) in foster care. Outcome decision-making was addressed by examining rates of discharge from foster care (e.g., the percentages of children who were returned to their original parents/legal guardians or relatives), as well as rates of reentry into foster care after discharge from an initial episode of care. (Additionally, the safety of children in the foster care system was to be addressed by examining rates of reabuse or reneglect while in care, however, this indicator was omitted from analysis due to an insufficient amount of follow-up information for children entering the system in FY 2000-01, as well as limitations of the data to distinguish between “true” maltreatment recurrence versus delayed reporting of original maltreatment events.) All quantitative child protection indicators examined in this section of the report were chosen by the Office of Community-Based Care, and developed in conjunction with the Office of Family Safety as part of an ongoing collaboration between the Department and FMHI (i.e., Information Utilization Project: see Brown, Lipien, Yampolskaya, & Trinidad, 2001 and Brown, Yampolskaya, & Trinidad, 2001).

Although the quantitative child protection indicators used in these analyses were modeled after indicators used in the Performance-Based Program Budget (PB²) and the Adoption and Foster Care Analysis and Reporting System (AFCARS), FMHI’s access to the original, disaggregated child protection databases allowed for the construction of indicators that were more appropriate for the detailed geographic and longitudinal nature of data required for statistical analysis. For example, analysis of these indicators relied on entry or exit cohorts of children, as opposed to groups of children who were in care at a specific “point-in-time,” thus reducing selection bias. Furthermore, transition from the State’s existing administrative child protection data system (Client Information System) to the new system (HomeSafenet) throughout FY 2000-01 required the specific exclusion of regions that did not have sufficient longitudinal data for analysis (unavailable using existing PB² or AFCARS indicators). Moreover, the statistical methods used to analyze the data were chosen to maximize the utility of the foster care episode-level data that were made available by the Department.
Sources of Data

The primary source of data for all quantitative child protection indicators used in this report was the Client Information System (CIS). CIS includes data from the Florida Abuse Hotline Information System (FAHIS), which supports the hotline and protective investigations. Additional data included in CIS consist of dates that a service provider (e.g., DCF foster care unit or Community-Based Care agency) was responsible for the child, service component (e.g., Protective Supervision or Foster Care—Substitute Care Placement), dates of initial placement and placement termination (used to construct service episodes), and case closure status (e.g., transfer to another service, returned to parents or legal guardians, returned to relatives). CIS also includes demographic information on children in the system, such as race, ethnicity, gender, age, and county of residence.

A second source of data used in this report was provided by the Center for the Study of Children's Futures at the Louis de la Parte Florida Mental Health Institute, University of South Florida. The Center is part of Florida KIDS COUNT, which has been supported by the Annie E. Casey Foundation, and is a data collection and dissemination project focusing on policy issues related to the well-being of children and families. Florida KIDS COUNT provides a consistent and reliable source of data on Florida’s children and their families for each of Florida’s 67 counties. These data are made available for use at the national, state and local levels and include county specific information, statewide measures, and comparisons among counties and regions within Florida (see www.floridakidscount.org).

County Matching Criteria

Analysis of quantitative child protection indicators used in this report consisted of tests between CBC Counties (i.e., Pasco, Pinellas, Sarasota, and Manatee) and three different sets of comparison counties. All three sets of comparison counties were limited to Florida counties that had child protection data for equivalent time periods in both “pre” (FY 1995-96) and “post” (FY 2000-01) measures. Because non-CBC Counties transitioned from CIS to HomeSafenet at various points throughout FY 2000-01, only counties with at least 11 months of follow-up data in FY 2000-01 were considered to be acceptable matches to the four CBC Counties.

The first set of comparison counties consisted of all Florida counties with at least 11 months of follow-up data. Specifically, this group consisted of all counties in Districts 2, 4, 7, 10, 12, 13, and 14 (i.e., counties in other districts had HomeSafenet transition dates before the 11 month cut-off). This first set of comparison counties is referred to as “Rest of State” throughout the remainder of this section.
In order to rule out differences between CBC Counties and the Rest of State counties that may be attributable to discrepancies in the demographic profile of counties around the State, a second set of comparison counties was identified (referred to as “CBC Matches” throughout the report). Demographic variables used to identify the set of CBC Matches consisted of: (a) total number of children in the county, (b) percentage of children that were Nonwhite, (c) percentage of children living in poverty, (d) median county income, and (e) per-capita crime rates.

The first four variables were provided by the Center for the Study of Children’s Futures/Florida KIDS COUNT, which routinely obtains longitudinal data for Florida counties from the U.S. Census Department. The crime index, as defined by the U.S. Census Department, is based on monthly reports from city police, sheriffs, and state police and includes murder and nonnegligent manslaughter, forcible rape, robbery, aggravated assault, burglary, larceny, motor vehicle theft, and arson. These data are reported as incidence per 100,000 people. Data for this variable were provided by the Florida Department of Law Enforcement.

The process of identifying matches to the four CBC Counties consisted of selecting the top five counties (out of all counties in the State) whose data on the five demographic variables most closely matched each individual CBC County. Specifically, potential matches for each CBC County were ranked in order from least to most discrepant on each of the five demographic variables. The differences in rankings between CBC Counties and their matches then were summed across all demographic variables (equally weighted) to determine an overall discrepancy score. Counties that did not have the requisite 11 months of follow-up data were subsequently excluded and another matching county was substituted in its place. The resulting set of CBC Matches, the demographic data used in the matching process, and the dates of transition to HomeSafenet are shown in Table 3.

**Table 3. Comparison Counties for CBC Evaluation**

<table>
<thead>
<tr>
<th>Comparison County</th>
<th>CBC County</th>
<th>Child Population</th>
<th>% Nonwhite</th>
<th>% in Poverty</th>
<th>Median Income ($)</th>
<th>Crime Index</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bay</td>
<td>Pinellas</td>
<td>35,805</td>
<td>21.55</td>
<td>22.4</td>
<td>32,047</td>
<td>5388.0</td>
</tr>
<tr>
<td>Brevard</td>
<td>Manatee</td>
<td>105,233</td>
<td>19.46</td>
<td>17.6</td>
<td>36,353</td>
<td>3612.5</td>
</tr>
<tr>
<td>Clay</td>
<td>Sarasota</td>
<td>39,559</td>
<td>15.75</td>
<td>10.6</td>
<td>42,729</td>
<td>3621.8</td>
</tr>
<tr>
<td>Duval</td>
<td>Manatee</td>
<td>205,739</td>
<td>43.48</td>
<td>18.8</td>
<td>35,883</td>
<td>6947.7</td>
</tr>
<tr>
<td>Hernando</td>
<td>Pasco</td>
<td>24,880</td>
<td>12.05</td>
<td>23.9</td>
<td>27,740</td>
<td>4097.8</td>
</tr>
<tr>
<td>Lake</td>
<td>Pasco</td>
<td>42,966</td>
<td>21.38</td>
<td>22.7</td>
<td>30,768</td>
<td>4126.3</td>
</tr>
<tr>
<td>Marion</td>
<td>Pasco</td>
<td>55,706</td>
<td>24.84</td>
<td>26.7</td>
<td>28,244</td>
<td>4577.9</td>
</tr>
<tr>
<td>Osceola</td>
<td>Manatee</td>
<td>46,402</td>
<td>28.62</td>
<td>21.8</td>
<td>32,552</td>
<td>6039.7</td>
</tr>
<tr>
<td>Polk</td>
<td>Pinellas</td>
<td>118,757</td>
<td>29.6</td>
<td>25.4</td>
<td>31,030</td>
<td>5815.0</td>
</tr>
<tr>
<td>Seminole</td>
<td>Manatee</td>
<td>93,030</td>
<td>22.18</td>
<td>14.2</td>
<td>43,061</td>
<td>3947.2</td>
</tr>
<tr>
<td>Volusia</td>
<td>Pasco</td>
<td>90,333</td>
<td>21.42</td>
<td>22.3</td>
<td>29,843</td>
<td>4858.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CBC County</th>
<th>Median Income ($)</th>
<th>Crime Index</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pasco</td>
<td>69,966</td>
<td>21.8</td>
</tr>
<tr>
<td>Pinellas</td>
<td>178,559</td>
<td>23.94</td>
</tr>
<tr>
<td>Sarasota</td>
<td>53,170</td>
<td>15.3</td>
</tr>
<tr>
<td>Manatee</td>
<td>54,966</td>
<td>24.24</td>
</tr>
</tbody>
</table>

Note: Demographic and income data provided by the Center for the Study of Children’s Futures/Florida KIDS COUNT (U.S. Census 2000 estimates). Crime index data provided by the Florida Department of Law Enforcement (2000 estimates). na = not applicable.
Finally, to examine the degree to which differences between CBC Counties and both Rest of State and CBC Matches were consistent across individual CBC Counties, a third set of statistical comparisons was performed consisting of tests between each individual CBC County and its respective set of matching counties.

**Statistical Note**

All statistical tests consisted of Site (CBC vs. non-CBC) and Time (FY 1995-96 vs. FY 2000-01) main effects, and Site by Time interactions (i.e., differences in the rate of change in indicators between sites over time), conducted at the alpha = .05 level of significance. All main effects and interaction terms were mean centered to reduce colinearity among independent variables.

**Length of Stay in Foster Care**

**Method**

Analysis of length of stay in foster care was based on a Cox regression (Cox, 1972) of the durations of children’s episodes in care. The sample for this analysis consisted of duplicated counts of children grouped by fiscal year entry cohort; that is, children could have multiple episodes of foster care within a fiscal year and each episode was included in the estimates. Thus, the specific unit of analysis consisted of all episodes of foster care begun during the first 11 months of either FY 1995-96 or FY 2000-01. In conjunction with the Department of Children and Families’ Office of Family Safety, a foster care episode was operationally defined as a continuous period of time in Foster Care Substitute Care Placements (CIS program component code 50) that was not interrupted by more than 30 days between placements. Temporary stays in an interim placement (e.g., emergency shelter or with relatives) during an on-going protective investigation were not included in the calculation of foster care episodes. In order to insure comparability between time periods, episodes in foster care that extended beyond the 11-month window were truncated (i.e., “censored”) at that point in time. Indicators of length in stay in foster care shown in the accompanying graphs refer to the proportion of children who exited care within six months of entry.

**Results**

Figures 1 and 2 show the proportions of children remaining in foster care over time for (a) CBC Counties versus Rest of State and (b) CBC Counties versus CBC Matches, respectively. For example, as shown in Figure 1, approximately 8% of children who entered foster care in a CBC County during the first 11 months of FY 1995-96 had exited care within 3 months. Following that same curve, approximately 18% are shown to have exited care within 6 months and 24% exited care by the 9-month mark. By comparison, for those children in CBC Counties who began an episode of foster care in FY 2000-01, approximately 20% exited care within 3 months, 30% exited care within
Figure 1. Cumulative Proportion of Children Exiting Foster Care Over Time: CBC Counties vs. Rest of State

Figure 2. Cumulative Proportion of Children Exiting Foster Care Over Time: CBC Counties vs. CBC Matches
Table 4. Results of Cox Regression Analysis of Length of Stay in Foster Care (Percentage of Children Exiting Foster Care Within 6 Months)

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Site</th>
<th>Time</th>
<th>Site by Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State</td>
<td>nsd</td>
<td>Greater % exiting FC in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>CBC Counties vs. CBC Matches</td>
<td>nsd</td>
<td>Greater % exiting FC in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>Pinellas vs. Pinellas Matches</td>
<td>nsd</td>
<td>Greater % exiting FC in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches</td>
<td>nsd</td>
<td>Greater % exiting FC in FY 2000-01</td>
<td>Pasco: decrease in % exiting FC over time</td>
</tr>
<tr>
<td>Manatee vs. Manatee Matches</td>
<td>nsd</td>
<td>Greater % exiting FC in FY 2000-01</td>
<td>Pasco Matches: increase in % exiting FC over time</td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches</td>
<td>Greater % exiting FC for Sarasota</td>
<td>nsd</td>
<td></td>
</tr>
</tbody>
</table>

Note: nsd = no significant difference. FC = Foster Care.

6 months, and 36% exited care within 9 months. The greater percentages of children exiting foster care between these two time periods indicates that for all counties (CBC and non-CBC), average length of stay in foster care has decreased over time.

General results of the Cox regression analyses are shown in Table 4 (specific details are given in Appendix 2). Significant Time effects for all comparisons document the overall decrease in average length of stay in foster care between FY 1995-96 and FY 2000-01 entry cohorts. A significant Site effect existed between Sarasota County and its matching counties indicating that, over both time periods, children in Sarasota County had shorter average durations in foster care than children in matching (i.e., Brevard, Clay, and Seminole) counties. No other significant Site differences were found. Differences in the rate of change in length of stay between CBC Counties and their comparison groups are examined in the Site by Time interaction, with only the Pasco County versus Pasco Matches comparison resulting in a significant difference.

The percentages of children exiting foster care within six months of entry are shown in Figures 3 through 7. As shown in Figures 6 and 7, the trend for Manatee and Sarasota Counties is for the proportions of children exiting care within six months to be increasing faster than the proportions for their respective matching counties. This corresponds to shorter average lengths of stay in foster care for Manatee and Sarasota, however, results of the Site by Time interactions for these two counties proved to be nonsignificant. For Pasco County (see Figure 5), the reverse trend is apparent with the percentage of children exiting foster care within six months increasing for children in Pasco County’s group of matching counties (i.e., Hernando, Lake, Marion, and Volusia Counties), and decreasing for Pasco County children.
Figure 3. Percentage of Children Exiting Foster Care Within 6 Months

Figure 4. Percentage of Children Exiting Foster Care Within 6 Months

Figure 5. Percentage of Children Exiting Foster Care Within 6 Months

Figure 6. Percentage of Children Exiting Foster Care Within 6 Months

Figure 7. Percentage of Children Exiting Foster Care Within 6 Months
Reentry into Foster Care

Method

Cox regression was used to examine differences in the proportions of children who had a subsequent episode of foster care begun within 11 months from discharge from their first episode of care. The denominator used in the calculation of percentages of children reentering foster care consisted of an unduplicated count of all children who exited their first episode of foster care during the first 11 months of either FY 1995-96 or FY 2000-01 (i.e., the analysis relied on exit cohorts of children). Children who did not reenter care within the first 11 months of FY 1995-96 or FY 2000-01 were censored at that point in time.

Results

General results of the analysis of reentry into foster care are shown in Table 5 (specific details are given in Appendix 2). A significant Time effect for the CBC County versus Rest of State comparison indicated that the percentage of children who reentered foster care within 11 months decreased over time. For example, 15.1% of children in the Rest of State group who exited foster care in FY 1995-96 reentered care within 11 months. In FY 2000-01, this percentage decreased to 10.7%. For the CBC County group, the percentage of reentries increased from 8.5% to 9.5%.

In Pinellas and Pasco Counties there was an apparent trend for the percentage of children reentering foster care to increase over time while the trend for their respective matches was to decrease over time (see Figures 9 and 10). For example, from FY 1995-95 to FY 2000-01, the percentage of reentries in Pinellas County increased from 6.3% to 8.4% and the percentage of reentries in Pasco County nearly doubled from 9.3% to 18.2%. Results of the Cox regression analyses, however, indicated that only the Pasco County versus Pasco Matches Site by Time interaction was statistically significant.

By comparison, for Manatee and Sarasota Counties, the percentages of reentries into foster care followed downward patterns similar to those of their respective matches (see Figures 11 and 12). For example, the percentages of reentries for Manatee and Sarasota decreased from 14.5% and 5.9% in FY 1995-96 to 10.2% and 3.9% in FY 2000-01, respectively. Time effects for both comparisons were marginally significant (p < .10) suggesting that the downward trend in the percentage of reentries was common for both counties and matched counterparts.
### Table 5. Results of Cox Regression of Reentry into Foster Care

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Site</th>
<th>Time</th>
<th>Site by Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State</td>
<td>nsd</td>
<td>Smaller % of reentries in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>CBC Counties vs. CBC Matches</td>
<td>nsd</td>
<td>nsd</td>
<td>nsd</td>
</tr>
<tr>
<td>Pinellas vs. Pinellas Matches</td>
<td>nsd</td>
<td>nsd</td>
<td>nsd</td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches</td>
<td>nsd</td>
<td>nsd</td>
<td>nsd</td>
</tr>
<tr>
<td>Manatee vs. Manatee Matches</td>
<td>nsd</td>
<td>nsd</td>
<td>nsd</td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches</td>
<td>nsd</td>
<td>nsd</td>
<td>nsd</td>
</tr>
</tbody>
</table>

*Note:* nsd = no significant difference.

### Figure 8. Percentage of Children Reentering Foster Care Within 11 Months

![Graph showing percentage of children reentering foster care between 1995-96 and 2000-01 for CBC Counties, CBC Matches, and Rest of State.](image)
Figure 9. Percentage of Children Reentering Foster Care Within 11 Months

Figure 10. Percentage of Children Reentering Foster Care Within 11 Months

Figure 11. Percentage of Children Reentering Foster Care Within 11 Months

Figure 12. Percentage of Children Reentering Foster Care Within 11 Months
Percentage of Children Transferred from Protective Supervision to Foster Care

Methods

Analysis of the percentage of children transferred from protective supervision to foster care was based on exit cohorts consisting of the unduplicated number of children who exited protective supervision during the first 11 months of either FY 1995-96 or FY 2000-01. Numerators for the percentages used in this analysis consisted of the number of children who transferred to foster care, as identified by a case closure status code of 57 in the Client Information System. Children transferred to protective supervision in another area were excluded from the analysis. The dichotomous dependent variable was coded 1 if the child transferred from protective supervision to foster care, and 0 otherwise.

Results

General results of the logistic regression analysis are shown in Table 6 (specific details are given in Appendix 2). Significant Site by Time effects were found for all comparisons except Pasco versus Pasco Matches. As shown in Figure 13, the percentage of children who transferred from protective supervision to foster care in the four CBC Counties (as a group) increased from 5.9% in FY 1995-96 to 8.0% in FY 2000-01. By comparison, transfers to foster care for both the Rest of State and CBC Matches groups decreased from 7.6% and 8.0% in FY 1995-96 to 4.5% and 5.0% in FY 2000-01, respectively.

Comparisons between individual CBC Counties and their respective matches indicated that the percentages of children that transferred from protective supervision to foster care in Pinellas, Manatee, and Sarasota Counties increased significantly over time relative to their respective matching counties (see Figures 14, 16, and 17).

Table 6. Results of Logistic Regression Analysis of Children Transferred from Protective Supervision to Foster Care

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Site</th>
<th>Time</th>
<th>Site by Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State</td>
<td>Greater % of transfers for CBC Counties</td>
<td>Smaller % of transfers in FY 2000-01</td>
<td>CBC Counties: increased % of transfers over time Rest of State: decreased % of transfers over time</td>
</tr>
<tr>
<td>CBC Counties vs. CBC Matches</td>
<td>Greater % of transfers for CBC Counties</td>
<td>Smaller % of transfers in FY 2000-01</td>
<td>CBC Counties: increased % of transfers over time; CBC Matches: decreased % of transfers over time</td>
</tr>
<tr>
<td>Pinellas vs. Pinellas Matches</td>
<td>Greater % of transfers for Pinellas</td>
<td>Smaller % of transfers in FY 2000-01</td>
<td>Pinellas: small increase in % of transfers over time Pinellas Matches: decreased % of transfers over time</td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches</td>
<td>nsd</td>
<td>nsd</td>
<td>nsd</td>
</tr>
<tr>
<td>Manatee vs. Manatee Matches</td>
<td>Greater % of transfers for Manatee</td>
<td>Smaller % of transfers in FY 2000-01</td>
<td>Manatee: increased % of transfers over time Manatee Matches: decreased % of transfers over time</td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches</td>
<td>Greater % of transfers for Sarasota</td>
<td>nsd</td>
<td>Sarasota: increased % of transfers over time Sarasota Matches: decreased % of transfers over time</td>
</tr>
</tbody>
</table>

Note: nsd = no significant difference.
Figure 13. Percentage of Children Transferring from Protective Supervision to Foster Care

Figure 14. Percentage of Children Transferring from Protective Supervision to Foster Care

Figure 15. Percentage of Children Transferring from Protective Supervision to Foster Care

Figure 16. Percentage of Children Transferring from Protective Supervision to Foster Care

Figure 17. Percentage of Children Transferring from Protective Supervision to Foster Care
Percentage of Children Returned to:
(a) Parents or Legal Guardians and
(b) Returned to Relatives After Exiting Foster Care

Methods

Analysis of these two indicators were based on exit cohorts of children, defined here as the duplicated number of children who exited from foster care during the first 11 months of either FY 1995-96 or FY 2000-01. Children in foster care whose case status was not closed (i.e., did not have a service exit date) and children who were transferred to foster care in another area were excluded from the analysis. Classification of children returned to parents or legal guardians was based on case closure status codes 46, 52, 71, and 72 from the Client Information System database (see Appendix 3); classification of children returned to relatives was based on case closure status code 76 (see Appendix 3). Logistic regression was used to analysis both dichotomous outcomes (coded 1 if the child had the respective outcome, 0 if the child had some other outcome).

Results

Children Returned to Parents or Legal Guardian After Exiting Foster Care

General results of the logistic regression analysis for this indicator are shown in Table 7 (specific results are given in Appendix 2). Significant Time effects for all comparisons revealed that the percentages of children who were returned to parents or legal guardians after exiting foster care significantly increased between the two time periods. For example, 33.5% of CBC children who entered foster care in FY 1995-96 were returned to their parents or legal guardians. By FY 2000-01, this percentage increased to 45.3% (see Figure 18). Significant Site effects for all comparisons except Pasco versus Pasco Matches and Sarasota versus Sarasota Matches indicated that, in general, CBC Counties had greater percentages of children returned to parents or legal guardians after exiting foster care than their respective comparison groups. However, nonsignificant Site by Time interaction effects for all comparisons indicated that the rate of change in these percentages over time was similar for both CBC and non-CBC Counties.

Table 7. Results of Logistic Regression Analysis of Children Returned to Parent or Legal Guardian

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Site</th>
<th>Time</th>
<th>Site by Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State</td>
<td>Greater % returned for CBC Counties</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>CBC Counties vs. CBC Matches</td>
<td>Greater % returned for CBC Counties</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>Pinellas vs. Pinellas Matches</td>
<td>Greater % returned for Pinellas</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches</td>
<td>nsd</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>Manatee vs. Manatee Matches</td>
<td>Greater % returned for Manatee</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches</td>
<td>nsd</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
</tbody>
</table>

Note: nsd = no significant difference. FC = Foster Care.
Figure 18. Percentage of Children Returned to Parents or Legal Guardian After Exiting Foster Care

Figure 19. Percentage of Children Returned to Parents or Legal Guardian After Exiting Foster Care
Figure 20. Percentage of Children Returned to Parents or Legal Guardian After Exiting Foster Care

Figure 21. Percentage of Children Returned to Parents or Legal Guardian After Exiting Foster Care

Figure 22. Percentage of Children Returned to Parents or Legal Guardian After Exiting Foster Care
Children Returned to Relatives After Exiting Foster Care

General results of the analysis of the percentage of children returned to relatives after exiting foster care are presented in Table 8 (specific results are given in Appendix 2). Significant Time effects indicated that the percentages of children returned to relatives consistently increased over time for all comparisons. Additionally, significant Site effects for all but Sarasota versus Sarasota Matches indicated that, in general, the percentages of children returned to relatives were greater in non-CBC comparison groups than in CBC Counties. For Pasco County, a significant Site by Time interaction effect indicated that the percentage of Pasco County children who were returned to relatives decreased over time (from 17.6% in FY 1995-96 to 9.3% in FY 2000-01), while children in Pasco County Matches increased over time (from 9.4% to 23.5%, respectively; see Figure 25). For Sarasota County, a significant Site by Time interaction indicated that the percentage of children who were returned to relatives increased at a much greater rate (from 2.3% in FY 1995-96 to 34.2% in FY 2000-01) compared to the slight increase for Sarasota (which increased from 11.5% to 11.8%, respectively; see Figure 27).

Table 8. Results of Logistic Regression Analysis of Children Returned to Relatives After Exiting Foster Care

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Site</th>
<th>Time</th>
<th>Site by Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State</td>
<td>Greater % returned for Rest of State</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>CBC Counties vs. CBC Matches</td>
<td>Greater % returned for CBC Matches</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>Pinellas vs. Pinellas Matches</td>
<td>Greater % returned for Pinellas Matches</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches</td>
<td>nsd</td>
<td>Greater % returned in FY 2000-01</td>
<td>Pasco: decreased % returned over time</td>
</tr>
<tr>
<td>Manatee vs. Manatee Matches</td>
<td>Greater % returned for Manatee Matches</td>
<td>Greater % returned in FY 2000-01</td>
<td>nsd</td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches</td>
<td>nsd</td>
<td>Greater % returned in FY 2000-01</td>
<td>Greater increase in % returned in Sarasota compared to Matches</td>
</tr>
</tbody>
</table>

Note: nsd = no significant difference.

Figure 23. Percentage of Children Returned to Relatives After Exiting Foster Care
Figure 24. Percentage of Children Returned to Relatives After Exiting Foster Care

Figure 25. Percentage of Children Returned to Relatives After Exiting Foster Care

Figure 26. Percentage of Children Returned to Relatives After Exiting Foster Care

Figure 27. Percentage of Children Returned to Relatives After Exiting Foster Care
ANALYSIS OF EXPENDITURES

Research Question

How do total expenditures for child protective services in the CBC sites pre- and post-CBC compare with expenditures in the non-CBC Counties?

Methodology

We analyzed direct expenditures for child protective services in the CBC Counties (Manatee, Pasco, Pinellas, and Sarasota) and non-CBC Counties. For this analysis, direct expenditures are defined as expenditures incurred at the district level for the following child protective services:

1. Adoptive home placement and adoption services (including adoption-related legal services)
2. Foster care child support & placement
3. Kinship foster care
4. Independent living support
5. Shelter care placement – group homes, emergency shelter, residential care shelter
6. Foster care licensing/certification/recruiting/training
7. Family preservation, including protective supervision & voluntary family services
8. Intensive crisis counseling program (ICCP)
9. Family Builders & other family reunification services
10. Secondary prevention and other in-home interventions not covered in #7
11. Other out of home interventions
12. Other child welfare services
13. Primary prevention of child abuse, maltreatment, & neglect

Case management expenditures could not be uniquely identified but were included in the expenditures for several service types. We excluded expenditures for investigative services. Expenditures for legal services pertaining to adoption were included because CBC sites are responsible for covering those costs, but all other expenditures for legal services were excluded.

Several other child protective services expenditures were excluded so that the CBC and non-CBC sites could be compared on the same basis. This analysis excludes expenditures for projects unique to a particular district (e.g., contract with Broward Alcohol Rehabilitation Center for counseling and intervention services in District 10), programs not made available to CBC sites (e.g., Community Partners for Timely Adoptions), and legislative member projects (e.g., District 11 contract with Kristi House for increased services for sexually abused foster children).

DCF accounting data were used to calculate child protective services expenditures. With guidance from Office of Revenue Management staff, we applied appropriate
DCF budget entities (BEs) and other cost accumulators (OCAs) to the above service list to arrive at a comprehensive list of child protective services expenditure categories. The Office of Revenue Management then provided us with expenditure data for these BEs and OCAs by district by fiscal year for FY95-96 (the “pre” CBC year) and FY00-01 (the “post” CBC year).

Accounting system limitations prevented us from reporting exact expenditures for two of the CBC sites (Manatee and Sarasota) for FY95-96. While the CBC program has been rolled out at the county level, DCF’s accounting system cannot report expenditures any lower than the district level. This particularly affects the analysis of expenditures in Manatee and Sarasota Counties, which do not comprise an entire district in the same way as Pinellas and Pasco Counties (District 5). We consulted with an expert panel to help us accurately allocate district level expenditures to the counties within those districts. The panel advised us to allocate 18% of District 6’s expenditures to Manatee and 27% of District 8’s expenditures to Sarasota. The problem was alleviated in FY00-01 with the creation of unique OCAs for CBC expenditure categories.

We also calculated average direct child protective services expenditures per child served. Using CIS data, a “child served” is defined as any child receiving protective supervision, ICCP, voluntary family services, other in-home services, foster care, or adoptive home placement during the relevant fiscal year.

Results

Total direct expenditures for child protective services in Florida rose from $225 million in FY95-96 to $386 million in FY00-01, an increase of 71%. As shown in Table 9, Districts 7 and 10 more than doubled their FY95-96 expenditure levels in FY00-01.

Table 9. Total Expenditures for the Direct Provision of Child Protective Services By District (Fiscal Years 1995-96 and 2000-01)

<table>
<thead>
<tr>
<th>District</th>
<th>Total Expenditures ($)</th>
<th>Change</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>9,086,815</td>
<td>4,986,714</td>
<td>55</td>
</tr>
<tr>
<td>2</td>
<td>10,557,741</td>
<td>5,056,588</td>
<td>48</td>
</tr>
<tr>
<td>3</td>
<td>10,547,612</td>
<td>4,406,539</td>
<td>42</td>
</tr>
<tr>
<td>4</td>
<td>17,629,954</td>
<td>8,093,327</td>
<td>46</td>
</tr>
<tr>
<td>5</td>
<td>15,586,166</td>
<td>5,032,496</td>
<td>32</td>
</tr>
<tr>
<td>6</td>
<td>28,701,126*</td>
<td>16,842,321</td>
<td>59</td>
</tr>
<tr>
<td>7</td>
<td>21,503,429</td>
<td>36,275,548</td>
<td>169</td>
</tr>
<tr>
<td>8</td>
<td>10,141,069*</td>
<td>8,762,965</td>
<td>86</td>
</tr>
<tr>
<td>9</td>
<td>11,658,750</td>
<td>6,262,342</td>
<td>54</td>
</tr>
<tr>
<td>10</td>
<td>19,228,352</td>
<td>26,364,654</td>
<td>137</td>
</tr>
<tr>
<td>11</td>
<td>36,640,436</td>
<td>16,896,142</td>
<td>46</td>
</tr>
<tr>
<td>12</td>
<td>6,357,108</td>
<td>5,450,099</td>
<td>86</td>
</tr>
<tr>
<td>13</td>
<td>9,764,526</td>
<td>7,914,698</td>
<td>81</td>
</tr>
<tr>
<td>14</td>
<td>12,203,742</td>
<td>5,098,182</td>
<td>42</td>
</tr>
<tr>
<td>15</td>
<td>5,433,938</td>
<td>3,374,780</td>
<td>62</td>
</tr>
<tr>
<td>State Total</td>
<td>225,040,764</td>
<td>160,817,395</td>
<td>71</td>
</tr>
</tbody>
</table>

* FY95-96 total expenditures for Sarasota County, which moved from District 8 to District 6 as of the beginning of FY00-01, are included in District 6’s total to equilibrate comparisons across the two time periods.
Table 10. Total Children Served By District
(Fiscal Years 1995-96 and 2000-01)

<table>
<thead>
<tr>
<th>District</th>
<th>Total Children Served 1995-96</th>
<th>Total Children Served 2000-01</th>
<th>Change</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3,986</td>
<td>3,877</td>
<td>(109)</td>
<td>-3</td>
</tr>
<tr>
<td>2</td>
<td>4,074</td>
<td>3,425</td>
<td>(649)</td>
<td>-16</td>
</tr>
<tr>
<td>3</td>
<td>2,985</td>
<td>2,832</td>
<td>(153)</td>
<td>-5</td>
</tr>
<tr>
<td>4</td>
<td>4,480</td>
<td>6,434</td>
<td>1,954</td>
<td>44</td>
</tr>
<tr>
<td>5</td>
<td>5,090</td>
<td>5,072</td>
<td>(18)</td>
<td>0</td>
</tr>
<tr>
<td>6</td>
<td>8,243*</td>
<td>8,273</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>8,046</td>
<td>11,489</td>
<td>3,443</td>
<td>43</td>
</tr>
<tr>
<td>8</td>
<td>2,935*</td>
<td>3,652</td>
<td>717</td>
<td>24</td>
</tr>
<tr>
<td>9</td>
<td>2,995</td>
<td>3,357</td>
<td>362</td>
<td>12</td>
</tr>
<tr>
<td>10</td>
<td>6,225</td>
<td>7,000</td>
<td>775</td>
<td>12</td>
</tr>
<tr>
<td>11</td>
<td>11,893</td>
<td>10,040</td>
<td>(1,853)</td>
<td>-16</td>
</tr>
<tr>
<td>12</td>
<td>1,695</td>
<td>2,529</td>
<td>834</td>
<td>49</td>
</tr>
<tr>
<td>13</td>
<td>4,268</td>
<td>5,262</td>
<td>994</td>
<td>23</td>
</tr>
<tr>
<td>14</td>
<td>3,140</td>
<td>5,681</td>
<td>2,541</td>
<td>81</td>
</tr>
<tr>
<td>15</td>
<td>1,831</td>
<td>2,447</td>
<td>516</td>
<td>27</td>
</tr>
<tr>
<td>State Average</td>
<td>71,986</td>
<td>81,370</td>
<td>9,384</td>
<td>13</td>
</tr>
</tbody>
</table>

* FY95-96 total children served for Sarasota County, which moved from District 8 to District 6 as of the beginning of FY00-01, are included in District 6’s total to equilibrate comparisons across the two time periods.

Table 11 shows average expenditures per child served for each district. (The number of children receiving child protective services per district (i.e., children served) is shown in Table 10). The average per child expenditures ranged from $2,280 in District 1 to $3,935 in District 4 during FY95-96; the state average was $3,126 per child served. FY00-01 average expenditures ranged from $3,046 in District 14 to $6,513 in District 10; the state average increased by 52% to $4,742 per child served. While most districts increased their per child expenditures by at least 24%, District 4’s per child expenditures rose only 2% while District 14’s average expenditures fell 22% from its FY95-96 level.

Table 11. Average Expenditures for the Direct Provision of Child Protective Services Per Child Served By District (Fiscal Years 1995-96 and 2000-01)

<table>
<thead>
<tr>
<th>District</th>
<th>Average Expenditures ($) 1995-96</th>
<th>Average Expenditures ($) 2000-01</th>
<th>Change</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2,280</td>
<td>3,630</td>
<td>1,350</td>
<td>59</td>
</tr>
<tr>
<td>2</td>
<td>2,591</td>
<td>4,559</td>
<td>1,967</td>
<td>76</td>
</tr>
<tr>
<td>3</td>
<td>3,534</td>
<td>5,280</td>
<td>1,747</td>
<td>49</td>
</tr>
<tr>
<td>4</td>
<td>3,935</td>
<td>3,998</td>
<td>63</td>
<td>2</td>
</tr>
<tr>
<td>5</td>
<td>3,062</td>
<td>4,065</td>
<td>1,003</td>
<td>33</td>
</tr>
<tr>
<td>6</td>
<td>3,302*</td>
<td>5,055</td>
<td>2,203</td>
<td>67</td>
</tr>
<tr>
<td>7</td>
<td>2,673</td>
<td>5,029</td>
<td>2,357</td>
<td>88</td>
</tr>
<tr>
<td>8</td>
<td>3,834*</td>
<td>5,176</td>
<td>1,342</td>
<td>35</td>
</tr>
<tr>
<td>9</td>
<td>3,893</td>
<td>5,338</td>
<td>1,446</td>
<td>37</td>
</tr>
<tr>
<td>10</td>
<td>3,089</td>
<td>6,513</td>
<td>3,424</td>
<td>111</td>
</tr>
<tr>
<td>11</td>
<td>3,081</td>
<td>5,332</td>
<td>2,251</td>
<td>73</td>
</tr>
<tr>
<td>12</td>
<td>3,751</td>
<td>4,669</td>
<td>918</td>
<td>24</td>
</tr>
<tr>
<td>13</td>
<td>2,288</td>
<td>3,360</td>
<td>1,072</td>
<td>47</td>
</tr>
<tr>
<td>14</td>
<td>3,887</td>
<td>3,046</td>
<td>(841)</td>
<td>-22</td>
</tr>
<tr>
<td>15</td>
<td>2,814</td>
<td>3,600</td>
<td>786</td>
<td>28</td>
</tr>
<tr>
<td>State Average</td>
<td>3,126</td>
<td>4,742</td>
<td>1,616</td>
<td>52</td>
</tr>
</tbody>
</table>

* FY95-96 average expenditures per child served for children in Sarasota County, which moved from District 8 to District 6 as of the beginning of FY00-01, are included in District 6’s average to equilibrate comparisons across the two time periods.
The magnitude of change in total direct expenditures for child protective services for the CBC sites substantially differed from the non-CBC sites, as shown in Figure 28. The non-CBC sites saw their child protective services direct expenditures increase from $201 million in FY95-96 to $355 million in FY00-01, an increase of 76%. Direct expenditures for child protective services in the 4 CBC Counties rose only 29%, from $24 million in FY95-96 to $31 million in FY00-01.

**Figure 28. Total Expenditures for CPS Direct Provision: CBC Sites Vs. Non-CBC Sites**

The change in average expenditures per child served indicated a similar trend. As shown in Figure 29, average expenditures for direct provision of child protective services rose from $3,096 per child served in FY95-96 to $4,813 per child served in FY00-01 in the non-CBC sites, an increase of 55%. The CBC sites increased their per child expenditures by 19%, from $3,402 in FY95-96 to $4,053 in FY00-01.

**Figure 29. Average Expenditures per Child Served: CBC Sites Vs. Non-CBC Sites**
Conclusions & Limitations

The data suggest that the CBC sites are delivering direct child protective services more efficiently than their non-CBC counterparts. While the number of children served has increased at similar rates — by 9% in CBC sites and 14% in non-CBC sites, respectively (data not shown) — expenditures in non-CBC sites rose by 76% while CBC expenditures increased by a more modest 29% during the same timeframe. Even after adjusting for inflation using the Consumer Price Index, non-CBC expenditures increased by 57% between FY95-96 and FY00-01, while CBC expenditures rose by only 15% during the same timeframe (data not shown).

There are several limitations to these findings. Total direct expenditures for child protective services were dramatically higher in FY00-01 than in FY95-96. Inflation-adjusted expenditures for FY95-96 were $252.5 million (data not shown), so the increase to $386 million in FY00-01 still represents a 53% higher outlay for direct child protective services compared to the baseline period. This large increase may reflect better reporting, as reported by others studying child welfare expenditures (Bess, Leos-Urbel, & Geen, 2001), or changes in DCF’s accounting system that could not be accounted for. Such changes could lessen the differences between CBC and non-CBC sites.

We excluded all overhead and state-level expenditures because we lacked sufficient data and guidance to accurately allocate those expenditures to each county. Similarly, it is impossible to accurately identify and allocate CBC start-up expenditures, which were incurred by the CBC sites and at the district and state levels. Consequently, our focus on direct expenditures ignores the potential efficiencies of the CBC model. The increased flexibility afforded by the CBC model may explain part of the efficiency difference between the CBC and non-CBC sites, but the omission of administrative expenditures suggests that CBCs may be even more efficient than shown in this analysis.

This analysis is done from the perspective of DCF. With its focus on direct expenditures, the analysis fails to capture indirect expenditures such as lost productivity due to time lost from work/school and morbidity. From a societal perspective, actual child protective services expenditures are much higher. The effect of CBC on indirect expenditures cannot be assessed from the data in this analysis.

Another limitation of these findings is that efficient service delivery may not represent effective or high quality service delivery. While CBC sites spent an average of $760 less per child served than non-CBC sites during FY00-01, this efficiency gain may be offset if children served in CBC sites fared worse on outcome indicators than their non-CBC counterparts. The Discussion and Policy Implications section of this report will interpret the efficiency findings in the context of the outcome indicators.
DISCUSSION AND POLICY IMPLICATIONS

The qualitative component clearly demonstrated that the creation of CBC is progressing considerably but is still a work in progress. The implementation of CBC did not occur uniformly in the two sites and other external events, as noted above, which complicated the implementation of CBC. It is no surprise, therefore, that the results are clearly mixed for the examined outcomes and need to be interpreted with caution. In the first place, the outcomes chosen were important, but not the only important outcomes. We were limited in our analysis by the transition to HomeSafenet and the availability of existing data. All of the outcome measures related to foster care, which is a vital part of the CBC system, but not the only one. In addition, without further information, even the broad characterization of an outcome being good or poor needs to be interpreted with care.

Table 12 summarizes the results of the administrative child protection data and expenditure analysis components of the evaluation. There are not too many differences between the CBC and non-CBC Counties on the major quantitative indicators. CBCs appear to be more cost-efficient because their expenditures on direct services are lower than for non-CBC sites.

Table 12. Summary of Key Findings

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Key Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. % exiting foster care within 6 months</td>
<td>Increased for CBC and non-CBC counties except Pasco. Only CBC effect was in Pasco, which was negative.</td>
</tr>
<tr>
<td>2. % re-entering foster care within 11 months after discharge</td>
<td>Increased only for Pasco relative to Pasco Matches. Decreased for CBC and non-CBC counties over time.</td>
</tr>
<tr>
<td>3. % transitioned from protective supervision to foster care</td>
<td>Increased for all CBC counties. Decreased for non-CBC counties except Pasco Matches.</td>
</tr>
<tr>
<td>4. % returned to parents and legal guardians after exiting foster care</td>
<td>Increased for all CBC and non-CBC counties except Pasco.</td>
</tr>
<tr>
<td>5. % returned to relatives after exiting foster care</td>
<td>Increased for all CBC and non-CBC counties except Pasco. Decreased for Pasco compared to Pasco Matches. Increased for Sarasota relative to Sarasota Matches.</td>
</tr>
<tr>
<td>6. Total expenditures for child protective services</td>
<td>Increased by 79% for non-CBC counties. Increased by 29% for CBC counties.</td>
</tr>
<tr>
<td>7. Average expenditures per child served</td>
<td>Increased by 55% for non-CBC counties. Increased by 19% for CBC counties.</td>
</tr>
</tbody>
</table>
A number of caveats are in order, however. First, we may not have had sufficient data from Pinellas and Pasco County (because of their late start up) to enable us to detect any effects of CBC in this site. Secondly, the complexity of the implementation process with all of the additional systems changes which occurred may mean that there are confounding factors associated with start-up affecting the outcomes which can not be teased out in the absence of additional information. Also, there were differences in the approaches to implementation of the two sites because of local circumstances and when the programs got started.

Start-up issues also confound the expenditure data as it is hard to categorize expenditures in terms of what is related to start-up vs. what is related to direct services. It is possible that the direct service expenditures for Sarasota and Manatee Counties may have been overestimated for fiscal years 95-96 because it is not clear to what extent we included start-up costs. We must also note that due to the re-organizations of the districts and the creation of the region, the cost data did not allow for “clean” tracking of expenditures on a county level over time. We will be examining the expenditure data in greater detail during Spring 2002.

We categorize the results of two of the indicators as inconclusive because we do not have enough information to determine whether the results were either positive or negative. There are a number of alternative interpretations of the second and third indicators and it is difficult to piece together a coherent picture without having tracked placements for individual children.

For example, increases in children transferred to foster care over time can be a negative outcome because it indicates that family preservation and protective supervision efforts are failing. Alternatively, it could be that the increased level of in-home services led to an increased knowledge of the family. Problematic situations which would not have been detected with less intense services were now being identified. Another potential factor is the extent to which the supply of appropriate foster care families was adequate. It is possible that initially, the limited supply of foster care families had artificially kept children in inappropriate living situations (obviously not in those cases where the child’s safety was at stake). As efforts to recruit, train, and retain foster parents improved, children who previously could not be placed in foster care now could be placed. This would be true for reentry into foster care as well. Service limitations could also be a factor in interpreting this indicator since follow-up services continue for six months and this may not be sufficient to stabilize the situation.

It is also very important to recognize that protective investigations and the courts determine the disposition of children and consequently such decisions are out of the control of the CBCs (although in many cases the courts would rely on the recommendations of the CBC workers). Thus, any changes in protective investigation practices and reporting (they were under transition in some sites) or in judicial decision making could account for changes in these indicators. Similarly, differences in these practices among jurisdictions could confound differences found in our comparisons. Consequently, another explanation for a transition from protective supervision to foster care might be the correction of an initial decision after further work was done with the family.
There is also an interplay between the various outcomes. All of the outcomes seen as good would only be considered positive if they were not accompanied by a higher rate of foster care reentry. Similarly, if the supply of foster care is limited, there could be pressure to return children to the biological family before it is ideal because there were children who were in much greater need of foster care. In short, the most important way to measure these outcomes is to be able to determine whether the child is in the most appropriate placement. We were not able to make this kind of determination for this report but this will be included in the next phase of the evaluation.

As might be expected given the limited time available for this analysis and the nature of the data, the results of the administrative child protection data have raised more questions than they answered. It was apparent from the beginning that given the limitations of the data and time for the analysis, no single piece could tell a methodologically sound story which is why the evaluation has taken a multi-method approach.

On even this limited set of quantitative indicators, CBC did no worse on any of the indicators. In all cases, however, the CBC Counties achieved their outcomes with less money. Consequently, we do not know whether they would have been able to improve in those areas where they had less positive outcomes if they had been able to spend more money as occurred in the rest of the state. Comparing the outcome indicators with the expenditure data suggests that the CBC sites delivered direct child protective services more efficiently than the rest of the state. CBC sites spent an average of $760 less per child served than non-CBC sites in FY 2000-2001 for direct services while achieving outcomes that were not collectively different from the outcomes achieved for children in non-CBC sites. Because the differences in the outcome indicators were not substantial and could not be clearly interpreted as good or bad, we cannot conclude that the CBCs also delivered child protective services more cost-effectively. Differences in quality of care, which will be measured in the next phase of the evaluation, would also confound any estimates of cost-effectiveness.

It must be emphasized that the outcomes were obtained at the time the CBC sites were undergoing major systems change as was described above. The CBCs had to shape an entirely different system of care. Even if many of the same child welfare staff and foster parents were used, it is still time consuming to establish a new set of relationships, new training, and new supervision programs. Therefore, a negative finding may simply be a reflection of start-up difficulties. It does not seem coincidental that Pasco County fared the worst on several outcomes and was the last CBC site to be implemented. In both Pasco and Pinellas CBC sites, programming changes were made with respect to foster care. Family Continuity has established new foster care coordinator positions in recognition of some of the earlier problems.

In sum, the CBC counties generally did as well on the outcome indicators as the comparison counties and they accomplished them while spending fewer dollars on direct child protective services, and at the same time, successfully achieving major systems change. Pasco County, was the only county which did not do as well on the
outcome indicators and, not surprisingly, it only recently implemented CBC. The qualitative component to this evaluation indicated that despite some major inter-organizational issues that remain to be resolved, there is strong leadership support at all levels and the changes have been achieved through a negotiation process involving the mutual respect of all parties.

Next Steps

Our first step upon completion of this report will be to convene a series of stakeholder meetings to present our data, obtain feedback, discuss possible interpretations of the results (particularly around the quantitative indicators identified above), and discuss any questions stakeholders might like us to explore during the remaining time or in a future evaluation. We will also clarify with DCF which issues we need to explore further to arrive at an accurate interpretation and explanation of the outcome data.

For the qualitative analysis we plan to proceed with implementation interviews using a scaled-down interview instrument. The interview will be refocused to further explore issues raised in the initial round of interviews, our initial analysis, and the stakeholder sessions. Each interview will be more closely tailored to the individual's specific role and expertise with respect to CBC. We plan to interview the following people: Assistant Director in Sarasota; Assistant Director at FCP; Manatee Provider; Pasco Provider; staff from DCF’s Office of Family Safety; DCF central office technical person; DCF central office contracting person; DCF central office QA person; DCF Regional QA person; DCF Regional technical person; PI person in Sarasota; PI person in Manatee; PI person in Pasco; PI person in Pinellas; legislative staff; and the Secretary.

We will conduct the pilot of the Quality Service Review (QSR) process in one CBC site in late February. This will serve as the field test for an intensive case study methodology that is aimed at addressing questions related to service quality and system performance. During this pilot we will train interviewers to conduct the QSR and to report on findings from twelve individual family cases. During this same week, the subcontractor from Human Systems and Outcomes (HSO) will conduct a series of focus groups and interviews to gain a greater understanding of community perception of and involvement with CBC. Themes will be generated across the individual family stories and community stakeholder interviews in a way that will provide immediate feedback to the CBC site. Findings from the field test will help guide future evaluation activities, will provide CBC-specific input on the Florida-based QSR protocol that is being developed in conjunction with other DCF initiatives, and will offer a glimpse of system performance in one CBC site.

Additional steps also will be taken in the analysis of administrative child protection data. We realize that the results of the quantitative analyses presented in this report generate new and more detailed questions regarding the effectiveness of Community-Based Care. As a first step in addressing these questions, we will explore the development of new indicators or improve upon current indicators from existing administrative data. Additionally, we will examine the State’s new child protection data system, HomeSafenet, as well as regional and CBC site data systems, to determine
future quantitative analyses. Second, the analyses presented in this report also can be extended by the addition of potential covariates. We will explore the role of child and family-level demographic variables (e.g., race, gender, age), as well as county-level ecological (e.g., population density, median income, crime level), and systemic (e.g., length of stay, proportion transferred from protective supervision to foster care) variables to develop a broader, more inclusive model by which CBC can be further evaluated.

We intend to explore two new issues in the cost analysis component of the June report. First, we will compare the changes in child protective services expenditures with the changes in outcomes (both included in this report) to develop measures of cost-effectiveness. These measures will be used to report the cost-effectiveness of CBC compared with non-CBC with regard to the delivery of direct child protective services. In the second new analysis, we will analyze the direct child protective services categories to determine for which services CBC is more (and less) cost-efficient.

**Recommendations for Mid-Course Corrections**

These recommendations are intended for the planned, more rapid expansion of CBC statewide. The process for the two study sites worked well but this larger effort will necessitate formalizing some of the processes handled informally during the demonstration phase.

- A series of training events should be developed using personnel involved in the existing successful CBC sites and national representatives from other lead agency programs who have developed different innovative models of care. The training should describe what worked and what didn’t in the implementation process and strategies for overcoming common problems. Descriptions of how the different CBC sites are organized and operate and similarities and differences could also be included. These could be supplemented by regional forums on an as needed basis for local CBCs to share issues and strategies.

- As CBC is implemented statewide, there will be a need for at least two types of formal written materials. First, there needs to be a brochure that educates the community and clients about changes resulting from the new program. Secondly, it would be useful to modify some of the existing CBC manuals developed by at least one of the existing sites to help new CBCs in their development.

- As more CBCs and regions are developed, it would be useful to develop a more formal policy/governance forum that would bring programs together on a regular basis to discuss emerging issues and policy decisions/changes that are needed.

- It is critical that the Legislature ensure the Department has sufficient resources to offer technical assistance regarding CBC implementation, particularly for counties that have fewer resources. It remains to be seen whether the current budget reductions will result in funding below the level needed to fully implement CBC effectively.
A stakeholder group should be developed to advise the CBC and help plan for the local service system and provider network, in addition to helping resolve coordination problems with other complementary systems. The relationship between this more narrowly focused group and the community alliances will need to be thought through, ideally with several alternative possibilities which could then be adopted to fit local needs and circumstances.

Greater efforts will need to be mounted in order to speed up the process of organizational culture change at the regional and district office levels. Perhaps DCF staff who have successfully made the transition into different roles, could be used to help their peers along.

The issues with the management information system need to be resolved quickly. The system should allow for a single entry of data with the electronic submission of agreed upon elements in the specified format to meet the requirements of state and federal agencies. The system should also have the capability of producing timely reports on outcomes and budgetary information at the county level. A minimum number of agreed upon reports that would regularly be generated from the data and published statewide is necessary for effective management. It would allow for comparisons between CBC sites to identify both best practices and areas of concern.

There must be a more realistic estimate of the time and resources necessary to implement Community-Based Care. While the CBC sites made steady progress, they all took more time than had originally been expected simply because of the complexity and magnitude of the changes involved. It was very clear that the level of start-up funding and the funding of a planning year were critical to the success of the CBC sites. Without resources, it would be very risky to expect similar successes.

As noted above, Competitive Government Strategies was conducting an independent evaluation of the prototype SunCoast Region. We coordinated efforts to avoid duplication. However, a number of issues surfaced in our evaluation independently as well. We concur with the majority of the recommendations of the CGS report based on our independent evaluation and urge that the issues identified in this report get resolved as soon as possible to enhance the likelihood of success of the new CBCs.

There are three recommendations of the CGS report however, where the results of our evaluation suggest that there are also some additional considerations, which also need to be evaluated in any policy discussions by DCF and/or the legislature.

While we strongly concur with the idea of crafting contracts with performance incentives, we would add the recommendation that the reimbursement process be shifted from a cost reimbursement mechanism to one of regular quarterly payments starting with the first payment on the first day of operation. There should be a
process of annual reconciliations with paybacks to DCF for under performance and the ability to keep savings based on exceeding performance for reinvestment in the system. This will not be an easy process because of the complexities of administering a system with multiple sources of funding, each with many regulations and restrictions attached to them. However, in the long run, it would be worth the effort to develop a mechanism to allow for this type of funding process.

The CGS report recommended that DCF consider opening up the bidding process to for-profit organizations. This requires a full debate in the context of human services to vulnerable populations. While this is not to say that this has never worked, there are also many instances where there have been serious problems. If the incentives are structured right, both quasi-public and not-for profit systems (e.g., the City of Philadelphia behavioral health program) have been able to produce considerable savings. However, in these cases, the savings do not go into the pockets of shareholders in some other location, but rather they are reinvested in the system to expand its capacity and to improve its services, particularly preventive services, thus saving even additional dollars over time. The savings are then also used for program development funds to test innovative services that were impossible to fund under the old system. Another technical problem with opening up the bidding to for-profit companies is that for- profits have more restrictions than not-for-profits in the use of federal funds and in helping the State maximize its use of Medicaid (e.g. meeting match requirements). For example, for-profit companies cannot by law draw down Title IV-E dollars, a substantial source of funding for CBC.

The CGS report also recommended using a competitive bidding process with sealed bids instead of providing bidders with a target dollar figure. The authors argued that competitive bidding would lead to cost savings. While competitive bidding may lead to a lower total contract amount, a “low-balled” contract amount may lead to several negative outcomes that would offset such a cost savings. Lead agencies may “cream-skim” the least costly children and families while trying to push difficult-to-serve clients towards other care systems. In addition, a lower total budget means lead agencies may need to cut corners on the quality and/or quantity of child welfare services provided. Another consequence of underbidding the true amount needed to provide services is fiscal distress, which may lead the agency to significantly raise their rates the following year or to stop providing services altogether. As privatization spreads statewide, the state may lose its capacity to deliver child welfare services, so a sudden change in contractors could lead to a temporary child welfare crisis. Competitive bidding for services that cannot be postponed until next year (like a new highway can be) might save money in the immediate future only to cost more in the long run. Finally, creating a sealed bid process is not very practical since the legislation requires that all dollars go to the lead agency and the budget is a public document so that the general amount available for the contract is public knowledge. While there may be room for negotiations around items such as overhead, this kind of negotiation already occurs under the current procurement process.

Finally, it was noted in the CGS report that some of the bidding requirements for the lead agency contract present a major burden for some not-for-profits and may preclude
some of them from responding to the ITN. Currently the applicant must have a 25% performance bond and 60 days of operating costs as cash in hand as protection against risk to the Department for failure of the lead agency to perform as specified in the lead agency’s contract. In addition, the applicant needs to have a fidelity insurance bond to protect against fraud commensurate with the amount of money handled by the agency. While these are major impediments for not-for profits applying there is another side to the story. One of the dilemmas facing government in a privatization effort is how to preserve the capacity to deliver essential services until such time as the transition has been completed and stabilized. In the past, for example, municipalities sold their garbage trucks to the private companies who had won the bid for services. When the company ran into problems or raised prices dramatically the city was stuck because it no longer had the capacity to deliver the services. With CBC, where children’s lives were at stake, this was a particularly critical concern. Requiring a bond, cash reserves, and obtaining legislation to allow the regional office to assume receivership in case of just such a failure was a way of preserving the capacity to resume service delivery in the case the lead agency experienced a failure. Once a stable provider network is in place, however, DCF should have the capacity to step in and manage the services without such restrictive bidding requirements being necessary.
References


References

services. Paper presented at the 8th Annual System of Care for Children’s Mental Health: Expanding the Research Base Conference, Tampa, FL.

Human Systems and Outcomes, Inc. (2001, June). Using the QSR to improve practices, services, and results. Training material used by the Florida Department of Children and Families, Office of Community-Based Care.


References


Appendix 1: CBC Conceptual Model

Conceptual Model of Community Based Care
Empowering local communities to ensure the safety and well-being of their children

Before
Desire to increase system effectiveness and efficiency while lowering overall cost
Need for local governance
Desire for increased communication between community partners and collaboration of resources
Need to improve adherence to ASFA guidelines and statutory requirements for child safety and stability

Community Based Care Implementation Strategies
System Relationships
- Coordinated and effective communication between DCF, lead agencies, and provider network
- Improved contracting and accountability mechanisms
- Prompt payment of subcontractors

Local Direction
- Engagement of Lead Agency in local planning
- Cooperation with child protection investigations
- Financial program and personnel resources flexibly managed at local level

Community Involvement
- Documentation of mix of number and types of providers
- Development and building of local community resources
- Role of the Community Alliances

Quality Performance
- Credentialing and professionalism of providers
- Skills based supervision and staff development
- Comprehensive assessment
- Matching of services to need
- Increased access to services
- Appropriate placement of children
- Continuity of care from entry to exit
- Sensitivity and respect for client diversity

After
Effective Child Protection System
Stability of Lead Agency and provider network
Cost effectiveness and cost efficiency
Enhanced professionalism of providers
Satisfaction with system
- Client
- Caregiver
- Community partners

Well-being of children
- Safety of children and their immediate environment
- Prevention of further maltreatment
- Stability of placement
- Rapid permanency resolution

Formative Evaluation of Quality Performance, Outcome Measure Attainment and Cost Efficiency
## Appendix 2: Programmatic Outcomes - Statistical Results

### Table 4. Length of Stay in Foster Care Results

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Site</th>
<th>Time</th>
<th>Site x Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State</td>
<td>1.25</td>
<td>102.97**</td>
<td>0.81</td>
</tr>
<tr>
<td>(n = 1,162 vs. n = 4,503)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>CBC Counties vs. CBC Matches</td>
<td>3.44</td>
<td>60.90**</td>
<td>0.14</td>
</tr>
<tr>
<td>(n = 1,162 vs. n = 2,933)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pinellas vs. Pinellas Matches</td>
<td>0.01</td>
<td>25.02**</td>
<td>1.78</td>
</tr>
<tr>
<td>(n = 496 vs. n = 1,686)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches</td>
<td>0.06</td>
<td>25.26**</td>
<td>8.32**</td>
</tr>
<tr>
<td>(n = 224 vs. n = 1,176)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manatee vs. Manatee Matches</td>
<td>2.45</td>
<td>16.27**</td>
<td>0.01</td>
</tr>
<tr>
<td>(n = 278 vs. n = 1,009)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches</td>
<td>3.84*</td>
<td>14.84**</td>
<td>0.14</td>
</tr>
<tr>
<td>(n = 164 vs. n = 1,686)</td>
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</table>

Note: *p < 0.05. ** p < 0.01.

### Table 5. Results of Cox Regression of Reentry into Foster Care

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Site</th>
<th>Time</th>
<th>Site x Time</th>
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</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State</td>
<td>1.64</td>
<td>4.48*</td>
<td>0.15</td>
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<tr>
<td>(n = 901 vs. n = 3,515)</td>
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</tr>
<tr>
<td>CBC Counties vs. CBC Matches</td>
<td>0.85</td>
<td>1.70</td>
<td>0.03</td>
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<tr>
<td>(n = 901 vs. n = 2,109)</td>
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</tr>
<tr>
<td>Pinellas vs. Pinellas Matches</td>
<td>4.73*</td>
<td>0.18</td>
<td>4.37*</td>
</tr>
<tr>
<td>(n = 376 vs. n = 1,192)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches</td>
<td>0.13</td>
<td>0.47</td>
<td>0.04</td>
</tr>
<tr>
<td>(n = 160 vs. n = 813)</td>
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</tr>
<tr>
<td>Manatee vs. Manatee Matches</td>
<td>0.36</td>
<td>3.16</td>
<td>0.30</td>
</tr>
<tr>
<td>(n = 236 vs. n = 1,192)</td>
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<td></td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches</td>
<td>0.57</td>
<td>3.11</td>
<td>0.05</td>
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<tr>
<td>(n = 129 vs. n = 394)</td>
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</table>

Note: *p < 0.05.

### Table 6. Results of Logistic Regression Analysis of Children Transferred from Protective Supervision to Foster Care

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Site</th>
<th>Time</th>
<th>Site x Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State</td>
<td>28.90**</td>
<td>71.46**</td>
<td>59.96**</td>
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<tr>
<td>(n = 3,500 vs. n = 19,358)</td>
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<td></td>
</tr>
<tr>
<td>CBC Counties vs. CBC Matches</td>
<td>12.82**</td>
<td>22.62**</td>
<td>45.51**</td>
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<tr>
<td>(n = 3,500 vs. n = 11,773)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pinellas vs. Pinellas Matches</td>
<td>5.07*</td>
<td>59.42**</td>
<td>23.03</td>
</tr>
<tr>
<td>(n = 1,669 vs. n = 7,710)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches</td>
<td>0.49</td>
<td>2.30</td>
<td>0.07</td>
</tr>
<tr>
<td>(n = 863 vs. n = 2,430)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manatee vs. Manatee Matches</td>
<td>14.69**</td>
<td>49.88**</td>
<td>20.23**</td>
</tr>
<tr>
<td>(n = 641 vs. n = 7,710)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches</td>
<td>4.47*</td>
<td>1.11</td>
<td>20.23**</td>
</tr>
<tr>
<td>(n = 327 vs. n = 2,511)</td>
<td></td>
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</tr>
</tbody>
</table>

Note: *p < 0.05. ** p < 0.01.
Appendix 2: Programmatic Outcomes - Statistical Results

Table 7. Results of Logistic Regression Analysis of Children Returned to Parent or Legal Guardian

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Wald Chi-Square</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State (n = 578 vs. n = 2,347)</td>
<td>6.45* 63.63** 0.66</td>
</tr>
<tr>
<td>CBC Counties vs. CBC Matches (n = 578 vs. n = 1,430)</td>
<td>11.50** 53.96** 1.94</td>
</tr>
<tr>
<td>Pinellas vs. Pinellas Matches (n = 224 vs. n = 739)</td>
<td>16.28** 27.01** 0.17</td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches (n = 75 vs. n = 586)</td>
<td>0.06 5.67* 2.18</td>
</tr>
<tr>
<td>Manatee vs. Manatee Matches (n = 200 vs. n = 739)</td>
<td>14.63** 14.91** 2.98</td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches (n = 79 vs. n = 272)</td>
<td>0.66 32.53** 0.31</td>
</tr>
</tbody>
</table>

Note: *p < 0.05. ** p < 0.01.

Table 8. Results of Logistic Regression Analysis of Children Returned to Relatives After Exiting Foster Care

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Wald Chi-Square</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC Counties vs. Rest of State (n = 578 vs. n = 2,347)</td>
<td>5.23* 44.27** 1.02</td>
</tr>
<tr>
<td>CBC Counties vs. CBC Matches (n = 578 vs. n = 1,430)</td>
<td>7.10* 37.59** 1.51</td>
</tr>
<tr>
<td>Pinellas vs. Pinellas Matches (n = 224 vs. n = 739)</td>
<td>13.04** 20.76** 0.01</td>
</tr>
<tr>
<td>Pasco vs. Pasco Matches (n = 75 vs. n = 586)</td>
<td>3.65 10.09** 9.97**</td>
</tr>
<tr>
<td>Manatee vs. Manatee Matches (n = 200 vs. n = 739)</td>
<td>12.63** 21.34** 2.28</td>
</tr>
<tr>
<td>Sarasota vs. Sarasota Matches (n = 79 vs. n = 272)</td>
<td>1.46 4.29* 7.74**</td>
</tr>
</tbody>
</table>

Note: *p < 0.005. ** p < 0.01.
# Appendix 3: Foster Care Exit Codes

## Foster Care

<table>
<thead>
<tr>
<th>Category</th>
<th>Code</th>
<th>Label</th>
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<tr>
<td>Return to Parent or Legal Guardian</td>
<td>46</td>
<td>Terminated, placed through Interstate Compact with parent or legal guardian (not a relative) as a result of a judicial review hearing</td>
</tr>
<tr>
<td></td>
<td>52</td>
<td>Terminated, placed through Interstate Compact with parent or legal guardian (not a relative) as a result of judicial review hearing</td>
</tr>
<tr>
<td></td>
<td>71</td>
<td>Terminated, placed in-state with parent or legal guardian (not a relative) as a result of a judicial review hearing</td>
</tr>
<tr>
<td></td>
<td>72</td>
<td>Terminated, placed in-state with parent or legal guardian (not a relative) not as a result of a judicial review hearing</td>
</tr>
<tr>
<td>Returned to Relatives</td>
<td>76</td>
<td>Terminated, placed with relative (not a parent)</td>
</tr>
<tr>
<td>Transferred to Adoptions</td>
<td>88</td>
<td>Terminated, transferred to adoptions</td>
</tr>
</tbody>
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