



Brevard Family Partnership

Protecting Children, Strengthening Families, Changing Lives.

EXECUTIVE SUMMARY

For

Subcontractor Monitoring

FY 2011-12

Report Date: May 21, 2012

Brevard Family Partnership EXECUTIVE SUMMARY

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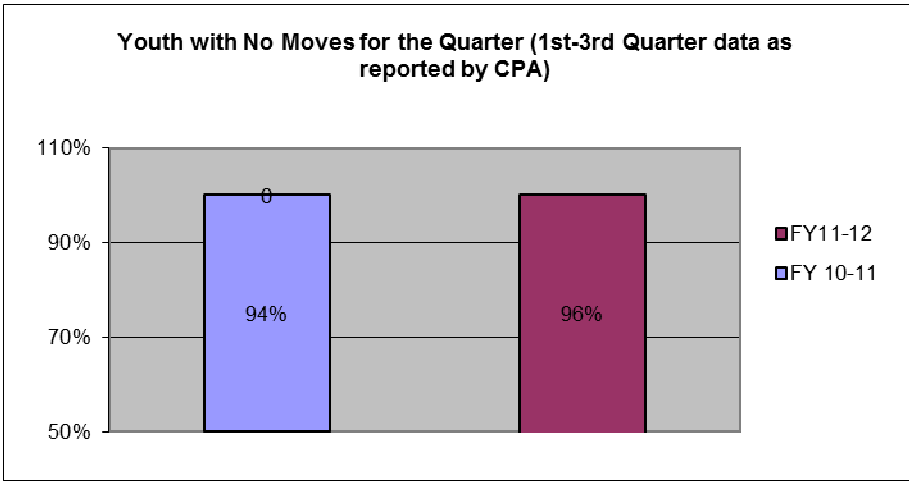
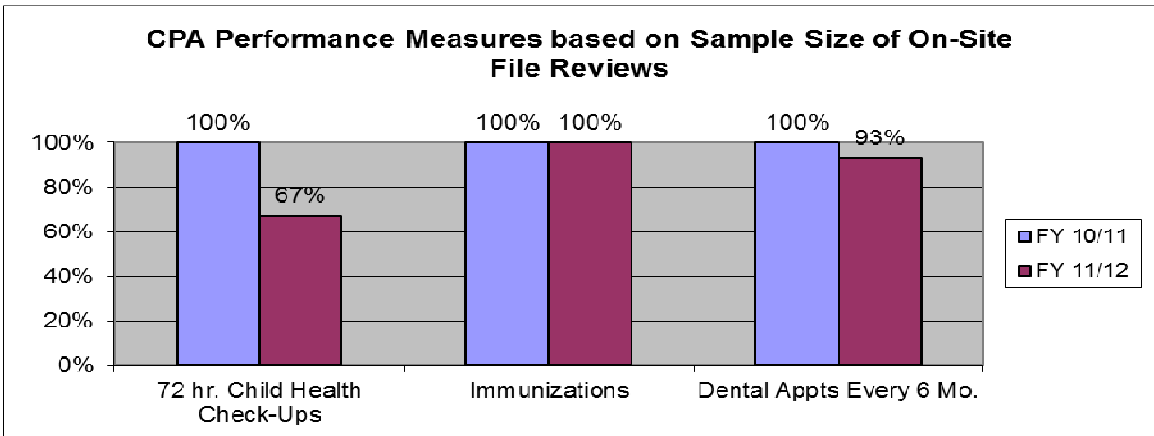
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Child Placing Agency Performance Measures

BFP now contracts with one agency, Devereux to provide child placing agency (CPA) services. The following performance measures results were obtained as a result of actual on-site case file reviews, based on a random sample.

	FY 11-12	FY 10-11
Children receive a minimum of <u>4</u> recreational/cultural activities per month	100% 17/17	100% 10/10
100% enrollment in school within 72 hours of admission	100% 3/3	100% 4/4
90% of youth will have no moves for the Quarter *Results from Qtr 1- Qtr 3 as reported by CPA	96%	94%
95% in need of initial Child Health Check-Up will have exam completed within 72 hours of admission <ul style="list-style-type: none"> • Based on limited sample size review • Comprehensive Results from Qtr 1- Qtr 3 as reported by CPA 	67% 2/3	100% 2/2
	96% 104/108	
100% will have all immunizations up-to-date (for youth over 90 days)	100% 18/18	100% 9/9
100% will have a dental appointment scheduled within 30 days of admission	75% 3/4	100% 3/3
100% will have been seen by a dentist at least every 6 months.	93% 13/14	100% 8/8
100% of children placed will have regular child check-ups as mandated by the FL Medicaid periodicity schedule.	94% 17/18	----
Overall Compliance	95% 73/77	100% 33/33

In FY 11-12 all child placing agency responsibilities were consolidated and awarded to Devereux. Despite the addition of a much larger population to serve within Brevard County, Devereux has demonstrated an overall compliance of 95%. The on-site review yielded a small sample size of youth requiring the initial 72-hour child health check-up, so for purposes of this report the more comprehensive results from Quarter's 1-3 were also included, which showed a high compliance rate of 96%.



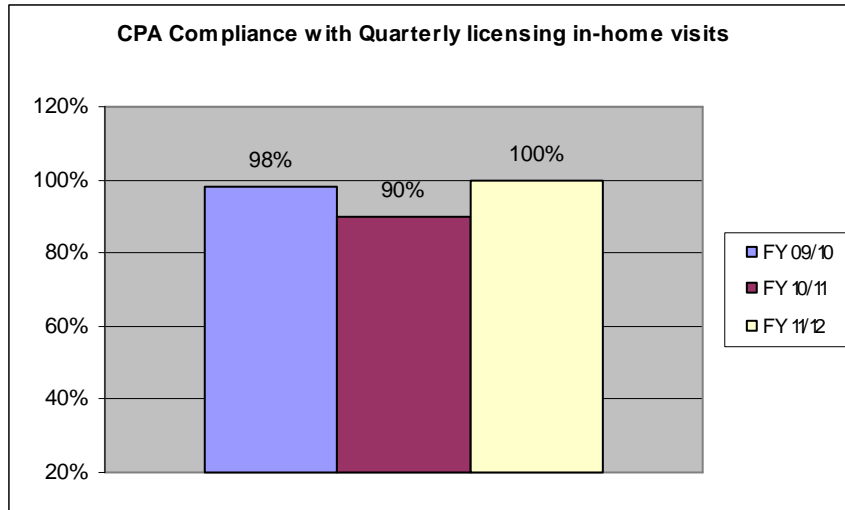
Child Placing Agency Service Tasks

The on-site annual monitoring review also included case file verification of the following service tasks:

	Devereux FY 11/12	Averages* FY 10/11	Averages* FY 09/10
Quarterly licensing in-home visits	100% 17/17	90% 27/30	98% (44/45)
Completed Discharge Summary Report, if applicable	100% 4/4	100% 7/7	82% (9/11)
Ensured monthly documentation by foster parents of allowance and purchases made	83% 15/18	96% 43/45	84% (59/70)
Documentation of required intake/admission documents	100% 18/18	100% 45/45	100% (65/65)
Documentation of social history of child	100% 18/18	100% 45/45	100% (65/65)
Documentation of required legal documents	94% 17/18	98% 43/44	88% (57/65)
Copy of child's case plan	100% 18/18	90% 37/41	92% (60/65)
Completed Monthly Progress Reports	100% 18/18	91% 41/45	100% (64/64)
Overall compliance by CPA	97% 125/129		

Overall, the CPA performed well in the area of documentation. The client files were found to be well-organized and contained needed information. Additionally, quarterly home visits and monthly progress reports were completed accordingly.

* Fiscal year 09/10 and 10/11 data noted above includes the results of previous Child placing Agencies that include Florida Mentor, Intervention Services, Children's Home Society and Devereux as they all held Child Placing Agency Provider contracts. FY 11/12 Averages only reflects data from Devereux as they are the only Child Placing Agency this monitoring year.



Residential Group Care Performance Measures

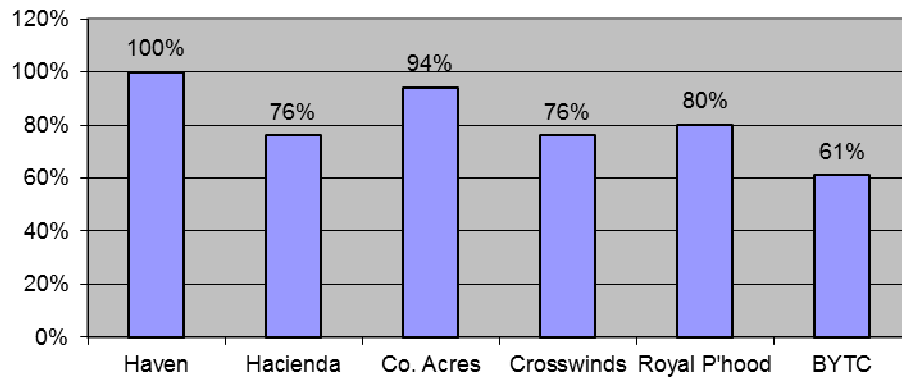
BFP contracted with six (6) facilities that provide residential group care (RGC) services. The RGC providers are responsible for tracking contract performance measures and reporting the measures on a quarterly basis. The following performance measures results were obtained as a result of actual on-site case file reviews, based on a random sample.

	Haven	Hacienda	Country Acres	Crosswinds *Eng. Shelter	Royal Priesthood	BYTC	Averages FY 11/12	Averages FY 10/11*	Averages FY 09/10*
90% with no more than 2 runaway incidents	100% 6/6	25% 1/4	86% 6/7	0% 0/3	75% 3/4	50% 4/8	63% 20/32	83% 30/36	79% (37/47)
Youth receive a minimum of 4 recreational/cultural activities away from facility per month	100% 6/6	100% 4/4	100% 7/7	100% 2/2	33% 1/3	100% 7/7	93% 27/29	100% 35/35	100% (47/47)
100% enrollment in school within 72 hours of admission	100% 1/1	NA	100% 5/5	NA	100% 1/1	100% 7/7	100% 14/14	100% 8/8	94% (29/31)
90% in need of initial Child Health Check-Up will have exam completed within 72 hours of admission. *This measure is tracked in multiple reports (on-site monitoring, and EPSDT monthly reports - July-Mar)	NA On-Site	NA On-Site	50% 1/2 On-Site	100% 2/2 On-Site	100% 1/1 On-Site	0% 0/1 On-Site	67% 4/6 On-Site	56% 5/9 On-Site	62% (18/29)
	N/A EPSDT report	100% 1/1 EPSDT report	75% 3/4 EPSDT report	100% 7/7 EPSDT report	100% 1/1 EPSDT report	50% 1/2 EPSDT report	87% 13/15 EPSDT report	----	
100% will have all immunizations up-to-date (for youth over 90 days)	100% 6/6	100% 4/4	100% 7/7	100% 1/1	100% 3/3	50% 4/8	86% 25/29	90% 27/30	95% (38/40)

	Haven	Hacienda	Country Acres	Crosswinds *Emg. Shelter	Royal Priesthood	BYTC	Averages FY 11/12	Averages FY 10/11*	Averages FY09/10*
100% will have a dental appointment scheduled within 30 days of admission	100% 1/1	100% 1/1	100% 7/7	100% 3/3	100% 2/2	0% 0/6	70% 14/20	89% 24/27	89% (33/37)
100% will have been seen by a dentist at least every 6 months	100% 6/6	100% 4/4	86% 6/7	NA	100% 4/4	33% 2/6	81% 22/27	96% 26/27	95% (35/37)
100% will have a Normalcy Plan within 30 days of admission	100% 2/2	25% 1/4	100% 4/4	67% 2/3	33% 1/3	75% 6/8	67% 16/24	72% 21/29	74% (29/39)
100% of children will have regular child health check-ups as mandated by the FL Medicaid periodicity schedule.	100% 6/6	100% 4/4	100% 7/7	100% 3/3	100% 4/4	75% 6/8	94% 30/32		
Overall Compliance by RGC Provider	100% 34/34	76% 19/25	94% 50/53	76% 13/17	80% 20/25	61% 36/59			

Overall, the RGC providers did well in providing monthly cultural and recreational activities, timely school enrollment, immunization records, and yearly physical health screenings. Due to prior low performance with several of the measures, BFP continues to implement a Monthly Report to track Provider performance on a monthly basis with initial Child Health Check-Ups within 72 hours, initial dental appointments, and Normalcy. The results from the monthly initial Child Health Check-Ups reports were also included as this is more comprehensive than the limited sample size review numbers show. The group homes do a good job with ensuring a follow-up health appointment is made for the youth, with 94% overall compliance with yearly health check-ups.

Overall Performance Measure Compliance by Group Home



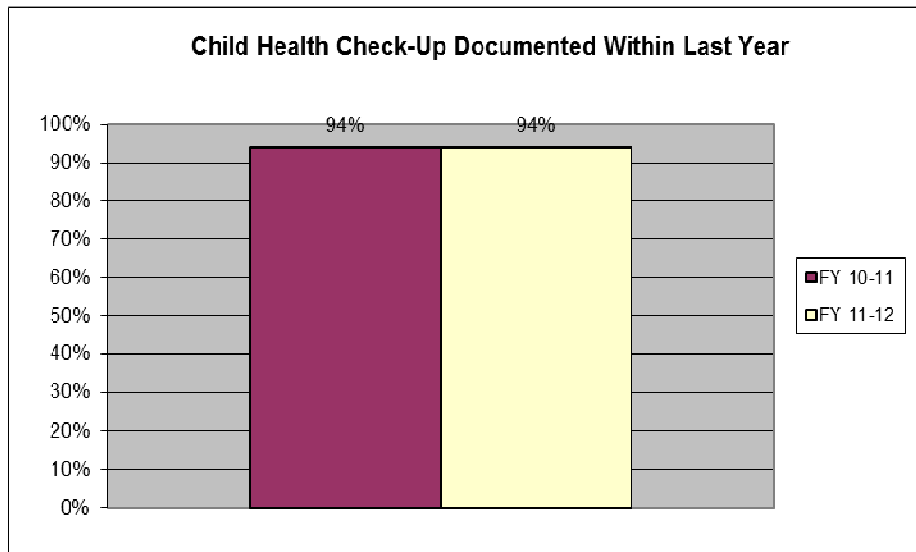
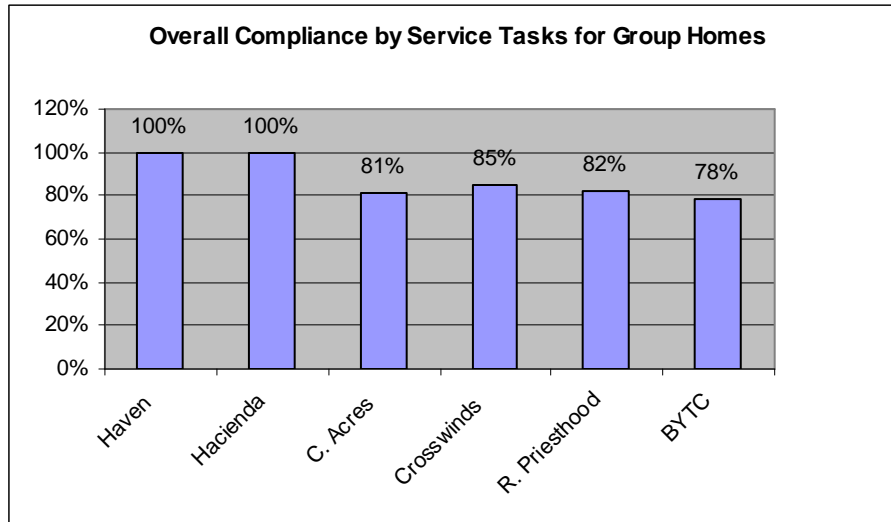
Residential Group Care Service Tasks

The on-site annual monitoring review also included case file verification of the following service tasks:

	Haven	Hacienda	Country Acres	Crosswinds *Fmg. Shelter	Royal Priesthood	BYTC	Averages FY 11/12	Averages FY 10/11*	Averages FY 09/10*
Written Personal Item Inventory at admission and updated	100% 6/6	100% 4/4	86% 6/7	100% 3/3	100% 4/4	100% 8/8	97% 31/32	89% 32/36	91% (43/47)
Documentation of Allowance	100% 4/4	100% 4/4	100% 7/7	100% 3/3	75% 3/4	25% 2/8	77% 23/30	100% 32/32	100% (45/45)
Documentation of Independent Living activities	100% 2/2	100% 4/4	0% 0/4	100% 3/3	0% 0/3	38% 3/8	50% 12/24	93% 27/29	92% (35/38)
Documentation of demographic information	100% 6/6	100% 4/4	100% 7/7	100% 3/3	100% 4/4	100% 8/8	100% 32/32	100% 36/36	100% (47/47)
Documentation of a social history for the child and his/her family	100% 6/6	100% 4/4	100% 7/7	100% 2/2	100% 4/4	88% 7/8	97% 30/31	100% 36/36	96% (45/47)
Documentation of required legal documents	100% 6/6	100% 4/4	100% 7/7	33% 1/3	100% 4/4	100% 8/8	94% 30/32	97% 35/36	85% (40/47)
Copy of child's current case plan	100% 6/6	100% 4/4	86% 6/7	NA	50% 2/4	63% 5/8	79% 23/29	70% 21/30	78% (31/40)
Completed Monthly Progress Reports	100% 6/6	100% 4/4	0% 0/7	0% 0/2	75% 3/4	100% 8/8	68% 21/31	85% 28/33	81% (38/47)
Maintain a Medication Admin Log	100% 6/6	100% 4/4	100% 6/6	100% 2/2	100% 3/3	100% 6/6	100% 27/27	100% 26/26	97% (36/37)
Completed Release & Aftercare Report for each youth discharged	NA	100% 1/1	100% 4/4	100% 2/2	100% 1/1	100% 1/1	100% 9/9	75% 6/8	100% (11/11)
Child Health Check-Up Documented Within Last Year	100% 6/6	100% 4/4	100% 7/7	100% 3/3	100% 4/4	75% 6/8	94% 30/32	94% 31/33	--
Overall compliance by RGC	100% 54/54	100% 41/41	81% 57/70	85% 22/26	82% 32/39	78% 62/79			

The majority of our group home providers did well with documentation requirements. Several of the Providers struggled with documentation of their Independent Living activities, allowance, and monthly progress reports and were given Corrective Action

Plans. Overall Provider compliance with a documented Child Health Check-Up continues to be high, with an overall compliance of 94%.



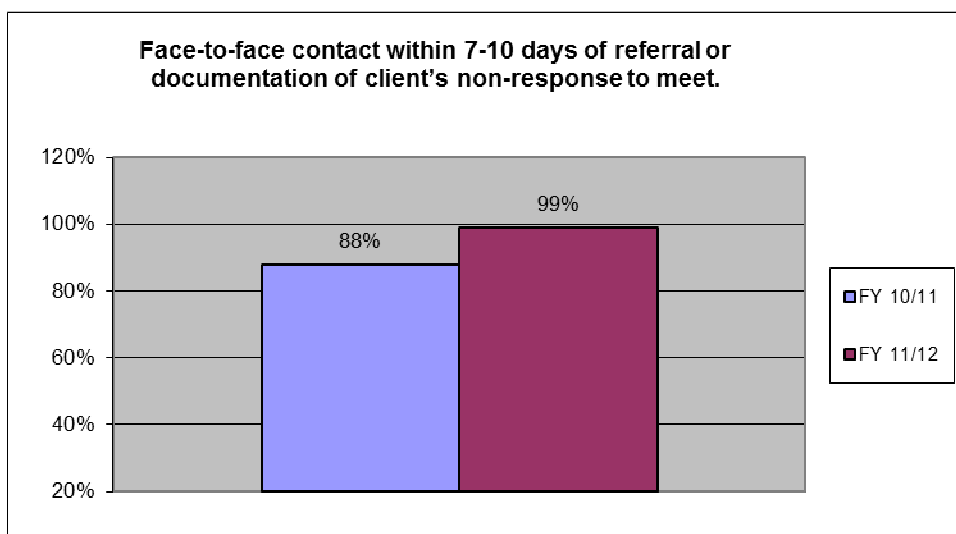
Flexible Supports Performance Measures

BFP contracts with five (5) providers to provide in-home flexible support services. These in-home supportive services are primarily provided to families where BFP is the primary payer and involve both professional and para-professional staff and are short-term. Providers are responsible for tracking contract performance measures and reporting the measures on a quarterly basis. The following performance measures results, unless otherwise indicated, were obtained as a result of actual on-site case file reviews, based on a random sample.

	Links of Hope (In-Home Programs)	Coastal Behavioral Therapy	Intervention Services	Yellow Umbrella (In-Home Program)	Brevard Behavioral Cons.	Averages FY11/12	Averages FY10/11	Averages FY09/10
95% of families will be contacted or attempt to contact within next business day of receipt of referral	64% 9/14	85% 11/13	100% 11/11	100% 34/34	100% 13/13	92% 78/85	95% 42/44	82% 62/76
95% of clients will have a face-to-face contact within 7-10 days of referral or documentation of client's non-response to meet	100% 14/14	100% 13/13	91% 10/11	100% 34/34	100% 11/11	99% 82/83	88% 38/43	--
95% of clients will have a written treatment plan prepared and submitted to BFP w/in 30 days of 1 st visit	88% 7/8	NA	73% 8/11	NA	NA	79% 15/19	70% 7/10	--
95% of clients will have weekly reports prepared and submitted to BFP through the Mindshare system.	100% 14/14	100% 23/23	90% 9/10	100% 35/35	100% 15/15	99% 96/97	99% 69/70	--
90% of all families served will show improvement in family functioning from pre-test to post-test. Data from 1st-3rd Quarter Outcome Measures Report.	96% 96/100	100% 18/18	100% 19/19	98% 123/125	100% 31/31	98% 287/293	96% 240/251	96%
95% of families served will show satisfaction with the provider's program Data from 1st-3rd Quarter Outcome	100% 83/83	100% 102/102	100% 3/3	100% 125/125	100% 64/64	100% 377/377	100% 256/256	99%

Measures Report.								
Overall Compliance by Flex Provider	96% 223/233	99% 167/169	92% 60/65	99% 351/353	100% 134/134			

Providers demonstrated improvement in face-to-face contact with the family within 7-10 days of referral and family functioning based on the pre and post testing. Also 100% of families served were satisfied with the services providers by all of the providers.

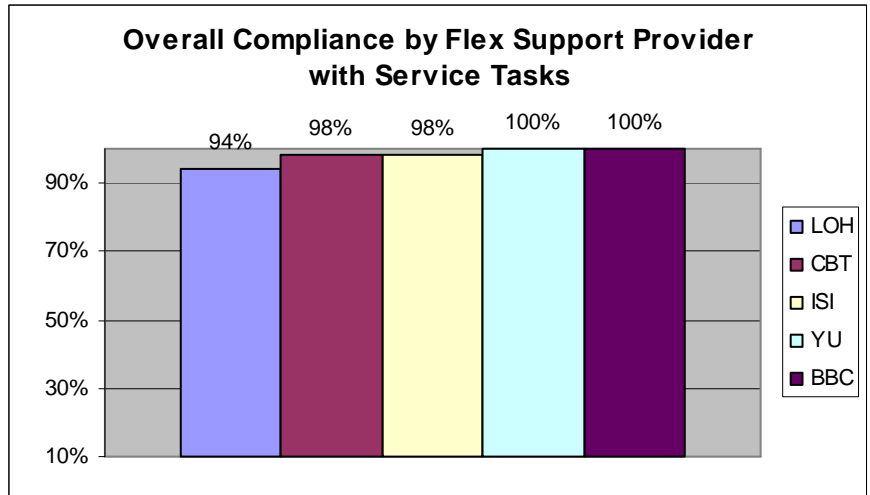


Flexible Supports Service Tasks

The on-site annual monitoring review also included case file verification of the following service tasks:

	Links of Hope (In-Home Programs)	Coastal Behavioral Therapy	Intervention Services	Yellow Umbrella (In-Home Program)	Brevard Behavioral Cons.	Averages FY 11/12	Averages FY10/11	Averages FY09/10
Services were authorized by BFP before service provision	100% 14/14	100% 23/23	100% 11/11	100% 35/35	100% 15/15	100% 98/98	100% 70/70	100% (77/77)
Provider completed Weekly Progress Reports	100% 14/14	100% 23/23	90% 9/10	100% 35/35	100% 15/15	99% 96/97	99% 69/70	96% (74/77)
Documentation of any failure to make contact with family on weekly chronological note in Mindshare	100% 6/6	100% 5/5	100% 2/2	100% 7/7	100% 2/2	100% 22/22	80% 12/15	79% (22/28)
Services provided were appropriate to the tasks stipulated on the Care Plan, as documented in the provider's service notes and were individualized to the needs of the family	100% 14/14	100% 23/23	100% 10/10	100% 35/35	100% 15/15	100% 97/97	100% 69/69	97% (75/77)
Utilizes a pre and post test	58% 7/12	87% 20/23	100% 11/11	100% 25/25	100% 15/15	91% 78/86	71% 49/69	--
Provider was successful in engaging client	100% 14/14	100% 23/23	100% 11/11	100% 35/35	100% 15/15	100% 98/98	99% 69/70	96% (74/77)
Signed HIPAA Acknowledgement Form	100% 14/14	100% 23/23	100% 11/11	100% 35/35	100% 15/15	100% 98/98	58% 40/69	--
Overall Compliance by Flex Provider	94% 83/88	98% 140/143	98% 65/66	100% 207/207	100% 92/92	98% 587/596	88% 378/432	

The above Service Tasks are a part of the Flex Support contract requirements. Overall, the programs continue to show excellent documentation, file organization, and monitoring of the various performance measures. Clients were seen timely and documentation was recorded in Mindshare accordingly. One Provider was not utilizing pre and post testing for all of their services, resulting in a Corrective Action Plan.



Parenting with Love & Limits

BFP contracts with Intervention Services to implement the Parenting with Love & Limits program model. The program targets children between the ages of 10 and 18 with extreme emotional or behavioral needs. The following service tasks results were obtained as a result of actual on-site case file reviews, based on a random sample. The performance measures are included as reported by Provider from the 1st – 3rd Quarter.

Service Tasks	FY 11/12	FY 10/11	FY09/10
Services were authorized by BFP prior to service provision and if needed, Provider obtained additional authorization before previous authorization expired	100% 7/7	100% 8/8	100% (8/8)
Completed Weekly Progress Reports for each family served	100% 7/7	100% 8/8	100% (8/8)
Documentation of weekly group therapy sessions	100% 7/7	100% 8/8	100% (8/8)
Documentation of weekly family therapy sessions	100% 7/7	100% 8/8	100% (8/8)
Services provided were documented in the client file, to include assessments, notes, correspondence, etc.	100% 7/7	100% 8/8	100% (8/8)
Documentation in file of notice to the family's care manager of any resistance or failure to make contact with the family	NA	NA	100% (1/1)
Performance Measure – As reported for Qtr 1 – Qtr 3, FY 2011/12			
Provider will serve 48 families through FY 2011/12. Note: results shown for partial contract year.	73% 35/48	60% 24/40	83% 66/80
Provider shall maintain a graduation rate of at least 75% of families that begin PLL	74% 26/35	89% 17/19	86% 57/66
95% of the families served will show satisfaction with provider's service delivery.	100% 26/26	97% 35/36	97% 61/63

The program continues to show great documentation and compliance with contract service tasks. Also families served are satisfied with the service delivery.

Supervised Visitation, Coaching & Mentoring

BFP began a contract during FY 2010/2011 with Eckerd for Supervised Visitation, Coaching, and Mentoring services aimed at families with the goal of reunification. The on-site annual monitoring review included case file verification of the following service tasks:

Eckerd Supervised Visitation, Coaching & Mentoring Program Service Tasks:	FY 11-12	FY 10-11
Services were authorized by BFP before service provision	100% 10/10	100% 13/13
Provider completed Weekly Progress Reports	100% 10/10	100% 13/13
Documentation of any failure to make contact with family on weekly chronological note in Mindshare	100% 4/4	100% 7/7
Provided and/or arranged for transportation when lack of transportation was identified as a barrier	100% 9/9	100% 4/4
Utilizes a pre and post test	100% 10/10	100% 10/10
Provider was successful in engaging client	100% 10/10	92% 11/12
Signed HIPAA Acknowledgement Form	100% 10/10	100% 10/10
Completed a Discharge/Termination Progress Report within 15 days following a client's termination from the program	100% 7/7	100% 1/1
Overall Compliance	100% 70/70	99% 69/70

Performance Measures:	FY 11-12	FY 10-11
The % of children reunified who were reunified within 12 months of the latest removal shall be at least 85%. Data from 1st-3rd Quarter Outcome Measures Report.	100% 4/4	75% 3/4
95% of incidents where families report inability to transport child to visitation will be successfully resolved through Provider transportation assistance.	100% 9/9	100% 4/4
95% of program participants will participate in weekly visitations. Data from 1st-3rd Quarter Outcome Measures Report.	76% 25/33	97% 31/32
100% of families will be contacted within 1 business day of receipt of referral	100% 7/7	82% 9/11
95% of clients will have weekly reports	100% 10/10	100% 13/13
95% of families served will show satisfaction with the provider's program Data from 1st-3rd Quarter Outcome Measures Report.	100% 7/7	TBD

This program has entered its second year of service provision and Eckerd continues to show excellent compliance with contract documentation requirements within client files. Also excellent documentation of services was provided in the monthly "Therapeutic Supervised Visitation Documentation" form.

Adoption Support Services

BFP contracts with Intervention Services, Inc. (ISI), to provide adoption support services. ISI employs 3 Adoption Support Coordinators. The following service tasks results were obtained as a result of actual on-site case file reviews.

Service Tasks	FY 11/12	FY 10/11	FY 09/10
Assisted in the recruitment of adoptive homes and matching events for children served	100% 8/8	100% 8/8	92% (11/12)
Ensured fingerprinting and background checks completed on potential adoptive families	100% 7/7	100% 11/11	100% (14/14)
Performed a comprehensive child study within 30 days of intake for each youth referred	100% 15/15	94% 16/17	93% (13/14)
Completed adoptive home studies on recruited adoptive parents, which also included supervisor review before submitting to BFP	100% 8/8	100% 7/7	100% (10/10)
Provided support, education, and assistance to prospective adoptive parents	92% 11/12	100% 12/12	100% (14/14)
Staffed cases quarterly with care manager and supervisor to assess progress towards adoption	94% 17/18	100% 16/16	100% (24/24)
Maintained all necessary documentation to meet the applicable federal, state, and local regulations	100% 6/6	100% 7/7	100% (11/11)
Maintained a record of work in FSFN	95% 18/19	100% 20/20	93% (26/28)
Registered eligible children on the Adoption Exchange within 30 days of the date of Termination of Parental Rights or within 30 days of case referral	100% 13/13	100% 17/17	94% (15/16)
Overall Compliance by Provider	97% 103/106	99% (114/115)	97%
Performance Measure			
The % of children with finalized adoptions whose adoptions were finalized within 24 months of the latest removal shall be <u>at least 32%</u> . (July 2011 – March 2012)	60% 31/52	56% (22/39)	36% (19/52)
# of finalizations to date (July 2011 – March 2012)	52/60 (87% of target)	39/48 (81% of target)	52/54 (96% of target)

The program showed consistent documentation, file organization, and compliance with the contract mandated performance measures.

Dialectical Behavioral Therapy (DBT) Services

BFP contracts with Devereux Florida to provide Dialectical Behavioral Therapy services. The following service tasks results were obtained as a result of actual on-site case file reviews, based on a random sample. The performance measures were reviewed during the on-site monitoring and from quarterly reports submitted by Provider.

Service Tasks	Devereux FY 11/12	Devereux FY10/11	Devereux FY09/10
Services were authorized by BFP prior to service provision and if needed, Provider obtained additional authorization before previous authorization expired	100% 3/3	100% 4/4	100% (4/4)
Completed Weekly Progress Reports for each family served	100% 3/3	100% 4/4	100% (4/4)
Documentation of service provided, to include: weekly individual sessions, DBT skills groups, and phone coaching	100% 3/3	100% 4/4	100% (4/4)
Performance Measure – As Reported for Qtr 1 – Qtr 3, FY 2011/12			
95% of clients satisfied with services	100% 7/7	100% 21/21	100% (21/21)
90% of clients and families served will show improved life satisfaction and functioning from pre to post test (Based on file random sample monitoring file review).	67% 2/3	0% 0/2	100% (1/1)
95% of clients and families served will show a decrease in inpatient and/or residential admissions through the course of the treatment	100% 11/11	100% 21/21	81% (17/21)
95% of the clients and families served will stay engaged in treatment until the completion of their program	78% 7/9	76% 16/21	71% (15/21)
95% of treatment outcomes will show improvement from the client's targeted baseline behaviors from pre to post test.	100% 1/1	0% 0/2	100% (4/4)

Monitors noted thorough documentation of service provision in the client files. The program utilizes the CFARS tool to track pre and post-test progress and compliance with this measure has improved significantly (0% compliance to 67% compliance).

Mobile Response Team Services

BFP contracts with Devereux Florida to provide Mobile Response Team (MRT) services. The following service tasks results were obtained as a result of actual on-site case file reviews, based on a random sample. The performance measures were reviewed during the on-site monitoring and from quarterly reports submitted by Provider.

Service Tasks	Devereux FY 11/12	Devereux FY 10/11	Devereux FY 09/10
Maintained a separate case file for every family served that contained a log of contacts/correspondence with the date and time	100% 10/10	100% 5/5	100% (13/13)
Clinicians provided crisis intervention counseling and assessment of the child and his/her family functioning and provided recommendations for service needs	100% 10/10	100% 5/5	100% (13/13)
Performance Measure			
95% of families will be stabilized during the MRT intervention. Data as reported from Qtr 1 – Qtr 3 Outcome Measures Report.	97% 139/143	96% 150/157	97% (159/164)
100% of clinicians will deploy within 1 hour or notification	100% 10/10	100% 5/5	100%
100% of children/families who require follow-up care and/or linkages will receive these services	NA	100% 1/1	100%

The program continues to show great documentation and compliance with performance measures as most measures have a 100% compliance rate. Year to date performance continue to remain high for families stabilized during the MRT intervention, with Quarter 1 – Quarter 3 performance at 97%. This measures the total number of calls involving possible placement disruption in which the family was stabilized during the MRT intervention.

Independent Living Service Tasks

BFP contracts with Crosswinds, Inc. for the provision of Independent Living services. BFP utilizes the DCF Monitoring Tool for on-site Independent Living reviews. The tool itself is quite extensive and the following are the highlights from the on-site reviews and is not comprehensive of all items monitored. Monitors reviewed a total of 26 client files, which comprised a sample size of (6) Age 15-17 files; (10) Road to Independence Age 18-22 files; and (10) Transitional Support Age 18-22 files.

	FY 11/12	FY 10/11	Follow-Up Monitoring 4/16/10	Crosswinds 12/7/09
Pre-Independent Living (Age 13-14) files:				
Timely completion of initial assessment	NA	50% 2/4	50% (1/2)	50% (1/2)
Completion of annual staffing	NA	100% 4/4	100% (2/2)	100% (1/1)
Life Skills (Age 15-17) files:				
Timely completion of assessment	100% 5/5	29% 2/7	100% (6/6)	58% (11/19)
Staffing completed timely after age 15	100% 6/6	100% 12/12	100% (6/6)	79% (15/19)
Most recent staffing conducted timely (conducted every 6 months)?	83% 5/6	92% 11/12		50% (9/18)
Age 17 IL Assessment & Judicial Reviews				
IL Assessment completed timely	100% 6/6	60% 3/5		0% (0/4)
First Special JR completed timely (within 90 days of 17 th birthday)	100% 6/6	40% 2/5	0% (0/2)	0% (0/4)
Second Special JR completed timely (6 months prior to 18 th birthday)	100% 5/5	25% 1/4		67% (2/3)
Ensured Transition Plan filed with court	100% 5/5	20% 1/5		0% (0/3)
Road to Independency (RTI) files				
Documentation that youth enrolled in an accredited high school OR post-secondary educational institution OR accredited adult education program.	100% 10/10	86% 6/7		88% (7/8)
Timely evaluation and renewal of each award annually	80% 4/5	60% 3/5		80% (4/5)
Documentation the youth met eligibility for most recent renewal	100% 5/5	100% 5/5		100% (3/3)

RTI Renewal Checklist completed & signed by student and approval authority	100% 5/5	100% 5/5		100% (5/5)
Assessment of funding needs of young adult completed to determine amount of award	90% 9/10	86% 6/7		88% (7/8)
File contained documentation of chronological entries made	100% 10/10	100% 7/7		100% (8/8)
Transitional Support (TSS) files:				
Transition Plan using CF-FSP 5293 completed	100% 10/10	100% 9/9		100% (15/15)
Plan included specific tasks and accountability or the ability to track progress	70% 7/10	78% 7/9		93% (14/15)
TSS benefits ended on or before the 3-month max limit	100% 9/9	100% 9/9		86% (12/14)
Young adult reapplied for TSS after the 3-month max limit	100% 9/9	100% 9/9		100% (13/13)
Documentation showed progress on completing the transition plan, such as proof of enrollment, GPA documents, etc.	89% 8/9	67% 6/9		100% (14/14)

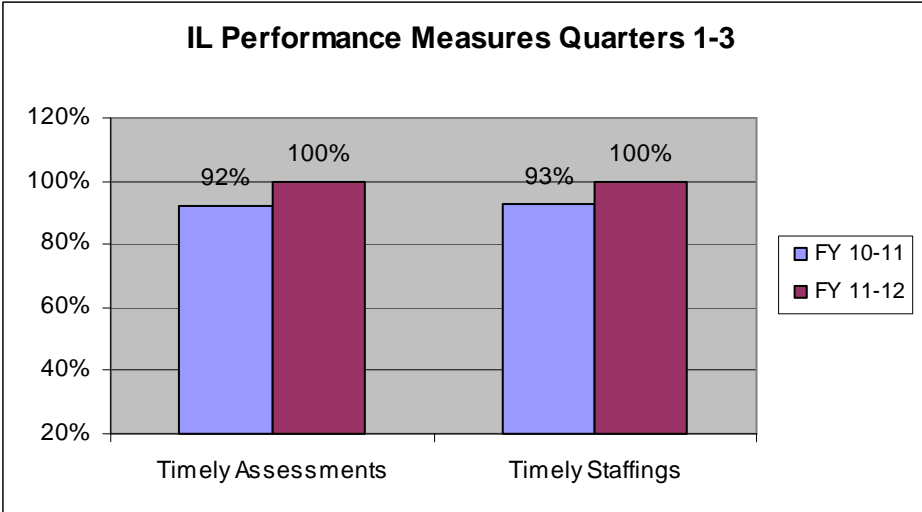
The monitors noted tremendous improvement in the quality and compliance of the Independent Living program files, with no Corrective Actions identified during this year's monitoring review. The program demonstrated compliance with all timelines and extensive documentation requirements. Some items for consideration noted by the monitors included: ensuring the plan clearly outlines the types of services being provided by the Provider and ensuring that the plans clearly note accountability and/or ability to track progress towards the completion of all tasks.

Independent Living Performance Measures

BFP contracts with Crosswinds Youth Services to provide Independent Living services. The program is responsible for tracking contract performance measures and reporting the measures on a quarterly basis. The following is their performance as reported from Quarter 1 – Quarter 3.

As Reported from Quarter 1 – 3 (July – March 2012) Outcome Measures Reports	Crosswinds FY 11/12	Crosswinds FY 10/11	Crosswinds FY 09/10
80% of youth aged 13-17 who attend monthly skills training will rate the information provided as useful based upon survey distributed by Provider	86% 147/171	94% 164/175	84% 108/128
90% of Daniel Memorial and/or Ansell Casey assessments will be completed on time	100% 43/43	92% 46/50	54% 33/61
90% of staffings will be completed on time	100% 101/101	93% 100/108	58% 45/77
90% of Subsidized IL Assessments will be completed on time	100% 5/5	100% 27/27	100% 2/2
95% of the target population will have documentation in their file that specific life skills training were delivered on a monthly basis that addressed their areas of need	100%	100%	100%
98% of the target population will have a plan for primary and secondary stable housing upon turning 18 years of age	100% 22/22	100% 19/19	100% 21/21
100% of the financial assessments and re-assessments necessary for RTI will be completed timely and maintained in the file	100% 26/26	100% 34/34	100% 19/19
90% of 18-23 year olds served in Transitional or RTI programs will not experience homelessness	100% 262/262	100% 133/133	100% 98/98

Crosswinds Youth Services continues to increase performance, particularly in regards to timely assessments and staffings. Also they continue to exceed goal expectations within the measures of providing needed specific life skills trainings and housing plans.



Satisfaction Surveys

In order to continuously improve the BFP monitoring process, each provider is given a satisfaction survey to rate the monitoring process. BFP requests information on the initial notification timeframe, explanation of the process by BFP staff, whether an Exit Interview was completed, thoroughness of the report, and overall satisfaction.

BFP polled 14 Provider Agencies and received the following response: 11 “Very Satisfied”, 2 “Satisfied”, 0 “Unsatisfied” and 0 “Very Unsatisfied”. The following comments were provided:

"The process was thorough and helped us to identify things we needed to address. Thank you!"

“Though the tools for monitoring the UM portion were not provided at time of contracting so some elements were unclear-though we appreciate recognition of baseline.”

“We were provided with all we needed to prepare for this monitoring. The process and findings were discussed thoroughly with us.”

“Overall, we are very satisfied with the most recent BFP monitoring process. BFP staff approaches the monitoring with our organization as community partners. We were informed of the date and an explanation of what would be monitored in a timely manner. (BFP monitoring staff) were all very professional and approached the monitoring in a positive and productive manner-providing us immediate, clear, and fair feedback on the strengths of our programs and what needed to be improved, which was followed in a clear written report. The BFP monitoring process this time and over the years has helped us improve our programs. Thanks You!

“Excellent communication.”

“The monitoring process is very thorough and helps us identify any areas that may need improvement. BBC, Inc. strives to maintain detailed reports and follow procedures and I think that was evident in the monitoring report. Thank you for being so thorough, timely and professional throughout the process.”

“We are always holding our breath at audit time, each day we strive to provide quality, services with measured results but somewhere in the back of our minds we wonder what we could be doing better and if we are right on track. When you receive a thorough audit and the results come back so positive with nearly a 100% compliance rating, it gives the center and the staff such a boost. It is a time consuming process for both the reviewer and the center but we are so appreciative of the support and guidance from BFP through this process. Thank you for providing the support and tools that allowed us to succeed.”