



State of Florida
Department of Children and Families

Ron DeSantis
Governor

Shevaun L. Harris
Secretary

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LONG RANGE PROGRAM PLAN

Department of Children and Families
Tallahassee, Florida

September 30, 2021

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Tallahassee, Florida 32399-1300

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201 Capitol
Tallahassee, FL 32399-1300

Dear Directors:

Pursuant to Chapter 216, *Florida Statutes*, our Long Range Program Plan (LRPP) for the Department of Children and Families is submitted in the format prescribed in the budget instructions. The information provided electronically and contained herein is a true and accurate presentation of our mission, goals, objectives and measures for the Fiscal Year 2022-23 through Fiscal Year 2026-2027. The internet website address that provides the link to the LRPP located on the Florida Fiscal Portal is <https://www.myflfamilies.com/general-information/publications-forms>. This submission has been approved by Shevaun L. Harris, Secretary.

Sincerely,

A handwritten signature in blue ink, appearing to read "Shevaun L. Harris".

Shevaun L. Harris

2415 North Monroe Street, Suite 400, Tallahassee, FL 32303

Department of Children and Families
Long Range Program Plan
Fiscal Years 2022-2023 through 2026-2027
September 30, 2021



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Message from Secretary Harris to Senate President and House Speaker

I am pleased to share the Long Range Program Plan (LRPP) for the Florida Department of Children and Families (DCF) for fiscal years 2022-2023 through 2026-2027. Many of the elements contained within the LRPP are also directly reflected in the Department's strategic plan.

The plan will reflect the tangible steps the team will take to ensure we deepen our visionary focus towards prevention and integration by focusing on workforce development (i.e., recruitment and retention), program effectiveness, and commitment to transparency, accountability and alignment..

The LRPP outlines the direction the department plans to take in coming years to best support Florida's children and families. When we invest in our team, ensure the most efficient and effective use of resources, and work in alignment with our partners, outcomes for those we serve will continue to improve.

Sincerely,

Shevaun L Harris
Secretary

Department Mission:

The mission of the Department of Children and Families is to work in partnership with local communities to protect the vulnerable, promote strong and economically self-sufficient families, and advance personal and family recovery and resiliency.

Department Vision:

To empower Floridians with opportunities that support and strengthen resiliency and wellbeing.

Department Goals

- 1. Enhance Program Effectiveness to Improve the Customers' Experience**
- 2. Build a System of Accountability, Transparency, and Alignment**
- 3. Enhance Workforce Development Efforts to Improve Stability, Culture, and Continuous Learning**

Department Service Outcomes and Performance Projection Tables

Enhance Program Effectiveness to Improve the Customers' Experience

Outcome	Baseline	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27
Percent of children experiencing repeat maltreatment within 6 months of case closure	June 2020 3.5%	3.2%	3.1%	3.0%	2.9%	2.8%
Percent of children experiencing repeat maltreatment by within 12 months of case closure	June 2020 7.2%	7.1%	7.0%	6.9%	6.8%	6.7%
Percent of adults not re-abused after verified findings within 6 months	August 2021 99%	99%	99%	99%	99%	99%
Percent of adults not re-abused during or within 6 months of protective supervision cases	August 2021 99.6%	99%	99%	99%	99%	99%
Children and adults in CSU, Inpatient, Detox, or Mental Health Treatment Hospitals	June 2020 7,262	6,877	6,800	6,700	6,600	6,500
Average years child protection investigators have within position	September 2021 2.07	2.11	2.15	2.19	2.23	2.28

Build a System of Accountability, Transparency and Alignment

Outcome	Baseline	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27
Decrease turnover in critical classes	FY 20-21 53.58%	51.58%	49.58%	47.58%	45.58%	43.58%
% CBCs requiring risk pool and/or back of bill funding to maintain operations	FY 19-20 8/19 (42.1%)	2/19 (10.5%)	1/19 (5.2%)	0/19 (0%)	0/19 (0%)	0/19 (0%)
% CBCs expending 10% or more of budget on prevention	FY 19-20 6/19 (31.6%)	12/19 (63.2%)	14/19 (73.3%)	16/19 (84.2%)	18/19 (94.7%)	19/19 (100%)
% open DCF investigations, case management cases, behavioral health treatment plans reviewed by Quality Office	June 2020 0%	5%	5.1%	5.2%	5.3%	5.4%

Governor's Priorities

1) Restore and Protect Florida's Environment

- a) Secure \$2.5 billion over 4 years to improve water quality, quantity, and supply.
- b) Prioritize Everglades' restoration, and the completion of critical Everglades' restoration projects.
- c) Prevent fracking and offshore oil drilling to protect Florida's environment.

2) Improve Florida's Education System

- a) Increase access to and expand options for quality educational choices for Florida families.
- b) Revamp Florida's curriculum to lead the nation and expand civics and computer education.
- c) Maintain the Florida higher education system's status as number one in the nation while still making necessary adjustments to improve it.
- d) Provide quality career and technical education options for Florida's students and workforce.

3) Economic Development and Job Creation

- a) Focus on diversifying Florida's job market, including a focus on an expansion of the financial services and technology sectors.
- b) Maintain Florida's status as a low-tax state and continue to find opportunities to reduce taxes and fees.
- c) Reduce existing regulations and stop any new regulations that do not serve the public health, safety, and welfare.

The Department is reviewing all legislative mandated reports to determine ongoing relevance. As administrative rules are revised, steps are taken to repeal unnecessary, obsolete or duplicative rules.

- d) Prioritize infrastructure development to meaningful projects that provide regional and statewide impact, especially focused on safety and improved mobility.

5) Health Care

- a) Focus resources on continuing to combat the opioid crisis and substance abuse in general, and addressing mental health.

The Department initiated the Overdose Prevention Program to help reduce opioid overdose deaths and increase access to naloxone, the medication that reverses opioid overdose, throughout the state.

- b) Promote innovation in healthcare that reduces the cost of medical procedures and services and increases access to care for Floridians.

The Department has established a goal to “Build a System of Accountability, Transparency, and Alignment” and is working with substance abuse and mental health managing entities to improve accountability and increase access to needed care.

- c) Reduce the cost of prescription drugs through state and federal reform.

6) Public Safety

- a) Continue to uphold immigration law to protect our borders and communities.

The Department conducts background checks and assures employees are citizens or have the proper work documents. The Department verifies immigration status in determining eligibility for public benefits.

- b) Support local and state law enforcement’s ability to investigate and prevent criminal activity.
- c) Develop and implement comprehensive threat assessment strategies to identify and prevent threats to the public.
- d) Continue efforts to enhance safety in our schools.

7) Public Integrity

- a) Protect taxpayer resources by ensuring the faithful expenditure of public funds.
- b) Promote greater transparency at all levels of government.
- c) Hold public officials and government employees accountable for failure to serve the public interest at all times.

Trends and Conditions

Adult Protective Services

A. Primary Responsibilities

The Adult Protective Services Program serves two primary target groups per Chapter 415, F.S.:

1. Vulnerable adults who are victims of abuse, neglect, exploitation, or in need of service due to neglect by the vulnerable adult themselves; and,
2. Adults with permanent disabilities who need assistance to remain in their homes in the community.

The statutory charge of the Adult Protective Services Program is to investigate allegations of abuse, neglect, or exploitation of vulnerable or disabled adults. In addition to conducting protective investigations for allegations made to the Hotline, the program also supports adults (ages 18 to 59) with disabilities who need assistance to remain in their homes or in other living arrangements other than costlier residential or nursing home settings. The following four programs operate in support of adult protective services:

The Protective Supervision program provides intensive services to protect vulnerable adults from being harmed from further abuse, neglect, exploitation, or self-neglect. These services may include in-home services such as home health care, Meals on Wheels, and personal care. Other services may include placement into a facility which provides the least restrictive environment to maintain the vulnerable adult's safety and care.

Protective Intervention services provide information, referrals, and supportive in-home services and/or placement, on a voluntary basis to vulnerable adults in order to prevent abuse, neglect, or exploitation from initially occurring or prevent the recurrence through the provision of these services.

The Community Care for Disabled Adults program assists adults who have a permanent physical or mental disability that restricts their ability to perform one or more activities of daily living and impedes their capacity to live independently. Services include, but are not limited to: adult day care, case management, transportation services, homemaker service, and personal care.

The Home Care for Disabled Adults program provides case management services and a small subsidy to approved caregivers providing in-home care to adult persons aged 18 through 59 with disabilities who would otherwise be placed in nursing homes or institutions. Subsidy payments, though limited in amount, are intended to help offset the cost of housing, food, clothing, and incidentals, as well as those expenses related to medical, pharmaceutical, and dental services not covered by Medicare, Medicaid, or other insurance. It is estimated that approximately 1,184,412 adults with disabilities (18 – 59 years of age) living in Florida have two or more permanent physical or mental limitations. Despite some progress in preventing disabilities, the number of people with disabilities is expected to continue to increase. Many of these individuals may receive services from other programs of DCF and agencies of the state of Florida. However, in FY 2020-2021, there were 1,443 nursing-home eligible adults with disabilities who received services through the Home Care for Disabled Adults or Community Care for Disabled Adults programs.

B. Selection of Priorities

The priorities for Adult Protective Services are consistent with the Department's primary goals of:

1. Enhancing Program Effectiveness to Improve the Customers' Experience
2. Building a System of Accountability, Transparency, and Alignment
3. Enhancing Workforce Development Efforts to Improve Stability, Culture, and Continuous Learning

C. Addressing Our Priorities over the Next Five Years

Florida is predicted to undergo a population growth of 30% between the years 2000-2030 (United States Census Bureau). By 2030, the population of Floridians age 65 or older is expected to increase from its present level of 17.7% to 27.1%. This increase will significantly increase the workload on Adult Protective Investigations and, subsequently, Adult Protective Services.

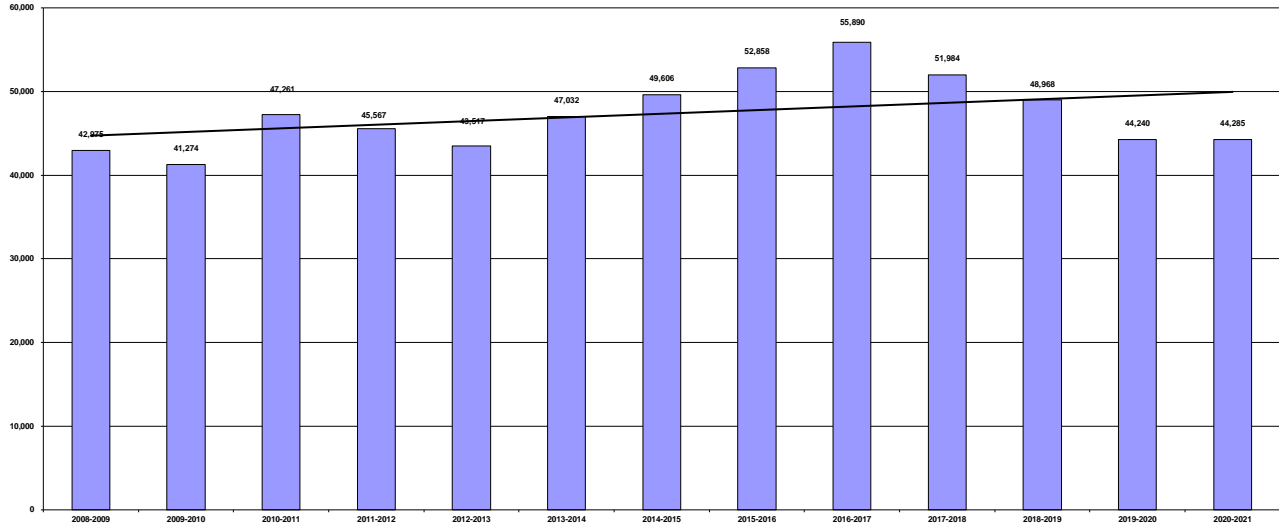
In light of this projection, the program priority is to continuously look for opportunities to enhance program effectiveness and enhance workforce development efforts which will result in improved staff retention and consequently ensure we have the manpower to manage the increased workload.

Strategy: Increase the use of techniques that improve the quality, consistency, efficiency, and effectiveness of adult protective service systems.

Action Steps:

1. Reduce the number of families in crisis by increasing pre-crisis referrals to community services and by exploring strategies by which to decrease the number of adult victims who are re-abused with twelve months of initial abuse, neglect, or exploitation.
2. DCF is taking proactive steps to prepare Adult Protective Investigators and other Adult Protective Service workers for the anticipated continued increase in caseloads. The Adult Protective Services Program received 44,285 reports of abuse, neglect, and/or exploitation of vulnerable adults during Fiscal Year (FY) 2020-2021 (see following chart). This represents only a .01% decrease in reports from the previous fiscal year but maintains an upward trend during recent years. The overall trend indicates a continuing increase in reports that aligns with current state and national projections. The COVID-19 pandemic has had a major downward effect on adult investigations. The last year and half have presented with historical low levels of reports received.

Statewide Totals - Adult Investigations Reports Received, 2008 - 2021



3. In reviewing these reports, DCF is mandated by policy to complete an initial face-to-face visit with the victim within 24 hours. This allows the Protective Investigator to evaluate the victim’s situation and safety, and begin the process of removing the individual from harm’s way, and/or providing needed services immediately.
4. DCF’s statewide case management mobile information system enables Adult Protective Services management to have accessible information for better decision-making and serves to improve programmatic reporting capability and accountability to the victims, their families, and the general public. The Department is looking to expand this system. During FY 2020-2021, the percentage of victims seen within the first 24 hours was 97.99%.
5. DCF, pursuant to statutory mandate, strives to close investigations within 60 days, though not all investigations can be closed within 60 days. Closure timeliness can depend on factors such as: seriousness of the allegation, number of alleged victims and possible responsible persons, medical complexity, and involvement of medical examiners and law enforcement. Edits in the statewide case management system require unit supervisors to review and evaluate each investigation after significant steps are completed by Protective Investigators. This provides for quality investigations, effective intervention strategies which promote the safety of victims of abuse, neglect, and exploitation, and the promptness of subsequent follow-up actions and services to victims. During FY 2020-2021, Adult Protective Services averaged closing investigations within 60 days in 99.81% of the cases statewide.

Strategy: Support sustainable, strong families.

Action Steps:

1. Because of the nature of the types of disabilities from which individuals in the in-home services programs suffer and the rising costs of health care and other services, as these individuals age, their health-related needs and costs of care increase. For Fiscal Year 2020-2021, the average care plan cost of an individual in the Home Care for Disabled Adults (HCDA) program was \$1,920. In Fiscal Year 2020-2021, the average care plan cost for an individual in the Community Care for Disabled Adults program was approximately \$8,600.

2. There is a growing need to provide services to the disabled adult population. The in-home service programs have statewide waiting lists of 1,414 adults with disabilities who are seeking services. The statewide waiting lists ensure more equity of service provision to individuals requesting services and better fiscal management.
3. Individuals in need of services are screened with a uniform instrument by Adult Protective Services counselors and added to the statewide waiting list(s) based on screening scores and the dates on which services are requested. Once dollars are freed because of attrition of individuals from an in-home services program, the highest-scoring individual is pulled from the statewide programmatic waiting list for a face-to-face assessment and, if programmatically eligible, is moved into the program. The attrition rates for these programs are not large, therefore adding new individuals for services occurs minimally.

Strategy: Reduce the number of families in crisis

Action Steps:

1. The program is committed to reduce the number of vulnerable adults suffering from re-abuse within a year after verified findings. In alignment with the department’s goal of reducing the numbers of families in crisis, Adult Protective Services is intensively examining re-abuse on a monthly basis with the goal of increasing intervention and reducing the rate of re-abuse among vulnerable adults by 10% in the coming year (rate at outset was 11.2%). Regions are performing case studies on repeat abuse scenarios and tailoring approaches accordingly. This undertaking was sunset on June 30, 2021 with the program holding re-abuse at a sustained level of 7.6% over time.

D. Justification of Revised or New Programs and/or Services

No new programs and/or services

E. Justification of Final Projection for each Outcome

Outcome: The percent of victims seen within the first 24 hours

The statewide target is currently 93%. Trend data indicate that performance significantly exceeds this target.

Outcome: The percent of investigations closed within 60 days

The statewide target is currently 99%. Trend data indicate that performance exceeds this metric.

F. Potential Policy Changes Affecting the Agency Budget Request

None

G. Changes Which Would Require Legislative Action

None

H. Task Forces and Studies in Progress

None

Office of Child Welfare

A. Primary Responsibilities

Florida Abuse Hotline

The Florida Abuse Hotline (Hotline) is the state’s centralized 24/7 operation responsible for receiving, analyzing, and making screening determinations regarding concerns of alleged abuse, neglect, exploitation and special conditions of children and vulnerable adults as defined in Chapters 39 and 415, F.S. The Hotline also conducts criminal background checks on participants of reports, potential caregivers for children in out-of-home care due to planned or emergency placements, and for reunification purposes. For FY 2020-21:

Hotline Contact Type	Number
Calls	391,652
On-Line	91,163
Total Contacts	545,818

Alleged Victim Type	Number
Child	326,047
Adult	118,894
Total Assessments	444,941

The Hotline also received 35,090 requests for referral information on services from the public and completed 555,422 criminal background checks on individuals who were subjects of reports and/or relative/non-relative placements.

Child Welfare

The vision of the Department is that every child in Florida thrives in a safe, stable, and permanent home sustained by nurturing relationships and strong community connections. The primary responsibility of the Office of Child Welfare is to work in collaboration with local partners and communities to ensure safety, well-being, and timely permanency (a permanent home) for children (Chapters 39 and 409, Florida Statutes). As in all aspects of social services, particularly child welfare, an integrated and collaborative approach with multiple partners and stakeholders is essential.

Section 39.001(1), Florida Statutes (F.S.), provides a fundamental statement of purpose for the child welfare system that is embedded throughout the delivery of services in the state:

- (a) To provide for the care, safety, and protection of children in an environment that fosters healthy social, emotional, intellectual, and physical development; to ensure secure and safe custody; to promote the health and well-being of all children under the state’s care; and to prevent the occurrence of child abuse, neglect, and abandonment.
- (b) To recognize that most families desire to be competent caregivers and providers for their children and that children achieve their greatest potential when families can support and nurture the growth and development of their children.

The Office of Child Welfare works in partnership with six regions, 17 community-based care lead agencies (CBCs), and seven sheriffs’ offices to develop and oversee policy and practice requirements for child protective investigations, prevention, and case management services. The office is responsible for complying with state and federal reporting requirements linked to financial awards and performance expectations. As of June 30, 2021, there were 22,242 children the Department served who were placed in out-of-home care and 10,131 who remained in their homes with their parents.

Child Protective Investigations (CPI) – In Florida, the Department conducts child protective investigations in 60 of the 67 counties. In the remaining seven counties (Broward, Hillsborough, Manatee, Pasco, Pinellas Seminole, and Walton Counties), each respective sheriff’s office receives funding to perform child protective investigations via a grant channeled through the Department. During an investigation, the CPI has multiple responsibilities. Ultimately, investigators are to determine whether there is any indication that any child in the family or household has been abused, abandoned, or neglected and, if so, to identify the individual responsible for the maltreatment. When a child is determined to be unsafe, a child protective investigator must implement a safety plan and ongoing services to protect the child and stabilize the family or remove the child for temporary placement in substitute care until permanency can safely be achieved. These actions shall ensure the child is safe while the parent or caregiver enhances his or her deficient protective capacities as they complete individualized treatment/intervention services.

From July 2020 through June 2021, CPI staff initiated 186,440 protective investigations (abuse, neglect, or abandonment) and Special Conditions referrals (caregiver unavailable, child-on-child sexual abuse, foster care referral, or parent needs assistance).

Federal and state law require CPIs to use the least intrusive means to achieve safety, permanency, and well-being for the child. For children who have been determined to be safe but at high risk of future maltreatment, CPIs are required to refer parents to family support services to increase both the caregiver’s intrapersonal development of protective factors and access to community supports. For children determined to be unsafe, the continuum of interventions, from least to most restrictive, would be:

- Non-judicial case management of an in-home safety plan.
- Case management with judicial oversight of an in-home safety plan; and
- Case management with judicial oversight of an out-of-home plan in which the child has temporarily been placed with another parent, relative, fictive kin, or in a licensed (foster care) setting.

Case Management Services through CBC – Florida’s service delivery system is unique in that it contracts for the delivery of foster care and other related child welfare services as defined in Florida Statutes through CBCs. Service delivery is coordinated through an administrative structure of six geographic regions, aligned with Florida’s 20 judicial circuits, serving all 67 counties. All contracts with CBCs are developed and monitored by both regional and headquarters staff. The Child Welfare Practice Model is utilized by CBCs or their subcontracted Case Management Organizations to determine if children are safe or unsafe. Florida’s practice model includes the expectation that when children are safe but at high or very high risk for future maltreatment, affirmative outreach and efforts will be provided to engage families in family support services designed to prevent future maltreatment. When children are determined to be unsafe, safety management and case planning are implemented.

Most CBCs contract with subcontractors for case management and direct care services to children and their families. This innovative system allows local agencies to engage community partners in designing a local system of care that maximizes resources to meet local needs.

Interstate Compact on the Placement of Children (ICPC) is law in all 50 states, the District of Columbia, and the U.S. Virgin Islands. ICPC is codified in section 409.401, F.S. The ICPC operates via a binding contract between 52-member jurisdictions and establishes uniform legal and administrative procedures governing the safe and timely interstate placement of children. In FY 2020-21, Florida received 5,218 ICPC requests resulting in the placement of 1,165 Florida children with families in other jurisdictions and 668 children from other jurisdictions with families in Florida.

ICPC modernization in Florida began in 2008 with conversion of the existing tracking system to a paperless file

system, the Interstate Compact System (ICS). The ICS database can be accessed by the courts, CBCs, guardians ad litem, and Department attorneys. These stakeholders can view the master ICPC file and determine case status. This transparency was implemented in an effort to increase accountability, build rapport, and further improve the quality of ICPC work.

Florida participated as a pilot state in the development and testing of the National Electronic Interstate Compact Enterprise (NEICE) based on Florida's ICS. Nationwide implementation of NEICE began in June 2015 and, as of June 2021, 38 states have implemented the NEICE system to process and transmit ICPC requests. On February 9, 2018, the Family First Prevention Services Act was signed into law. This will require all states to use an electronic interstate case processing system by October 2027. National electronic transmission and an electronic tracking system along with transparency in the ICPC process will provide uniform consideration of ICPC requests, more accountability, and quicker permanency for children across the nation.

Background Screening

The Background Screening Program performs a Level II fingerprint-based background screening and makes employment eligibility determinations on individuals employed with, volunteering with, or seeking employment with facilities or entities licensed, regulated, or required to comply with the Department's background screening and those employed with, seeking employment, or contracting directly with the Department or APD. In addition to a review of an individual's criminal history, additional components of background screening which require review for this group of screenings are: drug test results, clerk of court records, child abuse and neglect history (for designated roles within the agency), and driver's license record (for designated roles within the agency). The following Florida Statutes identify individuals required to submit background screenings through the Department: Chapters 39; 110; 393; 394; 397; 402; 409; and 435; and section 408.809, F.S.

In addition to primary background screenings, individuals disqualified from employment who meet statutory eligibility criteria and request an exemption from disqualification may initiate an exemption request through the Background Screening Program.

A total of 240,165 background screenings were initiated for review by the Department during FY 2020-21.

- The Department and APD providers-initiated 226,801 employment screenings for review.
- 13,364 screenings were processed for individuals employed, seeking employment, or direct contractors for the Department and APD.

Child Care

Pursuant to Chapter 402, F.S., the Office of Child Care Regulation is responsible for the health, safety, and well-being of children in the care of licensed facilities, family day care homes, and exempt childcare arrangements in 62 of the 67 counties; Broward, Hillsborough, Palm Beach, Pinellas, and Sarasota Counties have elected to regulate licensing of childcare facilities and homes as provided in s. 402.306, F.S.. There are more than 9,450 childcare settings statewide operating in childcare facilities, homes, afterschool programs, and public and nonpublic schools that can serve more than 787,270 children.

Domestic Violence

Pursuant to the passage of Chapter 2020-6, Laws of Florida, the Department's Domestic Violence Program assumed responsibility for oversight and contract management of 82 service providers, including the state's 41 certified domestic violence shelters/centers, quality assurance, legal services, programs and planning, funding allocation, and Florida's Domestic Violence Hotline. As the Department works to establish a new vendor to provide training and technical assistance, legal services, and hotline operations, the Domestic Violence Program will continue to engage and support stakeholders to ensure all services are sustained.

B. Selection of Priorities

The priorities for the Office of Child Welfare are consistent with the Department's primary goals of:

1. Enhancing Program Effectiveness to Improve the Customers' Experience
2. Building a System of Accountability, Transparency, and Alignment
3. Enhancing Workforce Development Efforts to Improve Stability, Culture, and Continuous Learning

C. Addressing Priorities over the Next Five Years

The following provides more descriptive information about priorities, activities, and initiatives that will be the focus over the next five years. Most of the priorities reflect a revision of program area practice, as well as a continuation of select initiatives where progress has been achieved.

Child Welfare

Quality Improvement

The Office of Child Welfare has partnered with the Quality Office to focus on improvement on the following nine performance metrics, which are aligned with the Department's goals of enhancing program effectiveness and building a system of accountability that fosters trust and transparency:

- Children Achieving Permanency within 12 Months of Entering Care (target: 41%)
- Children Initially Placed with Relatives/Non-Relatives (target: 65%)
- Placement Moves per 1,000 Bed Days (target: <4)
- Children with No Recurrence of Verified Maltreatment within 12 Months of a Prior Verified Maltreatment (target: 90.9%)
- Present Danger Plans Sufficient to Control Identified Threats (target: 95%)
- Cases with Concerted Efforts to Place Sibling Groups Together at Initial Placement (target: 95%)
- Cases with Concerted Efforts to Provide Services to Prevent Entry/Re-Entry into Out-of-Home Care (target: 95%)
- Cases for which Concerted Efforts were Made to Assess and Provide Services to Meet the Needs of Children, Parents, and Foster Parents (target: 95%)
- Cases with Concerted Efforts to Meet the Mental/Behavioral Health Needs of the Child (target: 95%)

Prevention

Further, the Office of Child Welfare will continue to work with our partners to enhance our prevention efforts and integration efforts as follows:

- Prevention efforts to divert children and families from entering the system of care by redesigning our front door to proactively equip parents and families with resources and support networks to address well-being needs, challenges, or barriers.
- Integration of services offered by all the programs within the Department to better serve the children and families of the state of Florida.
- Comprehensive wrap around services to reduce the number of children who enter out of home care; and therapeutic and clinical services to increase reunifications, adoptions, and permanency.
- Increase the quality of pre-crisis referrals being provided to reporters by incorporating the MyFloridaMyFamily website as a primary local referral resource to provide Hotline reporters.
- Partner with Economic Self-Sufficiency (ESS) to increase pre-crisis contacts with individuals or families before they reach a crisis state.
- Service integration partnerships within certified domestic violence centers including law enforcement, Child Welfare, Substance Abuse and Mental Health, and community-based providers.

- Examine current technology systems and develop an approach to integrate these systems to yield a high-quality, professional system that will meet the needs of Florida’s childcare system, including online exam capabilities.

Florida Child Welfare Practice Model

The Department continues a multi-year project to improve performance and decision-making in child protection across the continuum of care from the Hotline to the CBCs. Significant progress has been made transitioning beyond the implementation phase of the practice model with a focus on increasing the proficiency of child welfare professionals and the quality of information gathered to support decisions. One hundred percent of child protective investigation units have fully implemented the Safety Methodology into practice, and over 83% of the total cases currently being supervised by case managers have an approved, ongoing Family Functioning Assessment directing their intervention efforts; this percentage will continue to grow as cases that pre-date implementation of the practice model continue to work on their court-approved case plans toward the permanency goal.

Service Array and Quality Placements

The Office of Child Welfare continues to lead a statewide effort in partnership with the regions, CBCs, foster parents, and other stakeholders to assess best practices around recruitment and retention of quality foster homes and to ensure an adequate service array across Florida’s systems of care. This begins with an understanding of the array needed by conducting a gap analysis.

The Child Service Array workgroup, which concluded in October 2018, identified evidence-based services across the state. The University of South Florida completed a gap analysis report that outlined a comprehensive list of the best interventions to enhance services for children in Florida’s child welfare system.

The Office of Child Welfare led the 2018 placement array workgroup to cultivate an appropriate number of quality placements in the state that provide appropriate services for children in their placement. In addition, the goal was to create a system of care where foster parents are supported through appropriate services that result in improved partnerships and the greatest change of success in caring for the children in their homes.

To achieve these goals, the Department identified three objectives: retain an adequate number of quality placement options to meet the needs of children, increase the stability and well-being of children in care, and improve caregiver support and advocacy. The final report was distributed February 29, 2020, with 11 recommendations to facilitate meeting those three objectives:

	Recommendation
1	Support Birth Families to Keep Children Safely at Home
2	Increase Kin Placements
3	Utilize Foster Home Estimator Tool Across Community Based Care (CBC) Agencies
4	Utilize Market Segmentation
5	Utilize an Electronic Placement Matching System
6	Standardize Foster Home Closure Reasons
7	Create Repository of Evidence-Based Programs
8	Utilize Mobile Response Teams
9	Formalize Caregiver Peer and Mentor Supports to Increase Quality Retention
10	Create a Statewide Foster, Kin, and Birth Parent Advisory Board to Advocate for Caregivers

The Department embedded the recommendations into the Family First Prevention Services Act (FFPSA) implementation phase. The Department continues to partner with the Florida Institute for Children Welfare to enhance the kinship program through Kids Central Inc. and Children's Home Network to prepare them for a rating in the Title IV-E Prevention Clearinghouse as an approved Kinship Navigator Program. The Department has deployed the foster home estimator tool for all CBC to utilize in the recruitment of foster homes, the foster home closure reasons have been amended in FSFN as recommended, Substance Abuse and Mental Health (SAMH) and the CBC partnered with the Department to obtain a listing of all evidence-based programs that is currently housed manually, and SAMH conducted a training with the CBC and Department licensing teams to educate them on the mobile response teams and availability throughout the state.

Integration of SAMH Services and ESS supports for Child Welfare Families

The State Opioid Response grant expanded access to Behavioral Health Consultants (BHCs) to provide CPIs a resource for upfront screening of substance use issues, particularly opioid and stimulant use, and their impact on safety in the household. Work continues to increase the number of positions to offer consultation to CPIs regarding presence of substance use or mental health concerns. These subject matter experts provide additional information and clinical perspective to assist in safety decision-making. The Department is working to sustain and continue expansion for these grant-funded positions and increase facilitation of multidisciplinary team staffing by increasing BHCs upon approval of the Family First Transition Service Act Funds.

Engaging treatment services for those served by child welfare continues to be a priority. The Department is working with the behavioral health managing entities and provider network to enhance linkage to treatment and improve the quality of services provided to the population. Managing entities are establishing Working Agreements with their local CBCs to provide streamlined referral processes for individuals served by child welfare and create communication protocols to address barriers to information sharing. These Working Agreements will allow for more effective communication between child welfare professionals and treatment providers.

In September 2019, a policy change by the Agency for Health Care Administration took effect to allow parents whose children had been removed to maintain their Medicaid coverage under a temporary absence while working toward reunification. The Office of Child Welfare worked with ESS to implement this change. This was an important change as it removed a barrier to parents receiving the necessary treatment to regain custody of their children.

Analysis of Child Fatalities

The agency has made analysis of child fatalities a priority. In addition to publishing over ten years of historical data to inform local communities of trends and historical data. In 2015, the Department invested in a software program (Qualtrics) to analyze the data from a quantitative perspective.

Data analysis is completed on a quarterly basis to determine whether there are shifts in any identified patterns/trends. This is inclusive of all years beginning in 2009 and is updated with real time information. Along with the quarterly analysis, there is a monthly comparison spreadsheet that captures the number of fatalities in a given month for each listed year. Lastly, an annual analysis of all verified child fatalities is conducted to compare abuse-related fatalities to neglect-related fatalities and further stratifies the neglect-related causal factors given that those cases make up most child fatalities reported to the Hotline.

Issues and opportunities that have been identified in the casework process are addressed immediately. Follow-

up is conducted with the respective region regarding how issues and opportunities have been addressed on a region-wide basis and findings are provided to all regions to improve and incorporate lessons learned. Training opportunities are being identified for incorporation into pre-service and in-service training. In 2019, the Critical Incident Rapid Response Team (CIRRT) began using “talkbooks” that highlight practice trends that are identified during analysis of the reviews conducted. Information from the analysis is used to recommend changes to statutes and rules as needed.

The 2021 legislative session expanded the use of CIRRTs to include reports of sexual abuse of children in out-of-home care.

Results-Oriented Accountability Program



The Results-Oriented Accountability Program provides the resources and tools Florida needs to improve the lives of the children and families it serves. The program, which requires quantitative and qualitative data to measure desired outcomes, enables the Child Welfare system to build a stronger and more evidence-informed operating model. To hold stakeholders accountable, they must be measured against the outcomes they are charged with achieving. By measuring and monitoring outcomes over time, the state will have insight into whether its child welfare programs and services are having a positive impact on the safety, permanency, and well-being of children. Furthermore, using data reported at the system and stakeholder levels, both the

child welfare system and the individual participants can make better decisions about the interventions most effective in driving outcomes. Prior to the initiation of the program’s Cycle of Accountability, the desired results, or outcomes, must be defined and a set of measures developed to evaluate the performance of the child welfare system in collaboration with the Quality Office.

The five-year implementation plan began in FY 2015-16. Significant program impacts are expected in areas beyond the assessment of outcomes beginning in FY 2021-22:

- **Policy** – The organizational structure created by the program will use results to shape policy in the child welfare community.
- **Practice** – Evidence created by the program and corroborated by the Department and the Florida Institute for Child Welfare will identify effective interventions currently utilized and create opportunities to validate promising interventions, ultimately leading to practice changes.
- **People** – A fundamental culture shift will occur as the system becomes a learning reflexive entity and encourages the use of evidence and data for decision-making.
- **Organization** – The organizational borders will expand to include new partners in accomplishing meaningful, evidence-informed outcomes for children. Contracts between the Department and its existing partners could also require modification to support the key activities of the program.
- **Technology** – Innovation resulting from the program will lead to new solutions to support child welfare in new ways – for example, the use of explanatory, predictive, and preventive analytics will lead to enhancements in practice and policy.
- **Shared Accountability** – Assigning accountability to those organizations and entities having a role in achieving outcomes for children extends the vision of child welfare accountability to all stakeholders.

Workforce Stability

The Department focuses on developing qualified and talented staff who possess the requisite skills to advance the mission of the Department and better serve and protect the children of this state. The recruitment and retention of a highly functioning workforce is critical to this effort. Recognizing the CPI position as an entry-level role, despite its complexities, the Department elected to focus efforts on incentivizing competency-based development to increase retention. In March 2017, the Department implemented a Child Protection Glide Path incentive program to improve recruitment and retention of critical staff positions. In June 2019, the Department discontinued the Child Protection Glide Path for a new Career Ladder initiative. A project implementation team has been established in order to develop and inform the Career Ladder, which is being weaved into other retention and recruitment efforts statewide. The implementation team includes Human Resources, Office of Child Welfare policy team, Office of Child Welfare training team, regional champions, Quality Office, and the Office of Innovation. The ultimate goal of the Career Ladder is to increase employee satisfaction and retention with the expectation of improving employee motivation, responsiveness, and productivity with a projected launch in FY 2021-22 and evaluation period towards the end of FY 2022-23.

CPIs undergo pre-service training consisting of eight weeks of curriculum plus any field days and any regional training; this results in nine to ten weeks of pre-service training. The structure of pre-service is currently being re-evaluated, with considerations for advances in training utilizing virtual reality and simulation in order to ensure our front-line staff are fully prepared for the job when entering the field. After certification, 20 hours of in-service training is required annually in order to retain certification; and certification must be renewed every two years. A strong pre-service and in-service training program is an important component of workforce stability. The new pre-service training will start to be piloted in October in the Northwest Region. The goal is to implement the new pre-service training statewide in March 2022 with the new components.

Family First Prevention Services Act

The Family First Prevention Services Act (FFPSA) was signed into law February 9, 2018. The Act included several provisions to help prevent children from entering foster care by allowing federal reimbursements for evidence-based mental health services, substance use treatment, and in-home parenting skills training. Additionally, the Act limits the use of residential group care for children and youth served by the child welfare system. Since the passage of the Act, the Department has conducted a series of statewide engagement activities including participation in federal meetings and webinars to learn more about the intent and implications of FFPSA; hosted virtual meetings with Department regional and community-based care staff, and other community partners to increase awareness of FFPSA provisions, share Florida's prevention logic model and vision to move the state from a crisis agency to prevention agency to increase prevention services delivery and quality placements.

In collaboration with Florida's child welfare stakeholders, the Department established a statewide Steering Committee and multiple sub-committees to conduct a comprehensive analysis of the FFPSA requirements, provide input in the development of policies, and draft the Title IV-E prevention plan. Key planning and implementation activities in progress include finalizing policies to support the Title IV-E prevention programming and licensing of child-caring agencies as specified FFPSA setting types. The Office of Child Welfare is working to finalize operating procedures and administrative rules to better align with the new FFPSA requirements, specifically Title IV-E prevention services and specialized settings for residential care. Statewide training has been conducted with frontline staff, residential group care providers, judges, and other stakeholders.

Residential Group Care

Group care is an available service within the continuum of care with a primary purpose of addressing the distinct needs of children who require more intensive services. Over the past several years, there has been a continual

focus on the quality of services delivered within group care settings. In an effort to plan and implement statewide changes to Florida’s group home model, the Office of Child Welfare has worked in partnership with Department regional staff, CBCs, and residential care providers to engage stakeholders in on-going discussions regarding the FFPSA requirements and development of a comprehensive group home model to provide specialized placement and care to children with specified needs. Additionally, the Department, in collaboration with the Florida Institute of Child Welfare, established the *Quality Standards for Group Care Workgroup* to develop and implement a statewide accountability system for residential group care providers based on measurable quality standards. The completion of the quality standards statewide pilot and selections of outcomes in the upcoming year will mark critical progress toward fully validating the assessment and finalizing procedures. Lastly, the Department has implemented policy and practice surrounding the use of mandated Comprehensive Placement Assessment tool as indicated in 65C-28.004, F.A.C., to ensure children are placed in the most appropriate and recommended level of care to obtain services with a focus on permanency, safety, and well-being. The Office of Child Welfare amended the current group home licensing standards in administrative rule 65C-46, F.A.C., on May 23, 2021, to align with the new FFPSA requirements and to develop a continuum of placement and treatment options for Florida’s children who enter the child welfare system, improve their well-being outcomes, and improve the safety of children.

Commercial Sexually Exploited Children (CSEC)

Since 2009, the Hotline has accepted reports alleging human trafficking of an individual under the age of 18. In FY 2020-21, the total number of reports accepted by the Hotline alleging one of the human trafficking maltreatments was 2,289 reports involving 1,750 children. There has been an increase of 388 reports accepted by the Hotline in FY 2020-21 compared to FY 2019-20 (1,901). This can be attributed to a number of factors. First, there was a drop in reports in the last quarter of the previous fiscal year due to COVID-19 lockdowns and school closures. It is presumed that a number of instances of trafficking did not become known and reported until a few months later when the restrictions were lifted and schools partially reopened. Secondly, s. 509.096, F.S., created in 2019, required for employees of public lodging to complete annual training on human trafficking awareness and, by January 1, 2021, implement a procedure for the reporting of suspected human trafficking to the National Human Trafficking Hotline or to a local law enforcement agency. These efforts resulted in an increased number of reports submitted by employees of hotels and motels across Florida. Lastly, all human trafficking awareness and special topics trainings continued in the last year as usual but were converted to an on-line mode of delivery resulting in much greater numbers of attendees that was previously possible to achieve through in-person sessions.

FY 2020-21	Verified Victims		Total
	Females	Males	
CSEC	466	65	531
Labor Trafficking	12	16	28
Total	478	81	559

There is an ongoing concern for underreporting cases of minor sex trafficking. The latest available data from the National Human Trafficking Hotline shows the data for the calendar year 2019. This data indicates that there were 172 reported cases of minor human trafficking in Florida in that time period. The Department’s dashboard shows 1,962 investigations accepted by the Hotline in 2019. Regardless of the significant number of calls to the Hotline, the underreporting of human trafficking remains to be the area of focus for the Human Trafficking Unit which conducts and participates in multiple awareness events and trainings for DCF and CBC staff, partner organizations, and members of the community.

During FY 2020-21, the number of available safe houses decreased from nine to eight as one home for female victims permanently closed. As a result, the number of safe house beds decreased slightly from 61 beds in July 2020 to 56 beds as of July 12, 2021. Across the state, there are now seven safe homes for female victims of CSEC and one for male victims. The safe house for male victims has the capacity to accept five minors.

Between July 1, 2020 and June 30, 2021, the CBCs reported evaluating a total of 497 children for placement in a safe house or safe foster home. Sixty, or 12.07%, of the children were placed in a safe house or safe foster home based on evaluation.

While progress has been made in building a more comprehensive system of care for CSE youth, child welfare professionals continue to see a need for the independent evaluation of placements and programs to fully understand and identify the best intervention options for the children served. This includes ongoing research examining optimal strategies for CSE victims who chose to repeatedly return to modes of commercial sex. The Department will continue to identify successful and cost-effective programs and look for ways to expand those programs across the state where the need is the greatest. The Department's Human Trafficking Unit is working with a local service provider to implement the pilot intervention program that focuses on providing education, empowerment, and ongoing support for caregivers and siblings of youth involved in commercial sexual exploitation. The pilot aims to improve communication between the victim youth and their families and to reduce the number of victim's running away from home and re-engaging with commercial sex industry. The pilot will be offered to the families of both dependent and community children. The Human Trafficking Unit is working with local researchers to start the process of validating this intervention as an evidence-based practice. This will support the advancement of a person-centered prevention approach to commercial sexual exploitation of children to ensure that the level of re-experiencing the maltreatment of human trafficking is decreasing steadily and consistently. The Department continues to participate in the Statewide Council on Human Trafficking and Secretary Harris serves as the Chair for the Services and Resources Subcommittee.

Child Abuse Prevention and Treatment Act/Plans of Safe Care The Child Abuse Prevention and Treatment Act (CAPTA) requires states to have a statewide program relating to child abuse and neglect that includes: policies and procedures (including appropriate referrals to child protection service systems and for other appropriate services) to address the needs of infants born with and identified as being affected by substance use or withdrawal symptoms resulting from prenatal drug exposure, or Fetal Alcohol Spectrum Disorder, including a requirement that health care providers involved in the delivery or care of such infants notify the child protective services system of the occurrence of such condition of such infants; and the development of a plan of safe care for an infant born and identified as being affected by the illegal substance abuse or withdrawal symptoms or Fetal Alcohol Spectrum Disorder.

The Department has codified the requirements contained in the CAPTA legislation and continue to explore the best avenue for information collection around the number of families served through plans of safe care. The Department continues to work with stakeholders across the state to address the needs of this vulnerable population and educate providers on the implementation of plans of safe care.

The Department previously identified a need for increased early intervention efforts targeting substance affected newborns and their families. Through an increase in the CAPTA State Grant award, the Department has awarded seven contracts expanding evidence-based home visiting services delivered to at-risk pregnant woman and parents/caregivers using legal or illegal substances and newborns affected by substance use. These projects, located throughout the state, will work with parents and caregivers of newborns affected by substance use to create or modify existing plans of safe care. Programs will work to avert unmanageable family crisis and

preventable child maltreatment by increasing the skillsets and resources a family needs to address and overcome challenges that may have previously seemed insurmountable.

Implementation of 2021 State and Federal Legislation

Implementation plans have been developed for the following changes that occurred during the 2021 Florida legislative session:

- CS/CS/CS SB 80 – Child Welfare – effective October 1, 2021 (Chapter 2021-169, Laws of Florida)
- CS/CS/SB 96 – Child Welfare – effective July 1, 2021 (Chapter 2021-170, Laws of Florida)
- CS/CS/SB 252 – Child Care Facilities – effective October 1, 2021 (Chapter 2021-120, Laws of Florida)
- CS/CS/CS HB 419 – Early Learning and Early Grade Success – effective July 1, 2021 (Chapter 2021-10, Laws of Florida)

Child Care Regulations

The Child Care Regulation program maintains the following focus areas:

- Ensure compliance with minimum health and safety standards in licensed childcare facilities and registered homes for children in out of home care.
- Ensure that performance requirements are met for on-site inspections of licensed childcare programs, family day care homes, and exempt childcare arrangements that provide school readiness services.
- Statutorily required training is offered online and in classroom settings to childcare personnel who must successfully pass competency exams to be employed in the childcare industry.
- Ensure that federal Child Care Development Block Grant requirements are met within established time frames.

The Office of Child Care Regulation will continue the implementation of professional development opportunities and the federal requirements.

Domestic Violence

The Department now administers all federal and statewide domestic violence funding to the 41 certified domestic violence centers and works collaboratively with stakeholders to help prevent family violence and support victims of domestic violence and their children.

- Service Integration – Domestic Violence, Child Welfare, and other relevant stakeholders: the Department will continue to work collaboratively to promote and support the enhancement of existing and new community-based partnerships through cross-program training initiatives with the Department’s CPI units, CBCs, SAMH managing entities, Guardians ad Litem, foster parents, courts, and other relevant stakeholders. Overall support continues for domestic violence victim advocates co-located in many CPI offices. There are 72 full- and part-time co-located domestic violence advocates partnering with the Department, sheriffs’ offices, and CBCs.
- Capital Improvements Grant Program for Domestic Violence Centers: When legislative funds are made available, the Department will develop projects that add shelter capacity to certified domestic violence centers.

Florida Abuse Hotline

The Hotline continues to focus on protecting the most vulnerable citizens of Florida by improving how Hotline counselors assess reports. The Hotline counselors will demonstrate an expertise in understanding, interpreting, and applying Chapters 39 and 415, F.S., and Departmental operating procedures that provide guidance to processing reported concerns for child and vulnerable adult victims. Hotline counselors will also demonstrate

advanced understanding and application of Florida’s child welfare practice model and adult protective services protocols.

The Hotline will continue ensuring that a competent workforce is staffed with individuals who provide quality work products. This will be achieved by ensuring the best staff are hired during the new hire on-boarding process, by maintaining a strong pre-service and in-service training program, and ensuring the Hotline Quality Assurance Program provides accurate, consistent, and timely quality feedback to staff.

A management structure is in place to ensure daily operational needs are maintained. The daily productivity and performance of Hotline counselors and Crime Intelligence Unit staff are monitored and tracked to ensure Hotline performance metrics are met. Target goals have been established for the length of time a Hotline call assessment should last, the processing that is required after a call has been completed, and the average time it should take to complete required criminal background checks. Staffing software is used to determine scheduling to maximize efficiency, along with professional development to reduce employee turnover and to increase retention and satisfaction.

The following new initiatives are being developed for incorporation into the operational environment of the Hotline:

- Incorporate new legislative requirements associated with Chapter 2021-170, Laws of Florida. This chapter creates s. 39.101, F.S. which transfers existing provisions related to the Hotline from 39.201 F.S. This chapter also requires Hotline counselors to obtain the names of animal control officers who are reporting concerns to the Hotline.
- Incorporate a revised Hotline supervisor quality review process where more focus will be on counselor assessments, decision making, and documentation of screened-in reports.
- Increase the number of quality pre-crisis referral provided to Hotline reporters by incorporating the usage of the MyFloridaMyFamily referral database.
- Partner with ESS to develop a process where the Hotline would complete an assessment and refer callers to ESS Care Coordination. The Hotline anticipates to potentially refer approximately 2,500 calls annually to Care Coordination.
- Pilot the Child Maltreatment Prevention Academy. After curriculum updates are made, the Hotline will conduct train-the-trainer sessions in preparation for statewide rollout.

D. Justification of Revised or New Programs and/or Services

During the 2021 legislative session, two key pieces of legislation were passed that impact child welfare, effective July 1, 2021, and October 1, 2021.

- CS/CS/SB 96 – Child Welfare (Chapter 2021-170, Laws of Florida) – Effective July 1, 2021.
 - Expands the use of the Critical Incident Rapid Response Team process by requiring deployment on verified reports of allegations of sexual abuse of a child currently placed in out-of-home care if the child was the subject of a verified report of abuse or neglect in the previous six months.
 - Includes the Agency for Health Care Administration (AHCA) and Agency for Persons with Disabilities (APD) as an agency permitted to receive reports of abuse and neglect as the agency is responsible for licensing facilities under Chapter 394, F.S., that provide mental health services.
 - Requires Child Protection Investigators to report animal abuse, outlines animal control officer requirements to report child abuse, and creates penalties for failure to report.
 - Requires Family Finding and Kinship Navigator programs.
 - Creates new requirements for capacity waiver for foster homes to help increase foster capacity

and put Florida in-line with Federal definitions of foster family homes.

- CS/CS/CS SB 80 – Child Welfare (Chapter 2021-169, Laws of Florida) – Effective October 1, 2021.
 - Requires the Department to develop and include a “face sheet” that contains relevant information about the child and his or her case in every child’s case record.
 - Creates a list of priority placements for children in out-of-home settings.
 - Creates Multidisciplinary Teams for the purpose of bringing together a diverse group of individuals to convene in an effort to help children achieve permanency, safety, and overall family well-being.
 - Requires the Department to contract for development of model placement transition plans and related explanatory materials.
 - Establishes the Office of Continuing Care for young adults who age out of care between the ages of 18 to 21, 22 with a disability.

E. Justification of Final Projection for each Outcome

Child Welfare Outcomes: All outcome projections were based on an achievable first year target with straight line projection used to compute out years until optimum level was achieved.

F. Potential Policy Changes Affecting the Budget Request

None

G. Changes Which Would Require Legislative Action

None

H. Task Forces and Studies in Progress

Child Welfare Practice Task Force

The Department is the designated agency responsible for administering the Children’s Justice Act (CJA) grant for the state of Florida. Florida complies with Section 107(a) of the Child Abuse and Prevention Treatment Act (CAPTA) in order to continue its eligibility to receive the CJA grant award. The Child Welfare Practice Task Force is a requirement of the grant.

Authority: Federal Child Abuse Prevention and Treatment Act, Title I -- Children’s Justice Act (42 U.S.C. 5106c)

Purpose: Review, evaluate, and make policy recommendations on investigative, administrative, and civil and criminal judicial handling of child abuse and neglect cases.

Independent Living Services Advisory Council

Authority: s. 409.1451(7)(b)2., F.S.

Purpose: Review, evaluate, and make recommendations concerning the implementation and operational ability of Extended Foster Care and Post-Secondary Education Support and Services Program.

Program: Substance Abuse and Mental Health

The Office of Substance Abuse and Mental Health (SAMH) serves as the single state authority for mental health and substance use services as well as the statewide opioid treatment authority, and is comprised of the following:

1. Community Substance Abuse and Mental Health,
2. State Mental Health Treatment Facilities (SMHTFs),
3. The Sexually Violent Predator Program (SVPP),
4. Office of Suicide Prevention, and
5. Quality Assurance and Data Unit.

A. Primary Responsibilities

At the state level, the Office of SAMH develops the standards of quality care for prevention, treatment, and recovery services. SAMH is governed by Chapters 394, 397 and 916 of the Florida Statutes. The Department is statutorily responsible for licensure and regulation of substance use disorder treatment services, and designation of addiction and Baker Act receiving facilities. SAMH services are administered through the following administrative and programmatic functions:

1. Community-Based Services: operations, policy, clinical, licensure and designation
 - Operations:
 - Contract procurement and management; Oversight and monitoring of Community Mental Health Block Grant (MHBG); Oversight and monitoring of Substance Abuse Prevention and Treatment Block Grant (SABG); Legislative budget request development; Long range program planning; Statutorily required reports
 - Policy:
 - Policy and administrative rule development; Management of the Office of Suicide Prevention; Disaster behavioral health response; Management of the Behavioral Health Network; Baker and Marchman Act implementation; Discretionary grant management and implementation
 - Clinical:
 - Development of clinical guidance, based on industry standards and research; Discretionary grant management and implementation; Collection and analysis of seclusion and restraint event data; Review and dissemination of incident report data; Training and technical assistance development (workforce development); Recovery Oriented System of Care (ROSC) implementation; Specialty programs oversight; Substance use primary prevention
 - Licensure and Designation:
 - Oversight of statewide licensure of substance use disorder treatment services; Management of the Provider Licensure and Designations System; Designation of addictions and Baker Act receiving facilities; Approval of recovery residence/administrator credentialing entities; State Opiate Treatment Authority
2. State Mental Health Treatment Facility Services
 - Programmatic and supervisory oversight of state operated treatment facilities:
 - Florida State Hospital; Northeast Florida State Hospital; North Florida Evaluation and Treatment Center
 - Contract management and programmatic oversight for privately operated treatment facilities:

- South Florida Evaluation and Treatment Center; South Florida State Hospital; Treasure Coast Forensic Treatment Center
 - Contract management and programmatic oversight for the Juvenile Incompetent to Proceed (JITP) program
 - Coordination of forensic admissions
 - Policy and rule development and compliance monitoring
3. Sexually Violent Predator Program
- The SVP Program is primary responsible for the following:
- Screening individuals for presence of mental abnormality or personality disorder exiting the Department of Corrections, Department of Juvenile Justice, County Jails and forensic facilities
 - Commitment recommendations for referrals
 - Control, care and treatment to persons subject to the Involuntary Commitment of Sexually Violent Predators Act
 - Contract management and programmatic oversight of the Florida Civil Commitment Center
4. Quality Assurance and Data Unit
- The Unit responsibilities include SAMH community and facility:
- Data collection and analysis
 - Data reporting and system enhancements
 - Management of Financial and Services Accountability Management System (FASAMS)
 - SAMH Qlik Systems, Smartsheet, Power Bi
 - Account and policy functions for Web Infrastructure for Treatment Services System (WITS)

The Office of SAMH contracts with seven Managing Entities (MEs) for the administration and management of regional behavioral health services throughout the state. The MEs are private organizations responsible for planning, implementation, administration, monitoring, data collection, reporting, and analysis for behavioral health care in their regions. MEs contract with local network service providers for the provision of prevention, treatment, and recovery support services. Information about the regional organization and managing entities map can be accessed here: <https://www.myflfamilies.com/service-programs/samh/managing-entities/index.shtml>

Mental Health Trends

The National Survey on Drug Use and Health (NSDUH) provides important estimates of substance use, substance use disorders, and other mental illnesses at the national, state, and sub-state levels. The NSDUH estimates that 17.2% of adults in Florida experienced any mental illness in the past year.

- It is estimated that 4.3% of adults in Florida experienced a serious mental illness (SMI) from 2018-2019.
- Among children ages 12-17 in Florida, approximately 13.2% experienced a major depressive episode in 2018-2019.

The Health Resources and Services Administration reported that there are 209 areas experiencing a shortage of mental health professionals in Florida. In Florida, the percent of need met is 17%, compared to 27% for the entire United States. Statewide, the number of additional practitioners needed to remove the shortage designation is 389. For mental health geographic designations based on the ratio of population to psychiatrist ratio, the designation must have a ratio of 30,000 to 1, while for population designations or geographic designations in areas with unusually high needs, the threshold is 20,000 to 1. Thus, the use of expanded telepsychiatry, such as videoconferencing for patient evaluation, medication management, and therapy could

help rural areas address the shortage by tapping into broader networks.

Suicide Trends

According to the Florida Department of Health, Florida's total number of deaths due to suicide in 2019. Suicide is ranked as the ninth leading cause of death in Florida with a crude suicide rate of 16.1 per 100,000 population. For children and adolescents under the age of 18, suicide was the sixth leading cause of death with 79 suicides in this age group. Males die by suicide at a much higher rate than females. Specifically, in 2019, 77% of deaths by suicide were male.

To increase collaboration between state agencies and stakeholders, the 2020-2023 Florida Suicide Prevention Interagency Action Plan was developed to guide suicide prevention efforts throughout the state. The Florida Interagency Action Plan identifies four focus areas: Awareness, Prevention, Intervention and Caring Follow-up and Support. Additionally, the Action Plan identifies four goals, eleven strategies, and provides a template for communities and organizations to develop action plans that can be implemented at a local level.

Overdose Trends

Drug poisoning (overdose) is the leading cause of unintentional injury death in the United States. In 2019, there were 4,294 deaths caused by opioids. A comparison of Florida's mortality figures from 2018 and 2019 reflects a 45 percent increase in deaths caused by methamphetamine and a 38 percent increase in deaths caused by amphetamines. Among drug-related decedents, these stimulants commonly appear along with opioids like fentanyl. Deaths caused by fentanyl increased by 35 percent over this period.

B. Selection of Priorities

The priorities for the Office of Substance Abuse and Mental Health are consistent with the Department's primary goals of:

1. Enhancing Program Effectiveness to Improve the Customers' Experience
2. Building a System of Accountability, Transparency, and Alignment
3. Enhancing Workforce Development Efforts to Improve Stability, Culture, and Continuous Learning

Priorities Over Next Five Years

The Office of SAMH continues to transform Florida's behavioral healthcare system from an acute care system to a Recovery Oriented System of Care (ROSC). This includes increasing access to services and resources, using funding more efficiently, creating a structure for implementing person-centered services, improving care coordination and continuity of care, and improving outcomes for individuals, families, and communities. In addition, integrating resources and services available through the SAMH program office across the DCF Enterprise has been pivotal in helping families with deficient protective capacities due to substance misuse, have timely access to substance use assessments/evaluations and treatment and remain engaged in services for long term recovery. For parents who are at risk of being engaged with the child welfare system, this model serves to aid in our efforts of reducing out of home care for children and repeat maltreatment findings.

The Office of SAMH has identified four key strategic initiatives with related goals and objectives to improve the behavioral health system of care and ensure quality programs and services are being delivered to the state's most vulnerable populations. They are:

1. Community-Based Health Promotion and Prevention;
2. Access to Quality, Recovery-Oriented Systems of Care;
3. State Mental Health Treatment Facility Improvements; and
4. Information Management.

Strategic Initiative 1: Community-Based Health Promotion and Prevention	
Goal 1.1: Promote mental health and resiliency	Objective 1.1.1: Increase the public’s awareness of mental health.
	Objective 1.1.2: Ensure the public is able to access services in their community.
Goal 1.2: Prevent and reduce substance use	Objective 1.2.1: Strengthen the substance-abuse prevention workforce through training and certification.
	Objective 1.2.2: Prevent or delay the use of alcohol, tobacco, and other drugs in Florida through use of evidence-based practices.
	Objective 1.2.3: Improve the consistency and quality of prevention data entered into the Performance Based Prevention System.
Goal 1.3: Reduce the spread of infectious disease	Objective 1.3.1: Collaborate and coordinate with the Department of Health’s Priority Area Workgroup on STDs and Other Infectious Diseases.
	Objective 1.3.2: Analyze the impact of the new HIV Early Intervention Services Guidance Document on the number of individuals tested for HIV.
Goal 1.4: Reduce the number of suicide deaths	Objective 1.4.1: Enhance awareness for suicide prevention, increase suicide prevention education approaches, increase effective suicide-based intervention, and increase caring follow-up and support efforts.
Goal 1.5: Increase access to naloxone to reduce opioid-caused deaths	Objective 1.5.1: Continue implementation and expansion of the Overdose Prevention Program and naloxone distribution.
Strategic Initiative 2: Access to Quality, Recovery-Oriented Systems of Care (ROSC)	
Goal 2.1: Enhance the community-based service array to shift from an acute care model to a recovery-based model of care	Objective 2.1.1: Increase care coordination for high risk/high utilizer populations with emphasis on individuals at risk of entering and being discharged from state treatment facilities.
	Objective 2.1.2: Increase capacity for peer support.
	Objective 2.1.3: Increase access to medication assisted treatment.
	Objective 2.1.4: Implement standardized assessments of service needs (i.e., level of care).
	Objective 2.1.5: Implement a recovery-oriented system of care (ROSC) framework in Florida to increase consumer engagement, choice and self-management, including job opportunities.
Goal 2.2: Improve access to and retention in services	Objective 2.2.1: Develop alternate access options and locations with centralized triage and service delivery functions.
	Objective 2.2.2: Implement innovative and intentional outreach strategies.
	Objective 2.2.3: Identify barriers to retention as well as non-monetary incentives.
Goal 2.3: Implement an integrated child welfare and behavioral health treatment-based model	Objective 2.3.1: Increase access to treatment services that are trauma-based and family-focused. Integrate interventions for parents into the child welfare system.
Strategic Initiative 3: Information Management	
Goal 3.1: Improve data collection process to ensure reliability and validity of submitted data	Objective 3.1.1: Utilize Data Advisory Committee (formerly Substance Abuse and Mental Health Data Improvement Workgroup) to prioritize enhancements to the Financial and Services Accountability Management System.
	Objective 3.1.2: Deploy system enhancement process to ensure that all changes made in support of SAMH data collection aligns with approved policy and procedures.
	Objective 3.1.3: Deploy data quality reports.

Goal 3.2: Improve process for reporting and analyzing performance outcome data	Objective 3.2.1: Develop and implement an integrated performance reporting system.
Goal 3.3: Propose New Persons-Centered Performance Output and Outcome Measures	Objective 3.3.1: Document, design and test new person-centered performance measures.
Strategic Initiative 4: Performance of State Mental Health Treatment Facilities	
Goal 4: Improve the Quality and Performance of the State Mental Health Treatment Facilities	Objective 4.1: Improve operations and standardize practices.
	Objective 4.2: Collaborate with community partners to increase discharges and diversions from State Mental Health Treatment Facilities.
	Objective 4.3: Increase therapeutic services and implement evidence-based programming and clinical best practices.
	Objective 4.4: Improve the physical infrastructure to promote a safer environment.

COVID-19 Pandemic Response

Mobile Response Teams were established to provide youth and young adults ages 25 and under access to on-demand crisis intervention services 24/7 in any setting in which a behavioral health crisis is occurring. In FY 19-20, the Mobile Response Teams expanded services to respond to crisis calls via telehealth. The Department held monthly calls with the Mobile Response Team providers to discuss safety protocols, responding to crisis calls via telehealth versus in-person responses, Personal Protective Equipment (PPE), and networking with schools to ensure that students and their parents knew about the Mobile Response Team service. Many of the Mobile Response Team providers collaborated with their local school districts to distribute Mobile Response Team contact information on the student dashboards, during school textbook returns, and including the contact information at school lunch distribution sites. At the beginning of the COVID-19 pandemic, the Mobile Response Teams experienced a drop in the number of calls received but increased in early 2021 (Statewide number of calls received: February 2020 (2,013), April 2020 (1,092), August 2020 (1,295) and March 2021 (2,180).

The COVID-19 Emergency Response Grant was awarded on April 1, 2020. The Department received \$1,999,828 in grant funds to provide an array of behavioral health services to individuals impacted by COVID-19. The funding was allocated to four Managing Entities based on the highest impact of COVID-19 in their service area to serve individuals with serious mental illness and/or substance use disorders and to a statewide telehealth provider to serve individuals with less serious emotional issues and healthcare practitioners impacted by COVID-19. An additional \$2,859,403 was awarded to the Department on February 1, 2021 which will expand services to the entire State of Florida through all seven Managing Entities. To date this grant has served 614 individuals.

The COVID-19 Crisis Counseling Grant Crisis Counseling Program (CCP) began in July 2020 and is operating in a 90-day extension through July 11, 2021. The CCP provides disaster behavioral health services in response to the COVID-19 pandemic by expanding the capacity of twelve 2-1-1 providers to provide remote crisis counseling services in all 67 Florida counties. As of April 2021, there are eleven 2-1-1 providers participating. The CCP has served a total of 217,352 people through March 31, 2021. Services include individual/family counseling; referrals, brief educational/supportive counseling, emails and texts, and community networking. The Department is awaiting federal approval of a second no cost extension request to extend the program through September 2021.

Overdose Prevention Program

The Department initiated the Overdose Prevention Program in 2016 to help reduce opioid overdose deaths and

increase access to naloxone, the medication that reverses opioid overdose, throughout the state. There are currently 209 enrolled providers, including substance use and mental health treatment providers, opioid treatment programs, recovery community organizations, hospital emergency departments, harm reduction programs, federally qualified health centers, homeless shelters, and other community-based organizations that provide low-barrier access to naloxone directly to people who use drugs and their loved ones. During FY 2020-21, there were 97,406 kits distributed by providers enrolled in the naloxone distribution program. Providers reported 6,517 overdose reversals. In addition, 155 overdose prevention trainings were also conducted, educating 2,269 individuals.

The Department also launched an Opioid Overdose Prevention Awareness Campaign in November of 2018 focused on increasing awareness of naloxone and how individuals can access the medication in Florida. The targeted audience for the campaign includes individuals at risk of opioid overdose and their friends and family. Campaign materials include radio and online ads, printed materials and the [ISAVEFL](#) website that allows individuals to search for the nearest naloxone distribution site in their area. The campaign expanded to include awareness on the risks of opioid misuse and primary prevention education among young adults and their parents and caregivers. The Campaign is funded through Florida’s Partnerships for Success (2016-2021).

Service Gaps and Needs

Managing entities are required to develop and submit Enhancement Plans which include a description of strategies for enhancing services and the identification of priority needs within the service areas overseen by each of the seven managing entities. The planning process must minimally include individuals served and their families, community-based care lead agencies, local governments, law enforcement agencies, service providers, community partners, and other stakeholders. Priority needs are identified by the MEs in a variety of ways, including but not limited to, analyses of waitlist records, surveys, and focus groups with consumers, providers, and other community stakeholders. The priority needs identified by each of the Managing Entities within their updated Enhancement Plans for 2021 are presented in the table below.

Big Bend Community Based Care (BBCBC)	Detoxification services; Forensic ACT team with a focus on housing; and expanding outpatient services (including recovery support, care coordination, telehealth, counseling, expansion of jail services, case management, peer-led social club).
Broward Behavioral Health Coalition (BBHC)	Stepping-Up Initiatives for Jail Diversion (i.e., assessments in jails to identify SUDs and mental illness and linkage to BH providers); Short-term Residential Treatment (SRT); Housing Coordinators and ME Care Coordinators; FACT, CAT, and FIT teams: Zero Suicide Initiative; Care Coordination/Housing teams, Transitional Vouchers, and Family Peer Navigators; and Broward Forensic Alternative Center.
Central Florida Behavioral Health Network (CFBHN)	Various covered services through substance abuse and mental health programs; Short-term Residential Treatment (SRT); FACT teams to address waitlists; FACT team funding for staffing positions and incidentals; CAT team waitlist reductions; Recovery through Work Program (supported housing, supported employment, Clubhouse services); Community-based MH/SA treatment and temporary housing for individuals released from jail; Therapists to provide in-home and on-site therapy for high need/high utilizers; Case managers to provide in-home and on-site services for high need/high utilizers; Marchman Act services; School-based prevention services (universal direct); and Housing and supported housing options.
Central Florida Cares Health System (CFCHS)	Peer recovery respite care; Care Coordinators; Housing Specialists; Supportive group housing with mental health overlay services for adults with SMI or co-occurring disorders (prioritizing FACT step-down and SMHTF discharges); Suicide Prevention Coordinator; Mobile Response Team expansion; Housing Specialists; Adult/Child Care Coordinator; Housing assistance (for FACT and Care Coordination populations); Crisis Intervention Team (CIT) Coordinator; and Forensic Transitional Beds Expansion.

Lutheran Services Florida Health Systems (LSFHS)	Short Term Residential Treatment (SRT) and Assisted Outpatient Treatment (case management, medical services, recovery support); Adult substance use disorder treatment capacity (assessment, Medication Assisted Treatment, medical services, outpatient, recovery support, and residential); Care Coordinators, Housing Coordinators, Housing Resource Specialists, and Transition Vouchers; Behavioral health/law enforcement co-responder teams; Competitive salaries for provider key positions; and training.
Southeast Florida Behavioral Health Network (SEFBHN)	FACT teams; Forensic services (including Forensic Multidisciplinary Teams); Psychiatric telemedicine services; Supportive housing and Telehealth platform integration and expansion among provider network.
South Florida Behavioral Health Network (SFBHN)	Implementation of two additional NAVIGATE programs; Care Coordination and Housing Coordination; FACT teams; Substance abuse and mental health residential capacity; Children’s Crisis Response Teams (CCRT); Residential psychiatric care for children with serious emotional disturbances; and Mobile Response Teams.

State Mental Health Treatment Facilities

The Department has prioritized efforts to improve the quality and performance of the SMHTFs by addressing challenges related to operational inefficiencies, increasing forensic commitments, and an aging physical plant in the state-managed facilities. With guidance established by way of departmental policy and oversight, the state-managed facilities have traditionally managed operations independently with operating procedures, staffing and administrative structures unique to each facility. The number of persons served continued to increase, with forensic commitments increasing by 25% from FY 2014-2015 to FY 2018-19. During FY 2019-20, increases in commitments continued until the outbreak of the COVID-19 pandemic. Beginning in March 2020, most court proceedings pertaining to forensic individuals were postponed.

In effort to ensure the safety of staff and residents during the COVID-19 pandemic, admissions into SMHTFs were suspended from March through June 2020, at which time a plan was implemented to allow for a limited number of admissions into designated isolation areas within each facility. The suspended and limited admissions were authorized by various executive orders from the Secretary of the Department as permitted by the Governor’s emergency orders. In addition to suspending admissions into facilities, there was a suspension to the statutory requirement to admit forensic individuals within 15-days of receipt of commitment to the Department. Suspending and limiting admissions into SMHTF remains necessary to minimize the spread of COVID-19 throughout a vulnerable population. As a result, a substantial backlog was created in the number of individuals awaiting admission. The judicial system has been similarly impacted by the pandemic, creating delays in scheduling court dates and picking up residents in SMHTF who are awaiting return to court. As of 6/30/21, there were 140 individuals over 15 days awaiting admission into a forensic facility and 93 individuals awaiting return to court, ready to be discharged from a forensic facility. The Department is continuing to work to admit individuals as quickly and safely as possible to its available capacity, and is working with the courts, jails, and community providers in these efforts. The Department has also launched a long-range strategic plan to improve the quality and performance of the SMHTFs (see Strategic Initiative 4 below).

C. Justification of Revised or New Programs and Services

During the 2021 Regular Session, the Florida Legislature passed the following behavioral health-related legislation that impacts the clients, services, providers, and operations of the Department.

- SB 590 - School Safety Effective Date: July 2, 2021
 - Requires schools, including charter schools, to make a reasonable attempt to notify the student's parent, guardian, or caregiver before the student is removed from school, school transportation, or a school-sponsored activity to be taken to a receiving facility for an involuntary examination.
 - The school principal or designee may delay the required notification if they believe that such a delay is necessary to avoid jeopardizing the health and safety of the student.
 - Adds requirement that school safety officers must complete mental health crisis intervention training using a curriculum developed by a national organization with expertise in mental health crisis intervention.
 - Adds requirement for student identification cards in grades 6 through 12 to include the telephone numbers for national or statewide crisis and suicide hotlines and text lines.
 - Adds requirements to the mental health assistance allocation plans to include procedures to assist a mental health services provider, a behavioral health provider, or a school resource officer who has completed mental health crisis intervention training in attempting to verbally de-escalate a student's crisis situation before initiation an involuntary examination.

- SB 590 - School Safety Effective Date: July 2, 2021
 - Requires the Department to publish the following to its website annually:
 - All compensation from state appropriated funds in excess of 150% of the Secretary's annual salary.
 - This includes all compensation earned or awarded, whether paid or accrued, regardless of contingency for all employees, and any "contracted" staff providing the services of a chief executive, chief administrator, or other chief officer of a business or corporation. The most recent 3 years of each Managing Entities IRS tax filing Form 990, related IRS documents, and annual reports. This also applies to an "affiliated entity."
 - Requires each Managing Entity to add the following to its website; to all literature, documents, and forms, and forms; and to all business cards and letterhead: "(managing entity name) is a managing entity contracted with the Department of Children and Families"
 - Creates new definitions and requirements applicable to Managing Entity Board of Directors and their relatives regarding actual and potential conflicts of interest. This requires disclosures of conflicts related to activity under Board consideration for approval with different consequences for non-disclosure depending on when the activity was voted on. If undisclosed activity was first presented to the board after 7/1/21, or involves a renewal effective 7/1/21 but before 7/1/22, nondisclosure creates a rebuttable presumption of conflict.
 - Any conflict or activity reasonably construed as a conflict affecting any existing contracts not meeting the above timeframes must be disclosed before 12/31/21.
 - Any contract with an undisclosed actual or potential conflict is voidable by affirmative vote of 20% of the Managing Entity voting members present.
 - Establishes the legislative intent to establish a Commission on Mental Health and Substance Abuse to examine the current policies and procedures for providing behavioral health services and to make recommendations to improve and facilitate service delivery.
 - Creates s. 394.9086, F.S. to establish the Commission adjunct to the Department of Children and Families and requires the Department to provide administrative and staff support services for the Commission.
 - The Commission's purpose is to examine current behavioral health service delivery, improve the effectiveness of behavioral health services system in Florida, and recommend changes that are necessary to implement the Commission's recommendations.

- SB 804 -Substance Abuse Services Effective Date: July 1, 2021

- Adds a stipulation that an applicant who willfully and knowingly makes a false representation of material fact in a license application or who willfully and knowingly omits any material fact from a license application commits a third-degree felony, punishable as provided in s. 775.082 or s. 775.083, F.S.
- Adds a statement indicating if a licensed provider does not pay fines associated with licensure violations within 60 days after the date set by the Department, it shall immediately suspend the provider's license.
- Adds a subsection indicating a single or two-family dwelling certified as a recovery residence, as defined in s. 397.311, or that is a recovery residence, as defined in s. 397.311, F.S., that has a charter from an entity recognized or sanctioned by Congress (Oxford House) may not be reclassified for purposes of enforcing the Florida Fire Prevention Code solely due to use as a recovery residence.
- HB 945 - Children's Mental Health Effective Date: July 1, 2020
 - Requires the Department and the Agency for Health Care Administration (AHCA) to identify children and adolescents who are the highest utilizers of crisis stabilization services, collaboratively take action to meet the behavioral needs of such children, and jointly submit a quarterly report to the Legislature during FY 2020-21 through FY 2021-22. The Department and AHCA created strategies as guidelines to work towards this requirement as well as a data sharing agreement between the agencies. Quarterly reports can be viewed at <https://www.myflfamilies.com/service-programs/samh/publications/>.
 - Requires the Department to contract with the Managing Entities for crisis response services provided through mobile response teams (MRTs) for the provision of immediate, onsite behavioral health services to children and young adults through age 25 who meet specified criteria.
 - Directs the Louis de la Parte Florida Mental Health Institute to develop, in consultation with specified entities, a model response protocol for schools to use mobile response teams.
 - Requires Managing Entities to develop and submit a plan that promotes the development and effective implementation of a coordinated system of care to integrate services provided and funded through the state child serving systems to facilitate access to needed mental health services. Plans must be completed by January 1, 2022 and implemented by January 1, 2023.
 - Adds requirements for schools to verify that de-escalation strategies have been utilized and outreach to an MRT has been initiated prior to submitting the student to an involuntary examination.
 - Requires the Department and AHCA to jointly assess the quality of care provided in crisis stabilization units to children and adolescents who are high utilizers of services and submit a report on their findings and recommendations to the Governor and Legislature by November 20, 2020. The report can be viewed at <https://www.myflfamilies.com/service-programs/samh/publications/>.

D. Justification of Final Projection for each Outcome

Children and adults in CSU, Inpatient, Detox, or Mental Health Treatment Hospitals: The outcome projection is based on a planned reduction of 385 the first year followed by an addition 100 reduction each year.

E. Potential Policy Changes Affecting the Budget Request

None.

F. Changes Which Would Require Legislative Action

None at this time.

G. Task Forces and Studies in Progress

Florida Youth Substance Abuse Survey

The Florida Youth Substance Abuse Survey (FYSAS) was developed to provide scientifically sound information to state-level and community-level prevention planners and policy makers. It assesses the current prevalence of problem behaviors such as alcohol, tobacco and other drug use as well as other delinquent behaviors in the student population. The survey also measures the degree to which risk and protective factors exist in the community, family, school, peer and individual environments. This information is essential to support needs assessment, prevention planning, and intervention planning at the state and local levels. Results of the survey may be accessed at: <https://www.myflfamilies.com/service-programs/samh/prevention/fysas/>

Suicide Prevention Coordinating Council

The Statewide Office for Suicide Prevention and the Suicide Prevention Coordinating Council was established in 2007 pursuant to Ch. 14.2019, F.S. The Suicide Prevention Coordinating Council maintains three active committees to focus on different tasks relating to suicide prevention:

1. The Planning and Evaluation Committee
2. The Data Collection and Analysis Committee
3. The Special Populations/Risk Reduction Committee

First Responder Suicide Deterrence Task Force

The First Responders Suicide Deterrence Task Force was established in 2020 by SB 7012. The purpose of the task force is to “make recommendations on how to reduce the incidence of suicide and attempted suicide among employed or retired first responders in the state.” The task force is directed to identify or make recommendations on developing training programs and materials that would better enable first responders to cope with personal life stressors and stress related to their profession and to foster an organizational culture that meets specific requirements. Findings and recommendations for training programs and materials to deter suicide among active and retired first responders will be reported to the Governor, the President of the Senate, and the Speaker of the House of Representatives by each July 1, beginning in 2021 and through 2023.

Program: Economic Self-Sufficiency

A. Program Overview

Florida Statutes require the state to manage a system of federal and state funded benefit programs per federal law. Section 414.025, Florida Statutes, states: “It is the intent of the Legislature that families in this state be strong and economically self-sufficient so as to require minimal involvement by an efficient government.” Subsection 20.19(4), Florida Statutes, created within the Florida Department of Children and Families (DCF) an Economic Self-Sufficiency (ESS) Program Office. The responsibilities of this office encompass all public assistance benefit eligibility services operated by DCF, as well as the Homelessness Program, Public Benefits Integrity and Refugee Assistance Programs.

1. Economic Self-Sufficiency Benefit Program

Automated Community Connection to Economic Self Sufficiency (ACCESS) is Florida’s service delivery model for the state’s public assistance benefit programs. ACCESS determines eligibility for the following public assistance programs: Supplemental Nutrition Assistance Program, known in Florida as Food Assistance; Temporary Assistance for Needy Families, known in Florida as Temporary Cash Assistance; and Medicaid. These services are provided by department staff with support from a broad statewide network of community partners.

Supplemental Nutrition Assistance Program (SNAP) or Food Assistance (FA) helps low-income families meet their household nutritional needs by supplementing their food purchasing power with a monthly benefit allotment based on the number of people in their household and how much money is left after countable expenses are subtracted from their income. A food assistance household consists of people living and purchasing their food together, and they must meet the program’s technical and financial requirements. Food Assistance benefits may only be used to purchase items such as fruits, vegetable, meat, dairy products, breads, cereals and other consumable nutritional household food items.

SNAP Employment and Training (E&T) is jointly administered by DCF and the Department of Economic Opportunity (DEO) and CareerSource Florida. Florida’s SNAP E&T program is designed to assist Able-Bodied Adults Without Dependents (ABAWDs) in gaining skills, training, and/or work experience that will increase their ability to obtain regular employment that leads to economic self-sufficiency. ABAWDs are required to meet federal work requirements to maintain food assistance eligibility. DCF determines ABAWD status and refers these recipients to DEO for engagement. SNAP E&T participants complete an initial orientation, assessment, and interview with DEO and are then assigned to an E&T activity. SNAP E&T activities include job search, education, vocational training, and work experience. Services are provided by local workforce development boards often referred to as Career Source centers across the state.

Temporary Cash Assistance (TCA) provides cash assistance to families with children under the age of 18, or through age 18 if the 18-year-old is enrolled in a secondary school (high school) full time. This program provides time-limited financial assistance and services intended to help families gain economic self-sufficiency. Families must meet the program’s technical, income, and asset requirements. Parents, children, and minor siblings who live together are considered a single TCA household. Pregnant women without other children in the home may receive TCA either in the ninth month of pregnancy or in their third trimester of pregnancy if they are unable to work. Children living with relatives other than their parents may be covered by this program based on their needs alone.

Non-Relative/Relative Caregiver provides monthly cash assistance to non-relatives/relatives who have custody of a non-related/related child under age 18, who has been adjudicated dependent by court order, a

home study has been completed and filed with the court, and the caregiver is unable to financially care for the child without the assistance. The monthly cash assistance amount for the non-relative caregiver is higher than a TCA grant for one child, but less than the amount paid for a child in the Guardianship Assistance Program (GAP) or foster care program.

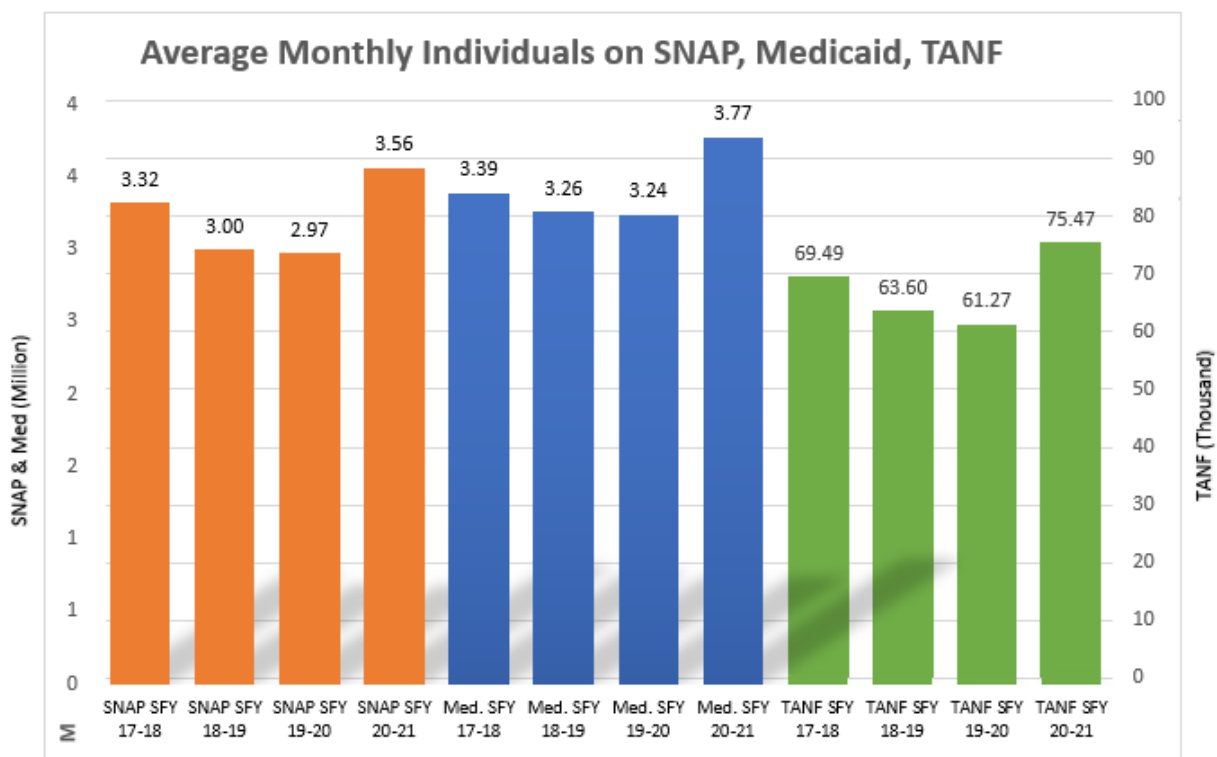
Medicaid provides medical coverage to low-income individuals and families. While eligibility for Medicaid is determined by ESS, services and payment for services are administered by the Agency for Health Care Administration (AHCA). ESS determines Medicaid eligibility for:

- Families with children,
- Children only,
- Pregnant women,
- Non-citizens with medical emergencies, and
- Aged and/or disabled individuals not currently receiving Supplemental Security Income (SSI).

Optional State Supplementation/Personal Needs Allowance (OSS/PNA) is a state-funded public assistance program that provides a monthly cash payment to indigent elderly or disabled individuals living in special non-institutional, residential living facilities, including assisted living facilities, adult family care homes, and mental health treatment facilities. To qualify for OSS/PNA, an individual must need assistance with the activities of daily living due to physical and/or mental conditions.

Electronic Benefits Transfer (EBT) is the benefit payment system for the FA and TCA programs. Customers access their benefits using a debit style EBT card. Each month benefits are deposited in the recipient's EBT account. A single card is used to access the account, but the TCA and FA benefits are separated within the account. Food assistance benefits cannot be withdrawn from the account as cash and may only be used for allowable food purchases at certified EBT point of sale sites. TCA benefits can be withdrawn as cash and must be used for children who have been deprived of support or care by one or both of their parents.

The Customer Call Center serves Florida families who are making general inquiries, seeking information or need to file their benefit applications. There are three customer call center sites located in Jacksonville, Miami, and Tampa; however, each site provides support statewide through voice and online live chat. An Interactive Voice Response (IVR) System and chatbot technology provides callers with the most recent information related to their case, enabling customers to have their questions answered through self-service.



Source: ESS Caseload Report / ESS Datamart

2. Homelessness Program:

The Homelessness Program coordinates the resources of various state agencies and programs to serve individuals or families who are homeless based on any of the criteria below found in 24 CFR 576.2.

- An individual/family who lacks or will imminently lose a regular and adequate nighttime residence.
- Unaccompanied youth under 25 years of age or families with children who do not otherwise qualify as homeless under this definition.
- Any individual/family who: (i) is fleeing domestic/dating violence, sexual assault, stalking; (ii) has no other residence; and (iii) lacks resources, support, or social networks to obtain permanent housing.

The Homelessness Program contracts with U.S. Department of Housing and Urban Development (HUD)-designated Continuum of Care (CoC) lead agencies to provide services that fall into the categories below:

Street Outreach reaches out to unsheltered homeless people; connects them with emergency shelter or housing and provides urgent, non-facility-based care to those unwilling or unable to access emergency shelter or housing.

Emergency Shelter serve homeless families and individuals in emergency shelters; renovates buildings to be used as emergency shelters and may cover costs of operations, rent, security, fuel, equipment, insurance, utilities, food, furnishings, supplies, or hotel/motel vouchers.

Homelessness Prevention funds may be used to provide housing relocation and stabilization services and

short/medium term rental assistance to prevent the need for emergency shelter.

Rapid Rehousing provides housing relocation and stabilization services, and short/medium term rental assistance to help a homeless individual or family into more permanent housing.

Number of Homeless from the annual Point-in-Time (PIT) count that takes place every January:

Statewide	2015	2016	2017	2018	2019	2020	2021*
	35,964	33,502	32,109	29,717	28,590	27,711	21,218

*The 2021 Point in Time Count numbers are not comparable to the previous years' counts. Typically, Continuums of Care (CoCs) conduct a PIT Count of both sheltered and unsheltered households. This year, due to COVID-19 related safety concerns, only six of the 27 CoCs conducted such a count; 10 CoCs did not conduct an unsheltered count; and others conducted a modified form of the unsheltered count. All CoCs conducted a sheltered PIT count. For those that did not conduct an unsheltered count, the CoCs reported zero unsheltered persons, resulting in an undercount of homelessness.

Emergency Solutions Grant-CV (ESGCV) funds were provided to the Department from the U.S. Department of Housing and Urban Development through the CARES Act to prevent, prepare for, and respond to coronavirus, among individuals and families who are homeless or receiving homeless assistance and to support additional homeless assistance and homelessness prevention activities to mitigate the impacts created by coronavirus. A total of \$85 million was disbursed amongst the local CoCs to provide rental assistance, support emergency shelters, and conduct street outreach programs to connect unsheltered individuals experiencing homelessness with local housing and other essential services.

3. Office of Public Benefits Integrity (OPBI)

The Office of Public Benefits Integrity (OPBI) is responsible for preventing fraud, investigating applicants suspected of fraud and recovering overpayment of benefits in food, cash, and Medicaid assistance. The Department of Financial Services (DFS), Division of Public Assistance Fraud (DPAF) is responsible for investigating and pursuing administrative or criminal prosecution of cases in which public assistance has been fraudulently obtained. The OPBI also pursues administrative disqualification on cases that DPAF cannot process and works with DCF's Inspector General's office to investigate cases of employee-related wrongdoing involving public assistance benefits. OPBI is also responsible for the Quality Management Team which monitors, analyzes and reports on the quality and accuracy of the ESS program's operation and delivery of services.

OPBI operates the following three programs:

Benefit Investigations is responsible for the detection and prevention of public assistance fraud. Investigative units receive referrals from various sources including ESS eligibility staff and the public. Staff investigate cases prior to approval of benefits and monitor active cases to ensure the proper receipt of benefits. When appropriate, disqualification hearings are conducted by the Office of Appeal Hearings for cases of confirmed fraud that are not pursued criminally, which impose penalty periods during which benefits cannot be received. Section 414.411, Florida Statutes, requires DPAF to investigate post-issuance suspected fraud. Benefit Investigations staff refer these potential criminal investigations as appropriate.

Benefit Recovery is responsible for identifying overpayments and recovering public assistance overpayments

due to a customer and/or agency error or fraud. Benefit Recovery staff receive referrals from a variety of sources, including ESS staff, DPAF, and the public. The Integrated Benefit Recovery System is the system of record for Benefit Recovery, and interfaces with the Florida Online Recipient Integrated Data Access (FLORIDA) system to implement recoupment of overpayments from active public assistance cases. Other methods of recovery include intercepting federal payments (Treasury Offset Program), collecting cash payments, intercepting lottery winnings, and receiving court-ordered payments through the Department of Corrections.

Quality Management is comprised of Quality Control and Quality Assurance monitoring activities: Supplemental Nutrition Assistance Program (SNAP) regulations at 7 CFR 275.10 require systematic method of measuring the validity of the SNAP caseload and a basis for determining state error rates. Additionally, SNAP regulations at 7 CFR 275.5 and Title IV, Chapter 20.19 (1) (b), Florida Statutes requires each state agency to conduct quality assurance activities and Management Evaluation (ME) Reviews. The ME review is a federally required systematic method of monitoring and assessing SNAP program operations as well as a basis to improve and strengthen program operations. There are four components of the ME review: SNAP eligibility, Benefit Recovery, Benefit Investigations, and Medicaid/TCA/ RAP. The purpose of the ME review is to fulfill federal and state requirements related to monitoring and technical assistance activities. The Quality Management (QM) team conducts state monitoring of all programs for accuracy and timeliness.

4. Refugee Services

Refugee Services programs promote economic self-sufficiency and successful integration into American society in the shortest time after arrival to the U.S. Financial and medical assistance is limited to individuals meeting specific criteria not eligible for Florida's TCA and Medicaid programs, but meeting the same income eligibility criteria, and is limited to a maximum of eight months. The refugee program is 100 percent federally funded through the U.S. Department of Health and Human Services, Office of Refugee Resettlement.

Refugee Services are established primarily through federal regulations and terms of federal grants. DCF enters into contractual agreements with various organizations, typically not for profit-community based organizations and local governments, to assist refugees in obtaining employment, learning English, and integrating into Florida's communities. Refugee Services employment providers placed 5,716 customers in employment in FFY20.

Refugee Services adult education providers enrolled 5,689 refugees in 11,468 classes in FFY20. In FFY20, those customers enrolled in English Language Instruction (ELI) earned 3,090 Literacy Completion Points (LCPs) allowing them to move to the next course level.

B. Selection of Priorities

The priorities for the Office of Economic Self Sufficiency are consistent with the Department's primary goals of:

1. Enhancing Program Effectiveness to Improve the Customers' Experience
2. Building a System of Accountability, Transparency, and Alignment
3. Enhancing Workforce Development Efforts to Improve Stability, Culture, and Continuous Learning

C. Addressing Our Priorities Over the Next Five Years

The ESS Program's current priorities were identified through strategic planning sessions with key stakeholders that included agency and non-agency staff, internal and external customer groups fully supporting DCF's mission, and the Secretary's priorities.

ESS program initiatives consist of the following:

Workforce Development/Stability

The ESS Program Office will be implementing initiatives that invest in establishing a culture of employee engagement and continuous learning which in turn supports professional development and staff retention. To achieve the goal ESS will ensure employee performance metrics align with production and quality. Additionally, the program is committed to enhancing trainings to develop engaged employees and who will become effective leaders.

Hope Florida – A Pathway to Prosperity

- Continue to expand upon and integrate Hope Florida - A Pathway to Prosperity across all DCF programs by establishing a unified pathway to assist clients throughout DCF's programs and identifying resources to support this approach. DCF's Hope Florida - A Pathway to Prosperity is a client-centered prevention model originally created to assist public benefit customers in establishing goals and identifying barriers towards the achievement of self-sufficiency. This process involves developing relationships with customers, listening to them, and accompanying them on their journey as they work to navigate the vast network of resources available at the state and local level. DCF continues to expand the model with a systematic and streamlined approach across the agency to serve a wider population of customers. The program now serves public benefit customers statewide, children aging out of foster care, pregnant mothers contending with substance abuse disorders, parents who need assistance and families in need of services by integrating A Pathway to Prosperity with the Office of Child Welfare, Office of Substance Abuse and Mental Health, and the Office of Adult Protective Services. A Pathway to Prosperity initiative offers dedicated team members an opportunity to team-up with customers to provide an assessment to identify client goals and barriers, care coordination, which includes warm referrals to local community-based providers, and follow-up services. The program works to effectively assist customers in navigating the state's vast network of non-profits, government programs, faith-based providers, and private-sector partners while building social capital to achieve a resilient, economically independent family unit. Within the first year, over 10,000 customers have volunteered to participate. Statewide, the top barriers to economic self-sufficiency that our customers have identified are housing, employment, basic needs assistance (includes hygiene items, food, clothing, etc.), education, bill payment assistance and childcare. As DCF's Care Navigators continue to build out the rolodex of local community providers of service, early outcomes show that over 90% of customers in Hope Florida - A Pathway to Prosperity were referred to a service to overcome a barrier within 30 days.

Best Practices to Gain Capacity

Multi-region work groups will employ project management techniques to create this process. Work groups from different teams will work toward standardizing processes to gain efficiencies and capacity to reinvest in A Pathway to Prosperity and to enhance the service provided to customers. ESS will target efforts toward automation and system enhancements to achieve resource capacity for improving customer experience. To better serve Floridians, ESS is embarking on an enterprise technology modernization effort that will focus on individuals and families who need a variety of services to become economically self-sufficient. This approach represents the modernization of the current eligibility system, known as ACCESS Florida. This includes the FLORIDA legacy mainframe system and unites other program areas through technology and data sharing to achieve more favorable outcomes for Floridians.

Accomplishments:

- **Integrity Action Plan:** Accomplished items on the Integrity Action Plan that identify opportunities to safeguard the benefit system from fraud. Working to align processes, developed a team that identifies trends and

research opportunities to safeguard the public benefit system from fraud, waste and abuse.

- **Pandemic EBT (P-EBT) Issued Statewide:** The ESS program worked in collaboration with the Department of Agriculture and Consumer Services to issue 2.2 million Florida students \$687 million in Pandemic-EBT (P-EBT) benefits for the 2019-2020 school year, and 1.2 million Florida students \$763 million in Pandemic-EBT benefits for the 2020-2021 school year. P-EBT is a supplemental benefit for households with children who have temporarily lost access to free or reduced-price school meals due to pandemic-related school closures.
- **COVID-19 Responsiveness:** The ESS program implemented the following flexibilities during the pandemic:
 - Increased the monthly SNAP benefit allotment to the maximum amount for March 2020 – July 2021.
 - Partnered with the Department of Economic Opportunity to apply good cause statewide, waiving the work requirement for March 2020 - May 2021 for SNAP and TANF customers required to complete a work requirement as a condition to receive benefits.
 - Implemented recertification extensions for Floridians on SNAP, Medicaid and TANF. This policy change allowed individuals scheduled to recertify in April, May, June, July and August an extension of benefits for six months. This encouraged social distancing and ensures the continuity of benefits during this public health emergency.
 - Partnered with the Agency for Healthcare Administration (AHCA) to extend continuity of Medicaid benefits to ensure recipients will not lose Medicaid eligibility during the state of emergency by maintaining Medicaid eligibility for current recipients through the end of the state of emergency.
 - Partnered with the AHCA to extend the timeframe for individuals to submit any necessary Medicaid paperwork to 120 days from the date the application was received, beginning with applications received in February 2020.
 - ESS worked with the U.S. Department of Agriculture’s Food and Nutrition Service in March 2020 to launch Florida’s online purchasing program (OPP) in April 2020, which allows Florida families receiving food assistance and/or cash assistance benefits to purchase groceries online at participating retailers with their EBT card. Walmart and Amazon were the first two retailers to offer online shopping to SNAP and TANF recipients in April of 2020, followed by Aldi (December 2020), BJ’s Wholesale Club (March 2021) and Publix (May 2021), and additional retailers may participate in Florida’s OPP. Submitted a joint state plan with the Florida Department of Agriculture and Consumer Services for approval to initiate Pandemic-EBT payments to families that lost the benefit of free and reduced priced school meals for their children when schools were closed.

D. Justification of Revised or Proposed New Programs and/or Services

No new programs and/or services

E. Justification of Final Projection for each Outcome: None

F. Potential Policy Changes Affecting the Budget Request: None

G. Changes Which Would Require Legislative Action

None at this time.

H. Task Forces and Studies in Progress

Council on Homelessness

As required by Florida Statute and in conjunction with Florida’s 27 homelessness Continuums of Care, the Florida Council on Homelessness meets routinely and issues an annual report pursuant to s.420.622, F.S..

Local Refugee Task Forces

Refugee Services organizes Refugee Task Forces consist of community-based agencies, ethnic organizations, contracted providers, and federal, state, and local government agencies in communities with a significant refugee population. The Refugee Task Force meetings are accessible to the public. The focus of such meetings includes the assessment of refugee needs, distribution of state and federal policies, the creation of practical solutions to current problems, and facilitating coordination among referrals and service providers.

LRPP Exhibit II - Performance Measures and Standards

Department: Department of Children and Families Department No.: 60

Program: Administration	60900101
Service/Budget Entity: Executive Direction and Support Services	60900101

NOTE: Approved primary service outcomes must be listed first.

Approved Performance Measures for FY 2020-21 (Words)	Approved Prior Year Standard FY 2019-20 (Numbers)	Prior Year Actual FY 2019-20 (Numbers)	Approved Standards for FY 2020-21 (Numbers)	Requested FY 2021-22 Standard (Numbers)
Administrative cost as a percent of total agency costs ED (M0144)	0.33	0.29	0.33	0.33
Administrative cost as a percent of total agency costs Admin (M0147)	1.23	0.82	1.23	1.23
Administrative cost as a percent of total agency costs (M0363)	1.6	0.64	1.6	1.6

Department: Department of Children and Families Department No.: 60

Program: Information Technology	60900200
Service/Budget Entity: Information Technology	60900202

NOTE: Approved primary service outcomes must be listed first.

Approved Performance Measures for FY 2020-21 (Words)	Approved Prior Year Standard FY 2019-20 (Numbers)	Prior Year Actual FY 2019-20 (Numbers)	Approved Standards for FY 2020-21 (Numbers)	Requested FY 2021-22 Standard (Numbers)
Information technology cost as a percent of total agency costs (M0145)	2.30	1.75	2.30	2.30

Department: Department of Children and Families
Department No.: 60

Program: Family Safety and Preservation Services	60910310
Service/Budget Entity: Family Safety and Preservation Services	60910310

NOTE: Approved primary service outcomes must be listed first.

Approved Performance Measures for FY 2021-22 (Words)	Approved Prior Year Standard FY 2020-21 (Numbers)	Prior Year Actual FY 2020-21 (Numbers)	Approved Standards for FY 2021-22 (Numbers)	Requested FY 2022-23 Standard (Numbers)
Percent of adult victims seen within the first 24 hours. (M04017a)	97	97.4	97	97
Percent of adult and child domestic violence victims in shelter more than 72 hours having a plan for family safety and security when they leave shelter. (M0126)	97	99.6	97	97
Number of investigations (M0127)	41,000	44,240	41,000	41,000
Number of people receiving protective supervision, and protective intervention services. (M0414)	5,600	5,240	5,600	5,600
Percent of adult investigations from an entry cohort completed within 60 days. (M04016)	98	99.55	98	98
Percent of protective supervision cases in which no report alleging abuse, neglect, or exploitation is received while the case is open (from beginning of protective supervision for a maximum of 1 year) (M0124)	100	99.38	100	100
The rate of abuse/neglect per 1000 for elderly persons. (M0757)	1.5	0.08	1.5	1.5
The rate of abuse/neglect per 1000 for adults with disabilities (M0735)	1.5	0.09	1.5	1.5
Number of facilities and homes licensed (M0123)	6,868	7,572	6868	6,868
Number of instructor hours provided to childcare provider staff. (M0384)	63,019	237,837	63,019	63,019
Percent of licensed childcare facilities inspected in accordance with program standards. (M04015)	95	99.7	95	95
Percent of licensed childcare homes inspected in accordance with program standards (M05175)	95	99.86	95	95
Calls answered (M0070)	430,000	381,196	430,000	430,000
Percent of calls made to the Florida Abuse Hotline that were abandoned (M0069)	3	15.8	3	3
Number of calls to the hotline (M0300)	450,000	452,735	450,000	450,000
Per capita verified child abuse rate/1000 (M0736)	14	6.52	14	14

Approved Performance Measures for FY 2021-22 (Words)	Approved Prior Year Standard FY 2020-21 (Numbers)	Prior Year Actual FY 2020-21 (Numbers)	Approved Standards for FY 2021-22 (Numbers)	Requested FY 2022-23 Standard (Numbers)
Percent of children in families who complete the Healthy Families Florida program who are not subjects of reports with verified or indicated maltreatment within 12 months after program completion. (M0393)	95	99.1	95	95
Number of children in families served (M0134)	122,937	Not Available	122,937	122,937
Number of families served in Healthy Families (M0294)	12,922	8,779	12,922	12,922
Percent of adults who had an identified substance abuse need as a result of a child welfare Family Assessment who received substance abuse services (M0738)	45	Not Available	45	45
Number of finalized adoptions (M0215)	3,514	4,548	3,514	3,514
Percent of victims of verified maltreatment who were not subjects of subsequent reports with verified maltreatment within 6 months. (M0100a)	94.6	96.5	94.6	94.6
Number of children in out-of-home care (M0297)	20,771	22,553	20,771	20,771
Number of children receiving in-home services (M0774)		10,645		
Percent of children reunified who were reunified within 12 months of the latest removal. (M0389)	65	37.2	65	65
Percent adoptions finalized within 24 months of the latest removal. (M0391)	40	51	40	40
Percent of foster children who were not subjects of reports of verified maltreatment. (M0106a)	99.9	Not Available	99.9	99.9
Percent of children in out-of-home care 24 months or longer on July 1 who achieved permanency prior to their 18th birthday and by June 30. (M0671)	33.6	48	33.6	33.6
Number of investigations (M0295)	180,000	164,199	180,000	180,000
The percentage of children in out-of-home care at least 8 days but less than 12 months who had two or fewer placement settings. (M05180)	87	Not Available	87	87
Percent of child investigations from an entry cohort completed within 60 days. (M0394)	100	98.6	100	100
Percent of children removed within 12 months of a prior reunification. (M05178)	9.9	10	9.9	9.9
Percent of investigations reviewed by supervisors with 72 hours of report submission (M0079)	98	97	98	98
Percent of child investigations commenced within 24 hours. (M0368)	100	99.5	100	100
Administrative cost as a percent of total program costs (M0136)	3.05	1.62	3.05	3.05
Administrative cost as a percent of total agency costs (M0426)	1.21	0.7	1.21	1.21

Program: Mental Health Services		60910506		
Service/Budget Entity: Mental Health Services		60910506		
Approved Performance Measures for FY 2021-22 (Words)	Approved Prior Year Standard FY 2020-21 (Numbers)	Prior Year Actual FY 2020-21 (Numbers)	Approved Standards for FY 2021-22 (Numbers)	Requested FY 2022-23 Standard (Numbers)
Average annual days worked for pay for adults with severe and persistent mental illness (M0003)	40	76	40	40
Number of adults with a serious and persistent mental illness in the community served (M0016)	136,480	132,517	136,480	136,480
Number of adults in mental health crisis served (M0017)	30,404	34,788	30,404	30,404
Number of adults with forensic involvement served (M0018)	3,328	5,255	3,328	3,328
Percent of adults with serious mental illness who are competitively employed. (M0703)	24	32	24	24
Percent of adults with serious mental illness readmitted to a civil state hospital within 180 days of discharge (M0709)	8	2	8	8
Percent of adults with severe and persistent mental illnesses who live in stable housing environment. (M0742)	90	86	90	90
Percent of adults in forensic involvement who live in stable housing environment. (M0743)	67	56	67	67
Percent of adults in mental health crisis who live in stable housing environment. (M0744)	86	78	86	86
Percent of adults with serious mental illness readmitted to a forensic state treatment facility within 180 days of discharge (M0777)	8	2	8	8
Percent of school days seriously emotionally disturbed (SED) children attended. (M0012)	86	94	86	86
Percent of children with mental illness restored to competency and recommended to proceed with a judicial hearing (M0019)	75	99	75	75
Percent of children with mental retardation or autism restored to competency and recommended to proceed with a judicial hearing (M0020)	50	89	50	50
Number of children served who are incompetent to proceed (M0030)	340	543	340	340
Number of SED children to be served (M0031)	46,000	17,740	46,000	46,000
Number of ED children to be served (M0032)	27,000	6,669	27,000	27,000

Approved Performance Measures for FY 2021-22 (Words)	Approved Prior Year Standard FY 2020-21 (Numbers)	Prior Year Actual FY 2020-21 (Numbers)	Approved Standards for FY 2021-22 (Numbers)	Requested FY 2022-23 Standard (Numbers)
Number of at-risk children to be served (M0033)	4,330	2,743	4,330	4,330
Percent of children with emotional disturbances who improve their level of functioning (M0377)	64	29	64	64
Percent of children with serious emotional disturbances who improve their level of functioning. (M0378)	65	27	65	65
Percent of children with emotional disturbance (ED) who live in stable housing environment (M0778)	95	97	95	95
Percent of children with serious emotional disturbance (SED) who live in stable housing environment (M0779)	93	95	93	93
Percent of children at risk of emotional disturbance who live in stable housing environment (M0780)	96	92	96	96
Average number of days to restore competency for adults in forensic commitment. (M0015)	125	117	125	125
Number of people on forensic admission waiting list over 15 days. (M0361)	0	1512	0	0
Number of people in civil commitment, per Ch. 394, F.S., served (M0372)	1606	1,696	1606	1606
Number of adults in forensic commitment, per Ch. 916, F.S., served (M0373)	2320	3,311	2320	2320
Percent of adults in civil commitment, per Ch. 394, F.S., who show an improvement in functional level. (M05050)	67	63	67	67
Percent of adults in forensic commitment, per Chapter 916, Part II, who are Not Guilty by Reason of Insanity, who show an improvement in functional level. (M05051)	40	56	40	40
Number of sexual predators assessed (M0283)	2879	3,676	2879	2879
Number of sexual predators served (detention and treatment). (M0379)	480	599	480	480
Annual number of harmful events per 100 residents in sexually violent predator commitment. (M0380)	3	0	3	3
Percent of assessments completed by the SVP program within 180 days of receipt of referral. (M05305)	85	0	85	85
Number of residents receiving Mental Health treatment (M06001)	169	247	169	169
Administrative cost as a percent of total program costs (M0135)	4.87	5	4.87	4.87

Department: Department of Children and Families **Department No.: 60**

Program: Substance Abuse	60910604
Service/Budget Entity: Substance Abuse	60910604

NOTE: Approved primary service outcomes must be listed first.

Approved Performance Measures for FY 2021-22 (Words)	Approved Prior Year Standard FY 2020-21 (Numbers)	Prior Year Actual FY 2020-21 (Numbers)	Approved Standards for FY 2021-22 (Numbers)	Requested FY 2022-23 Standard (Numbers)
Number of adults served (M0063)	115,000	43,404	115,000	115,000
Percentage change in clients who are employed from admission to discharge. (M0753)	10	7	10	10
Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge. (M0754)	14.6	-4	14.6	14.6
Percent of adults who successfully complete substance abuse treatment services. (M0755)	51	53	51	51
Percent of adults with substance abuse who live in a stable housing environment at the time of discharge. (M0756)	94	77	94	94
Number of children with substance-abuse problems served (M0052)	50,000	7198	50,000	50,000
Number of at-risk children served in targeted prevention (M0055)	4,500	9,082	4,500	4,500
Number of at-risk children served in prevention services. (M0382)	150,000	192,598	150,000	150,000
Percent of children who successfully complete substance abuse treatment services. (M0725)	48	58	48	48
Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to discharge. (M0751)	19.6	-13	19.6	19.6
Percent of children with substance abuse who live in a stable housing environment at the time of discharge. (M0752)	93	94	93	93
Alcohol usage rate per 1,000 in grades 6-12. (M05092a)	295	138	295	295
Marijuana usage rate per 1,000 in grades 6-12. (M05092m)	110	92	110	110
Administrative cost as a percent of total program costs (M0137)	5.0	5.0	5.0	5.0

Department: Department of Children and Families	Department No.:
60	

Program: Economic Self Sufficiency Program		60910708
Service/Budget Entity: Economic Self Sufficiency Program		60910708

NOTE: Approved primary service outcomes must be listed first.

Approved Performance Measures for FY 2021-22 (Words)	Approved Prior Year Standard FY 2020-21 (Numbers)	Prior Year Actual FY 2020-21 (Numbers)	Approved Standards for FY 2021-22 (Numbers)	Requested FY 2022-23 Standard (Numbers)
Number of cash assistance applications (M0305)	296,826	265,959	296,826	296,826
Number of cash assistance participants referred to the Regional Workforce Development Boards (M0119)	70,394	22,163	70,394	70,394
Percentage of food assistance applications processed within 7 days (expedited) (M0733)	95	92	95	95
Percentage of food assistance applications processed within 30 days (M0219)	95	97	95	95
Percent of food stamp benefits determined accurately (M0107)	94	Due to the COVID-19 a blanket waiver was provided to states to suspend quality reviews. No active cases were reviewed October 2020 thru June 2021.	94	94
Total number of applications processed (M0106)	5,000,000	12,832,326	5,000,000	5,000,000
Percent of all applications for assistance processed within time standards. (M0105)	96	97	96	96
Percent of All Family TANF customers participating in work or work-related activities (M05088)	21.9	1.7	21.9	21.9
Percent of 2-Parent TANF customers participating in work or work-related activities (2-Parent TANF Participation Rate). (M0678)	34.2	0.89	34.2	34.2

Approved Performance Measures for FY 2021-22 (Words)	Approved Prior Year Standard FY 2020-21 (Numbers)	Prior Year Actual FY 2020-21 (Numbers)	Approved Standards for FY 2021-22 (Numbers)	Requested FY 2022-23 Standard (Numbers)
Percent of welfare transition sanctions referred by the regional work force boards executed within 10 days (M0223)	98	100	98	98
Number of beds per day available for homeless clients (M0304)	1,500	45,338	1,500	1,500
Percent receiving a diversion payment / service that remain off cash assistance for 12 months (M05087)	80	50	80	80
Dollars collected through Benefit Recovery (M0111)	13,500,000	39,170,486	13,500,000	13,500,000
Percent of suspected fraud cases referred that result in front-end fraud prevention savings (M0110)	76.5	84	76.5	76.5
Number of fraud prevention investigations completed (M0112)	22,000	12,060	22,000	22,000
Number of refugee cases closed (M0104)	7,600	4,614	7,600	7,600
Percent of refugee assistance cases accurately closed at 8 months or less (M0103)	99.2	94	99.2	99.2
Number of refugee cases (M0362)	37,350	33,172	37,350	37,350
Percent of unemployed active caseload placed in employment. (M04040)	40	36	40	40
Administrative cost as a percent of total program costs (M0138)	7.93	5.55	7.93	7.93

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Adult Protection

Service/Budget Entity: 60910310 Family Safety and Preservation Services

Measure: (M0124) Percent of protective supervision cases in which no report alleging abuse, neglect or exploitation is received while the case is open (from beginning of protective supervision for a maximum of 1 year)

Action:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input checked="" type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
100	99.32	.68 Under	(.68%)

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify) – |

Explanation:

Current standard allows for no variance due to chance or external factors.

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: A large portion of investigations worked by APS are for Self-Neglect. When subjects have capacity, it is often difficult to change the behaviors that lead to subsequent verified reports.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|--|--|
| <input checked="" type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Recommendations: Continue training and quality assurance efforts centered on Protective Supervision. A modification of this target to 99.5% or 99% would be in order.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Adult Protection

Service/Budget Entity: 60910310 Family Safety and Preservation Services

Measure: (M0414) Number of people receiving protective supervision, and protective intervention services.

Action:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input checked="" type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
5600	5240	1,230 Under	(1,230)

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input checked="" type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | |
| <input type="checkbox"/> Other (Identify) | |

Explanation: With an increasing focus on prevention of re-abuse, the necessity for Protective Supervision should logically decrease.

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation: COVID-19 markedly drove down adult intakes; therefore, the corresponding number of resultant services cases has fallen.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input type="checkbox"/> Other (Identify) |

Recommendations: There should not be a target for a measure that is driven by work coming in through the Hotline, which is subject to many external factors, or the target should be based on a fixed percentage of intakes coming in each year.... i.e., 5 – 7 % of intakes received.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Florida Abuse Hotline

Service/Budget Entity: 60910310 Family Safety and Preservation Services

Measure: M0069 Percent of Calls made to the Florida Abuse Hotline that were abandoned.

Action:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input checked="" type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
3%	13.9%	+10.9	+10.9%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|---|---|
| <input checked="" type="checkbox"/> Personnel Factors | <input checked="" type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input checked="" type="checkbox"/> Level of Training |
| <input checked="" type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) – Not |

Explanation: In July 2013, the Hotline adopted the Florida Family Safety Decision Making Methodology, which increased the average assessment time performed by the Hotline Counselor. The Hotline has experienced an increase in turnover rate over the previous three FYs. In FY 2018-19 the turnover rate was 39.44%, the turnover during FY 2019-20 was 41.90%, and the turnover rate increased to 58.89% during FY 2020-21.

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input checked="" type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: Although the pandemic continued to impact Florida, the total contacts received at the Hotline during FY 2020-21 were similar to the volume received pre-pandemic. The total contacts number of contacts for the past three fiscal years are: FY 2018-19 = 566,140; FY 2019-20 = 534,781; and FY 2020-21 = 545,818.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Training | <input checked="" type="checkbox"/> Technology |
| <input checked="" type="checkbox"/> Personnel | <input type="checkbox"/> Other (Identify) |

Recommendations: The Hotline has focused on expanding the level of hiring to address the increased turnover rate.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families
Program: Child Protection and Permanency
Service/Budget Entity: 60910310 Family Safety and Preservation Services
Measure: M0294 Number of families served in Healthy Families

Action:

- | | |
|---|---|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input checked="" type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
12,922	9,911	-3,011	-23.3%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: Funding has remained consistent since SFY 2016-17, the funding trend has remained steady, the measure for future should be adjusted as the costs associated with the program have increased, and while the service delivery areas have expanded. The numbers of families served has increased due to the Mental and Behavioral Health Enhancement. The enhancement includes 156 families.

External Factors (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input checked="" type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: The 2015-16 funding level was \$26,395,763.00, SFY 2016-17 funding increased to \$28,380,263.00. SFY 2016-17 saw the introduction of the Healthy Families Enhancement, this enhancement includes Mental Health and Behavioral Health Positions. Funding has remained consistent since the SFY 2016-17 through the remainder of the contract term 2021-22.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) (Fiscal) |

Recommendations: Adjust the Approved Standard to 5,879 families to correspond with the current contract funding and terms.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families
Program: Child Protection and Permanency
Service/Budget Entity: 60910310 Family Safety and Preservation Services
Measure: M0297 Number of children in out-of-home care

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
20,771	22,381	+1,610	+7.75%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: The number of unsafe children served by Florida’s child welfare system saw a negligible decrease in FY 2020-21 from the 22,467 children in out-of-home care in FY 2019-20. While the number is decreasing due to the decreased calls to the Hotline beginning in FY 2018-19, coupled with lower removal rates per 100 alleged victims, it is also a positive move since the child population has increased 4.85% since 2010 (census.gov, v2020) which also impacts the calls to the Hotline. Child exits from care have decreased at the same rate as the decrease in children entering care, which has led to very little change in the number of children in out-of-home care.

External Factors (check all that apply):

- | | |
|--|--|
| <input checked="" type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: Increases in the number of children determined to be unsafe have created a need for enhanced and expanded safety management services as well as staff that are able to address the immediate safety needs of this population. Continuing to expand and strengthen the service array available to both child protective investigators and case managers allows for meaningful, appropriate service intervention, and thus, reducing the amount of children being removed from their homes. Due to increased spending on the needs of children in out-of-home care and the families from which they were removed in previous years, there has been a reduction in funding for front end child welfare services.

During the pandemic in FY 2020-21, court closures had a negative impact on permanency, which contributed to fewer exits from care. The pandemic also made parent visitation more difficult, which delayed permanency.

Management Efforts to Address Differences/Problems (check all that apply):

- Training
- Personnel

- Technology
- Other (Identify)

Explanation: Exits from care are included as a metric discussed with regions and CBCs in their financial viability plans. These plans include actions that will be performed to impact permanency. The Department has also set a target of 65% of initial placements into out-of-home care being in kinship care. Research has shown that initial placement in kinship care has a positive impact on permanency.

Recommendations: Implementation of a Kinship Navigator Program within each CBC to support kinship placements to prevent children from entering out-of-home care. In addition, the Department is seeking to implement evidence-based services to prevent children from entering out-of-home care, through the Family First Prevention Services Act.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Child Protection and Permanency

Service/Budget Entity: 60910310 Family Safety and Preservation Services

Measure: M0389 Percent of children reunified who were reunified within 12 months of the latest removal

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
65%	33.44%	-31.56%	-31.56%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation: As the number of children entering out-of-home care declines so too does the percentage of children achieving permanency within 12 months of their entry to out-of-care. This is due to a decline in Hotline intakes, total child abuse investigations, and the use of alternative services that are designed to prevent the removal of a child. As the number of entries to out-of-home care decline the number of children that are in out-of-home care for reasons that are simpler to manage and resolve also declines and this tends to adversely impacts both the numerator and denominator for this measure.

During the pandemic in FY 2020-21, court closures had a negative impact on permanency, which contributed to fewer exits from care. The pandemic also made parent visitation more difficult, which delayed permanency.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: Exits from care are included as a metric discussed with regions and CBCs in their financial viability plans. These plans include actions that will be performed to impact permanency. The Department has also set a target of 65% of initial placements into out-of-home care being in kinship care. Research has shown that initial placement in kinship care has a positive impact on permanency.

Recommendations: Implementation of a Kinship Navigator Program within each CBC to support kinship placements to prevent children from entering out-of-home care. In addition, the Department is seeking to implement evidence-based services to prevent children from entering out-of-home care, through the Family First Prevention Services Act.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Child Protection and Permanency

Service/Budget Entity: 60910310 Family Safety and Preservation Services _

Measure: M0106a Percent of foster children who were not subjects of reports of verified maltreatment

Action:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input checked="" type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input checked="" type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
99.9%			

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: In 2014, the federal standard was changed to 8.5 incidents of abuse per 100,000 bed days in out-of-home care. The fixed federal standard has since been eliminated.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: This measure has been replaced with the Child Welfare Dashboard for Rate of abuse per 100,000 bed days for children in out-of-home care. For children in care between 7/1/2020 and 6/30/2021, the rate was 6.79 incidents of abuse per 100,000 bed days.

Recommendations: This measure is obsolete and should be replaced with the Rate of abuse per 100,000 bed days for children in out-of-home care and the Approved Standard should be adjusted to the statewide target/federal standard of 8.5 incidents of abuse per 100,000 bed days for children in out-of-home care.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families
Program: Child Protection and Permanency
Service/Budget Entity: 60910310 Family Safety and Preservation Services
Measure: M0295 Number of Investigations

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
180,000	167,805	12,195	-6.78%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: Prior to the issuance of emergency orders in March 2020 related to the pandemic, both Hotline intakes and the number of active child abuse investigations had been declining. Both Hotline intakes and active child abuse investigations declined rapidly upon the issuance of emergency orders related to the pandemic as child visibility within the community declined. The percentage of intakes screened in at the Hotline continues to decline over time, which is jointly contributed by the declining number of calls to the Hotline and the level of assessment completed at the Hotline to determine if an allegation meets the statutory criteria for acceptance.

External Factors (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation:

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: The number of calls received at the Hotline, along with the percentage of intakes being screened in for investigation continues to decline over time

Recommendations: This measure should be deleted in its entirety as the number of investigations is contingent upon factors completely beyond the agency's control.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Child Protection and Permanency

Service/Budget Entity: 60910310 Family Safety and Preservation Services

Measure: M05180 The percentage of children in out-of-home care at least 8 days but less than 12 months who had two or fewer placement settings

Action:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input checked="" type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input checked="" type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
87%			

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input checked="" type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: DCF is currently implementing significant changes to practice including improved assessment of family dynamics, safety planning and treatment matching. Training for case managers is undergoing significant revisions.

External Factors (check all that apply):

- | | |
|--|---|
| <input checked="" type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: DCF has established as a priority of effort the increase of quality family foster homes. As the numbers of homes increase, offering more options in placements, the number of placements per child should go down.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: This measure has been replaced with the Child Welfare Dashboard Placement Moves per 1,000 Bed Days in Out-of-Home Care. For children in care between 7/1/2020 and 6/30/2021, the rate was 3.87 moves per 1,000 Bed Days in Out-of-Home Care.

Recommendations: This measure is obsolete and should be replaced with the measure "Placement Moves per 1,000 Bed Days in Out-of-Home Care" and the Approved Standard changed to the statewide target/federal standard of 4.12 placement moves per 1,000 Bed Days in Out-of-Home Care.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Child Protection and Permanency

Service/Budget Entity: 60910310 Family Safety and Preservation Services

Measure: M0394 Percent of child investigations from an entry cohort completed within 60 days.

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input checked="" type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
100%	98.78%	-1.22%	-1.22%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | |
| <input checked="" type="checkbox"/> Other (Identify) | |

Explanation: There are a number of cases that should appropriately remain open beyond 60 days – such as reports involving child deaths wherein a final Medical Examiner’s report containing toxicology and other laboratory results critical to determining the appropriate finding in the report (i.e., verified, some indication, or no findings of abuse or neglect) and are typically not available within 60 days. In addition, due to a lag in time required to allow all investigations to be closed, the “locked” data is only available for the period of 7/1/2020 – 5/30/2021 at this time.

External Factors (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Recommendations: Due to legitimate circumstances beyond the Department’s control, a more appropriate standard would be 99%.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Child Protection and Permanency

Service/Budget Entity: 60910310 Family Safety and Preservation Services

Measure: M05178 The percentage of children removed within 12 months of a prior reunification

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
9.9%	10.73%	-0.83	<1%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: As the number of children that are the subject of an investigation and the number of children that enter out-of-home care decline the proportion of children that enter out-of-home care are entering for more serious and complex reasons. This is the population that is ultimately exits from out-of-home care for evaluation for reentry within 12 months of reunification. As a result, the increasing seriousness and complexity within the original cases can have an adverse impact on reentry percentages.

External Factors (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation:

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|--|---|
| <input checked="" type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input type="checkbox"/> Other (Identify) |

Explanation: Florida's practice model is not being followed to its fidelity for conditions for return. This is an area child welfare professionals lack expertise in statewide.

Recommendations: Ongoing collaboration with Strong Foundations as they develop an intensive training on conditions for return to help improve this outcome.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Child Protection and Permanency

Service/Budget Entity: 60910310 Family Safety and Preservation Services

Measure: M0079 Percent of investigations reviewed by supervisors with 72 hours of report submission

Action:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input checked="" type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
98%	97.49%	-0.51%	-0.51%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify) |

Explanation: Effective 12/31/2014 Florida Administrative Code 65C-29 (Protective Investigations) was amended to change the 72-hour supervisory review requirement to reflect Florida's new safety methodology/practice standard for the review to take place within five days which is reflected in the above actual performance.

External Factors (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation:

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify) |

Recommendations: This measure should be deleted in its entirety or be amended to reflect the new timeframe measure of five days.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families
Program: Child Protection and Permanency
Service/Budget Entity: 60910310 Family Safety and Preservation Services _
Measure: M0368 Percent of investigations commenced within 24 hours.

Action:

- Performance Assessment of Outcome Measure Revision of Measure
- Performance Assessment of Output Measure Deletion of Measure
- Adjustment of GAA Performance Standards

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
100%	99.53%	-0.47%	<1%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- Personnel Factors Staff Capacity
- Competing Priorities Level of Training
- Previous Estimate Incorrect
- Other (Identify)

Explanation: A multitude of factors affect performance results with this standard. A legitimate delay occurs when law enforcement is conducting a concurrent criminal investigation and requests the child protective investigator to delay commencement until law enforcement personnel has had the opportunity to conduct all subject interviews. More typically, problematic delays occur when investigators assigned to work weekend “on-call” shifts receive an unusually high number of reports to investigate and the reports are not re-assigned timely, or case specific circumstances (e.g., five children have to be sheltered and placed out of county and CPI has to attend judicial hearing, etc.) precludes a second or additional reports from being commenced timely.

External Factors (check all that apply):

- Resources Unavailable Technological Problems
- Legal/Legislative Change Natural Disaster
- Target Population Change Other (Identify)
- This Program/Service Cannot Fix the Problem
- Current Laws Are Working Against the Agency Mission

Explanation:

Management Efforts to Address Differences/Problems (check all that apply):

- Training Technology
- Personnel Other (Identify)

Recommendations: Due to legitimate circumstances beyond the Department’s control, a more appropriate standard would be 99%.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0016 - Number of adults with a serious and persistent mental illness in the community served

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
	136,480	132,517	

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. Over the last three fiscal years, the number of adults with SPMI in the community served has met the approved standard for this performance measure. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the actual number of adults with SPMI served in the community during FY 2020-21 is higher than reported above.

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0742 - Percent of adults with severe and persistent mental illnesses who live in stable housing environment

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
90%	86%	4% (Under)	- 4.4%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. Over the last five fiscal years (except for FY 18-19), the percent of adults with SPMI who live in stable housing has met the approved standard for this performance measure. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the percent of adults with SPMI who live in stable housing during FY 2020-21 is higher than reported above.

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0743 - Percent of adults in forensic involvement who live in stable housing environment

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
67%	56%	11% (Under)	- 16.4%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. In FY 2019-20, the percent of adults in forensic involvement who live in stable housing environment met the approved standard for this performance measure. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the percent of adults in forensic involvement who live in stable housing during FY 2020-21 is higher than reported above.

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0744 - Percent of adults in mental health crisis who live in stable housing environment

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
86%	78%	8% (Under)	- 9.3%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. Over the last five fiscal years, the percent of adults in mental health crisis who live in stable housing environment has either met the approved standard for this performance measure except for FY 2018-19 which differed by 1-2 percentage points. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that percent of adults in mental health crisis who live in stable housing during FY 2020-21 is higher than reported above.

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0031 - Number of SED children to be served

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
	46,000	17,740	

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. Approximately 50 percent of the variance is attributed to consistent gaps between actual performance reported and the approved standards. The Department has never met the approved standard for this measure. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the actual number of SED children served during FY 2020-21 is higher than reported above.

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic. The Department will review the approved standard for this performance measure.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0032 - Number of ED children to be served

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
27,000	6,669	20,331 (Under)	-75.3%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the actual number of ED children served during FY 2020-21 is higher than reported above.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0033 - Number of at-risk children to be served

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
4,330	2,743	1,587 (Under)	-36.7%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. Over the past three fiscal years, with the exception of FY 2018-19, the Department met the approved standard for this performance measure. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the actual number of at-risk children served during FY 2020-21 is higher than reported above.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0377 - Percent of children with emotional disturbances who improve their level of functioning

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
64%	29%	35% (Under)	-54.7%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. Over the past four fiscal years, the Department met the approved standard for this performance measure. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the percent of children with emotional disturbances who improve their level of functioning during FY 2020-21 is higher than reported above.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0378 - Percent of children with serious emotional disturbances who improve their level of functioning

Action:

- Performance Assessment of Outcome Measure Revision of Measure
- Performance Assessment of Output Measure Deletion of Measure
- Adjustment of GAA Performance Standards

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
65%	27%	38% (Under)	-58.5%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- Personnel Factors
- Competing Priorities
- Previous Estimate Incorrect
- Staff Capacity
- Level of Training
- Other (Identify): See Below

External Factors (check all that apply):

- Resources Unavailable
- Legal/Legislative Change
- Target Population Change
- This Program/Service Cannot Fix the Problem
- Current Laws Are Working Against the Agency Mission
- Technological Problems
- Natural Disaster
- Other (Identify): See Below

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the percent of children with serious emotional disturbances who improve their level of functioning during FY 2020-21 is higher than reported above.

Management Efforts to Address Differences/Problems (check all that apply):

- Training
- Personnel
- Technology
- Other (Identify): See Below

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0780 - Percent of children at risk of emotional disturbance who live in stable housing environment

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
	96%	92%	

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. Over the past five fiscal years, the Department met the approved standard for this performance measure. There have been some difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the percent of children at risk of emotional disturbance who live in stable housing environment during FY 2020-21 is higher than reported above.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910506 Mental Health Services

Measure: M0361 Number of people on forensic admission waiting list over 15 days.

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
	0	1,512	

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The variance observed between the actual performance and the approved standard for this metric is attributed to impacts of the COVID-19 pandemic. The State Mental Health Treatment Facilities performance toward this metric has historically met or been near to the established benchmark. As a result of the Governor’s Executive Order Number 20-52, extended by 20-114, the Department issued Emergency Order DCF-20-096-EO to suspend forensic admissions. Admissions into the State Mental Health Treatment Facilities were suspended on 3/27/20 in response to the COVID-19 pandemic. Subsequently, the Department executed emergency orders to implement a phased admission plan which limited the admission capacities of State Mental Health Treatment Facilities. Due to the phased admission plan, bed capacity deficit, staff deficit, and Covid-19 testing requirements for admission, an increase in the number of people on forensic admission waiting list occurred. Prior to the suspending of admissions due to Covid-19, there were zero forensic commitments awaiting placement longer than 15-days

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department continues to supplement resources to support an increased demand for services at the state mental health treatment facilities.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Mental Health Services

Service/Budget Entity: 60910506 Mental Health Services

Measure: M05050 - Percent of adults in civil commitment, per Ch. 394, F.S., who show an improvement in functional level

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
	67%	63%	

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

As a result of the Covid-19 pandemic, staff shortages, reduction of activity and therapeutic hour, and reassignment of those staff to critical care positions within the units all contributed to difficulty in meeting the approved standard for this performance measure. Staffing averages were below 75% in public facilities. In addition, the difficulty in the use of Level of Care Utilization System (LOCUS) and submission of data also may have contributed to the decrease in the actual performance results. Therefore, the Department will review the approved standard since it was based on the previous assessment tool.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|--|--|
| <input checked="" type="checkbox"/> Training | <input checked="" type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department will continue to monitor the current situation and staffing shortages as well as evaluate the need for potential adjustment to the approved standard that better reflect changes in evaluation tool.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Sexual Violent Predator Program

Service/Budget Entity: 60910501 Violent Sexual Predator Program

Measure: M05305 Percent of assessments completed by the SVP Program within 180 days of receipt of referral.

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
85%			

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input checked="" type="checkbox"/> Legal/Legislative Change | <input type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

This is no longer mandated by statute. In 2014, changes to s. 394.913(3)(e)(1), F.S., eliminated this requirement. Florida law now requires the multidisciplinary team to prioritize the assessment and evaluation of each person referred to the team based upon the person's scheduled release date.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

In response to statutory changes, The Office of Substance Abuse and Mental Health proposes the deletion of this measure from the General Appropriation Act.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Substance Abuse Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0063 - Number of adults served

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
115,000	43,404	71,596 (Under)	-62.3%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. However, changes in the data reporting structure and the COVID-19 pandemic has created difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the actual number of at-risk children served during FY 2020-21 is higher than reported above. In review of five years of historical data reported for this metric, the number of adults served has remained below the approved standard; however, there was an increase of 8 percent from FY 2019-20 to FY 2020-21.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic. Based on the historical discrepancy observed in the actual number served and the approved standard, the Department will review the approved standard and methodology for this performance measure.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Substance Abuse Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0753 - Percentage change in clients who are employed from admission to discharge

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
	10%	7%	

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. In review of five years of historical data reported for this metric, the percentage change in clients has met the approved standard. However, changes in the data reporting structure and the COVID-19 pandemic has created difficulty and delays in the data submission process during the last fiscal year. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the percentage change in clients who are employed from admission to discharge during FY 2020-21 is higher than reported above.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Substance Abuse Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0756 - Percent of adults with substance abuse who live in a stable housing environment at the time of discharge

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
94%	77%	17% (Under)	-18.1%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. However, changes in the data reporting structure and the COVID-19 pandemic has created difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the percent of adults with substance abuse who live in a stable housing environment at the time of discharge during FY 2020-21 is higher than reported above.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Department of Children and Families

Program: Substance Abuse Services

Service/Budget Entity: 60910950 Community Substance Abuse & Mental Health Services

Measure: M0052 - Number of children with substance-abuse problems served

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
50,000	7,198	42,802 (Under)	-85.6%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation:

The Department launched the Financial and Service Accountability Management System (FASAMS) in January 2019, which modified the process for submitting client evaluation data. However, changes in the data reporting structure and the COVID-19 pandemic has created difficulty and delays in the data submission process. At the time of this review, complete data for FY 2020-21 was not available; therefore, it is highly probable that the number of children with substance-abuse problems served during FY 2020-21 is higher than reported above. In addition, a review of five years of historical data reported for this metric indicated that the number of children served for substance abuse needs each year has remained below the approved standard.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input checked="" type="checkbox"/> Other (Identify): <u>See Below</u> |

Recommendations:

The Department, in collaboration with the Managing Entities, identified opportunities for improving the collection of client evaluation data. The Department implemented additional guidance documentation and is modifying system validation rules in FASAMS to improve the collection of evaluation data and pinpointing of target populations. In addition, the Department has been working closely with Managing Entities and network service providers to diversify the service delivery model and provide alternative treatment options that are consistent with the safety standards that have been outlined in response to the pandemic. Based on the historical discrepancy observed in the actual number served and the approved standard, the Department will review the approved standard and methodology for this performance measure.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Children and Families

Program: Economic Self Sufficiency

Service/Budget Entity: 60910708 Economic Self Sufficiency

Measure: Percentage of food assistance applications processed within 7 days (expedited) (M0733)

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
95%	92%	-3	-2.77%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation: Due to the COVID-19 Public Health Emergency, the Department experienced an increased number of expedited applications which prevented the Department from meeting the 95% standard.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input type="checkbox"/> Other (Identify) |

Recommendations:

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Children and Families

Program: Economic Self Sufficiency

Service/Budget Entity: 60910708 Economic Self Sufficiency

Measure: Percent of All Family TANF customers participating in work or work-related activities (M05088)

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
21.9%	1.65%	20.25%	-92.47%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation: The State of Florida waived work requirement activities for March, April, May, and June due to the public health emergency (COVID).

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input type="checkbox"/> Other (Identify) |

Recommendations:

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Children and Families

Program: Economic Self Sufficiency

Service/Budget Entity: 60910708 Economic Self Sufficiency

Measure: Percent of 2-Parent TANF customers participating in work or work-related activities (2-Parent TANF Participation Rate). (M0678)

Action:

- Performance Assessment of Outcome Measure Revision of Measure
 Performance Assessment of Output Measure Deletion of Measure
 Adjustment of GAA Performance Standards

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
34.20%	.89%	33.31%	97.40%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- Personnel Factors Staff Capacity
 Competing Priorities Level of Training
 Previous Estimate Incorrect Other (Identify)

Explanation:

External Factors (check all that apply):

- Resources Unavailable Technological Problems
 Legal/Legislative Change Natural Disaster
 Target Population Change Other (Identify)
 This Program/Service Cannot Fix the Problem
 Current Laws Are Working Against the Agency Mission

Explanation: Under the direction of Governor DeSantis, work requirements for TANF were waived from March 2020 through May 2021 due to COVID-19.

Management Efforts to Address Differences/Problems (check all that apply):

- Training Technology
 Personnel Other (Identify)

Recommendations:

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Children and Families

Program: Economic Self Sufficiency

Service/Budget Entity: 60910708 Economic Self Sufficiency

Measure: Number of Fraud Prevention Investigations Completed (M0112)

Action:

- Performance Assessment of Outcome Measure Revision of Measure
 Performance Assessment of Output Measure Deletion of Measure
 Adjustment of GAA Performance Standards

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
22,000	12,060	-9,940	-45.2 %

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- Personnel Factors Staff Capacity
 Competing Priorities Level of Training
 Previous Estimate Incorrect Other (Identify)

Explanation:

External Factors (check all that apply):

- Resources Unavailable Technological Problems
 Legal/Legislative Change Natural Disaster
 Target Population Change Other (Identify)
 This Program/Service Cannot Fix the Problem
 Current Laws Are Working Against the Agency Mission

Explanation: Target was not met due to Office of Public Benefits Integrity Benefits Investigations staffing shortage, staff deployed to support operations, and a high number of probationary staff.

Management Efforts to Address Differences/Problems (check all that apply):

- Training Technology
 Personnel Other (Identify)

Recommendations:

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Children and Families

Program: Economic Self Sufficiency

Service/Budget Entity: 60910708 Economic Self Sufficiency

Measure: Percent of unemployed active caseload placed in employment. (M04040)

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
40.0%	36.0%	(4)	-10.0%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation: The impact of the COVID-19 global pandemic lowered the overall average.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input type="checkbox"/> Other (Identify) |

Recommendations: Continue the approved standard unchanged.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Children and Families

Program: Economic Self Sufficiency

Service/Budget Entity: 60910708 Economic Self Sufficiency

Measure: Percent of refugee assistance cases accurately closed at 8 months or less (M0103)

Action:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
99.2%	94.0%	(5.2)	-5.24%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix the Problem | |
| <input type="checkbox"/> Current Laws Are Working Against the Agency Mission | |

Explanation: The impact of the COVID-19 global pandemic lowered the overall average.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input type="checkbox"/> Other (Identify) |

Recommendations: Continue the approved standard unchanged.

LRPP Exhibit III: PERFORMANCE MEASURE ASSESSMENT

Department: Children and Families

Program: Economic Self Sufficiency

Service/Budget Entity: 60910708 Economic Self Sufficiency

Measure: Percent of food stamp benefits determined accurately (M0107)

Action:

- | | |
|---|--|
| <input type="checkbox"/> Performance Assessment of <u>Outcome</u> Measure | <input type="checkbox"/> Revision of Measure |
| <input checked="" type="checkbox"/> Performance Assessment of <u>Output</u> Measure | <input type="checkbox"/> Deletion of Measure |
| <input type="checkbox"/> Adjustment of GAA Performance Standards | |

Approved Standard	Actual Performance Results	Difference (Over/Under)	Percentage Difference
94.00%	0.00%	100%	100%

Factors Accounting for the Difference:

Internal Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Personnel Factors | <input type="checkbox"/> Staff Capacity |
| <input type="checkbox"/> Competing Priorities | <input type="checkbox"/> Level of Training |
| <input type="checkbox"/> Previous Estimate Incorrect | <input type="checkbox"/> Other (Identify) |

Explanation:

External Factors (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Resources Unavailable | <input type="checkbox"/> Technological Problems |
| <input type="checkbox"/> Legal/Legislative Change | <input checked="" type="checkbox"/> Natural Disaster |
| <input type="checkbox"/> Target Population Change | <input type="checkbox"/> Other (Identify) |
| <input type="checkbox"/> This Program/Service Cannot Fix The Problem | |
| <input type="checkbox"/> Current Laws Are Working Against The Agency Mission | |

Explanation: Blanket waiver due to COVID. No active cases were reviewed October 2020 thru June 2021.

Management Efforts to Address Differences/Problems (check all that apply):

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Training | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Personnel | <input type="checkbox"/> Other (Identify) |

Recommendations:

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Adult Protection 60900310</u>
Measure:	<u>Percent of protective supervision cases in which no report alleging abuse, neglect, or exploitation is received while the case is open (from beginning of protective supervision for a maximum of 1 year) (M0124)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Protective supervision cases in this instance means court-ordered or voluntary protective supervision clients registered into DCF's Client Information System. The measure identifies the rate of re-abuse, re-neglect, or re-exploitation among cases that are still open and being provided services from a prior abuse, neglect, or exploitation reported to DCF's abuse hotline resulting in some indication of verified findings. Measure is a percent. The denominator is a sample of the total number of protective supervision cases that are currently receiving case management, services, and referrals (from beginning of protective supervision for a maximum of 6 months). The numerator is the number from the above cases where no subsequent report alleging abuse, neglect, or exploitation is closed with verified findings.</p> <p>Data Source: Florida Safe Families' Network (FSFN) and the Adult Protective Services Information System (ASIS)</p>
Validity:	The measure is a direct indicator of the program goal to protect vulnerable adults from further harm during services.
Reliability:	The measure uses data from statewide abuse and neglect reporting system and the Adult Services Information System. The data was verified as reliable by auditors during a special audit. One threat to the validity of the measure is the limited number of reported instances of abuse and neglect may make the results spurious.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Domestic Violence 60900310</u>
Measure:	<u>Percent of adult and child domestic violence victims in shelter more than 72 hours having a plan for family safety and security when they leave shelter. (M0126)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Domestic violence is a pattern of behaviors that adults or adolescents use against their intimate partners or former partners to establish power and control. It may include physical abuse, sexual abuse, emotional abuse, and economic abuse. It may also include threats, isolation, pet abuse, using children and a variety of other behaviors used to maintain fear, intimidation and power over one's partner. This measure is a percent. The numerator is the number of victims leaving shelter after a minimum of 72 hours in residence with a safety plan. The denominator is the total number of victims who left shelter after 72 hours. Data Source: Domestic Violence Program Services monthly statistical report
Validity:	This output measure is a performance driver directly related to the program goal, to be safe from harm. The provision of a safety plan before the family leaves shelter will directly affect the family's ability to avoid domestic violence in the future and remain safe from harm. Safety plans include preventative strategies that equip clients with survival skills when in danger of future violence.
Reliability:	Each month providers are required to submit to their contract managers a statistical report on all services as delineated in their contract objectives. The report includes the number of victims leaving shelter after a minimum of 72 hours and the number completing a safety plan. The safety plan comprises a set of activities whose purpose is to enhance the safety of the victim and her dependents. A state summary of these data is kept in the central office.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Adult Protection 60900310</u>
Measure:	<u>Number of investigations (M0127)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Investigations are on-site assessments of facts and evidence to either support or refute allegations of abuse, neglect, or exploitation of vulnerable adults. A count of investigations as defined above. Data Source: Florida Safe Families' Network (FSFN).
Validity:	The measure indicates the workload involved in protecting vulnerable adults
Reliability:	The measure uses data from the statewide abuse and neglect information system. The data was determined reliable by auditors during a special audit. Periodic district reviews by program staff have not indicated major reliability issues.

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Adult Protection 60900310</u>
Measure:	<u>Percent of adult investigations from an entry cohort completed within 60 days. (M04016)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Investigations are on-site assessments of facts and evidence to either support or refute allegations of abuse, neglect, or exploitation of vulnerable adults. Entry cohort is defined as cases open during the period being measured. Completed is defined as those cases for which the statutory or procedurally required elements (such as Medical Examiner's report) have been completed. Days are calendar days. The measure is a percentage measuring the proportion of cases that are closed within the statutorily mandated time limits. The denominator is the total number of cases received during the time period. The numerator is the number of investigations closed within 60 days. Data Source: Adult Protective Investigators and Supervisors.
Validity:	Statutory requirement. s. 415.104(4), F.S. This measure is important to ensure that cases are closed in a timely fashion. This is important to ensure client safety and well-being and reduce the risk of further abuse, neglect or exploitation.
Reliability:	The measure uses data from the statewide abuse and neglect reporting system. The data was determined reliable by auditors during a special audit. Periodic district reviews by program staff have not indicated major reliability issues. This data is monitored on a daily basis by central office and Region staff.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Adult Protection 60900310</u>
Measure:	<u>Percent of adult victims seen within the first 24 hours. (M04017a)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Victim is defined as any vulnerable adult named in a report of abuse, neglect, or exploitation. Seen is defined as face-to-face contact with the victim. The measure is a percentage. The denominator is the total number of adult victims seen for the period. The numerator is the number of those victims seen within 24 hours for the period. This measure includes only those victims that are seen and does not include victims that are never seen. Data Source: Florida Safe Families' Network (FSFN)
Validity:	This is an important measure that is intended to evaluate victim safety within 24 hours. This measure could be improved by including all victims, including those never seen for legitimate reasons.
Reliability:	Program staff monitor investigative records on a routine basis. In 2006 Districts 1 and 2 conducted individual record reviews to validate data as recorded by central office.

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Adult Protection 60900310</u>
Measure:	<u>Number of people receiving protective supervision, and protective intervention services. (M0414)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Protective services include protective supervision and protective intervention (Home Care for Disabled Adults, Community Care for Disabled Adults, short term case management, Supportive services and placement services) cases. Protective supervision applies to services arranged or provided by DCF to protect vulnerable adults from further occurrences of abuse, neglect, or exploitation. Supportive services are services that encourage and assist eligible vulnerable adults to remain in the least restrictive environment. Placement services assist in the physical relocation of a vulnerable adult, who can no longer live independently in his/her own home, into the most appropriate and cost-effective living arrangement in the least restrictive setting. Total number of persons in the protective supervision and protective intervention programs. Data Source: Adult Protective Services Information System (ASIS)
Validity:	This number is a direct count through the Adult Protective Services Information System of persons receiving protective supervision and protective intervention services.
Reliability:	The data was verified as reliable during a special audit.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Adult Protection 60900310</u>
Measure:	<u>The rate of abuse/neglect per 1000 for adults with disabilities (M0735)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	An adult is a person 18 years of age or over with a physical, mental or emotional disability. Abuse is defined as a willful act or threatened act or omission by a relative caregiver or household member that causes or is likely to cause significant impairment to a vulnerable adult's physical, mental or emotional health. This measure is a rate. The numerator is the number of unduplicated victims of Adult Abuse, Neglect, or Exploitation as reported to the hotline and determined after investigation to have been verified a victim of at least one maltreatment. The denominator is the number of disabled or frail elderly adults over the age of 18 in the state divided by 1,000. Data Source: Florida Safe Families' Network (FSFN), Department of Elder Affairs, US Social Security Administration, and the US Census Bureau.
Validity:	This measure is a rough indicator of the incidence of adult maltreatment in Florida.
Reliability:	The measure includes only adult maltreatment that is: (1) known or suspected, and (2) reported to and accepted by the hotline for investigation, and (3) verified by an investigator during the reporting period. Higher reporting and substantiation rates increase the rate; lower reporting and substantiation rates decrease the rate.

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Adult Protection 60900310</u>
Measure:	<u>The rate of abuse/neglect per 1000 for elderly persons. (M0757)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Frail elderly is defined as an adult over 60 suffering from the infirmities of aging. Abuse is defined as a willful act or threatened act or omission by a relative caregiver or household member that causes or is likely to cause significant impairment to a vulnerable adult's physical, mental or emotional health. This measure is a rate. The numerator is the number of unduplicated victims of Adult Abuse, Neglect, or Exploitation as reported to the hotline and determined after investigation to have been verified a victim of at least one maltreatment. The denominator is the number of disabled or frail elderly adults over the age of 18 in the state divided by 1,000. Data Source: Florida Safe Families' Network (FSFN), Department of Elder Affairs, US Social Security Administration, and the US Census Bureau.
Validity:	This measure is a rough indicator of the incidence of adult maltreatment in Florida.
Reliability:	The measure is not precise. It includes only adult maltreatment that is: (1) known or suspected, and (2) reported to and accepted by the hotline for investigation, and (3) verified by an investigator during the reporting period. Periods of increasing backlog can drive the number up; when DCF aggressively pursues backlog reduction, the number goes down. Higher reporting and substantiation rates increase the rate; lower reporting and substantiation rates decrease the rate.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Abuse Prevention and Intervention 60900310</u>
Measure:	<u>Number of children in families served (M0134)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Children refer to children in families receiving prevention services and other services funded by CBFRS, CAPTA and PSSF This measure is a count of the number of children in families receiving prevention services and other services funded by CBFRS, CAPTA and PSSF. It includes both children in families receiving direct services (including parent education, counseling, support groups, and home visiting) and the number receiving non-direct services. Data Source: Prevention providers' contract staff
Validity:	This is a workload measure that counts the number of children in families receiving prevention services and other services funded by CBFRS, CAPTA and PSSF.
Reliability:	The reliability of this measure is dependent on provider's compliance with data reporting requirements. Providers are required by contract to report performance data including number of clients served. DCF will monitor the extent to which providers comply with these contractual requirements.

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Abuse Prevention and Intervention 60900310</u>
Measure:	<u>Number of families served in Healthy Families (M0294)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Healthy Families Florida (HFF) is a child abuse prevention program modeled on the Healthy Families America model and provided through the Ounce of Prevention Fund. HFF provides home visitation services in high-risk neighborhoods. This is a count of the number of families served. Quarterly Report-Unduplicated of families served in the report quarter. Year-to-Date Report-Unduplicated count of families served fiscal year to date. Data Source: Healthy Families Florida program staff
Validity:	This count of the number of families served is an important measure of the size of the program.
Reliability:	Required in the contract with the Ounce of Prevention Fund

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Abuse Prevention and Intervention 60900310</u>
Measure:	<u>Percent of children in families who complete the Healthy Families Florida program who are not subjects of reports with verified or indicated maltreatment within 12 months after program completion. (M0393)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Healthy Families Florida (HFF) is a child abuse prevention program modeled on the Healthy Families America model and provided through the Ounce of Prevention Fund. HFF provides home visitation services in high-risk neighborhoods. The numerator is the number of children in families completing the HFF program who are not subjects of verified or indicated maltreatment within 12 months of program completion. The denominator is all children in families completing the HFF program during the reporting period.</p> <p>Data Source: Healthy Families Florida staff and Protective Investigators</p>
Validity:	This is a measure of the HFF program's success in preventing or reducing child abuse and neglect. A threat to validity is the effect of other unmeasured factors in preventing or reducing child abuse and neglect, such as family influences, non-DCF services, or the absence of the abuser.
Reliability:	The HFF database has periodic data quality review by trained staff. A recent third party evaluation found this system to be satisfactory. Reliability of this measure is dependent on DCF and Sheriff's Office Protective Investigations staff compliance with data reporting requirements as well as a common understanding of those requirements. Periodic district reviews by program staff have indicated no major reliability issues. Ongoing systems training, and monitoring assure consistency and accuracy of data.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Abuse Prevention and Intervention 60900310</u>
Measure:	<u>Per capita verified child abuse rate/1000 (M0736)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>A child is any unmarried person under age 18 who has not been emancipated by court order. Abuse is defined as maltreatment, which includes both actual harm and threatened harm. This measure is a rate. The numerator is the number of unduplicated victims of child abuse and neglect as reported to the hotline and determined after investigation to be verified. The denominator is number of children under the age of 18 in the state divided by 1,000. The YTD report for the first 11 months of the fiscal year represents a projection of the actual abuse per 1,000 children per fiscal year. This projection is calculated by summing the number of verified abuse cases during the report period, then "annualizing" that figure by multiplying that number by 12, then dividing by the total number of months in the report period (YTD). This number is then divided by the denominator, the number of children under 18 in the state divided by 1,000, to create the projection. Data Source: Hotline staff and Protective Investigations staff (Sheriff Offices in Broward, Citrus, Manatee, Pasco, Pinellas and Seminole; department staff in remaining 61 counties).</p> <p>The source for the Florida population estimates and projections is the Florida Legislature, Office of Economic and Demographic Research, Demographic Estimating Conference Database.</p>
Validity:	This measure is a rough indicator of the incidence of child maltreatment in Florida
Reliability:	The measure includes only child maltreatment that is: (1) known or suspected, and (2) reported to and accepted by the hotline for investigation, and (3) substantiated by an investigator during the reporting period. Higher reporting and substantiation rates increase the rate; lower reporting and substantiation rates decrease the rate.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Care Regulation and Information 60900310</u>
Measure:	<u>Number of facilities and homes licensed (M0123)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Licensed child care facility includes any child care center or child care arrangement, whether or not operated for profit, which provides child care for more than five children unrelated to the operator and which receives a payment, fee, or grant for any of the children receiving care, wherever operated. Family day care homes are occupied residences, whether or not operated for profit, in which child care is regularly provided for children from at least two unrelated families and which receives a payment, fee, or grant for any of the children receiving care. The legal authority for imposing penalties is s. 402.310, F.S. Guidelines for Class I violations are in Children and Families Operating Procedure 175-2. The total count of licensed facilities and homes at any given time. Data Source: Child Care Information System
Validity:	This workload measure represents the effort expended to licensed facilities and homes.
Reliability:	Region Child Care Licensing staff are trained to compile and enter data into the Child Care Information System.

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Care Regulation and Information 60900310</u>
Measure:	<u>Number of instructor hours provided to child care provider staff. (M0384)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	The total number of hours of instruction provided by trainers to child care personnel whether working in the industry or not. The total number of hours of instruction provided. Data Source: Child Care Training Report
Validity:	The training is provided by contractors for whom performance measures are included in the contract. Contract monitoring as well as system information monitoring by staff is done on a routine basis.
Reliability:	Fifteen contract providers coordinate training statewide and report categorically the total number of instructor hours provided on the Quarterly Child Care Training Report.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Abuse Prevention and Intervention 60900310</u>
Measure:	<u>Percent of licensed child care facilities inspected in accordance with program standards. (M04015)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Licensed child care facility includes any child care center or child care arrangement, whether or not operated for profit, which provides child care for more than five children unrelated to the operator and which receives a payment, fee, or grant for any of the children receiving care, wherever operated. Program standards for facilities are in Ch. 65C-22, F.A.C. This measure is a percentage. The numerator is the total number of inspections completed. The denominator is the total number of inspections required during the same time period. Data Source: District licensing staff
Validity:	This measure reflects how well DCF meets it required inspection schedule.
Reliability:	Licensing staff are trained to conduct inspections; unit supervisors continue with on-the-job training. Quality assurance staff provide reinforcement training and technical assistance as needed.

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Care Regulation and Information 60900310</u>
Measure:	<u>Percent of licensed child care homes inspected in accordance with program standards (M05175)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Child Care homes are also known as Family Day Care Homes. Family day care homes are occupied residences, whether or not operated for profit, in which care is regularly provided for children from at least two unrelated families and for which a payment, fee or grant is received for any of the children receiving care. Program standards for homes are in 65C-20, F.A.C. This measure is a percentage. The numerator is the total number of inspections completed. The denominator is the total number of inspections required during the same time period. Data Source: District licensing staff
Validity:	This measure reflects how well DCF meets it required inspection standards.
Reliability:	Licensing staff are trained to conduct inspections; unit supervisors continue with on-the-job training. Quality assurance staff provide reinforcement training and technical assistance as needed.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Percent of investigations reviewed by supervisors with 72 hours of report submission (M0079)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Reports of child abuse and neglect are investigated by child protective investigators. Protective investigators complete an initial safety assessment within 48 hours of the receipt of the report. The initial safety assessment includes a review of key safety factors by the child protective investigator to determine if there are immediate threats to the child’s safety that require attention. This initial safety assessment must be reviewed by the supervisor within 72 hours of the submission by the protective investigator. The measure is a percent. The daily measure is based on the point-in-time open investigations each day. The numerator is the subset of the open investigations for which an initial safety assessment was reviewed by the supervisor within 72 hours of submission. The denominator is the total number of initial safety assessments that have been submitted for more than 72 hours plus the initial safety assessments that have been submitted less than 72 hours that have been reviewed. Year-to-date is the percent of all submitted initial safety assessments during the report period that were reviewed within 72 hours of submission. The numerator is the number of initial safety assessments submitted during the report period that were reviewed by the supervisor within 72 hours of submission. The denominator is the total number of initial safety assessments submitted during the report period.</p> <p>Data Source: Hotline staff and Protective Investigations staff (Sheriff Offices in Broward, Manatee, Pasco, Pinellas, Walton and Seminole; department staff in remaining counties)</p>
Validity:	This is a measure of the timeliness designed to identify high risk investigations for further review and oversight. However, DCF no longer has an early warning system.
Reliability:	Reliability of this measure is dependent on DCF and Sheriff's Office Protective Investigations staff compliance with data reporting requirements as well as a common understanding of those requirements. Periodic district reviews by program staff have indicated no major reliability issues. Ongoing systems training and monitoring assure consistency and accuracy of data

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Percent of victims of verified maltreatment who were not subjects of subsequent reports with verified maltreatment within 6 months. (M0100a)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Protective Investigators document findings of “verified,” “some indicators,” or “no indicators” in FSFN. Only children with “verified” are counted in this measure. This measure is a percent. The numerator is the subset of the number of children in the denominator who were not subjects of subsequent reports with findings of "verified" of maltreatment of abuse or neglect received during the 6 (formerly 12) month period following the receipt of the initial abuse report in the reporting period. The denominator is the number of children who were subjects of reports with findings of "verified" of maltreatment received during the reporting period.</p> <p>Data Source: Hotline staff and Protective Investigations staff (Sheriff Offices in Broward, Manatee, Pasco, Pinellas, Walton and Seminole; department staff in remaining counties)</p>
Validity:	This is an outcome measure of Florida's success in protecting abused and neglected children from recurrence of abuse and neglect.
Reliability:	Reliability of this measure is dependent on DCF and Sheriff's Office Protective Investigations staff compliance with data reporting requirements as well as a common understanding of those requirements. Periodic district reviews by program staff have indicated no major reliability issues. Ongoing systems training, and monitoring assure consistency and accuracy of data.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Percent of foster children who were not subjects of reports of verified maltreatment. (M0106a)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>“Maltreatment” is a conclusion in a child protective investigation that resulted in a “verified” finding of abuse or neglect. “Out-of-home care” means care provided during a removal episode, regardless of placement type or custodian, including those in licensed board-paid foster care and kinship (relative and non-relative) care. A “removal episode” is the period that a child is removed from the child’s home, beginning with a removal date and ending with a discharge date. A “child” is any unmarried person under the age of 18 years who has not been emancipated by order of the court. This measure is a percent. The denominator is the total number of children in out-of-home care at any time during the report period, regardless of the duration of the episode. The numerator is the subset of children in the denominator who had no abuse reports with maltreatment findings of “verified” with an incident date that is both during the quarter and during the removal episode. The federal numerator also limits the number to cases where the perpetrator was the substitute caregiver (foster parent, group home provider, etc.), the state measure does not impose this exclusion and counts all children in out of home care with a verified finding during the quarter and during the removal episode regardless of perpetrator relationship to the child. There is no FSFN report specific to the federal measure.</p> <p>Data Source: Florida Safe Families Network (FSFN). Results of the FSFN report titled “Abuse During Services by Perpetrator” are posted quarterly to the Performance Dashboard.</p>
Validity:	This is an outcome measure of Florida's success in protecting foster children from abuse and neglect while they are in care.
Reliability:	Reliability of this measure is dependent on Department and Sheriff's Office staff compliance with data entry requirements.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Number of finalized adoptions (M0215)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>A “child” is any unmarried person under the age of 18 years who has not been emancipated by order of the court. “Finalized adoption” means the legal relationship between parent and child where it did not exist, thereby declaring the child to be legally the child of the adoptive parents and their heir at law, and entitled to all the rights and privileges and subject to all the obligations of a child born to the adoptive parents in lawful wedlock. This measure is a count of the number of children in FSFN with a discharge reason of adoption and a discharge date within the reporting period, where either (1) the child’s courtesy worker on the discharge date (if there was a courtesy worker on the discharge date) was an agent of the provider; otherwise (2) where the child’s primary worker on the discharge date was an agent of the provider.</p> <p>Data Source: Florida Safe Families Network (FSFN). Results from FSFN report titled “Adoptions Finalized by Month and Cumulate for SFY” are posted monthly to the Performance Dashboard.</p>
Validity:	This is an output measure of the number of children achieving permanency through adoption.
Reliability:	Reliability of this measure is dependent on Department and provider staff compliance with data reporting requirements. Providers are required by contract to report performance data including client outcomes. They are also required to make appropriate and timely data entry into FSFN. DCF will monitor the extent to which providers comply with these contractual requirements.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Number of investigations (M0295)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Child protective investigations are conducted by DCF in most counties, sheriff's offices in others in response to citizens reporting known or suspected child abuse or neglect to the Florida Abuse Hotline. Count all Initial Reports and Additional Investigation Reports accepted by the Florida Abuse Hotline and entered into FSFN for investigation by protective investigators during the report period.</p> <p>Data Source: Hotline staff and Protective Investigations staff (Sheriff Offices in Broward, Citrus, Manatee, Pasco, Pinellas and Seminole counties; DCF protective investigators in the remaining 61 counties)</p>
Validity:	This measures the volume of work that must be performed by protective investigators. It is the denominator for several percentage measures, including M0359, M0368, M0385, M0386, M0387, M04001, and M04007.
Reliability:	Reliability of this measure is dependent on DCF and Sheriff's Office Protective Investigations staff compliance with data reporting requirements as well as a common understanding of those requirements. Periodic district reviews by program staff have indicated no major reliability issues. Ongoing systems training, and monitoring assure consistency and accuracy of data.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Number of children in out-of-home care (M0297)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>"Out-of-home care" includes both children in board-paid foster care and those receiving protective supervision in the home of a relative or approved non-relative after a removal. Children under protective supervision in the home of a relative or approved non-relative after removal are considered "out-of-home," as they are entitled to the same safeguards as board-paid foster children. This measure is a count of the children in out-of-home care.</p> <p>Data Source: Direct services staff with DCF and contract providers.</p>
Validity:	This measures workload for direct services staff. As a count, it is the denominator for several percentage measures: M0083, M0255, M0388, M0597. It should be considered jointly with percentage measures in order to understand whether the number represents small or large percentages of children who are in the total caseload of children under department care.
Reliability:	Reliability of this measure is dependent on Department and provider staff compliance with data reporting requirements. Data entry in FSFN is the responsibility of district and provider direct services and supervisory staff. On-going systems training, and monitoring assure consistency and accuracy of data. Providers are required by contract to report performance data including client outcomes. They are also required to make appropriate and timely data entry into FSFN. DCF will monitor the extent to which providers comply with these contractual requirements.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Percent of child investigations commenced within 24 hours. (M0368)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	An child investigation is one which has been received from the Abuse Hotline and assigned to an Child Protective Investigator. Commencement of an investigation means an on-site attempt to contact the subjects of an abuse report. This measure is a percent. The numerator is the number of child protective investigations (Initial and Additional Reports) received during the reporting period where the commencement date and time is within 24 hours of the received date and time. The denominator is the total number of child protective investigations (Initial and Additional Reports) received during the same reporting period as the numerator. Data Source: Hotline staff and Protective Investigations staff (Sheriff Offices in Broward, Citrus, Manatee, Pasco, Pinellas and Seminole counties; DCF protective investigators in the remaining 61 counties)
Validity:	This is a timeliness measure that tracks staff compliance with the Ch. 39, F.S. requirement that all protective investigations be commenced immediately or within 24 hours. The law is intended to ensure children's safety. A percentage does not tell us whether the percentages are based on very small or large numbers of clients.
Reliability:	Reliability of this measure is dependent on DCF and Sheriff's Office Protective Investigations staff compliance with data reporting requirements as well as a common understanding of those requirements. Periodic district reviews by program staff have indicated no major reliability issues. Ongoing systems training and monitoring assure consistency and accuracy of data.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Percent of children reunified who were reunified within 12 months of the latest removal. (M0389)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	A “child” is any unmarried person under the age of 18 years who has not been emancipated by order of the court. “Reunified” means the discharge of a child from out-of-home care with a discharge reason of either: (1) reunification with parent(s) or other primary caretaker(s), (2) living with other relatives or (3) Guardianship. This measure is a percent. The denominator includes all children reunified during the reporting period who had been in care eight days or longer, where the child’s primary worker was an agent of the provider, using data for the most recent discharge date during the period. The numerator is the subset of children in the denominator whose discharge date is less than twelve months from removal date of the same removal episode. If a child has multiple reunifications after removals of eight days or longer during any report period, only the last reunification will be used for calculating performance on this measure. Data Source: Florida Safe Families Network (FSFN). Results from an ad hoc report from FSFN produced by Family Safety Data Reporting Unit are posted quarterly to the Performance Dashboard. Client level list data for local staff use is available to authorized users via Imaging Lite System on DCF Web Portal.
Validity:	This measure is a valid indicator of how fast DCF can get children back to their family.
Reliability:	Reliability of this measure is dependent on Department and provider staff compliance with data reporting requirements. Data entry in FSFN is the responsibility of district and provider direct services and supervisory staff.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Percent adoptions finalized within 24 months of the latest removal. (M0391)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Adoption creates a legal relationship between parent and child where it did not exist, thereby declaring the child to be legally the child of the adoptive parents and their heir at law and entitled to all the rights and privileges and subject to all the obligations of a child born to such adoptive parents in lawful wedlock. Removal refers to taking a child into custody pursuant to s. 39.401, F.S. Finalized refers to children whose FSFN removal discharge reason is "adoption finalization." This measure is a percent. The denominator includes all children whose most recent episode ended during the reporting period with discharge reason of adoption, where the child's Courtesy worker was an agent of the provider. If no Courtesy worker assigned at discharge, then assignment will be to the agency of the Primary Worker. The numerator is the subset of children in the denominator whose discharge date is less than 24 months from removal date of the same removal episode.</p> <p>Data Source: Florida Safe Families Network (FSFN). Results from an ad hoc report from FSFN produced by Family Safety Data Reporting Unit are posted quarterly to the Performance Dashboard. Client level list data for local staff use is available to authorized users via Imaging Lite System on DCF Web Portal.</p>
Validity:	This measure is a valid indicator of how fast DCF can get children that cannot go back to their family into a permanent home.
Reliability:	Reliability of this measure is dependent on department and provider staff compliance with data reporting requirements

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Percent of child investigations from an entry cohort completed within 60 days. (M0394)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Calls to the Florida Abuse Hotline to report child abuse or neglect trigger an investigation. A timely investigation commences within 24 hours of a call. The investigation duration is from the date of the call to the hotline to the date of final supervisor approval recorded in FSFN Child Safety Assessment. This measure is a percent. The numerator is the number of child protective investigations from the denominator completed within 60 days from the date of the Hotline call. The denominator is the total number of child protective investigations opened during the reporting period and having been open 60 days.</p> <p>Data Source: Hotline staff and Protective Investigations staff in Sheriffs' Offices in Broward, Citrus, Manatee, Walton, Seminole, Pinellas, and Pasco; DCF staff in the remaining 61 counties.</p>
Validity:	<p>This is a timeliness measure which tracks staff compliance with the Ch. 39, F.S. requirement that all protective investigations be completed within 60 days. That policy is intended to ensure the safety of children and to give families timely resolution of an investigation into the care their children are receiving. In order to know the magnitude of open investigations, it should be accompanied by a measure of the number of open investigations during the same time period.</p>
Reliability:	<p>Reliability of this measure is dependent on DCF and Sheriff's Office Protective Investigations staff compliance with data reporting requirements as well as a common understanding of those requirements. Periodic district reviews by program staff have indicated no major reliability issues. Ongoing systems training and monitoring assure consistency and accuracy of data.</p>

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Percent of children removed within 12 months of a prior reunification. (M05178)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>A “child” is any unmarried person under the age of 18 years who has not been emancipated by order of the court. “Out-of-home care” means care provided during a removal episode, regardless of placement type or custodian, including those in licensed board-paid foster care and kinship (relative and non-relative) care. A “removal episode” is the period that a child is removed from the child’s home, beginning with a removal date and ending with a discharge date. “Removal date” means the date a child is removed from the home. “Discharge date” means the date a child leaves out-of-home care, either by achieving permanency or other reason. “Reunified” means the discharge of a child from out-of-home care with a discharge reason of either: (1) reunification with parent(s) or other primary caretaker(s), (2) living with other relatives or (3) Guardianship. “Re-enter” means a subsequent removal episode following reunification. This measure is a percent. The denominator includes all children who were reunified during the same report period 12 months prior to the current report period (e.g., for report period 1/1/07 – 3/31/07 the cohort is children reunified 1/1/06 – 3/31/06) where the child’s primary worker was an agent of the provider. The numerator is the subset of children in the denominator who had a subsequent removal less than twelve months from the reunification date. If a child has multiple re-entries during any report period, only the first re-entry will be used for calculating performance on this measure.</p> <p>Data Source: Florida Safe Families Network (FSFN). Results from an ad hoc report from FSFN produced by Family Safety Data Reporting Unit are posted quarterly to the Performance Dashboard. Client level list data for local staff use is available to authorized users via Imaging Lite System on DCF Web Portal.</p>
Validity:	This is a measure of our success in maintaining children placed back with their parents.
Reliability:	Reliability is dependent on the completeness, accuracy and timeliness of removal data, including removal and discharge dates.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>The percentage of children in out-of-home care at least 8 days but less than 12 months who had two or fewer placement settings. (M05180)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>A “child” is any unmarried person under the age of 18 years who has not been emancipated by order of the court. “Out-of-home care” means care provided during a removal episode.</p> <p>A “removal episode” is the period that a child is removed from the child’s home, beginning with a removal date and ending with a discharge date. "Removal date" means the date a child is removed from the home. "Discharge date" means the date a child leaves out-of-home care, either by achieving permanency or other reason. "Placement setting" means a specific placement (e.g., individual shelter, foster home or group care facilities) during a removal episode. This measure is a percentage. The denominator includes all children in out-of-home care where the child’s primary worker was an agent of the provider, and who were in care: (1) at least one day during the reporting period (quarter, state fiscal year), and (2) at least eight days but less than 12 months in the most recent removal episode, as of the last day of the report period or the discharge date, if the child was discharged during the report period. If the child had primary workers from more than one lead agency during the reporting period, the most recent primary worker is used to determine the provider. The numerator is the subset of the denominator with no more than two placement settings.</p> <p>The following placements will not be counted when calculating performance on this measure:</p> <ol style="list-style-type: none"> 1) Initial placement in a placement service category of Correctional Placement; 2) Any placement in the placement service categories of Routine Emergency/Mental, Routine Emergency Services, Routine Emergency/Medical, Visitation, Missing Child or Respite; 3) The initial placement after any of the placements in (2), if the child is returning to the placement that directly preceded the placement (e.g., going from Foster Home A to Missing Child and then back to Foster Home A would count as one total placement, Child going from Foster Home A to Missing Child to Foster Home B would count as 2 total placements); 4) Child has a change in placement service category but has not changed physical location. <p>Data Source: DCF, sheriffs office and CBC staff.</p>
Validity:	This is a measure of our success in maintaining children in stable placements while they are in a removal episode. There are two problems with this approach. It counts all children in care less than one year, so their episodes are of varying duration (one day to one year), which can be misleading. It is also problematic as a contract measure, as children have typically had one or more shelter placements before the CBC assumes responsibility for the child. It is possible that the Cubic's first placement after shelter will be the child's third.
Reliability:	Reliability is dependent on the completeness, accuracy and timeliness of FSN removal data, including removal and discharge dates, and placement. Completeness and accuracy are believed to be good, but timeliness delays may occur.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	Department of Children and Families
Program:	FAMILY SAFETY AND PRESERVATION SERVICES
Service/Budget Entity:	Child Protection and Permanency 60900310
Measure:	Percent of children in out-of-home care 24 months or longer on July 1 who achieved permanency prior to their 18th birthday and by June 30. (M0671)
Action:	Backup for performance measure
Data Sources and Methodology:	<p>A “child” is any unmarried person under the age of 18 years who has not been emancipated by order of the court. “Achieved permanency,” means that the child was placed in a permanent living arrangement, defined as reunification with parents or primary caretakers, living with other relatives, guardianship, or adoption. “Out-of-home care” means care provided during a removal episode. A “removal episode” is the period that a child is removed from the child’s home, beginning with a removal date and ending with a discharge date. “Removal date” means the date a child is removed from the home. “Discharge date” means the date a child leaves out-of-home care, either by achieving permanency or other reason. This measure is a percent. The denominator includes all children with an active removal episode on July 1 of the current state fiscal year with a duration of 24 months or longer, where the child’s primary worker was an agent of the provider. The numerator is the subset of children in the denominator (1) whose discharge date is not later than June 30 of the same state fiscal year, (2) whose discharge date is not later than the child’s 18th birthday and (3) whose discharge reason is reunification with parents or primary caretakers, living with other relatives, guardianship, or adoption. This measure tracks performance of children established on July 1. Due to this, performance will increase with each quarter, as more children in the cohort achieve the desired goal.</p> <p>Data Source: DCF and Sheriff’s Office Protective Investigators and CBC Case Managers enter removal data (including removal date, discharge date and discharge reason) directly into the FSFN database.</p>
Validity:	This measure reflects how well DCF finds long term foster children permanent homes before they become adults.
Reliability:	Reliability is dependent on the completeness, accuracy and timeliness of FSFN removal data, including removal and discharge dates, and placement. Completeness and accuracy are believed to be good, but timeliness delays may occur.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Percent of adults who had an identified substance abuse need as a result of a child welfare Family Assessment who received substance abuse services (M0738)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Child Welfare Supervision includes all adults who must comply with requirements set by Family Safety and the courts due to child abuse and dependency determinations. N: Number of adults identified as needing substance abuse treatment in protective services records who receive treatment. D: Number of adults identified as needing substance abuse treatment in protective services records. Data Source: SACWIS/ADM Data Warehouse
Validity:	National studies indicate 50-60 percent of families with child abuse and neglect have substance abuse as a contributing factor. Measure determines extent to which the parents follow through on treatment to reduce substance abuse problems.
Reliability:	Data are derived from uniform survey/record review format and is maintained independent of the substance abuse and protective services programs.

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Child Protection and Permanency 60900310</u>
Measure:	<u>Number of children receiving in-home services. (M0774)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	These are children staying in their parents' homes under their supervision of DCF or a CBC. This measure is a count of the children in in-home care. Data Source: Direct services staff with DCF and contract providers.
Validity:	This measure attempts to measure the success of clients to live independently with mental illness and function as a productive member of the community.
Reliability:	Reliability of this measure is dependent on Department and provider staff compliance with data reporting requirements. Data entry in FSFN is the responsibility of district and provider direct services and supervisory staff. On-going systems training and monitoring assure consistency and accuracy of data. Providers are required by contract to report performance data including client outcomes. They are also required to make appropriate and timely data entry into FSFN. DCF will monitor the extent to which providers comply with these contractual requirements.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Florida Abuse Hotline 60900310</u>
Measure:	<u>Percent of calls made to the Florida Abuse Hotline that were abandoned (M0069)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Citizens call the Florida Abuse Hotline to report abuse or neglect. Each caller hears a 180 second message about the hotline and the information required to make a report. If the caller hangs up after the 180 second message, but before the call is answered, the call is considered "abandoned." If the call is answered at any time, or the caller hangs up during the 180 second message, the call is not considered "abandoned." This measure is a percent. The numerator is a count of all calls of 180 seconds or more made to the Florida Abuse Hotline that are abandoned by the caller before they are answered by Hotline staff. The denominator is a count of all calls made to the Florida Abuse Hotline. The source of data is the Hotline's Automated Call Distribution System. Data Source: ACD System
Validity:	This is an outcome measure of the hotline's performance in timely response to calls made to the hotline.
Reliability:	The Automated Call Distribution (ACD) system is a sophisticated telephone system that handles and monitors processing of all calls. Data on number of calls received, answered and abandoned, the duration of calls and response time come directly from the telephone system.

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Florida Abuse Hotline 60900310</u>
Measure:	<u>Calls answered (M0070)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Citizens call the Florida Abuse Hotline to report abuse. Calls answered by a hotline counselor are considered answered. This measure is a number. It is a count of all calls made to the Florida Abuse Hotline that are answered by Hotline staff. It includes all calls on: (1) the lines to report abuse (voice and TDD), (2) fax lines and (3) the helpline for DCF staff. It does not include calls in which the caller hangs up before the call is answered. The source of data is the Hotline's Automated Call Distribution System. Data Source: ACD System
Validity:	This output is a process measure that indicates the workload of the Hotline.
Reliability:	The Automated Call Distribution (ACD) system is a sophisticated telephone system that handles and monitors processing of all calls. Data on number of calls received, answered and abandoned, the duration of calls and response time come directly from the telephone system.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Florida Abuse Hotline 60900310</u>
Measure:	<u>Number of calls to the hotline (M0300)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	The Florida Abuse Hotline receives: (1) calls from citizens who indicate through a telephone prompt that they wish to report concerns about child abuse or neglect or adult abuse, neglect or exploitation; (2) faxes from citizens with concerns about abuse, neglect or exploitation; and (3) calls from district DCF staff who require assistance. This measure is a number. It is a count of all calls and faxes received by the Florida Abuse Hotline's Automated Call Distribution System. Data Source: ACD System
Validity:	This is a process measure that indicates the workload of the Hotline.
Reliability:	Reliability of this measure is dependent on DCF, sheriff's and contract provider's staff compliance with data reporting requirements as well as a common understanding of those requirements. Data entry in FSFN is the responsibility of district and provider direct services and supervisory staff. Periodic district reviews by program staff have indicated no major reliability issues. On-going systems training and monitoring assure consistency and accuracy of data.

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Program Management and Compliance - Family Safety 60900310</u>
Measure:	<u>Administrative cost as a percent of total program costs (M0136)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	The cost of positions and other related expenses that support the delivery of services to the eligible population. The total of the sub-budget entity divided by the total of all the sub-budget entities in this program area. Data Source: The Legislative Accounting System/Program Budgeting System (LAS/PBS) and FLAIR.
Validity:	This measure is intended to keep administrative costs low so that the bulk of the expenditures are for the direct benefit of clients.
Reliability:	FLAIR has tight controls by the Comptroller to ensure accurate reporting of expenditures.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>FAMILY SAFETY AND PRESERVATION SERVICES</u>
Service/Budget Entity:	<u>Program Management and Compliance - Family Safety 60900310</u>
Measure:	<u>Administrative cost as a percent of total agency costs (M0426)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	The cost of positions and other related expenses that support the delivery of services to the eligible population. Administrative cost is divided by total agency costs (*100). Data Source: The Legislative Accounting System/Program Budgeting System (LAS/PBS) and FLAIR.
Validity:	This measure is intended to keep administrative costs low so that the bulk of the expenditures are for the direct benefit of clients.
Reliability:	FLAIR has tight controls by the Comptroller to ensure accurate reporting of expenditures.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Community Mental Health Services 60900506</u>
Measure:	<u>Average annual days worked for pay for adults with severe and persistent mental illness (M0003)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Adults with severe and persistent mental illness (SPMI) includes adults age 18 and over who meet the following criteria:</p> <ol style="list-style-type: none"> 1. They do not meet the criteria for adults with forensic involvement, and 2. They have an International Classification Diagnosis, 9th edition (ICD-9) diagnosis of 295-299, or 3. They have another qualifying ICD 9 diagnosis and currently receive SSI/SSDI benefits for a psychiatric disability, or 4. They have another qualifying ICD 9 diagnosis and have a prognosis that their mental health issue will last, or has already lasted, at least 12 months, or 5. They have another qualifying ICD 9 diagnosis and are unable to perform activities of daily living independently. A day of work is defined as any time period within a calendar day that results in taxable income, whether or not such income is actually reported to the tax authorities. Adults who are in a state mental health treatment facility as of July 1 are excluded from the measure. Measure is an average of days worked for pay. The average is derived by: <ol style="list-style-type: none"> 1) Selecting quarterly and discharge evaluations for each person served during the specified time period. 2) Work days are totaled for each client and then divided by the total number of evaluations for that client to derive an average number of work days per client. 3) The averages are then added together and divided by the number of clients who were evaluated during the specified time period. 4) The average derived is then multiplied by 12.1667 to get the annual average days worked. <p>People over the age of 62 are excluded from the algorithm. Data Source: Provider staff report the data based on client interviews and records.</p>
Validity:	Increased employment is an indication of a person's ability to live independently. The measure does not take into account adults who are in school, participating in volunteer work, or in vocational training, although these activities may contribute toward successful living in the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. Providers are required by contract to report performance data, and DCF monitors compliance. Central office provides routine training on data reporting. Region staff monitor the quality and accuracy of information submitted by their contracted providers. Threats to reliability include self-reporting mistakes by clients as well as provider error.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Community Mental Health Services 60900506</u>
Measure:	<u>Number of adults with a serious and persistent mental illness in the community served (M0016)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Adults with severe and persistent mental illness (SPMI) includes adults age 18 and over who meet the following criteria:</p> <ol style="list-style-type: none"> 1. They do not meet the criteria for adults with forensic involvement, and 2. They have an ICD 9 diagnosis of 295-299, or 3. They have another qualifying ICD 9 diagnosis and currently receive SSI/SSDI benefits for a psychiatric disability, or 4. They have another qualifying ICD 9 diagnosis and have a prognosis that their mental health issue will last, or has already lasted, at least 12 months, or 5. They have another qualifying ICD 9 diagnosis and are unable to perform activities of daily living independently. <p>Served means an individual received at least one mental health service event during the time period. Measure is an unduplicated count of number of adults whose first service of the fiscal year had a target population of severe and persistent mental illness. Data Source: Substance Abuse and Mental Health (SAMH) Data System</p>
Validity:	This is a direct measure of the number of adults who receive treatment in the state mental health system.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. Providers are required by contract to report performance and service data, and the department will monitor compliance. Central office provides annual training on data collection, and district staff monitor the quality and accuracy of information submitted by their contracted providers.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Community Mental Health Services 60900506</u>
Measure:	<u>Number of adults in mental health crisis served (M0017)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Adults in mental health crisis includes adults age 18 and over who have a target population of adults with serious and acute mental illness (SAMI) OR adults with mental health problems (MHP).</p> <p>Adults with SAMI meet the criteria to be admitted into a Baker Act receiving facility. They do not meet the criteria for adults with forensic involvement or adults with severe and persistent mental illness.</p> <p>Adults with MHP have emotional issues that are impacting their day to day functioning. They do not meet the criteria for adults with forensic involvement, adults with severe and persistent mental illness, or adults with serious and acute mental illness</p> <p>Served means an individual received at least one service event during the time period.</p> <p>Measure is an unduplicated count of number of adults whose first service of the fiscal year had a target population of adults with serious and acute mental illness or adults with mental health problems.</p> <p>Data Source: Provider staff report the data based on client interview and records.</p>
Validity:	This is a direct measure of the number of adults who receive treatment in the state mental health system.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. Providers are required by contract to report performance and service data, and the department will monitor compliance. Central office provides annual training on data collection, and district staff monitor the quality and accuracy of information submitted by their contracted providers.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Community Mental Health Services 60900506</u>
Measure:	<u>Number of adults with forensic involvement served (M0018)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Adults with forensic involvement includes adults age 18 and over who meet the following criteria:</p> <p>They have a legal status indicating that they were 916 Not Guilty by Reason of Insanity or 916 Incompetent to Proceed.</p> <p>Served means an individual received at least one service event during the time period.</p> <p>Measure is an unduplicated count of number of adults whose first service of the fiscal year had a target population of adults with forensic involvement.</p> <p>Data Source: Provider staff report the data based on client interview and records.</p>
Validity:	This is a direct measure of the number of adults who receive treatment in the state mental health system.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. Providers are required by contract to report performance and service data, and DCF will monitor compliance. Central office provides annual training on data collection, and district staff monitor the quality and accuracy of information submitted by their contracted providers.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Community Mental Health Services 60900506</u>
Measure:	<u>Percentage of adults in community mental health programs who are employed (M0703)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Competitively employed is defined as a person whose employment status is full or part time any time during the fiscal year as reported in the Substance Abuse and Mental Health Information System (SAMHIS). Adults with severe and persistent mental illness (SPMI) includes adults age 18 and over who meet the following criteria: 1. They do not meet the criteria for adults with forensic involvement, and 2. They have an ICD 9 diagnosis of 295-299, or 3. They have another qualifying ICD 9 diagnosis and currently receive SSI/SSDI benefits for a psychiatric disability, or 4. They have another qualifying ICD 9 diagnosis and have a prognosis that their mental health issue will last, or has already lasted, at least 12 months, or 5. They have another qualifying ICD 9 diagnosis and are unable to perform activities of daily living independently. Adults with forensic involvement includes adults age 18 and over who meet the following criteria:</p> <ul style="list-style-type: none"> ● They have a legal status indicating that they were 916 Not Guilty by Reason of Insanity or 916 Incompetent to Proceed. ● Adults with mental health problems (MHP) are adults who have emotional issues that are impacting their day to day functioning, but these issues are transient and are not expected to develop into a chronic mental illness. ● Adults with serious and acute mental illness (SAMI) are adults with who met the criteria to be admitted into a Baker Act receiving facility. <p>Served means an individual received at least one service event during the time period. The numerator is an unduplicated number of adults with SMI who are competitively employed full or part-time during the time period. The denominator is an unduplicated number of all the adults with SMI served regardless of their employment status (e.g. employed full or part-time, unemployed, not in the labor force such as those who are retired, sheltered employment, sheltered workshops, and other). Data Source: Provider staff report the data based on client interviews and records.</p>
Validity:	This measure attempts to measure the success of clients to live independently with mental illness and function as a productive member of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Community Mental Health Services 60900506</u>
Measure:	<u>Percent of adults with severe and persistent mental illnesses who live in stable housing environment. (M0742)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Stable housing environment includes living situation for adults who live in private residences with relatives, non-relatives, friends, or foster parents as opposed to being in institutional setting, residential care, residential treatment facility, crisis residence, jail, correctional facility, or homeless. The client's most recent residential status code of 01 thru 08, and 11 will be used to determine if an adult lives in stable housing environment. Adults with severe and persistent mental illness (SPMI) includes individuals age 18 and over who meet the following criteria: 1. They do not meet the criteria for adults with forensic involvement, and 2. They have an ICD 9 diagnosis of 295-299, or 3. They have another qualifying ICD 9 diagnosis and currently receive SSI/SSDI benefits for a psychiatric disability, or 4. They have another qualifying ICD 9 diagnosis and have a prognosis that their mental health issue will last, or has already lasted, at least 12 months, or 5. They have another qualifying ICD 9 diagnosis and are unable to perform activities of daily living independently. The numerator is the number of adults with SPMI served who live in stable housing environment during the time period. The denominator is all adults with SPMI served and living in any living situation, excluding persons with living situation of unknown.</p> <p>Data Source: Provider staff report the data based on client interviews and records.</p>
Validity:	This measure attempts to measure the success of clients to live independently with mental illness and function as a productive member of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Community Mental Health Services 60900506</u>
Measure:	<u>Percent of adults in forensic involvement who live in stable housing environment. (M0743)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Stable housing environment includes living situation for adults who live in private residences with relatives, non-relatives, friends, or foster parents as opposed to being in institutional setting, residential care, residential treatment facility, crisis residence, jail, correctional facility, or homeless. The client's most recent residential status code of 01 thru 08, and 11 will be used to determine if a child lives in stable housing environment. Adults with forensic involvement includes adults age 18 and over who meet the following criteria: (a) have a legal status indicating that they were 916 Not Guilty by Reason of Insanity or 916 Incompetent to Proceed, and (b) have a mental health problem. The numerator will be the number of Adults with forensic involvement served who live in stable housing environment during the time period. The denominator will be all Adults with forensic involvement served and living in any living situation, excluding persons with living situation of unknown.</p> <p>Data Source: Provider staff report the data based on client interviews and records.</p>
Validity:	This measure attempts to measure the success of clients to live independently with mental illness and function as a productive member of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Community Mental Health Services 60900506</u>
Measure:	<u>Percent of adults in mental health crisis who live in stable housing environment. (M0744)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Stable housing environment includes living situation for adults who live in private residences with relatives, non-relatives, friends, or foster parents as opposed to being in institutional setting, residential care, residential treatment facility, crisis residence, jail, correctional facility, or homeless. The client's most recent residential status code of 01 thru 08, and 11 will be used to determine if a person lives in stable housing environment. Adults in mental health crisis include two subgroups: (1) adults with mental health problems (MHP) are adults who have emotional issues that are impacting their day to day functioning, but these issues are transient and are not expected to develop into a chronic mental illness; and (2) Adults with serious and acute mental illness (SAMI) are adults who met the criteria to be admitted into a Baker Act receiving facility. Served means an individual received at least one service event during the time period. The numerator will be the number of adults in mental health crisis served who live in stable housing environment during the time period. The denominator will be all adults in mental health crisis served and living in any living situation, excluding persons with living situation of unknown.</p> <p>Data Source: Provider staff report the data based on client interviews and records.</p>
Validity:	This measure attempts to measure the success of clients to live independently with mental illness and function as a productive member of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Percent of school days seriously emotionally disturbed (SED) children attended. (M0012)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Children with serious emotional disturbance (SED) includes children under age eighteen, and in some cases children between the ages of 18 and 21, who meet any of the following criteria:</p> <ol style="list-style-type: none"> 1. They have a diagnosis of schizophrenia/other psychotic disorder, major depression, mood disorder or personality disorder. 2. They have a diagnosis of another allowable ICD 9 diagnosis and have a C-GAS score of fifty or below. 3. They currently receive SSI benefits for a psychiatric disability. <p>School days attended are the days on which a child's school was in session and the child attended school.</p> <p>Measure is a percent. First, an average of days available and an average of days attended is calculated for each client by separately summing the total days attended and the total days available reported on each record for each ssn and dividing those numbers by the total number of records reported for that ssn. This is done to weight the figures, so that a ssn who happens to have more outcome measure records reported does not skew that data.</p> <p>The numerator is created next by summing the average number of school days attended. The denominator is the sum of the average school days available. That result is multiplied to 100. Only post admission outcome measure records (purpose codes 2 and 3) are used, and the records must have occurred within the fiscal year. The child must have a valid children's mental health target population to be included and must have received a service event within the fiscal year. Children who are in the physical custody of DJJ are excluded.</p> <p>Data Source: Provider staff report the data based on client interview and records.</p>
Validity:	School attendance is a strong indicator of a child's future self-sufficiency and is an important aspect of overall functioning.
Reliability:	The reliability of this measure is dependent on client self reporting and/or the providers' ability to obtain attendance information from schools, as well as providers' compliance with data reporting. Providers are required by contract to report performance data, and DCF will monitor compliance. Central office provides annual training on data reporting, and district staff monitor the quality and accuracy of information submitted by their contracted providers.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Percent of children with mental illness restored to competency and recommended to proceed with a judicial hearing (M0019)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>The principle of law to ensure a defendant's due process right to a fair trial has been codified into Florida Rules of Juvenile Procedure and is cited as being "whether the defendant has sufficient present ability to consult with counsel with a reasonable degree of rational understanding and whether the defendant has a rational, as well as factual, understanding of the pending proceedings. In addition, under Florida statute a youth can only be committed to DCF for competency training if the basis of the incompetency is mental illness or intellectually disabled. This measure is a percentage. Numerator is number of children with mental illness who were restored to competency and recommended to proceed to a judicial hearing in the time period. Denominator is the total number children with mental illness who had competency reports submitted to the courts.</p> <p>Data Source: Referral packets from the court which includes, at a minimum, the court order, the charging documents, the petition, and the court-appointed evaluator's reports.</p>
Validity:	<p>Measure is a not a true indicator of the desired outcome (see also comment section) that juveniles are restored to competency and are able to proceed with a judicial hearing. Several factors impact the degree of success in a juvenile's ability to obtain competency. These factors include the nature and severity of the juvenile's mental illness, a prior finding by the court ordered evaluators that the juvenile will never obtain competency, and extent or lack thereof of prior mental health treatment. These factors are outside the scope of the provider's ability to restore competency.</p>
Reliability:	<p>Central office maintains an ACCESS data base that tracks major events of each child's case. The provider has demonstrated their capacity to maintain data accurately and consistently. The program coordinator conducts on site monitoring of the provider, reviews representative samples of case files to ensure information coincides with the providers monthly reports.</p>

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Percent of children who are intellectually disabled restored to competency and recommended to proceed with a judicial hearing (M0020)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Intellectual disability means significantly sub average general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the period from conception to age 18. "Significantly sub average general intellectual functioning," for the purpose of this definition and as defined in 393.063, means performance which is two or more standard deviations from the mean score on a standardized intelligence test. These children require an DSM-IV AXIS II intellectually disabled. The principle of law to ensure a defendant's due process right to a fair trial has been codified into Florida Rules of Juvenile Procedure and is cited as being "whether the defendant has sufficient present ability to consult with counsel with a reasonable degree of rational understanding and whether the defendant has a rational, as well as factual, understanding of the pending proceedings. In addition, under Florida statute a youth can only be committed to DCF for competency training if the basis of the incompetency is mental illness or intellectually disabled This measure is a percentage. Numerator is number of children who are intellectually disabled who were restored to competency and recommended to proceed to a judicial hearing in the time period. Denominator is the total number children who are intellectually disabled who had competency reports submitted to the court in the time period.</p> <p>Data Source: Referral packets from the court which includes, at a minimum, the court order, the charging documents, the petition, and the court-appointed evaluator's reports.</p>
Validity:	<p>Measure is not a true indicator of the desired outcome (see comment section) that juveniles are restored to competency and are able to proceed with a judicial hearing. Several factors impact the degree of success in a juvenile's ability to obtain competency. These factors include the nature and severity of the juvenile's intellectual disability, a prior finding by the court ordered evaluators that the juvenile will never obtain competency, and extent or lack thereof of prior treatment. These factors are outside the scope of the provider's ability to restore competency.</p>
Reliability:	<p>Central office maintains an access database program that tracks major events of each child's case. The provider has demonstrated their capacity to maintain data accurately and consistently. The program coordinator conducts on site monitoring of the provider, reviews representative samples of case files to ensure information coincides with the providers monthly reports.</p>

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Number of children served who are incompetent to proceed (M0030)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Children must be charged with a felony and found incompetent to proceed due to mental illness or intellectually disability, or autism. This is a count of all children served by the contracted provider at any time during the year. Data Source: Referral packets from the court which includes, at a minimum, the court order, the charging documents, the petition, and the court-appointed evaluator's reports.
Validity:	This is a direct indicator of the goal to serve children who are incompetent to proceed to a juvenile justice process.
Reliability:	Additional separate reports have been cross referenced to validate the admission and discharge reporting.

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Number of SED children to be served (M0031)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Children with serious emotional disturbance (SED) includes children under age eighteen, and in some cases children between the ages of 18 and 21, who meet any of the following criteria:</p> <ul style="list-style-type: none"> • They have a diagnosis of schizophrenia/other psychotic disorder, major depression, mood disorder or personality disorder. • They have a diagnosis of another allowable ICD 9 diagnosis and have a C-GAS score of fifty or below. • They currently receive SSI benefits for a psychiatric disability. <p>Served means that the individual received at least one service event during the time period. Measure is an unduplicated count of number of children whose first service of the fiscal year had a target population of children with serious emotional disturbance. Data Source: Provider staff report the data based on client interview and records.</p>
Validity:	This is a direct measure of the number of children with SED served in mental health
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. Providers are required by contract to report performance and service data, and the department will monitor compliance. Central office provides annual training on data collection, and district staff monitor the quality and accuracy of information submitted by their contracted providers.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Number of ED children to be served (M0032)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Children with emotional disturbance (ED) includes children under age eighteen, and in some cases children between the ages of 18 and 21, who meet both of the following criteria:</p> <ol style="list-style-type: none"> 1. They do not meet the criteria for the SED target population. 2. They have a diagnosis of an allowable ICD 9 diagnosis. <p>Served means that the individual received at least one service event during the time period.</p> <p>Measure is an unduplicated count of number of children whose first service of the fiscal year had a target population of children with emotional disturbance. Data Source: Provider staff report the data based on client interview and records.</p>
Validity:	This is a direct measure of the number of children with ED served in mental health treatment programs.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. Providers are required by contract to report performance data, and DCF will monitor compliance. Central office provides annual training on target population enrollment, and district staff monitor the quality and accuracy of information submitted by their contracted providers.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Number of at-risk children to be served (M0033)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Children at risk of emotional disturbance (At Risk) includes children under age eighteen, and in some cases children between the ages of 18 and 21, who meet both of the following criteria:</p> <ol style="list-style-type: none"> 1. They do not meet the criteria for SED or ED target populations. 2. They have factors in their lives that place them at risk for emotional disturbance, such as referral to EH program in accordance IDEA, homelessness, family history of mental illness, have experienced or are experiencing abuse or neglect, exposure to domestic violence, substance abuse, chronic or serious physical illness, or multiple out-of-home placements. <p>Served means that the individual received at least one service event during the time period.</p> <p>Measure is an unduplicated count of the number of children whose first service of the fiscal year had a target population of children at risk of emotional disturbance.</p> <p>Data Source: staff report the data based on client interview and records.</p>
Validity:	This is a direct measure of the number of children at risk of ED served in mental health treatment programs.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. Providers are required by contract to report performance and service data, and the department will monitor compliance. Central office provides annual training on data collection, and district staff monitor the quality and accuracy of information submitted by their contracted providers

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Percent of children with emotional disturbances who improve their level of functioning (M0377)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Children with emotional disturbances (ED) includes children under age eighteen, and in some cases children between the ages of 18 and 21, who meet both of the following criteria:</p> <ol style="list-style-type: none"> 1. They do not meet the criteria for serious emotional disturbance (SED). 2. They have an allowable mental health diagnosis as defined in the International Classification of Diseases, 9th edition (ICD-9) and listed in the DCF Pamphlet 155-2 for Substance Abuse and Mental Health Measurement and Data. <p>Improved functioning means that the current level of functioning is better than the level previously measured. This number is a percent and is based on the change between two assessments.</p> <p>The numerator is the number of children whose "most recent score" is less than their "previous assessment score". The scores are calculated by summing the score for the 16 questions per person captured on the Children's Functional Assessment Rating Scales (CFARS). A decrease in score from the most recent assessment score to the previous assessment score indicates that the level of functioning has improved. The "most recent score" must occur within the reporting fiscal year and cannot be an admission assessment.</p> <p>The "previous assessment score" must have occurred within the 12 previous months of the "most recent score" and cannot be a discharge assessment. If there are multiple records for the child, the "previous assessment score" that falls closest to the 6 month mark (180 days) from the "most recent score" will be used.</p> <p>The denominator is all children with two assessments.</p> <p>To achieve the percentage of increase, the total number of children who improved is divided by the total number of children with two qualifying assessments.</p> <p>To be included in this measure, the child must have been served during the reporting fiscal year (must have at least one service event record) and must be enrolled in the specified target population.</p> <p>Data Source: Provider staff report the data based on the administration of CFARS by a certified rater.</p>
Validity:	The validity of this measure to capture functioning level that is commensurate with level of care has been tested by the Florida Mental Health Institute.
Reliability:	The reliability of this measure is enhanced by the fact that CFARS is administered only by certified raters who must meet training criteria to become certified. Florida Mental Health Institute has performed inter-rater reliability studies to validate the administration of the tool.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Percent of children with serious emotional disturbances who improve their level of functioning. (M0378)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Children with serious emotional disturbance (SED) includes children under age eighteen, and in some cases children between the ages of 18 and 21, who meet any of the following criteria:</p> <ol style="list-style-type: none"> 1. They have a diagnosis of schizophrenia/other psychotic disorder, major depression, mood disorder or personality disorder. 2. They have an allowable mental health diagnosis as defined in the International Classification of Diseases, 9th edition (ICD-9) and listed in the DCF Pamphlet 155-2 for Substance Abuse and Mental Health Measurement and Data and have a C-GAS score of fifty or below. 3. They currently receive SSI benefits for a psychiatric disability. <p>Improved functioning means that the current level of functioning is better than the level previously measured. This number is a percent and is based on the change between two assessments.</p> <p>The numerator is the number of children whose "most recent score" is less than their "previous assessment score". The scores are calculated by summing the score for the 16 questions per person captured on the Children's Functional Assessment Rating Scales (CFARS). A decrease in score from the most recent assessment score to the previous assessment score indicates that the level of functioning has improved. The "most recent score" must occur within the reporting fiscal year and cannot be an admission assessment.</p> <p>The "previous assessment score" must have occurred within the 12 previous months of the "most recent score" and cannot be a discharge assessment. If there are multiple records for the child, the "previous assessment score" that falls closest to the 6 month mark (180 days) from the "most recent score" will be used.</p> <p>The denominator is all children with two assessments.</p> <p>To achieve the percentage of increase, the total number of children who improved is divided by the total number of children with two qualifying assessments.</p> <p>To be included in this measure, the child must have been served during the reporting fiscal year (must have at least one service event record) and must be enrolled in the specified target population.</p> <p>Data Source: Provider staff report the data based on the administration of CFARS by a certified rater.</p>
Validity:	The validity of this measure to capture functioning level that is commensurate with level of care has been tested by the Florida Mental Health Institute.
Reliability:	The reliability of this measure is enhanced by the fact that CFARS is administered only by certified raters who must meet training criteria to become certified. Florida Mental Health Institute has performed inter-rater reliability studies to validate the administration of the tool.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Percent of children with emotional disturbance (ED) who live in a stable housing environment (M0778</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Stable housing environment includes living situation for children who live in private residences with relatives, non-relatives, friends, or foster parents as opposed to being in institutional setting, residential care, residential treatment facility, crisis residence, jail, correctional facility, or homeless. The client's most recent residential status code of 01 thru 08, and 11 will be used to determine if a child lives in stable housing environment. Children with emotional disturbance (ED) includes persons under age eighteen, and in some cases persons between the ages of 18 and 21, who meet the following criteria: (1) Has an allowable Diagnostic and Statistical Manual (DSM-IV) diagnosis; and (2) Has a Children's Global Assessment Scale score of 51-60. The numerator will be the number of children with emotional disturbance served who live in stable housing environment during the time period. The denominator will be all children with emotional disturbance served with any living situation, excluding persons with living situation of unknown. Data Source: Provider staff report the data based on client interviews and records.
Validity:	This measure attempts to measure the success of clients to live independently with mental illness and function as a productive member of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting requirements. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Percent of children with serious emotional disturbance (SED) who live in a stable housing environment (M0779)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Stable housing environment includes living situation for children who live in private residences with relatives, non-relatives, friends, or foster parents as opposed to being in institutional setting, residential care, residential treatment facility, crisis residence, jail, correctional facility, or homeless. The client's most recent residential status code of 01 thru 08, and 11 will be used to determine if a child lives in stable housing environment. Children with serious emotional disturbance (SED) includes persons under age eighteen, and in some cases persons between the ages of 18 and 21, who meet any of the following criteria:</p> <p>(1) They have a diagnosis of schizophrenia/other psychotic disorder, major depression, mood disorder or personality disorder;</p> <p>(2) They have a diagnosis of another allowable ICD 9 diagnosis and have a C-GAS score of fifty or below;</p> <p>(3) They currently receive SSI benefits for a psychiatric disability. Served means that the individual received at least one service event during the time period. The numerator will be the number of children at risk of emotional disturbance served who live in stable housing environment during the time period.</p> <p>The denominator will be all children with at risk of emotional disturbance served and living in any living situation, excluding persons with living situation of unknown.</p> <p>Data Source: Provider staff report the data based on client interviews and records.</p>
Validity:	This measure attempts to measure the success of clients to live independently with mental illness and function as a productive member of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting requirements. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Children's Mental Health Services 60900506</u>
Measure:	<u>Percent of children at risk of emotional disturbance who live in a stable housing environment (M0780)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Stable housing environment includes living situation for children who live in private residences with relatives, non-relatives, friends, or foster parents as opposed to being in institutional setting, residential care, residential treatment facility, crisis residence, jail, correctional facility, or homeless. The client's most recent residential status code of 01 thru 08, and 11 will be used to determine if a child lives in stable housing environment. Children at risk of emotional disturbance include persons under age eighteen, and in some cases children between the ages of 18 and 21, who meet one of the following criteria:</p> <p>(1) Has a mental health presenting problem; or</p> <p>(2) Does not have a mental health diagnosis but has factors associated with an increased likelihood of developing an emotional disturbance (such as homelessness, family history of mental illness, abuse or neglect, domestic violence exposure, substance abuse, chronic physical illness, or multiple out-of-home placements).</p> <p>The numerator will be the number of children with serious emotional disturbance served who live in stable housing environment during the time period.</p> <p>The denominator will be all children with serious emotional disturbance served with any living situation excluding persons with living situation of unknown. Data Source: Provider staff report the data based on client interviews and records.</p>
Validity:	This measure attempts to measure the success of clients to live independently with mental illness and function as a productive member of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting requirements. DCF checks data submitted for accuracy and logic errors. While uniform procedures for data submission are provided to all contractors, a threat to consistency is differing interpretations of those procedures.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Program Management and Compliance - Mental Health 60900506</u>
Measure:	<u>Administrative cost as a percent of total program costs (M0135)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	The cost of positions and other related expenses that support the delivery of services to the eligible population. The total of the sub-budget entity divided by the total of all the sub-budget entities in this program area. Data Source: The Legislative Accounting System/Program Budgeting System (LAS/PBS) and FLAIR.
Validity:	This measure is intended to keep administrative costs low so that the bulk of the expenditures are for the direct benefit of clients.
Reliability:	FLAIR has tight controls by the Comptroller to ensure accurate reporting of expenditures.

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Violent Sexual Predator Program 60900506</u>
Measure:	<u>Number of sexual predators assessed (M0283)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Sexually Violent Predator, means an individual 18 years of age or older, who has been convicted of a sexually violent offense and who suffers from a mental abnormality or personality disorder that makes the individual likely to engage in acts of sexual violence, of such a degree as to pose a menace to the health and safety of others, if not confined in a secure facility for long-term control, care and treatment. Most individuals are pending a release from a correctional facility. Assessment means a determination by the Multidisciplinary Team of whether a client suffers from a mental abnormality or personality disorder that makes the individual likely to engage in acts of sexual violence, of such a degree as to pose a menace to the health and safety of others, if not confined in a secure facility for long-term control, care and treatment. The assessment shall include a review of the person's institutional history and treatment record, if any, the person's criminal background, and any other factor that is relevant to the determination of whether such person is a sexually violent predator. Count the number of Assessments completed Data Source: Program Office Database
Validity:	Valid measure of the program's assessment workload and need for resources for this activity.
Reliability:	Program database referral information is periodically reconciled with the Department of Corrections database

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Violent Sexual Predator Program 60900506</u>
Measure:	<u>Number of sexual predators served (detention and treatment). (M0379)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Sexually Violent Predator, means an individual 18 years of age or older, who has been convicted of a sexually violent offense and who suffers from a mental abnormality or personality disorder that makes the individual likely to engage in acts of sexual violence, of such a degree as to pose a menace to the health and safety of others, if not confined in a secure facility for long-term control, care and treatment. Unduplicated count of persons who are held in the SVPP's facilities at any time during the year. Data Source: Census reports from facilities that are entered into the SVPP Access database
Validity:	Measures the demand for secure confinement and treatment resources
Reliability:	Reliability is dependent on the facilities reporting data correctly to the program office. Facilities have been trained to report the data and program office staff perform site visits routinely.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Violent Sexual Predator Program 60900506</u>
Measure:	<u>Annual number of harmful events per 100 residents in sexually violent predator commitment. (M0380)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Harmful events are "significant reportable events" or those that result in serious injury to staff or residents; any incidents that result in a client elopement; and any incidents that result in serious damage to the physical plant. Florida has only one facility for sexually violent predators, the Florida Civil Commitment Center at Arcadia. Sexually Violent Predator, means an individual 18 years of age or older, who has been convicted of a sexually violent offense and who suffers from a mental abnormality or personality disorder that makes the individual likely to engage in acts of sexual violence, of such a degree as to pose a menace to the health and safety of others, if not confined in a secure facility for long-term control, care and treatment. Residents are the individuals court ordered to the program. The sum of harmful events in the facility for the fiscal year (numerator), divided by the average daily resident census (denominator), multiplied by 100.</p> <p>Data Source: Contractor staff</p>
Validity:	The reporting system is undergoing change from a resident-based report to a incident-based report. While the resident-based reporting system has fairly represented "significant reportable events," another category, "critical incidents" has been found to have been reported incorrectly or underreported. A quality assurance staff person at the facility and under separate contract to DCF reviews reports to correct these errors.
Reliability:	A recent test of the categories showed that "significant reportable events" are likely to be reported consistently across staff. QA review addresses any differences and requires correction.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Violent Sexual Predator Program 60900506</u>
Measure:	<u>Percent of assessments completed by the SVP program within 180 days of receipt of referral. (M05305)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>SVP or Sexually Violent Predator means an individual 18 years of age or older, who has been convicted of a sexually violent offense and who suffers from a mental abnormality or personality disorder that makes the individual likely to engage in acts of sexual violence, of such a degree as to pose a menace to the health and safety of others, if not confined in a secure facility for long-term control, care and treatment. Most individuals are pending a release from a correctional facility. Assessment means a determination by the Multidisciplinary Team of whether a client suffers from a mental abnormality or personality disorder that makes the individual likely to engage in acts of sexual violence, of such a degree as to pose a menace to the health and safety of others, if not confined in a secure facility for long-term control, care and treatment. The assessment shall include a review of the person's institutional history and treatment record, if any, the person's criminal background, and any other factor that is relevant to the determination of whether such person is a sexually violent predator. Days refer to calendar days. Receipt of referral means the date referral received by department staff. The count of all completed assessments is divided into the number of assessments completed within 180 days of receipt multiplied by 100.</p> <p>Data Source: SVPP Access database</p>
Validity:	The measure captures the ability of the program to comply with the legislative mandate to complete all assessments within 180 days.
Reliability:	Program referral database is periodically reconciled with Department of Corrections and a sample is checked.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Violent Sexual Predator Program 60900506</u>
Measure:	<u>Number of residents receiving Mental Health treatment (M06001)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Residents refers to Sexually Violent Predators (an individual 18 years of age or older, who has been convicted of a sexually violent offense and who suffers from a mental abnormality or personality disorder that makes the individual likely to engage in acts of sexual violence, of such a degree as to pose a menace to the health and safety of others, if not confined in a secure facility for long-term control, care and treatment) court ordered and located in a treatment facility. Unduplicated count of residents receiving Mental Health treatment. Data Source: Contractor Monthly Report
Validity:	This output measure addresses level of effort being given to treatment for the residents.
Reliability:	This measure is checked through annual contract monitoring.

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Mental Health Treatment Facilities 60900506</u>
Measure:	<u>Average number of days to restore competency for adults in forensic commitment. (M0015)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	The average number of days to restore to competency is the period between admission and the date the competency report to the court is completed. This measure uses a trimmed mean procedure. The days to restore is calculated for each client by subtracting the admission date from the date the competency report was sent to the court. The days to restore are then ranked, and the top 5 percent and the bottom 5 percent of cases are removed (for a total of 10%). The sum of those days, after the total of 10 percent is trimmed, is the numerator. The denominator is the total number of clients remaining after the trim for whom days to restore to competency has been calculated. Data Source: The forensic facility staff send the data to the ADM Central Office where the data is entered into the forensic facility database.
Validity:	This measure addresses the primary mission of forensic facilities.
Reliability:	Forensic Facility database has been in operation for ten years and no significant data accuracy problems have been identified for performance measure.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Mental Health Treatment Facilities 60900506</u>
Measure:	<u>Number of people on forensic admission waiting list over 15 days. (M0361)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Adults are persons 18 years old and over and juveniles who have been adjudicated as adults who are charged with a felony offense and as incompetent to proceed due to mental illness or not guilty by reason of insanity. They are committed by a circuit court to DCF for involuntary hospitalization pursuant to Ch. 916, F.S. Ch. 916.107(1)(a), F.S. mandates that DCF admit committed people within 15 days of receipt of a complete commitment packet. The forensic waiting list is a document maintained by the Forensic Admission Coordinator in the Mental Health Program Office. The count of days (calendar days) begins on the day the complete commitment packet is received. Only persons remaining on the waiting list 16 days or longer are included in the measure.</p> <p>Count of all persons committed pursuant to Ch. 916, F.S. who have not been admitted to a state mental health treatment facility within 15 calendar days from the date that the complete commitment packet is received in the Forensic Admission Coordinator's office of the Mental Health Program Office. Data Source: The Clerk of the Circuit Court in each of Florida's twenty judicial circuits is responsible to ensure commitment packets are sent to the Mental Health Program Office. The packets may also be sent from other local offices: public defender, Mental Health Administrator (Dade County), or Court Projects Office (Broward County).</p>
Validity:	<p>This measures the availability of forensic beds in state mental health treatment facilities. The number does not break down availability by males and females, an important distinction because the total can show a reduction that may apply only to one or the other.</p> <p>The number can distort a critical need for beds for females or males at any given time. Counts also do not tell us whether the numbers represent small or large percentages of the total number waiting for admission or how long those individuals have been waiting.</p>
Reliability:	<p>Commitment criteria are defined in Ch. 916, F.S. People who are committed but appear appropriate for community-based treatment services may be referred to the district for possible diversion. If successfully diverted with court approval, individuals are removed from the waiting list without ever being admitted to a state mental health treatment facility.</p>

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Mental Health Treatment Facilities 60900506</u>
Measure:	<u>Number of people in civil commitment, per Ch. 394, F.S., served (M0372)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Civil commitment patients per Ch. 394, F.S., are patients who are committed to an institution under Florida's civil commitment statutes. They have no criminal adjudication pending, but are considered a danger to themselves or others, or are unable to care for themselves due to the severity of their mental illness. Served means they were on the hospital's census for at least one day during the fiscal year. The measure is calculated by adding the census at the beginning of the fiscal year and all new admissions during the fiscal year for clients who have a civil (394) legal status. The count is unduplicated. Data Source: Data is collected by the clinicians at each facility and submitted to the ADM data warehouse
Validity:	Measure is a direct count of the number of people who use hospital beds
Reliability:	Reliability is dependent on the facilities reporting data correctly to the program office. Facilities have been trained to report the data and program office staff perform site visits routinely.

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Mental Health Treatment Facilities 60900506</u>
Measure:	<u>Number of adults in forensic commitment, per Ch. 916, F.S., served (M0373)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Adults in forensic commitment means adults who are mentally ill, have been charged with a crime and have been committed to a mental health facility under Ch. 916, F.S.. These clients may be "not guilty by reason of insanity" (NGI) or "incompetent to proceed to trial" (ITP). Served means that they were on the hospital census for at least one day in the fiscal year. The measure is calculated by adding the census at the beginning of the fiscal year and all new admissions during the fiscal year for clients who have a forensic (916) legal status. The count is unduplicated. Data Source: Data is collected by the clinicians at each facility and submitted to the ADM data warehouse.
Validity:	Measure is a direct count of the number of people who use hospital beds
Reliability:	Reliability is dependent on the facilities reporting data correctly to the program office. Facilities have been trained to report the data and program office staff perform site visits routinely.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Mental Health Treatment Facilities 60900506</u>
Measure:	<u>Percent of adults in civil commitment, per Ch. 394, F.S., who show an improvement in functional level. (M05050)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Civil commitment patients per Ch. 394, F.S., are patients who are committed to an institution under Florida's civil commitment statutes. They have no criminal adjudication pending, but are considered a danger to themselves or others, or are unable to care for themselves due to the severity of their mental illness. This number is a percent. The denominator is the number of people who had two scores reported for comparison. The numerator is the number of people who showed improvement.</p> <p>Data Source: Data is collected by the clinicians at each facility and submitted to the ADM data warehouse.</p>
Validity:	The measure captures the success of a provider's intervention through functional assessment. The instrument, the FARS, has high validity when tested.
Reliability:	Reliability of measure is dependent on provider's compliance with data reporting. Providers are required by contract to report performance data including client outcomes. Department will monitor extent to which providers comply with these contractual requirements. The tool currently being used, the FARS, has high test/retest and inter-rater reliability. All raters are required to be trained and certified before using the instrument.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Mental Health Treatment Facilities 60900506</u>
Measure:	<u>Percent of adults in forensic commitment, per Chapter 916, Part II, who are Not Guilty by Reason of Insanity, who show an improvement in functional level. (M05051)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Not guilty by reason of insanity (NGI) patients have been found by a court to be not guilty of a crime due to their mental illness at the time they committed the crime and have been ordered to a mental health facility, in accordance with Ch.916, F.S.. This number is a percent. The denominator is the number of people who had two scores reported for comparison. The numerator is the number of people who showed improvement. Data Source: Data is collected by the clinicians at each facility and submitted to the ADM data warehouse.
Validity:	The measure captures the success of a provider's intervention through functional assessment. The instrument, the FARS, has high validity when tested.
Reliability:	Reliability of measure is dependent on provider's compliance with data reporting. Providers are required by contract to report performance data including client outcomes. Department will monitor extent to which providers comply with these contractual requirements. The tool currently being used, the FARS, has high test/retest and inter-rater reliability. All raters are required to be trained and certified before using the instrument.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Mental Health Treatment Facilities 60900506</u>
Measure:	<u>Percent of adults with serious mental illness readmitted to a civil state hospital within 180 days of discharge (M0709)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Readmission within 180 days means that a person in civil commitment was discharged from a state mental health treatment facility and returned to any facility (civil or forensic) within 180 days following the previous discharge date.</p> <p>Persons in civil commitment are individuals with serious mental illness committed to a state mental health treatment facility as Voluntary Admission under Section 394.4625, Florida Statutes, or as Involuntary Admission under Section 394.467, Florida Statutes.</p> <p>(1) The numerator is the number of persons in civil commitment who were discharged as specified below in the denominator and were readmitted within 180 days following the discharge date and had a forensic or civil commitment at the time of readmission (COMMITYPE = 1 through 9) and had a readmission type other than transfer between hospitals or status change (ADMTYPE = 01, 02, 03, 04, or 10).</p> <p>(2) The denominator is the total number of persons in civil commitment status (most recent COMMITYPE = 1, 2, 3, 7, 8, or 9), who were discharged during the reporting fiscal year and the discharge reason was not one of the following: (a) transfer between hospitals (DREASON= 02, 03, 04); (b) death (DREASON = 10 or 11); or (c) status change (DREASON = 16, 17 or 18). Data Source: Staff in State Mental Health Treatment Facilities reports the data daily, weekly, or monthly in the Substance Abuse and Mental Health Information System (SAMHIS).</p>
Validity:	This measure attempts to measure the success of persons with serious mental illness to live independently or in less restrictive environment in community and to function as a productive member of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting requirements. DCF validates data submitted for accuracy and logic errors. All the state mental health treatment facilities use uniform procedures and requirement specifications for data definition, validation and submission into the SAMHIS database.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>MENTAL HEALTH SERVICES</u>
Service/Budget Entity:	<u>Adult Mental Health Treatment Facilities 60900506</u>
Measure:	<u>Percent of adults with serious mental illness readmitted to a forensic state treatment facility within 180 days of discharge (M0777)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Readmission within 180 days means that a person in forensic commitment was discharged from a state mental health treatment facility and returned to a forensic state treatment facility within 180 days following the previous discharge date.</p> <p>Persons in forensic commitment are individuals with serious mental illness committed to a state mental health treatment facility as Not Guilty by Reason of Insanity (NGI) under Section 916.15, Florida Statutes, or as Incompetent to Proceed (ITP) under Section 916.13, Florida Statutes.</p> <p>(1) The numerator is the distinct number of persons in forensic commitment, who were discharged as specified below in the denominator and were readmitted within 180 days following the discharge date and had a forensic commitment at the time of readmission (COMMITYPE = 4, 5 or 6) and had a readmission type other than transfer between hospitals or status change (ADMTYPE = 01, 02, 03, 04, or 10).</p> <p>(2) The denominator is the distinct number of persons in forensic commitment status (most recent COMMITYPE = 4, 5 or 6), who were discharged during the reporting fiscal year and the discharge reason was not one of the following: (a) transfer between hospitals.</p> <p>Data Source: Staff in State Mental Health Treatment Facilities reports the data daily, weekly, or monthly in the Substance Abuse and Mental Health Information System (SAMHIS)</p>
Validity:	This measure attempts to measure the success of persons with serious mental illness to live independently or in less restrictive environment in community and to function as a productive member of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with DCF data reporting requirements. DCF validates data submitted for accuracy and logic errors. All the state mental health treatment facilities use uniform procedures and requirement specifications for data definition, validation and submission into the SAMHIS database.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Adult Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Number of adults served (M0063)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Adults served in substance abuse treatment include persons enrolled in adult substance abuse priority populations and received services in any cost center under adult substance abuse program. Count of adults served in substance abuse program Data Source: Provider staff reports service event data in Substance Abuse and Mental Health Information System (SAMHIS) based on data collected locally.
Validity:	This workload measure represents the effort expended to serve at adults.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Adult Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Percentage change in clients who are employed from admission to discharge. (M0753)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Employed is defined as part-time or fulltime employment, including active military duty, at the time of discharge from treatment. There are no minimum hour or wage requirements; the wages must be subject to income tax, however, so that welfare and nontaxable stipends are not considered employment. An adult is a person 18 years old and older. The measure is a percentage, calculated by taking the number of adults who, at the time of discharge, are employed fulltime, part-time or active military (numerator), divided by the number of adults discharged from treatment with any employment or unemployment codes. Persons who are retired or not in the labor force (students, persons with disabilities, homemakers and on leave of absence from a job) are not included in the denominator. Clients who died, were incarcerated, referred outside of the agency and did not complete episode of care or discharged for other reasons not elsewhere captured are excluded. Data Source: OneFamily Substance Abuse and Mental Health (SAMH) data system discharges and service events.
Validity:	Research available from the Substance Abuse Program office has shown that higher employment rates are positively correlated with reduced substance use.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting requirements. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Adult Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Percent change in the number of adults arrested 30 days prior to admission versus 30 days prior to discharge. (M0754)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Having arrest means the client was arrested and booked at least once during the last 30 days before his/her admission into the provider agency and/or at least once during the last 30 days prior to discharge from the provider agency.</p> <p>This measure focuses on adults discharged during the reporting period, who received services in at least one of the following treatment cost centers: 06= Day/Night; 08=In-home/On-site; 12=Medical Services; 14=Outpatient Individual; 18=Residential Level I; 19= Residential Level II; 20= Residential Level III; 21= Residential Level IV; 31=Behavioral Health Overlay; 35=Outpatient Group; 36=Room & Board Level I; 37=Room & Board Level II; 38=Room & Board Level III. Percent arrested prior to admission: the numerator is the number of adults who meet the following criteria: (a) the substance abuse admission record (Purpose = 1) indicates that the client was arrested at least once in the last 30 days prior to admission (Arrest > 0). The denominator is the total number of adults admitted (Purpose = Percent arrested prior to discharge: the numerator is the number of adults who meet the following criteria: (a) the substance abuse discharge record (Purpose = 3) indicates that the client was arrested at least once in the last 30 days prior to discharge (Arrest > 0). The denominator is the total number of adults discharged (Purpose = 3). Percent change is the difference between the percent arrested prior to admission and the percent arrested prior to discharge.</p> <p>Data Source: Provider staff reports service event data in Substance Abuse and Mental Health Information System (SAMHIS) based on data collected locally.</p>
Validity:	Substance use and abuse have been shown in the research to be contributing factors to crime and delinquency. This measure is designed to evaluate the extent to which treatment facilitates reduced subsequent criminal activity.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Adult Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Percent of adults who successfully complete substance abuse treatment services. (M0755)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>The measure is a percentage. Successful completion of treatment include clients discharged during the reporting period who: (a) received services in any treatment cost centers (i.e., 06,08, 12, 14, 18, 19, 20, 21, 31, 35, 36, 37, 38) and discharge reason code is 01, 10 or 13 and frequency of use for a declared drug is 1 (no past use in the last 30 days). The numerator is the number of adults discharged who successfully completed treatment as defined above.</p> <p>The denominator is the number of adults discharged during the reporting period (excluding immediate discharges) with discharge reason codes of 01, 02, 06, 10, 11, 13, 15, and 16. Data Source: Provider staff reports data in SAMHIS based on client interviews or information in local client records.</p>
Validity:	Research has shown that completion of treatment is correlated with higher rates of reduced substance use and related problems versus non-completion.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Adult Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Percent of adults with substance abuse who live in a stable housing environment at the time of discharge. (M0756)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Stable housing environment includes the following residential status: independent living (code = 01, 02, or 03); dependent living (code = 04 or 05); and other residential settings (codes = 06, 07, 08, 11 or 17).</p> <p>The client's residential status code at the time of discharge is used to determine if the client lives in stable housing environment.</p> <p>This measure only includes adult clients who are discharged and received services in any of the following cost centers: 06= Day/Night; 08=In-home/On-site; 12=Medical Services; 14=Outpatient Individual; 18=Residential Level I; 19= Residential Level II; 20= Residential Level III; 21= Residential Level IV; 31=Behavioral Health Overlay; 35=Outpatient Group; 36=Room & Board Level I; 37=Room & Board Level II; 38=Room & Board Level III.. The numerator is the number of adults who meet the following conditions: (a) were discharged during the reporting period; (b) received services in at least one treatment cost center during the episode of care; and (c) their residential status at the time of discharge shows that they live in a stable housing environment. The denominator is the number of adults who meet the following conditions: (a) were discharged during the reporting period; and (b) received services in at least one treatment cost center during the episode of care.</p> <p>Data Source: Provider staff reports data in SAMHIS based on client interviews and local records.</p>
Validity:	This measure attempts to measure the success of clients who live independently with substance abuse problems and function as productive members of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting procedures for data submission are provided to all contractors, a threat to consistency is differing interpretations of those requirements. DCF checks data submitted for accuracy and logic errors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Adult Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Percent of adults who had an identified substance abuse need as a result of a child welfare Family Assessment who received substance abuse services (M0775)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Child Welfare Supervision includes all adults who must comply with requirements set by Family Safety and the courts due to child abuse and dependency determinations. N: Number of adults identified as needing substance abuse treatment in protective services records who receive treatment. D: Number of adults identified as needing substance abuse treatment in protective services records. Data Source: SACWIS/ADM Data Warehouse.
Validity:	National studies indicate 50-60 percent of families with child abuse and neglect have substance abuse as a contributing factor. Measure determines extent to which the parents follow through on treatment to reduce substance abuse problems.
Reliability:	Data are derived from uniform survey/record review format and is maintained independent of the substance abuse and protective services programs.

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Child Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Number of children with substance-abuse problems served (M0052)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Children served in substance abuse treatment include persons enrolled in child substance abuse priority populations and received services in any treatment and non-treatment cost center under children substance abuse programs. Count of children served in substance abuse treatment Data Source: Provider staff reports service event data in Substance Abuse and Mental Health Information System (SAMHIS) based on data collected locally.
Validity:	This output measure represents the effort to evaluate the number of persons served.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Child Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Number of at-risk children served in targeted prevention (M0055)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Targeted prevention includes programs designed to provide early assessment, brief counseling and/or education to children at risk of developing substance abuse problems due to low academic achievement and related problems. Children at risk are children identified as having a high potential for substance use (although not known to be using). Count of children served in selected/indicated (targeted) prevention services. Data Source: OneFamily Substance Abuse and Mental Health (SAMH) data system service events.
Validity:	This workload measure represents the effort expended to serve at risk children.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Child Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Number of at-risk children served in prevention services. (M0382)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Level 1 Prevention Programs include persons participating in Universal and Selective programs in cost center 16. Level 1 Prevention Programs address subgroups of the general population that are at a higher risk of substance abuse than the general population. The mission is to provide individuals with the information and skills necessary to prevent the abuse of substances. This is an unduplicated count of participants. Level 2 Prevention Programs include persons participating in Indicated programs in cost center 16 and all programs in cost center 17. Level 2 Prevention Programs are designed to prevent the onset of substance abuse in individuals who do not meet the DSM-IV criteria for addiction but who are showing early danger signs in the form of multiple risk factors. The mission of Level 2 Prevention Programs is to identify individuals who are exhibiting early signs of substance abuse and other problem behaviors associated with substance abuse and to target them with special programs. This is an un-duplicated count of participants. "Programs" are defined as a structured Schedule of Activities (by instructors and participants) designed so that participants will attain, so far as possible, certain educational and behavioral objectives. Total number of at risk children provided prevention services.</p> <p>Data Source: Alcohol, Drug Abuse, and Mental Health Data Warehouse (ADMDW) enrollment and placement data.</p>
Validity:	This workload measure represents the effort expended to serve at risk children with prevention services.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Child Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Alcohol usage rate per 1,000 in grades 6-12. (M05092a)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	This is an annual measure extrapolated from the results of specific items contained in the annual Florida Youth Substance Abuse Survey. Data Source: The Florida Youth Substance Abuse Survey.
Validity:	The Florida Youth Substance Abuse Survey provides a comprehensive assessment of youth substance abuse attitudes and practices. This survey is completed annually and obtains information from more than 65,000 students statewide. This data is used to guide the state's substance abuse prevention efforts.
Reliability:	The University of Miami utilizes a number of statistical methods to increase the reliability and validity of survey results.

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Child Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Marijuana usage rate per 1,000 in grades 6-12. (M05092m)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	This is an annual measure extrapolated from the results of specific items contained in the annual Florida Youth Substance Abuse Survey. Data Source: The Florida Youth Substance Abuse Survey.
Validity:	The Florida Youth Substance Abuse Survey provides a comprehensive assessment of youth substance abuse attitudes and practices. This survey is completed annually and obtains information from more than 65,000 students statewide. This data is used to guide the state's substance abuse prevention efforts.
Reliability:	The University of Miami utilizes a number of statistical methods to increase the reliability and validity of survey results.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Child Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Percent of children who successfully complete substance abuse treatment services. (M0725)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>The measure is a percentage. Successful completion of treatment include clients discharged during the reporting period who: (a) received services in any treatment cost centers (i.e., 06, 08, 12, 14, 18, 19, 20, 21, 31, 35, 36, 37, 38) and discharge reason code is 01, 10 or 13 and frequency of use for a declared drug is 1 (no past use in the last 30 days). The numerator is the number of children discharged who successfully completed treatment as defined above.</p> <p>The denominator is the number of children discharged during the reporting period (excluding immediate discharges) with discharge reason codes of 01, 02, 06, 10, 11, 13, 15, and 16.</p> <p>Data Source: Provider staff reports data in SAMHIS based on client interviews or information in local client records.</p>
Validity:	Research has shown that completion of treatment is correlated with higher rates of reduced substance use and related problems versus non-completion.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Child Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Percent change in the number of children arrested 30 days prior to admission versus 30 days prior to discharge. (M0751)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Having arrest means the client was arrested and booked at least once during the last 30 days before his/her admission into the provider agency and/or at least once during the last 30 days prior to discharge from the provider agency.</p> <p>This measure focuses on children discharged during the reporting period, who received services in at least one of the following treatment cost centers: 06= Day/Night; 08=In-home/On-site; 12=Medical Services; 14=Outpatient Individual; 18=Residential Level I; 19= Residential Level II; 20= Residential Level III; 21= Residential Level IV; 31=Behavioral Health Overlay; 35=Outpatient Group; 36=Room & Board Level I; 37=Room & Board Level II; 38=Room & Board Level III. Percent arrested prior to admission: the numerator is the number of children who meet the following criteria: (a) the substance abuse admission record (Purpose = 1) indicates that the client was arrested at least once in the last 30 days prior to admission (Arrest > 0). The denominator is the total number of children admitted (Purpose = 1).</p> <p>Percent arrested prior to discharge: the numerator is the number of children who meet the following criteria: (a) the substance abuse discharge record (Purpose = 3) indicates that the client was arrested at least once in the last 30 days prior to discharge (Arrest > 0). The denominator is the total number of children discharged (Purpose = 3).</p> <p>Percent change is the difference between the percent arrested prior to admission and the percent arrested prior to discharge. Data Source: Provider staff reports service event data in Substance Abuse and Mental Health Information System (SAMHIS) based on data collected locally</p>
Validity:	Substance use and abuse have been shown in the research to be contributing factors to crime and delinquency. This measure is designed to evaluate the extent to which treatment facilitates reduced criminal activity.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Child Substance Abuse Prevention, Evaluation and Treatment Services 60900604</u>
Measure:	<u>Percent of children with substance abuse who live in a stable housing environment at the time of discharge. (M0752)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Stable housing environment includes the following residential status: independent living (code = 01, 02, or 03); dependent living (code = 04 or 05); and other residential settings (codes = 06, 07, 08, 11 or 17).</p> <p>The client's residential status code at the time of discharge is used to determine if the client lives in stable housing environment.</p> <p>This measure only includes children who are discharged and received services in any of the following cost centers: 06= Day/Night; 08=In-home/On-site; 12=Medical Services; 14=Outpatient Individual; 18=Residential Level I; 19= Residential Level II; 20= Residential Level III; 21= Residential Level IV; 31=Behavioral Health Overlay; 35=Outpatient Group; 36=Room & Board Level I; 37=Room & Board Level II; 38=Room & Board Level III.. The numerator is the number of children who meet the following conditions: (a) were discharged during the reporting period; (b) received services in at least one treatment cost center during the episode of care; and (c) their residential status at the time of discharge shows that they live in a stable housing environment.</p> <p>The denominator is the number of children who meet the following conditions: (a) were discharged during the reporting period; and (b) received services in at least one treatment cost center during the episode of care.</p> <p>Percent arrested prior to discharge: the numerator is the number of adults who meet the following criteria: (a) the substance abuse discharge record (Purpose = 3) indicates that the client was arrested at least once in the last 30 days prior to discharge (Arrest > 0). The denominator is the total number of adults discharged (Purpose = 3).</p> <p>Percent change is the difference between the percent arrested prior to admission and the percent arrested prior to discharge. Data Source: Provider staff reports data in SAMHIS based on client interviews and local records.</p>
Validity:	This measure attempts to measure the success of clients with substance abuse problems who live independently and function as a productive members of the community.
Reliability:	The reliability of this measure is dependent on providers' compliance with data reporting requirements. DCF checks data submitted for accuracy and logic errors. Uniform procedures for data submission are provided to all contractors.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>SUBSTANCE ABUSE SERVICES</u>
Service/Budget Entity:	<u>Program Management and Compliance - Substance Abuse 60900604</u>
Measure:	<u>Administrative cost as a percent of total program costs (M0137)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	The cost of positions and other related expenses that support the delivery of services to the eligible population. The total of the sub-budget entity divided by the total of all the sub-budget entities in this program area. Data Source: The Legislative Accounting System/Program Budgeting System (LAS/PBS) and FLAIR.
Validity:	This measure is intended to keep administrative costs low so that the bulk of the expenditures are for the direct benefit of clients.
Reliability:	FLAIR has tight controls by the Comptroller to ensure accurate reporting of expenditures.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Program Management and Compliance - ESS 60900708</u>
Measure:	<u>Administrative cost as a percent of total program costs (M0138)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	The cost of positions and other related expenses that support the delivery of services to the eligible population. The total of the sub-budget entity divided by the total of all the sub-budget entities in this program area. Data Source: The Legislative Accounting System/Program Budgeting System (LAS/PBS) and FLAIR.
Validity:	This measure is intended to keep administrative costs low so that the bulk of the expenditures are for the direct benefit of clients.
Reliability:	FLAIR has tight controls by the Comptroller to ensure accurate reporting of expenditures.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Refugees 60900708</u>
Measure:	<u>Percent of refugee assistance cases accurately closed at 8 months or less (M0103)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	A refugee assistance case is a client or family unit found eligible for refugee cash or refugee medical assistance. Accurately closed means that services have been terminated. The eight-month time frame is required by federal regulation and the Office of Refugee Resettlement, Department of Health and Human Services. The measure is a percentage, calculated by taking the number of refugee assistance cases closed at 8 months or less (numerator), divided by the total number of refugee assistance cases closed for the time period (denominator). Data Source: Economic Self Sufficiency (ESS) staff.
Validity:	The measure is based upon a requirement of 45 CFR 400.60, describing client eligibility. DCF could be responsible for repayment should too many cases exceed 8 months.
Reliability:	Annual audits on the eligibility components of the FLORIDA System by the State Auditor General reduce the potential for errors in data entry. A threat to consistency is the potential for different interpretations of eligibility standards by case workers. In order to ameliorate such threats, DCF monitors data quality and reliability for the FLORIDA system. Ten to twelve weeks of training, of which 25-33% centers on the FLORIDA system, is provided to new public assistance workers.

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Refugees 60900708</u>
Measure:	<u>Number of refugee cases closed (M0104)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	A refugee case is a client or family unit found eligible to receive refugee cash or refugee medical assistance. Closed means that the client has been terminated from receiving cash or medical assistance. The measure is a count of cases closed. Data Source: Economic self-sufficiency staff.
Validity:	Care in interpreting this measure must be taken as it is not a count of the total refugee assistance caseload, but only a count of cases closed within the time period measured.
Reliability:	A threat to consistency is the potential for different interpretations of eligibility standards by case workers. In order to ameliorate such threats, DCF monitors data quality and reliability for the FLORIDA system.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Refugees 60900708</u>
Measure:	<u>Number of refugee cases (M0362)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>A refugee case is a client determined eligible to receive refugee cash and refugee medical assistance and services from a provider contracted by the DCF Refugee Services Program Office. The measure is an unduplicated of the total active client population, including those receiving refugee cash assistance, those receiving refugee medical assistance and those receiving services by contract.</p> <p>Data Source: Refugee cash and refugee medical assistance client data are reported by ACCESS Florida staff. Data about clients receiving contracted services are reported by the contracted providers.</p>
Validity:	Threats to validity include errors in eligibility determination, case closure, as well as potential duplicated counts of clients receiving benefits from two different sources. The FLORIDA system contains the FLORIDA client identifier (PIN) and the Refugee Services client identifier (Alien Number), allowing the sorting out of duplicate entries by using Alien Number.
Reliability:	A threat to consistency is the potential for different interpretations of eligibility standards by case workers. In order to ameliorate such threats, DCF monitors data quality and reliability for the FLORIDA system. Ten to twelve weeks of training, of which 25-33% centers on the FLORIDA system, is provided to new public assistance workers.

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Refugees 60900708</u>
Measure:	<u>Percent of unemployed active caseload placed in employment. (M04040)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Unemployed active caseload includes all eligible employment services clients for whom a case record is open and no active placement exists. Caseload is defined as a single unduplicated client count. The measure is a percentage calculated by taking the total number of clients placed who were in the unemployed active caseload for the quarter (numerator), divided by the total number in the unemployed active caseload (denominator).</p> <p>Data Source: Contracted provider staff</p>
Validity:	Threats to validity include errors in eligibility determination, placement information, and case closure.
Reliability:	Threats to consistency include the potential for different interpretations of eligibility standards, the contracted service provider's staff turnover, level of data entry skills and training. The Department monitors data quality and reliability in the Florida system.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Percentage of all public assistance applications for assistance processed within time standards. (M0105)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	<p>Application refers to electronic or paper forms submitted by individuals for cash assistance, Medicaid or Food Stamps. Processed/disposed is defined as approved or denied.</p> <p>Time standards are measured from date of application to date of disposition as follows: Cash Assistance: 45 days. Expedited Food Stamps: 7 days. Non-Expedited Food Stamps: 30 days. Medicaid without disability determination: 45 days. Medicaid with disability determination: 90 days.</p> <p>Excluded from days processed are days attributed to non-agency delays such as delays in information submittal by the applicant.</p> <p>Denominator: Total of all applications disposed in the month, excluding KidCare Medicaid, SUNCAP and disaster Food Stamp applications.</p> <p>Numerator: The number of these applications that do not exceed the defined time standards.</p> <p>Data Source: Applicants and Economic Self-Sufficiency staff.</p>
Validity:	This indicator measures DCF's ability to respond timely to requests for assistance from families and individuals to help meet their basic needs. Basic needs include food, shelter and medical care.
Reliability:	Internal quality reviews are completed on a sample of applications. These reviews validate the dates reported in the system. The Department monitors data quality and reliability in the Florida system.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Total number of applications processed (M0106)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	The applications are for economic assistance e.g. food stamps, Medicaid, cash assistance and others. Processed means that the person in need of economic assistance has been interviewed; his or her application has been analyzed by ESS staff; and the person's eligibility has been determined. This measure is an unduplicated count of applications approved and denied, extracted from the FLORIDA System. It is the denominator of M0105, percent of all applications processed within time standards. Data Source: FLORIDA System
Validity:	This measure counts the number of applications that go through the eligibility determination process. It is an input measure for calculating other measures related to processed applications. The goal intention to increase the number can misdirect the processing activity as an increase may encourage quantity over quality. Conversely, a decrease may improve the score on measures that are percentages of success.
Reliability:	Inconsistencies in processing applications can occur when staff interprets eligibility guidelines differently. The Department monitors data quality and reliability in the Florida system.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Percent of food stamp benefits determined accurately (M0107)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Food stamps are public assistance benefits disbursed electronically to eligible clients. Accuracy rate is defined as a review of an household's eligibility determination to verify that the determination and correct amount of benefits have been authorized and received. It is verified by Food Stamp case reviews conducted by the DCF Office of Quality Control (QC). Florida uses the National Integrated Quality Control System to transmit Florida data from QC to the US Department of Agriculture, Food and Nutrition Service monthly. The QC internal web-based system is used to collect and store data. For the districts, the measure is a percentage, calculated by taking the total dollar value of food stamp benefits provided accurately (numerator) and dividing by the total dollar value of food stamp benefits provided (denominator). For the state, the accuracy rate is weighted based upon district stratification. Data Source: FLORIDA system, client interviews and collateral contacts to verify information.
Validity:	QC conducts reviews according to a plan approved by the Food and Nutrition Service of the US Department of Agriculture. If a state's food stamp accuracy rate is lower than the national tolerance level for two consecutive years, the state is subject to federal monetary penalties.
Reliability:	Accuracy is calculated on a statewide basis; although the error rate is not reliable on a district basis, stratified oversampling allows the district data to be used for indication of problem areas. The Department monitors data quality and reliability in the Florida system.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Percent of suspected fraud cases referred that result in front-end fraud prevention savings (M0110)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Suspected fraud cases are those meeting specific error prone profiles such as expenses continually exceeding available income. Once identified, these cases are referred to a fraud unit for review. Savings are defined as benefits that are not issued because of the detection of client misrepresentation. Denominator: The total number of cases which meet the error prone profiles that are referred for review. Numerator: The total number of cases which meet the error prone profiles that are referred for review that result in savings. Data Source: ESS Fraud Prevention staff
Validity:	The intent of this measure is to ensure that significant effort is devoted to the proper use of taxpayer money to meet the needs of only those who are eligible. The threat to the validity of this measure is that the data is limited to only those cases that produce savings
Reliability:	Central Office Quality Assurance and district staff both monitor local Fraud Units to validate that data is entered into the system correctly and accurately reflects individual employee and unit performance.

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Dollars collected through Benefit Recovery (M0111)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Benefit Recovery dollars are monies collected by DCF that have been issued through client misrepresentation or department/client error. The measure is a count, the sum of the dollar value collected on established benefit recovery claims. Data Source: Benefit Recovery System (interfaces with FLORIDA)
Validity:	This measure shows the public that DCF recoups the value of benefits issued in error.
Reliability:	DCF's Benefit Recovery staff monitor the data in the Benefit Recovery System (BRS) on a routine basis.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Number of fraud prevention investigations completed (M0112)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Fraud is deception in order to secure an unlawful gain. Front-end Fraud Prevention, prior to benefit determination, is a review of client-supplied information that is suspected of containing fraudulent statements. An investigation is conducted to verify and document the facts. The measure is a count of the suspected fraud case investigations. Data Source: Departmental eligibility staff.
Validity:	This measure shows the public that an effort is being made to prevent ineligible individuals from receiving benefits to which they are not entitled.
Reliability:	Departmental staff are provided with training and written guidance in identifying possible fraudulent statements on an application for assistance. In addition, DCF has established error prone profiles which are part of the modernized system. Applications meeting those identified criteria are referred to ACCESS Integrity staff for review and possible investigation. QA staff at the state level monitor each district's system annually.

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Number of cash assistance participants referred to the Regional Workforce Development Boards (M0119)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Regional Workforce Development Boards are defined as local employment service providers. Cash assistance participants are defined as participants receiving TANF who have a work requirement as a condition of receipt of benefits. It is the total number of cash assistance participants referred to the regional workforce development boards. Data Source: Departmental staff.
Validity:	This measure indicates the number of people referred to the Regional Workforce Development Boards for employment assistance.
Reliability:	Departmental staff monitor the FLORIDA system, training new public assistance workers in its use.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Percentage of food assistance applications processed within 30 days (M0219)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Application refers to electronic or paper forms submitted by individuals for Florida's Food Assistance Program. Time standards are measured from date of application to date of approval. For Food Assistance the approval is to be processed within 30 days for all Non-Expedited Food Assistance cases. There are no days excluded from the 30-day standard for non-agency delays. Total of all Food Assistance applications approved in the month, excluding Non-Expedited and disaster Food Assistance applications. Numerator: The number of these applications that do not exceed the 30-day time standard. Data Source: Economic Self Sufficiency field staff.
Validity:	This measure is an indicator of the system's success in increasing the self-sufficiency of food stamp recipient households.
Reliability:	Dependent on ESS field staff to recognize and code applications as expedited or regular.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Percent of welfare transition sanctions referred by the regional work force boards executed within 10 days (M0223)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Welfare transition sanctions are required when work eligible TANF recipients do not meet their work requirement. The measure is a percent. The numerator is the number of sanctions imposed timely (10 calendar days). The denominator is the total number of sanction requests received by DCF. Data Source: The data sources for this measure are reports from the Florida Department of Children and Family Services, and Florida On-line Recipient Integrated Data Access (FLORIDA) and the WAGES system.
Validity:	Section 414.105, Florida Statutes states that recipients "...shall receive temporary assistance for episodes of not more than 24 cumulative months in any consecutive 60 month period..." The percent of requested sanctions for failure to comply with work activity is an indirect measure of the desired outcome, "... work and gain economic self-sufficiency..." Timely sanctioning of non-compliant clients provides motivation to other clients to faithfully pursue their training and job search requirements. Additionally, sanctioning frees up training and job openings for more diligent applicants who are more likely to "Work and gain economic self-sufficiency." This measure does not account for sanction requests, which may not be imposed because the client does not meet criteria for sanctioning or the client qualifies for an appeal.
Reliability:	The data are derived from the data systems of the Florida Department of Children and Families. The systems are monitored for quality and reliability by personnel of the department as well as by the federal government. Additionally, new public assistance workers with DCF are given 10-12 weeks of training, 25-35% of which centers on the FLORIDA system.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Number of beds per day available for homeless clients (M0304)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Homeless means any person without a fixed regular or adequate night-time residence. Assisted bed means any bed assisted by an Emergency Shelter Grants or a Housing Assistance Grant. An actual physical count of number of beds done once a year when grants are awarded. Data Source: Paper copies of Grant Applications submitted annually to the Office of Homelessness in DCF.
Validity:	Measures effective use of state or federal funds used to develop beds for the homeless.
Reliability:	Twenty-seven continuums report this information to the Office of Homelessness each year in grant applications received in hard or electronic copy from eligible applicants.

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Number of cash assistance applications (M0305)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Cash assistance application is defined as an electronic or paper request for public assistance benefits to provide financial assistance to eligible individuals. This is a count of applications processed to the point of determination of eligibility. Data Source: Economic Self Sufficiency staff
Validity:	This is a count of client (and prospective client) applications which indicates the number of clients and program workload that must be processed.
Reliability:	Data quality and reliability of the FLORIDA System are monitored by department data processing personnel.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Percent receiving a diversion payment / service that remain off cash assistance for 12 months (M05087)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Diversion payments are defined as lump sum TANF monies issued in lieu of ongoing monthly benefits with an agreement that the recipient will not request regular monthly TANF for at least three months. This measure is the percent of those diversion recipients who do not receive regular TANF for 12 months after receipt of the diversion payment. Denominator: Count payees who received a TANF diversion payment 12 months ago. Numerator: Of the above, a count of payees who have not participated in TANF since the diversion payment. Data Source: Economic Self-Sufficiency staff.
Validity:	This measure identifies success in diverting families from enrolling in a monthly assistance program, a strategy in DCF's Strategic Plan. This may be an indication that these clients have become more self-sufficient.
Reliability:	Data reliability is dependent on ESS field staff coding the diversion payment accurately.

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Percent of All Family TANF customers participating in work or work-related activities (M05088)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Similar to the Federal Work Participation Rate, this measure calculates the percent of TANF adults with a work participation requirement who are meeting the required number of work participation hours each month. Denominator: The number of eligible TANF adults with a work participation requirement. Numerator: The number of those participating in allowable work activities for the required number of hours each month. Data Source: Regional Work Force Board field staff.
Validity:	This measure identifies success in increasing self-sufficiency of TANF adults, a strategy intended to further the mission of the agency.
Reliability:	Data reliability is dependent on WFB staff accurately entering work and work related activities coding into the AWI OSST system and ESS field staff accurately recording work participation requirement code in FLORIDA.

LRPP EXHIBIT IV: Performance Measure Validity and Reliability

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Percent of 2-Parent TANF customers participating in work- or work-related activities (2-Parent TANF Participation Rate). (M0678)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Similar to the Federal Work Participation Rate, this measure calculates the percent of 2-parent TANF adults with a work participation requirement who are meeting the required number of work participation hours each month. Denominator: The number of eligible 2-parents TANF adults with a work participation requirement. Numerator: The number of those above participating in allowable work activities for the required number of hours each month. Data Source: Regional Work Force Board field staff.
Validity:	This measure identifies success in increasing self-sufficiency of TANF adults, a strategy intended to further the mission of the agency.
Reliability:	Data reliability is dependent on WFB staff accurately entering work and work related activities coding into the AWI OSST system and ESS field staff accurately recording work participation requirement code in FLORIDA.

Department:	<u>Department of Children and Families</u>
Program:	<u>ECONOMIC SELF SUFFICIENCY SERVICES</u>
Service/Budget Entity:	<u>Welfare Transition and Employment Supports 60900708</u>
Measure:	<u>Percentage of food assistance applications processed within 7 days (expedited) (M0733)</u>
Action:	Backup for performance measure
Data Sources and Methodology:	Application refers to electronic or paper forms submitted by individuals for Florida's Food Assistance Program. Time standards are measured from date of application to date of approval. For Expedited Food Assistance the approval is to be processed within 7 days. All other Food Assistance cases are to be approved within 30 days. There are no days excluded from the 7 day standard for non-agency delays. Total of all Food Assistance applications approved in the month, excluding Non-Expedited and disaster Food Assistance applications. Numerator: The number of these applications that do not exceed the 30 day time standard. Data Source: Economic Self Sufficiency field staff
Validity:	This measure is an indicator of the system's success in increasing the self-sufficiency of food stamp recipient households.
Reliability:	Dependent on ESS field staff to recognize and code applications as expedited or regular. The Department monitors data quality and reliability in the Florida system.

LRPP Exhibit V: Identification of Associated Activity Contributing to Performance Measures

Measure Number	Approved Performance Measures for FY 2020-21	Associated Activities Title
1	Administrative cost as a percent of total agency costs (M0144)	
2	Information technology cost as a percent of total agency costs (M0145)	
3	Administrative cost as a percent of total agency costs (M0147)	
4	Administrative cost as a percent of total agency costs (M0363)	
5	Percent of licensed child care facilities inspected in accordance with program standards (M04015)	Number of facilities and homes licensed (M0123)
	Percent of licensed child care homes inspected in accordance with program standards (M05175)	Number of facilities and homes licensed (M0123)
6	Number of instructor hours provided to child care provider staff. (M0384)	Number of facilities and homes licensed (M0123)
8	Number of investigations (M0127)	Number of people receiving protective supervision, and protective intervention services and number of investigations completed
9	Number of people receiving protective supervision, and protective intervention services. (M0414)	Number of qualified disabled adults (ages(18 - 59) in the CCDA, ADA Medicaid Waiver Programs, and Consumer Directed Care Medicaid Waiver
		Number of qualified disabled adults (ages 18 - 59) in the HCDA Program
10	Per capita abuse/neglect rate per 1,000 disabled adult and elderly. (M05166)	Number of people receiving protective supervision, and protective intervention services and number of investigations completed
11	Percent of adult investigations from an entry cohort completed within 60 days. (M04016)	Number of people receiving protective supervision, and protective intervention services and number of investigations completed
12	Percent of adult victims seen within the first 24 hours. (M04017a)	Number of people receiving protective supervision, and protective intervention services and number of investigations completed
13	Percent of protective supervision cases in which no report alleging abuse, neglect, or exploitation is received while the case is open (from beginning of protective supervision for a maximum of 1 year) (M0124)	Number of people receiving protective supervision, and protective intervention services and number of investigations completed

			Number of people receiving protective supervision, and protective intervention services and number of investigations completed
14	Number of children in families served (M0134)		Number of families served in Healthy Families (M0294)
15	Number of families served in Healthy Families (M0294)		Number of families served in Healthy Families (M0294)
16	Per capita child abuse rate/1000 (M0133)		Number of families served in Healthy Families (M0294)
17	Percent of children in families who complete intensive child abuse prevention programs of 3 months or more who are not abused or neglected within 12 months after program completion (M0196)		Number of families served in Healthy Families (M0294)
18	Percent of children in families who complete the Healthy Families Florida program who are not subjects of reports with verified or indicated maltreatment within 12 months after program completion. (M0393)		Number of families served in Healthy Families (M0294)
19	Children receiving adoptive services (M0073)		Children receiving adoptive services (M0073)
20	Number of children in out-of-home care (M0297)		Number of children with a goal of adoption who remain in out-of-home care after 24 months.
21	Number of children receiving adoption subsidies (M0074)		Number of children receiving adoption subsidies (M0074)
22	Number of children remaining in out-of-home care more than 12 months. (M0388)		Number of children in out-of-home care (M0297)
23	Number of children under protective supervision (point in time) (M0296)		Number of children under protective supervision (point in time) (M0296)
24	Number of children with a goal of adoption who remain in out-of-home care after 24 months (M0392)		Number of children with a goal of adoption who remain in out-of-home care after 24 months.
25	Number of investigations (M0295)		Number of investigations (M0295)
26	Number of investigations not completed after 60 days (M0387)		Number of investigations (M0295)
27	Percent adoptions finalized within 24 months of the latest removal. (M0391)		Number of children with a goal of adoption who remain in out-of-home care after 24 months.
28	Percent of adults in child welfare protective supervision who have case plans requiring substance-abuse treatment who are receiving treatment. (M04026)		Number of children with a goal of adoption who remain in out-of-home care after 24 months.
29	Percent of child investigations commenced within 24 hours. (M0368)		Number of investigations (M0295)
30	Percent of child investigations from an entry cohort completed within 60 days. (M0394)		Number of investigations (M0295)

31	Percent of children entering out-of-home care who re-entered within 12 months of a prior episode. (M0390)		Number of children with a goal of adoption who remain in out-of-home care after 24 months.
32	Percent of children reunified who were reunified within 12 months of the latest removal. (M0389)		Number of children with a goal of adoption who remain in out-of-home care after 24 months.
33	Percent of children who age out of foster care with high school diploma or G.E.D. (M05085)		Number of children with a goal of adoption who remain in out-of-home care after 24 months.
34	Percent of foster children who were subjects of reports of verified or indicated maltreatment. (M0385)		Number of children with a goal of adoption who remain in out-of-home care after 24 months.
35	Percent of investigations reviewed by supervisors with 72 hours of report submission (M0079)		Number of investigations (M0295)
36	Percent of victims of verified or indicated maltreatment who were subjects of subsequent reports with verified or indicated maltreatment within 6 months. (M0386)		Number of children with a goal of adoption who remain in out-of-home care after 24 months.
			Number of investigations (M0295)
			Number of termination of parental rights petitions filed (M0298)
37	Calls answered (M0070)		Number of calls to the hotline (M0300)
38	Number of calls to the hotline (M0300)		Number of calls to the hotline (M0300)
39	Percent of calls made to the Florida Abuse Hotline that were abandoned (M0069)		Number of calls to the hotline (M0300)
40	Administrative cost as a percent of total agency costs (M0426)		
41	Administrative cost as a percent of total program costs (M0136)		
42	Annual number of harmful events per 100 residents in sexually violent predator commitment. (M0380)		Number of individuals served (treatment) (M0318)
43	Number of residents receiving Mental Health treatment (M06001)		Number of individuals served (treatment) (M0318)
44	Number of sexual predators assessed (M0283)		Number of sexual predators assessed (M0283)
45	Number of sexual predators served (detention and treatment). (M0379)		Number of individuals served (treatment) (M0318)
46	Percent of assessments completed by the SVP program within 180 days of receipt of referral. (M05305)		Number of sexual predators assessed (M0283)
47	Average annual days spent in the community for adults with forensic involvement. (M0010)		Number of adults served

48	Average annual days spent in the community for adults with severe and persistent mental illnesses. (M0001)		Number of adults served
49	Average annual days worked for pay for adults with severe and persistent mental illnesses (M0003)		Number of adults served
50	Median length of stay in CSU/Inpatient services for adults in mental health crisis (M0376)		Number of adults served
51	Number of adults in mental health crisis served (M0017)		Number of adults served
52	Number of adults with a serious and persistent mental illness in the community served (M0016)		Number of adults served
53	Number of adults with forensic involvement served (M0018)		Number of adults with forensic involvement served (M0018)
54	Percent of adults with forensic involvement who violate their conditional release under chapter 916, Florida Statutes, and are recommitted. (M0009)		Number of adults with forensic involvement served (M0018)
55	Average annual days emotionally disturbed (ED) children (excluding those in juvenile justice facilities) spend in the community (M0025)		Number of children served
56	Average annual days seriously emotionally disturbed (SED) children (excluding those in juvenile justice facilities) spend in the community (M0011)		Number of children served
57	Number of at-risk children to be served (M0033)		Number of children served
58	Number of children served who are incompetent to proceed (M0030)		Number of children served
59	Number of ED children to be served (M0032)		Number of children served
60	Number of SED children to be served (M0031)		Number of children served
61	Percent of children with emotional disturbances who improve their level of functioning (M0377)		Number of children served
62	Percent of children with mental illness restored to competency and recommended to proceed with a judicial hearing (M0019)		Number of children served
63	Percent of children with mental retardation restored to competency and recommended to proceed with a judicial hearing (M0020)		Number of children served
64	Percent of children with serious emotional disturbances who improve their level of functioning. (M0378)		Number of children served

65	Percent of school days seriously emotionally disturbed (SED) children attended. (M0012)		Number of children served
66	Administrative cost as a percent of total program costs (M0137)		
67	Administrative cost as a percent of total program costs (M0135)		
68	Average age of first substance abuse (M05093)		Number of children with substance abuse problems served
69	Number of at risk children served in prevention services. (M0382)		Number of children with substance abuse problems served
70	Number of at-risk children served in targeted prevention (M0055)		Number of children with substance abuse problems served
71	Number of children with substance-abuse problems served (M0052)		Number served
72	Percent of children at risk of substance abuse who receive targeted prevention services who are not admitted to substance-abuse services during the 12 months after completion of prevention services (M0051)		Number of children with substance abuse problems served
73	Percent of children with substance abuse under the supervision of the state receiving substance-abuse treatment who are not committed to the Department of Juvenile Justice during the 12 months following treatment completion (M0047)		Number of children with substance abuse problems served
74	Percent of children with substance abuse who are drug free during the 12 months following completion of treatment (M0046)		Number of children with substance abuse problems served
75	Percent of children with substance abuse who complete treatment (M0045)		Number of children with substance abuse problems served
76	Substance usage rate per 1,000 in grades 6-12. (M05092)		Number of at-risk children served in targeted prevention (M0055)
77	Number of adults served (M0063)		Number of adults provided detoxification and crisis supports (M0065)
78	Percent change in the number of clients with arrests within 6 months following discharge compared to number with arrests within 6 months prior to admission. (M0381)		Number of adults provided detoxification and crisis supports (M0065)
79	Percent of adults employed upon discharge from substance abuse treatment services (M0058)		Number of adults provided detoxification and crisis supports (M0065)
80	Percent of adults in child welfare protective supervision who have case plans requiring substance-abuse treatment who are receiving treatment (M0061)		Number of adults provided detoxification and crisis supports (M0065)

			Number of at-risk adults provided prevention services (M0066)
81	Percent of adults who are drug free during the 12 months following completion of treatment (M0057)		Number of adults provided detoxification and crisis supports (M0065)
82	Percent of adults who complete treatment (M0062)		Number of adults provided detoxification and crisis supports (M0065)
83	Percent of all applications for assistance processed within time standards. (M0105)		Total number of applications processed (M0106)
84	Total number of applications processed (M0106)		Total number of applications processed (M0106)
85	Percent of cash assistance benefits determined accurately (M0108)		Total number of applications processed (M0106)
86	Percent of food stamp benefits determined accurately (M0107)		Total number of applications processed (M0106)
87	Percent of Food Stamp applications processed in accordance with Federal high performance bonus criteria. (M05181)		Total number of applications processed (M0106)
88	Administrative cost as a percent of total program costs (M0138)		
89	Return on investment from fraud prevention/benefit recovery (M0369)		Dollars collected through benefit recovery (M0111)
90	Number of fraud prevention investigations completed (M0112)		Dollars collected through benefit recovery (M0111)
91	Dollars collected through benefit recovery (M0111)		Dollars collected through benefit recovery (M0111)
92	Percent of suspected fraud cases referred that result in front-end fraud prevention savings (M0110)		Dollars collected through benefit recovery (M0111)
93	Percent of Optional State Supplementation (OSS) applications processed within time standards (M0114)		Total number of applications processed (M0106)
94	Number of applications processed for Optional State Supplementation payments (M0115)		Total number of applications processed (M0106)
95	Number of beds per day available for homeless clients (M0304)		Number of beds per day available for homeless clients (M0304)
96	Number of cash assistance applications (M0305)		Total number of applications processed (M0106)
97	Number of cash assistance participants referred to the regional workforce development boards (M0119)		Total number of applications processed (M0106)
98	Percent of customers who have employment entry. (M05090)		Total number of applications processed (M0106)
99	Percent of customers who remain in employment (job retention). (M05141)		Total number of applications processed (M0106)

100	Percent of welfare transition sanctions referred by the regional work force boards executed within 10 days (M0223)		Total number of applications processed (M0106)
101	Percent receiving a diversion payment / service that remain off cash assistance for 12 months (M05087)		Total number of applications processed (M0106)
102	Percent of TANF customers participating in work or work-related activities (M05088)		Total number of applications processed (M0106)
103	Percent of work able food stamp customers participating in work or work-related activities (M05089)		Total number of applications processed (M0106)
104	Number of refugee cases (M0362)		
105	Number of refugee cases closed (M0104)		
106	Percent of refugee assistance cases accurately closed at 8 months or less (M0103)		
107	Average number of days to restore competency for adults in forensic commitment. (M0015)		Number of adults in forensic commitment served (M0044)
108	Number of adults in forensic commitment, per Ch. 916, F.S., served (M0373)		Number of adults in forensic commitment served (M0044)
109	Number of people in civil commitment, per Ch. 394, F.S., served (M0372)		Number of people in civil commitment served (M0041)
110	Percent of adults in civil commitment, per Ch. 394, F.S., who show an improvement in functional level. (M05050)		Number of people in civil commitment served (M0041)
111	Percent of adults in forensic commitment, per Chapter 916, Part II, who are Not Guilty by Reason of Insanity, who show an improvement in functional level. (M05051)		Number of adults in forensic commitment served (M0044)
112	Percent of adult and child domestic violence victims in shelter more than 72 hours having a plan for family safety and security when they leave shelter. (M0126)		Percent of adult and child domestic violence victims in shelter more than 72 hours having a plan for family safety and security when they leave shelter. (M0126)

APPENDIX: GLOSSARY OF TERMS AND ACRONYMS

ACA: Affordable Care Act.

ACCESS Florida: Automated Community Connection to Economic Self-Sufficiency.

ACF: Administration for Children and Families

ACT: Assertive Community Treatment (teams)

Activity: A unit of work which has identifiable starting and ending points, consumes resources, and produces outputs. Unit cost information is determined using the outputs of activities.

Actual Expenditures: Includes prior year actual disbursements, payables and encumbrances. The payables and encumbrances are certified forward at the end of the fiscal year. They may be disbursed between July 1 and December 31 of the subsequent fiscal year. Certified forward amounts are included in the year in which the funds are committed and not shown in the year the funds are disbursed.

ADA: Americans with Disabilities Act

ADRC: Adult Disability Resource Center

AFSP: American Foundation for Suicide Prevention

AHCA: Agency for Health Care Administration

ALF: Assisted Living Facility

ALF-LMHL: Assisted Living Facility with a limited mental health license.

APHSA: American Public Human Services Association

API: Adult Protective Investigator

Appropriation Category: The lowest level line item of funding in the General Appropriations Act which represents a major expenditure classification of the budget entity. Within budget entities, these categories may include: salaries and benefits, other personal services (OPS), expenses, operating capital outlay, data processing services, fixed capital outlay, etc. These categories are defined within this glossary under individual listings. For a complete listing of all appropriation categories, please refer to the ACTR section in the LAS/PBS User's Manual for instructions on ordering a report.

ARF: Addiction Receiving Facilities

ARS: Alternative Response System

ASA: Adult Substance Abuse

ASFA: Adoptions and Safe Families Act

ATR: Access to Recovery

AWI: Agency for Workforce Innovation

Baseline Data: Indicators of a state agency's current performance level, pursuant to guidelines established by the Executive Office of the Governor in consultation with legislative appropriations and appropriate substantive committees.

BASP: Behavior Analysis Services Program

BHOS: Behavioral Health Overlay Services

BNet: Behavioral Health Network

BRITE: Brief Intervention and Treatment for the Elderly

BSF: Building Strong Families

Budget Entity: A unit or function at the lowest level to which funds are specifically appropriated in the appropriations act. “Budget entity” and “service” have the same meaning.

CAPTA: Child Abuse Prevention and Treatment Act

CBC: Community-Based Care/Community-Based Care Lead Agency

CCDA: Community Care for Disabled Adults

CCSU: Children’s Crisis Stabilization Unit

CDC+: Consumer Directed Care (Plus) Medicaid Waiver

CFS: Child and Family Services

CFSR: Child and Family Services Review

CHMI: Community Healthy Marriage Initiative

CIO: Chief Information Officer

CIP: Capital Improvements Program Plan

CIT: Crisis Intervention Team

CMS: Children’s Medical Services

CNA: Community Needs Assessment

COOP: Continuity of Operations Plans

COSIG: Co-occurring System Improvement Grant

CPI: Child Protective Investigator

CMS: Children’s Medical Services

CSA: Children’s Substance Abuse

CSE: Child Support Enforcement

CSU: Crisis Stabilization Unit

CW: Child Welfare

D3-A: A legislative budget request (LBR) exhibit which presents a narrative explanation and justification for each issue for the requested years.

DCF: Department of Children and Families

Demand: The number of output units which are eligible to benefit from a service or activity.

DENS: Drug Epidemiology Networks

DJJ: Department of Juvenile Justice

DOC or DC: Department of Corrections

DOEA: Department of Elder Affairs

EBP: Evidence Based Practice

EOG: Executive Office of the Governor

ESS: Economic Self-Sufficiency

Estimated Expenditures: Includes the amount estimated to be expended during the current fiscal year. These amounts will be computer generated based on the current year appropriations adjusted for vetoes and special appropriations bills.

EBP: Evidence Based Practice

FAC: Florida Administrative Code

FACT: Florida Assertive Community Treatment Team

FADAA: Florida Alcohol and Drug Abuse Association

FARS: Functional Assessment Rating Scale

FCB: Florida Certification Board

FCCC: Florida Civil Commitment Center

FCCTIP: Florida Clinical Consultation Treatment Improvement Project

FCO: Fixed Capital Outlay

FFMIS: Florida Financial Management Information System

FIS: Family Intervention Specialist

FISP: Florida Initiative for Suicide Prevention

FIT: Family Intensive Treatment

Fixed Capital Outlay: Real property (land, buildings including appurtenances, fixtures and fixed equipment, structures, etc.), including additions, replacements, major repairs, and renovations to real property which materially extend its useful life or materially improve or change its functional use. Includes furniture and equipment necessary to furnish and operate a new or improved facility.

FLAIR: Florida Accounting Information Resource Subsystem

FMHI: Florida Mental Health Institute

F.S.: Florida Statutes

FSAS: Florida School of Addiction Studies

FSFN: Florida Safe Families Network

FSH: Florida State Hospital

FTE: Full time equivalent position

FSAPAC: Florida Substance Abuse Prevention Advisory Council

FYSAS: Florida Youth Substance Abuse Survey

GAA - General Appropriations Act

GR - General Revenue Fund

HCDA – Home Care for Disabled Adults (Adult Services program)

HCBS: Home and Community-Based Services

HIPAA: Health Insurance Portability and Accountability Act of 1996

HMO: Health Maintenance Organization

HSn: HomeSafenet. (Child Welfare data system for Family Safety program)

HSS/ACF: Health and Human Services/Administration for Children and Families

ICF/DD: Intermediate Care Facility/Developmental Disabilities

IDEA: Individuals with Disabilities Education Act

Indicator: A single quantitative or qualitative statement that reports information about the nature of a condition, entity or activity. This term is used commonly as a synonym for the word “measure.”

Information Technology Resources: Includes data processing-related hardware, software, services, telecommunications, supplies, personnel, facility resources, maintenance, and training.

Input: See Performance Measure.

IBRS: Integrated Benefit Recovery System

ICAMA: Interstate Compact on Adoption and Medical Assistance

ICPC: Interstate Compact on the Placement of Children

ICWA: Indian Child Welfare Act

IDP: Indigent Drug Program

ILP: Independent Living Program

IOE: Itemization of Expenditure

IQC: Interagency Quality Council

IDS: Interim Data System (Mental Health/Substance Abuse)

IT: Information Technology

Judicial Branch: All officers, employees, and offices of the Supreme Court, district courts of appeal, circuit courts, county courts, and the Judicial Qualifications Commission.

LAN: Local Area Network

LAS/PBS: Legislative Appropriations System/Planning and Budgeting Subsystem. The statewide appropriations and budgeting system owned and maintained by the Executive Office of the Governor.

LBC - Legislative Budget Commission

LBR - Legislative Budget Request

Legislative Budget Commission: A standing joint committee of the Legislature. The Commission was created to: review and approve/disapprove agency requests to amend original approved budgets; review agency spending plans; and take other actions related to the fiscal matters of the state, as authorized in statute. It is composed of 14 members appointed by the President of the Senate and by the Speaker of the House of Representatives to two-year terms, running from the organization of one Legislature to the organization of the next Legislature.

Legislative Budget Request: A request to the Legislature, filed pursuant to section 216.023, Florida Statutes,

or supplemental detailed requests filed with the Legislature, for the amounts of money an agency or branch of government believes will be needed to perform the functions that it is authorized, or which it is requesting authorization by law, to perform.

L.O.F.: Laws of Florida

Long-Range Program Plan (LRPP): A plan developed on an annual basis by each state agency that is policy-based, priority-driven, accountable, and developed through careful examination and justification of all programs and their associated costs. Each plan is developed by examining the needs of agency customers and clients and proposing programs and associated costs to address those needs based on state priorities as established by law, the agency mission, and legislative authorization. The plan provides the framework and context for preparing the legislative budget request and includes performance indicators for evaluating the impact of programs and agency performance.

MAN: Metropolitan Area Network (Information Technology)

MDTMPBH: Medicaid Drug Therapy Management Program for Behavioral Health

MHI: Mental Health Institutions

NAPSA: National Adult Protective Services Association

NASBO: National Association of State Budget Officers

Narrative: Justification for each service and activity is required at the program component detail level. Explanation, in many instances, will be required to provide a full understanding of how the dollar requirements were computed.

NEFAN: Northeast Florida Addictions Network

NEFSH: Northeast Florida State Hospital

Nonrecurring: Expenditure or revenue which is not expected to be needed or available after the current fiscal year.

OPB: Office of Policy and Budget, Executive Office of the Governor

OPS: Other Personal Services

OSS: Optional State Supplementation

Outcome: See Performance Measure.

OOH: Out-of-Home (Care).

Output: See Performance Measure.

Outsourcing: Means the process of contracting with a vendor(s) to provide a service or an activity and there is a transfer of management responsibility for the delivery of resources and the performance of those resources. Outsourcing includes everything from contracting for minor administration tasks to contracting for major portions of activities or services which support the agency mission.

PBPB/PB2: Performance-Based Program Budgeting

PASRR: Pre-Admission Screening and Resident Review

Pass Through: Funds the state distributes directly to other entities, e.g., local governments, without being managed by the agency distributing the funds. These funds flow through the agency's budget; however, the agency has no discretion regarding how the funds are spent, and the activities (outputs) associated with the

expenditure of funds are not measured at the state level. **NOTE: This definition of “pass through” applies ONLY for the purposes of long range program planning.**

Performance Ledger: The official compilation of information about state agency performance based programs and measures, including approved programs, approved outputs and outcomes, baseline data, approved standards for each performance measure and any approved adjustments thereto, as well as actual agency performance for each measure.

Performance Measure: A quantitative or qualitative indicator used to assess state agency performance.

Input means the quantities of resources used to produce goods or services and the demand for those goods and services.

Outcome means an indicator of the actual impact or public benefit of a service.

Output means the actual service or product delivered by a state agency.

PIP: Program Improvement Plan.

PIRW: Protective Investigator Retention Workgroup.

PPFWR: Permanent Placement with a Fit and Willing Relative

PRTS: Purchase of Residential Treatment Services.

Policy Area: A grouping of related activities to meet the needs of customers or clients which reflects major statewide priorities. Policy areas summarize data at a statewide level by using the first two digits of the ten-digit LAS/PBS program component code. Data collection will sum across state agencies when using this statewide code.

Primary Service Outcome Measure: The service outcome measure which is approved as the performance measure which best reflects and measures the intended outcome of a service. Generally, there is only one primary service outcome measure for each agency service.

Privatization: Occurs when the state relinquishes its responsibility or maintains some partnership type of role in the delivery of an activity or service.

Program: A set of activities undertaken in accordance with a plan of action organized to realize identifiable goals based on legislative authorization (a program can consist of single or multiple services). For purposes of budget development, programs are identified in the General Appropriations Act by a title that begins with the word “Program.” In some instances a program consists of several services, and in other cases the program has no services delineated within it; the service is the program in these cases. The LAS/PBS code is used for purposes of both program identification and service identification. “Service” is a “budget entity” for purposes of the LRPP.

Program Purpose Statement: A brief description of approved program responsibility and policy goals. The purpose statement relates directly to the agency mission and reflects essential services of the program needed to accomplish the agency’s mission.

Program Component: An aggregation of generally related objectives which, because of their special character, related workload and interrelated output, can logically be considered an entity for purposes of organization, management, accounting, reporting, and budgeting.

PSSF: Promoting Safe and Stable Families

QA: Quality Assurance

QMS: Quality Management System (Child Welfare)

Reliability: The extent to which the measuring procedure yields the same results on repeated trials and data

are complete and sufficiently error free for the intended use.

RFP: Request for Proposal.

SAMH: Substance Abuse/Mental Health Block Grant

SAMHSA: Substance Abuse and Mental Health Services Administration

SAPT: Substance Abuse Prevention Treatment Grant

SDC: Self-directed Care

Service: See Budget Entity.

SEW: State Epidemiology Workgroup

SFETC: South Florida Evaluation and Treatment Center

SHM: Supporting Healthy Marriage

SISAR: State Information Substance Abuse Report

SMHTF: State Mental Health Treatment Facilities

SPAN-FL: Suicide Prevention Action Network -Florida

SRT: Short-Term Residential Treatment

Standard: The level of performance of an outcome or output.

SIG: State Incentive Grant.

STO: State Technology Office

SVP: Sexually Violent Predator

SVPP: Sexually Violent Predator Program

SWOT: Strengths, Weaknesses, Opportunities and Threats

TANF: Temporary Assistance to Needy Families

TCS: Trends and Conditions Statement

TF: Trust Fund

TRW: Technology Review Workgroup

Unit Cost: The average total cost of producing a single unit of output – goods and services for a specific agency activity.

USDA: U.S. Department of Agriculture

Validity: The appropriateness of the measuring instrument in relation to the purpose for which it is being used.

WAGES - Work and Gain Economic Stability (Agency for Workforce Innovation)

WAN - Wide Area Network (Information Technology)