



April 2016 Newsletter, Volume 3

Performance-Based Child Welfare System Development

How does the performance-based system fit into the state's overall approach to child welfare?

A performance-based child welfare system is a core tenet of Michigan's Strengthening Our Focus on Children and Families approach (Strengthening Our Focus). Strengthening Our Focus has three primary components to establish and assure long term systemic child welfare reform in the state of Michigan:

1. An enhanced, trauma-informed MiTEAM practice model
2. An overarching continuous quality improvement (CQI) approach
3. Development of a performance-based child welfare system
 - a. Defining consistent performance indicators and outcomes for public and private child welfare agencies across the state
 - b. Innovative funding models (e.g. Kent County Pilot)



The Child Welfare Partnership Council (CWPC) is a key advisory group in further developing the performance-based child welfare system in Michigan.

Defining consistent performance indicators and outcomes for public and private child welfare agencies across the state

To ensure Continuous Quality Improvement (CQI) of a system, it is critical to have ongoing accurate information about how the system is operating. Central to CQI is establishing a process by which we can measure whether the system is achieving agreed upon objectives and outcomes, and if not, determining what is necessary to correct and support achievement of them.

With the implementation of Michigan's Statewide Automated Child Welfare Information System (MiSACWIS), Michigan is better positioned to generate quantitative data that allows tracking of system performance. As staff gain improved skill in use of MiSACWIS and as the system continues to mature, data will more closely reflect performance and support more robust reporting opportunities.

Michigan established seven Key Performance Indicators (KPIs) as initial areas of practice to be measured using MiSACWIS data.

The KPIs are as follows:

1. Child welfare professionals will ensure completion of the initial face-to-face contact in time frames required by policy for Child Protective Services (CPS) investigation.
2. Child welfare professionals will visit children assigned to their workload as required by policy.
3. Child welfare professionals will ensure children in care are provided updated and current medical, dental, and mental health examination and, when necessary, appropriate follow up treatment.

4. Child welfare professionals will develop and complete timely and thorough trauma-informed and resiliency-based case plans in coordination with children and their families.
5. Child welfare professionals will ensure children with a reunification goal will visit with their parents, if those parents are available.
6. Child welfare professionals will ensure children placed in unlicensed, relative placements have timely initial home studies and licensing waivers.
7. Child welfare professionals will ensure older youth aging out of the foster care system engage in a formal 90-day discharge planning meeting to support their transition to independence.

Performance on the first five indicators are shared with public and private providers via the Children's Services Agency Monthly Management Report (MMR). The MMR is released monthly and outlines performance of the prior month by identifying how many events were due, how many were completed timely, and the monthly percentage. Trends are broken down in 3-, 6-, and 12-month increments in a column referred to as "Performance Compared to Prior Period Averages." The report displays the percentage at each of these points in time, as well as the difference for each respective timeframe. The term "difference" refers to the positive or negative change between that point in time (i.e. 3, 6, or 12 months) and the monthly performance percentage. The current performance is displayed in the form of monthly gain. The columns under "Monthly Performance Compared to" compare the Monthly Performance Percentage to Business Service Center (BSC) and/or State percentages.

Michigan's CQI process will allow the state and other stakeholders to progress from *thinking* we are helping children and families to *knowing* that we are.

Quantitative data is not yet available for the last two indicators, and therefore a qualitative review is required of case files to determine performance.

In addition to the KPIs, Michigan is developing the capacity to provide public and private providers with performance data of federally established indicators, in line with the federal Child and Family Services Review (CFSR).

In partnership with the University of Michigan, MDHHS is utilizing Adoption and Foster Care Analysis and Reporting System (AFCARS) and National Child Abuse and Neglect Data System (NCANDS) files to replicate the federal Children's Bureau data reporting processes. Developing our own reporting capacity will allow data to be generated on a monthly basis, enabling early identification of practice areas that require targeted attention to support improvement.

The federal data indicators are as follows:

1. Children have permanency and stability in their living situations.
 - Permanency in 12 months for children entering foster care.
 - Permanency in 12 months for children in care 12 to 23 months.
 - Permanency in 12 months for children in care 24 months or more.
 - Placement stability.
 - Re-entry into foster care.
2. Children are first and foremost, protected from abuse and neglect.
 - Maltreatment in care.
 - Recurrence of maltreatment. (Applicable only for DHHS as this indicator is specific to CPS).

To complement MDHHS’s quantitative data reports, the state has developed a Quality Service Review (QSR) protocol.

MDHHS, in partnership with national experts from the Child Welfare Policy and Practice Group, private partners, and other stakeholders, developed a Michigan QSR protocol. The QSR, which is designed to assess implementation of the Michigan case practice model MiTEAM, has been conducted in fifteen counties to date.

The QSR includes twelve **Status Indicators** which measure the functioning of the child and family, as well as nine **Practice Indicators** that evaluate how well the system is working to support positive life changes that help children and families get better, do better, and stay better.

Innovative Funding Models

To support Michigan’s performance-based child welfare system, the state is pursuing innovative funding models. To date, there are three different innovative funding models in various states of progress:

	Kent County Pilot	Wayne County Pilot	Per Diem Rate Setting
Geographic Area	Kent County	Wayne County	Statewide
Funding Model	Case rate; based on historical costs of providing child welfare services in Kent County and actuarial soundness	TBD	Per diem; the state and its contracted rate review team (PCG and L&E) are also exploring options to incentivize outcomes through the per diem payment system
Staffing/ Organization Structure	A new non-profit, the West Michigan Partnership for Children (WMPC), will contract with MDHHS and will receive the case rate; WMPC will be responsible for contracting with and paying providers in the community	TBD	No change
Implementation Status	Target pilot start-date of 7/1/2016	Pilot is still in knowledge gathering phase; will not begin development until the Kent County pilot has started	In process; cost reports have been collected and are being analyzed to determine costs for providing contracted services

Kent County Pilot: Racing Toward July

The Kent County pilot continues to make great progress toward reaching a July 1, 2016, target start date. Some recent work and accomplishment are listed below:

- ✓ The case rate, developed in partnership with Public Consulting Group and Lewis & Ellis, is nearly final. Next steps are to review with MDHHS executive team and State Budget Office.
- ✓ WMPC has received federal approval as a 501(c)3 not-for-profit.

- ✓ MDHHS has resolved barriers to allow the WMPC to use Mindshare, as requested, through an interface with MiSACWIS.
- ✓ MDHHS and WMPC have been meeting with MiSACWIS development team to request changes to MiSACWIS necessitated by the pilot (ex: consortium hierarchy design, access/security, payment authorization approvals, etc.).
- ✓ MDHHS has been supporting WMPC in building the payment structure from the consortium to the providers.
- ✓ For an internal review, MDHHS is working on developing and compiling all documentation necessary to submit a Title IV-E State Plan Amendment, including MDHHS and WMPC program and funding policies.
- ✓ MDHHS has developed a draft contract between MDHHS and WMPC, which is currently being vetted by WMPC and MDHHS. Next steps are to collect feedback on the contract, revise as necessary, and then forward to MDHHS legal and federal compliance teams for review.

MDHHS and WMPC continue to work aggressively knowing that a summer start date depends on completion of the following work flows:

- Approval from the Federal Administration for Children and Families Liaison regarding the case rate model, claiming, and monitoring.
- Budget approval for needed MiSACWIS changes and resources to support the data sharing between MDHHS and Mindshare.
- Implementation of required MiSACWIS changes and/or temporary solutions.
- WMPC and Mindshare contract in place and system developed.
- WMPC Child Placing Agency license issued.
- WMPC hiring of essential staff and leasing of office space.
- WMPC policy development.
- WMPC contracts in place with provider subcontractors.
- MDHHS and WMPC contract in place.

Kent County Pilot "Team Leads" Working Retreat

On March 2-3, 2016, Laura Mitchell (LSSM), Sonia Noorman (Wellspring), Nancy Rostoni (MDHHS), Maureen Stanton (PCG), Donna Tefft (DAB-SJ), gathered for a Kent County pilot development retreat.

The group tackled several items, including the Title IV-E state plan amendment, the MDHHS-WMPC contract, policies and procedures, CQI plan, and communication plan.

Other news in brief:

MDHHS Performance-based Child Welfare System Development Manager

- MDHHS established a dedicated, full time position within Children's Services to support the ongoing work needed to start the pilot.
- MDHHS's Performance-based Child Welfare System Development Manager is **Nancy Rostoni**.

Evaluator Contract is Signed

- MDHHS has executed a third party independent evaluator contract with **Westat**.

CWPC Membership Updates

- Please welcome **Tracy Byard**, Clare County Administrator, to the CWPC membership team
- Please welcome **Steve Currie**, Michigan Association of Counties, who is replacing Dana Gill on the CWPC membership team.