Child Welfare Key Indicators
Annual Review
FY 2015-16

Office of Child Welfare
Performance and Quality Management

A Results-Oriented Accountability Report
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Child Welfare in Florida

Florida’s community-based child welfare system was created to prevent child abuse, neglect, and abandonment, through a partnership between the Department of Children and Families (DCF), other state agencies, the courts, law enforcement agencies, service providers, and local communities. It is designed to provide equal protection to children through consistent intake decision-making regarding the children to be served and local systems of care to meet varying community needs, matching the needs of children and families to community resources, and allowing flexible development of evidence-based and promising approaches to the protection of children.

Intake for the community-based system of care is provided by DCF and county sheriff’s offices, which determine whether children and families should receive services and what kind of services:

- DCF’s Florida Abuse Hotline receives over 300,000 child-related calls, web reports and faxes annually and screens-in those which meet the requirements for investigation or assessment of special conditions with no alleged maltreatment.
- Child Protective Investigations (CPI) are conducted by county sheriff’s offices in six counties and DCF in the other 61 counties. Investigators determine the need for post-investigation services, including protecting the child through removal and placement in out-of-home care, or through case-managed, in-home services (by court order or non-judicially), or through informal voluntary family support services.

Section 409.986(1), Florida Statutes, requires that post-investigation services be provided through contracting with community-based care lead agencies (CBCs) and emphasizes that:

- Communities “have responsibility for and participation in ensuring safety, permanence, and well-being for all children in the state.”
- Outsourcing must be accompanied by “comprehensive oversight of the programmatic, administrative, and fiscal operation of those entities. . . . The appropriate care of children is ultimately the responsibility of the state and outsourcing such care does not relieve the state of its responsibility to ensure that appropriate care is provided.”

Section 409.997, F.S requires DCF to develop and implement a comprehensive, results-oriented accountability program (ROA), which includes monitoring outcomes. ROA “is about holding professionals and organizations answerable for the results (outcomes) of a chosen course of action rather than just for the fulfillment of assigned activities and duties (processes).” The state “acts as principal in holding other agents accountable for meeting the child’s needs in a long chain of principal-agent relationships that extends from policymaker, judge, and public administrator to service provider, caseworker and caregiver.” (Fostering Accountability, Mark Testa and John Poertner, 2010)

Our complex system has many entities sharing responsibility for child welfare outcomes. ROA includes data analysis; research review and evaluation; and an assessment of performance of individual entities and groups of entities working together to provide an integrated system of care.

ROA incorporates a limited number of outcome measures, using available data to quantify outcomes as children move through the system of care. Results are transparent for all parties in the child welfare system, policymakers and the public. This report includes some of the ROA outcomes and other key outcome and process indicators.
Florida’s Child Welfare Practice Model

In order to implement Florida’s child welfare law, a practice model was created.

Vision. Every child in Florida thrives in a safe, stable and permanent home, sustained by nurturing relationships and strong community connections.

Goals. Florida’s child welfare professionals seek to achieve these goals:

Safety. Florida’s children live free from maltreatment.

Permanency. Florida’s children enjoy long-term, secure relationships within strong families and communities.

Child Well-Being. Florida’s children are physically and emotionally healthy, and socially competent.

Family Well-Being. Florida’s families nurture, protect, and meet the needs of their children, and are well integrated into their communities.
Practices

To achieve these goals, Florida’s child welfare professionals use a safety-focused, family-centered and trauma-informed approach that includes these key practices:

**Engage the Family.** Build rapport and trust with the family and people who know and support the family. Empower family members by seeking information about their strengths, resources and proposed solutions. Demonstrate respect for the family as the family exists in its social network, community and culture.

**Partner with All Involved.** Form partnerships with family members and people who know and support the family. Partner and share information with relative caregivers and foster and adoptive parents. Include parent and other caregivers in case decision-making. Lead and facilitate partnership with all involved parties to achieve optimum communication, clear roles and responsibilities, and mutual accountability.

**Gather Information.** Gather information from the family members and other team members throughout the course of interventions to gain insight into solutions that might work for family members. Update information as underlying issues, including trauma histories, are identified and as the family situation changes.

**Assess and Understand Information.** Assess the sufficiency of information gathered. Identify and, whenever possible, reconcile unsupported impressions and observations or unverified statements regarding family functioning. Ensure all team members have a shared understanding of both risk and safety information and how this information informs interventions.

**Plan for Child Safety.** Develop and implement, with the family and other partners, short-term actions to keep the child safe in the home or in out-of-home care. For a child in temporary care, identify the circumstances within the child’s family that must exist for the child to be returned home safely with an in-home safety plan.

**Plan for Family Change.** Work with the child, family members, and other team members to identify appropriate interventions and supports necessary to achieve child safety, permanency and well-being. Identify services to help the child recover from the effects of child maltreatment and trauma, and to restore typical development to the extent possible. Seek to identify what is needed for the family members and their support network to succeed in maintaining positive changes over the long term. Seek the caregivers’ expertise in case planning and service delivery.

**Monitor and Adapt Case Plans.** Link family members to services and help them navigate formal systems. Troubleshoot and advocate for access to services when barriers exist. Modify safety actions and family case plans as the needs of family members change. Support the child and family members with transitions, including alternative permanency options when reunification cannot occur.
Indicators Presented in this Report

This report provides charts for a set of indicators describing the current status of Florida’s community-based child welfare system is operating. The sequence follows the flow of Florida’s child welfare system from the Florida Abuse Hotline to Child Protective Investigations (CPI) to Community-Based Care (CBC) lead agencies. CBC indicators are structured around the three national goals of Safety, Permanency, and Well-Being. These goals have evolved over the development of public child welfare programs in the last half of the twentieth century:

- The 1970s had expansion of programs to protect children from further maltreatment, with removal and placement in foster care as the primary intervention (Safety).
- The 1980s had increased recognition that children were staying too long in foster care and drifting from placement to placement, so there was new emphasis that foster care be a short-term solution and children move quickly to permanent homes (Permanency).
- The 1990s put greater emphasis on the quality of life for children in foster care, placing children in more family-like settings, while meeting their educational and medical needs and preparing them for adulthood (Well-Being).

This report uses trend and comparison charts. Trend charts show change over time. Comparison charts show Florida in relation to other states and each area in Florida in relation to other areas. Such comparisons are included to provide appropriate context. For example, if Florida appears to be trending in the wrong direction on a given indicator, it is useful to see that Florida’s performance is among the best in the nation.

The indicators in this report show wide variation from state to state and community to community. Many of the measured differences between states reflect differences in laws and reporting systems, as well as differences in populations served. Variation within Florida may also be due in part to varying demographics of populations served and different levels of community resources to support children and families. The flexibility to meet varying community needs means that our varying systems of care will have different mixes of services, which may lead to varying levels of performance on outcome measures.

Caution should be used in comparing states, circuits and CBC lead agencies. Comparisons may trigger celebration of high performance or signal a need for improvement. More often, recognition of differences will trigger questions about how our state is different from others and how Florida’s communities are different.

This report provides indicators in the following sequence:

- Demographic Context of the Child Welfare System
- Reporting to the Hotline
- Child Protective Investigations
- Investigative Decision-Making and the Flow to CBC Lead Agencies
- CBC Caseloads
- CBC Safety Outcome Indicators
- Permanency Outcome Indicators
- Drivers of Timely Permanency
- Well-Being of Children in Out-of-Home Care
Demographic Context of the Child Welfare System

Wide variation on various indicators, including removals and discharges, services mix, and measured outcome performance, are present throughout the report. There are also some important context differences between communities, including wide variations in the proportion of children living in poverty and the public response to maltreatment measured through maltreatment reporting rates. Both indicators are included on the following pages.

Although additional indicators, such as teen births, employment, education, crime, etc., are not included in this report, such indicators could help develop a broader understanding of how such community variations might affect community-level indicators in this report. The availability of community resources is another important variable:

- The allocation of resources to various components by lead agencies, including the mix of case management, residential placement (e.g., foster family homes vs. group care), safety management and other direct services.
- The availability of additional resources devoted to child welfare, such as those with Children’s Services Councils supported by local taxes.
- Potential resources that might be available, using such indicators as median income, the number of children compared to the general population, and income inequality.

Growth in Child Population

*Long-Term Trends: Florida vs. National Estimates*

The United States child population grew by only **13.3%** from 65,313,018 in 1991 to 74,019,405 in 2007 and has remained essentially flat, with a 0.5% decrease from 74,019,405 in 2007 to 73,645,111 in 2015. In contrast, Florida’s child population grew by **32.4%** from 3,045,638 in 1991 to 4,031,098 in 2007 and has been essentially flat, with a 1.8% increase from 4,031,098 in 2007 to 4,105,129 in 2015.
Children Living in Poverty

When comparing communities on various child welfare indicators, poverty is an important factor to consider, including its relationship to reporting rates and implications for service needs.

**Florida Compared to Other States**

Florida’s child poverty rate of 24% in 2014 was higher than the 22% national average and is almost twice the level of a few states.

**Circuit/CBC Comparisons**

Note that the highest rates are almost three times as high as the lowest rates.
Intake into the Child Welfare System
Maltreatment Reporting

Reporting Rate: Children Investigated Compared to Population

In 1971 the Florida Legislature created the Florida Abuse Hotline and child protective investigations in each of Florida’s 67 counties. Since that time, Florida has used this intake system as the “front door” of its child welfare system. According to a 2016 Florida study by the SAS Institute that followed a 2005 birth cohort for 10 years, approximately one in every five children born in Florida in 2005 were reported at least once to the child welfare system within 60 months from birth.

Long-Term Trends: Florida vs. National Average

Reporting rates have been flat for a decade, but Florida’s rate has been twice the national average through 2014, the last year with national data.

Florida Compared to Other States

Florida’s investigation rate was one of the highest in the nation in 2014.
Reporting Rate: Children Investigated Compared to Population

**Florida Statewide Trend**

Florida’s maltreatment reporting rate has been stable over the years. The dip in 2008-09 and 2009-10 was due to handling some allegations to the Hotline as “Parent Needs Assistance” special conditions referrals, rather than maltreatment reports.

![Graph of Children in Maltreatment Investigations in State Fiscal Year per 100 Children in the General Population]

**Circuit Comparisons**

Maltreatment reporting rates are extremely variable, with the highest rates almost three times the size of the lowest rates. Note the relationship to the poverty rates presented earlier, with some important exceptions. Variation in reporting rates affects measured recurrence of maltreatment, later in this report.

![Bar chart of Children in Maltreatment Investigations in Fiscal Year 2015-16 per 100 Children in the General Population]
Florida Abuse Hotline

Intake Screening Rates

The first decision point in a child welfare system is the decision as to whether a reporter’s suspicion of alleged maltreatment meets the criteria to be accepted for investigation. Caution should be used in comparing states, due to varying laws, reporting mechanisms, and information systems, but Florida has traditionally had one of the highest “screen-in” rates.

Florida Compared to Other States

The most recent national data for the percentage of allegations screened-in is for 2014. (Alabama, Illinois and New Jersey) are excluded, as their acceptance rate is 100% indicating that they may have excluded screened-out allegations. Six additional states provided no data: Hawaii, New York, North Carolina, North Dakota, and Pennsylvania. Florida’s rate was among the highest in 2014.

Source: Children’s Bureau, Child Maltreatment 2014, Table 2-1 "Screened-In and Screened-Out Referrals"
Intake Screening Rates

*Florida Trend*

Florida’s “screen-in” rate, one of the highest in the nation in 2014, has continued to increase. The increase in the acceptance of “special condition” (non-maltreatment) referrals in 2014 was the result of a statutory change related to child-on-child sexual abuse referrals.

![Graph showing total special condition and child maltreatment allegations and percentage screened in.]

**Seasonality of Reporting**

*Florida Trend*

Reporting levels follow a fairly predictable seasonal pattern. The higher level in 2014-15 was due in part to longer wait times, resulting in some callers hanging up and calling back.

![Graph showing seasonality in reporting: total contacts offered.]

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Child Protective Investigations

Workload Indicators

*Florida Statewide Trends*

Incoming, Active, and Backlog Investigations

Although incoming investigative workload had a small increase in the last few years, the number of active investigations and active investigations open over 60 days had significant increases.

Maltreatment Investigations and Special Conditions Assessments

The relative growth in special conditions referrals, due to 2014 statutory changes related to child-on-child sexual abuse referrals, is much greater than the growth in alleged maltreatment.
**Average Investigative Response Time in Hours**

Timeliness in responding to alleged maltreatment is important. Florida law requires that some investigations be commenced immediately while others are required to be commenced within 24 hours. These requirements have contributed to Florida having an extremely fast investigative response time when compared to the national average.

**Trend: Florida vs. National Average**

Florida has maintained consistently high performance over the years, including 2010 through 2014, the last year with available national data, as presented in this chart.

![Graph showing trend of average investigative response time in hours for Florida vs. national average.](image)

**Florida Compared to Other States**

In 2014, Florida had the fastest response time of all states that reported.

![Graph showing average investigative response time in hours for Florida compared to other states in 2014.](image)
Percent of Alleged Victims Seen within 24 Hours

In addition to initiating investigations in a timely manner, Florida also requires that investigators make timely face-to-face contact with each alleged victim.

**Florida Statewide Trend**

Although Florida’s performance in timely investigative response has traditionally been high, performance in seeing all alleged victims within 24 hours has been declining since 2014.

**Circuit/Sheriff Comparisons**

Although there is no specific standard for this indicator, eleven sheriff’s offices and DCF circuits saw 90% or more alleged victims within 24 hours in FY 2015-16.
Percent of Investigations Completed within 60 Days

Florida has a statutory requirement to complete all but a few investigations (death, missing children, and those with a specified concurrent criminal investigation) within 60 days.

**Florida Statewide Trend**

Statewide performance in completing investigations within 60 days has been declining since 2013.

**Circuit/Sheriff Comparisons**

Fourteen circuits and sheriff’s offices completed over 90% of investigations within 60 days in FY 2015-16.
**Safety Outcome Indicator: Recurrence of Verified Maltreatment**

The first safety outcome indicator in this report measures recurrence of maltreatment within 12 months of verified maltreatment, regardless of whether services were provided. This national data indicator for Round 3 of the Child and Family Services Reviews (CFSR-3), answers the question, “Of all children who were victims of a substantiated maltreatment report during a 12-month period, what percent were victims of another substantiated maltreatment report within 12 months?”

Denominator: Number of children with at least one substantiated or indicated maltreatment report in a 12-month period.

Numerator: Number of children in the denominator that had another substantiated or indicated maltreatment report within 12-months of their initial report.

**Florida Compared to Other States**

The national standards and calculations of state performance for CFSR-3 are being revised; however, the most recent national data indicates that Florida’s “observed performance” 8.4% was better than the initial standard and national average of 9.1%. “Risk standardized performance,” not presented here, is adjusted by the Children’s Bureau according to the each state’s median age.

Source: Children’s Bureau, Florida data from "CFSR-3 Data Profile" (9/2016), Other states data from CFSR Round 3 Statewide Data Indicators Workbook” (5/2015)
Safety Outcome Indicator: Non-Recurrence of Verified Maltreatment

Florida Statewide Trend

Florida presents performance on this indicator positively as “non-recurrence.” The percent has been trending upwards and began to exceed the initial standard in 2013-2014.

Circuit/Sheriff Comparisons

The x-axis scale on chart below begins at 85% to allow differences between circuits and sheriff’s offices to be observed more clearly.
Investigative Decisions and Flow to Services
Evidence of Maltreatment

Chapter 39, Florida Statutes requires that “Protective investigations shall . . . perform the following child protective investigation activities to determine child safety . . . Determine whether there is any indication that any child in the family or household has been abused, abandoned, or neglected; the nature and extent of present or prior injuries, abuse, or neglect, and any evidence thereof.”

Verification Rates

While evidence of maltreatment is important, the decisions to provide post-investigation services should be based on safety determinations and service needs rather than simply verified evidence of maltreatment, regardless of danger to the child or the family’s need for services. Decision-making based on safety determinations are presented in the indicators in the next section.

Florida Statewide Trend

The percent of children in investigations with at least one finding of "verified" has been declining over the last four fiscal years. As only verified maltreatment is included in the measurement of recurrence, the decline in percent verified may have had a significant impact in lowering the rates of measured recurrence of maltreatment present in the last section.

![Percent of Children in Investigations with at Least One Finding of "Verified"](chart)

*Note: Due to limited data range available in Trend Report when chart produced, FY 2006-07 uses children in investigations September 2006 - August 2007 to provide the best FY estimate using 12 months of data. Source: DCF OCWDR report from FSN data, "Child Protective Investigations Trend Report"*
Circuit/Sheriff Comparisons

The wide range from highest to lowest percentages suggests that there is variation in local practice, rather than simply variation in evidence of maltreatment. Variation in verification rates affects variation in measured recurrence of maltreatment.

Safety Methodology and Flow to Services

Section 39.301, F.S. defines requirements for assessment of safety and development of safety plans.

“Protective investigations shall . . . perform the following child protective investigation activities to determine child safety . . . Complete assessment of immediate child safety for each child based on available records, interviews, and observations . . . Document the present and impending dangers to each child based on the identification of inadequate protective capacity through utilization of a standardized safety assessment instrument. If present or impending danger is identified, the child protective investigator must implement a safety plan or take the child into custody. If present danger is identified and the child is not removed, the child protective investigator shall create and implement a safety plan before leaving the home or the location where there is present danger. If impending danger is identified, the child protective investigator shall create and implement a safety plan as soon as necessary to protect the safety of the child. The child protective investigator may modify the safety plan if he or she identifies additional impending danger.”

“If the child protective investigator implements a safety plan, the plan must be specific, sufficient, feasible, and sustainable in response to the realities of the present or impending danger. A safety plan may be an in-home plan or an out-of-home plan, or a combination of both. A safety plan may include tasks or responsibilities for a parent, caregiver, or legal custodian. However, a safety plan may not rely on promissory commitments by the parent, caregiver, or legal custodian who is currently not able to protect the child or on services that are not available or will not result in the safety of the child. A safety plan may not be implemented if for any reason the parents, guardian, or legal custodian lacks the capacity or ability to comply with the plan. If the department is not able to develop a plan that is specific, sufficient, feasible, and sustainable, the department shall file a shelter petition.”

“The child protective investigator shall collaborate with the community-based care lead agency in the development of the safety plan as necessary to ensure that the safety plan is specific, sufficient, feasible, and sustainable. The child protective investigator shall identify services necessary for the successful implementation of the safety plan. The child protective investigator and the community-based care lead agency shall mobilize service resources to assist all parties in complying with the safety plan.”

“If the department or its agent determines that a child requires immediate or long-term protection through . . . services to stabilize the home environment . . . such services shall first be offered for voluntary acceptance unless . . . there are high-risk factors that may impact the ability of the parents or legal custodians to exercise judgment. Such factors may include the parents’ or legal custodians’ young age or history of substance abuse, mental illness, or domestic violence; or there is a high likelihood of lack of compliance with voluntary services, and such noncompliance would result in the child being unsafe.”

The DCF safety methodology guides selection of appropriate post-investigative services, including removal and placement in out-of-home care, case-managed in-home services, and family support services.
Safe/Unsafe Determinations

The statewide percent of children determined “unsafe” was 8.0% last quarter, but there is wide variation among circuits and sheriff’s offices in making the safe/unsafe determination.

Flow to Services, Regardless of Safe/Unsafe Determinations

There is wide variation among circuits and sheriff’s offices in the proportion of families receiving services after the conclusion of an investigation, with the use of Family Support Services having the highest variation.
Children Determined "Unsafe" Receiving Post-Investigation Services

Our practice model requires that children who are determined to be unsafe require ongoing case management. The majority (54.1%) of children determined “unsafe” were removed from their home and a smaller group received services in home (36.3%), totaling 90.4% of children determined to be “unsafe” receiving ongoing case management. This means there is a small portion of children determined to be “unsafe” were not receiving ongoing case management services (9.6%). However, there is wide variation among circuits and sheriff’s offices..

Children Determined "Safe" Receiving Post-Investigation Services

The chart below presents the reverse, the number of children who have been determined to be safe and what, if any, services they are receiving after the conclusion of the investigation. The expectation would be that children who are found to be safe would not be receiving ongoing case management services. This was true for almost all children (96.9%); however, a small percent of children (3.2%) found to be unsafe are receiving ongoing case management and specifically, a very small percent (1.5%) of children found to be safe were in out of home care.
Children Removed from their Families

In order to compare removals in different areas, removal rates per 1,000 children in the general population and per 100 children in investigations are calculated. The rate per 1,000 children in the general population indicator does not consider how many children were investigated with a chance of removal. The removal rate per 100 children in investigations indicator is limited to children with a chance of being removed, so it is more directly related to investigative decision-making.

Removal Rates per 1,000 Children in General Population

**Long-Term Trends: Florida vs. National Average**

Note that Florida’s entry rate into foster care per 1,000 children in the general population has been higher than the national average. However, beginning in 2008 the Florida and national rates converged, with the exceptions of 2011 and 2012.

![Graph showing Children Entering Foster Care per 1,000 Children in General Population](image)

**Florida Compared to Other States**

Florida’s rate in 2014 was near the national median, but higher than the national average, as several large states with low removal rates (e.g., Texas and New York) affected the national average.
Removal Rates per 1,000 Children in General Population

Florida Statewide Trend

Removal rates per 1,000 children in the general population declined in the last decade from around five per 1,000 in 2004-05 through 2006-07 to around three per thousand in 2008-09; however, the rate has been steadily increasing to 3.9 per thousand in the last three fiscal years.

Circuit/Sheriff Comparisons

Note the wide variation, with five areas having rates of six or more and four areas having rates of less than three.


Removal Rates per 100 Children Investigated

Long-Term Trends: Florida vs. National Average

Children investigated include those who are the subject of at least one alleged maltreatment and/or alternative response report. Florida’s rate is historically much lower than the national rate, but both the Florida rate and the national rate declined through 2008 and plateaued for several years. The recent increase in the national rate preceded Florida’s recent increase.

Florida Compared to Other States

State differences in policies and practices—including variations in the legal definitions of maltreatment—affect rates, so interpretation of trends and state-by-state comparisons should be made with caution. Some differences in rates are related to differences in other rates. For example, states with very low reporting rates (e.g. Pennsylvania) tend to have a relatively high removal rate; states with a very high reporting rate (e.g. Florida) tend to have a relatively low removal rate.
Removal Rates per 100 Children Investigated

Florida Statewide Trend

After a sharp drop from 2006-07 to 2007-08, the removal rate remained flat at around five per 100 for six years, increasing to six per 100 in the last two years, still below the seven per 100 experienced in the period through 2006-07.

Circuit/Sheriff Comparisons

At the statewide level removals have increased, but trends in each area are different. In order to compare communities, the rate of removals per 100 children in investigations is used. Note the wide variation, with the top three areas having twice the rates of the bottom three.
Community-Based Care
Source of Indicators in this Section

The remaining outcome indicators in this report are based primarily on the seven federal outcomes related to three goals of Safety, Permanency, and Well-Being established by the federal Adoption and Safe Families Act of 1997 (ASFA) and the nine outcomes established by Florida’s Community Based Care law, which contains the requirements for Results-Oriented Accountability (ROA).

The United States Children’s Bureau established seven national outcomes:
- Outcome 1: Reduce recurrence of child abuse and/or neglect
- Outcome 2: Reduce the incidence of child abuse and/or neglect in foster care
- Outcome 3: Increase permanency for children in foster care
- Outcome 4: Reduce time in foster care to reunification without increasing reentry
- Outcome 5: Reduce time in foster care to adoption
- Outcome 6: Increase placement stability
- Outcome 7: Reduce placements of young children in group homes or institutions

Florida law (s. 409.986, F.S.) established the following nine outcomes “to protect the best interest of children by achieving the following outcomes in conjunction with the community-based care lead agency, community-based subcontractors, and the community alliance:
- (a) Children are first and foremost protected from abuse and neglect.
- (b) Children are safely maintained in their homes, if possible and appropriate.
- (c) Services are provided to protect children and prevent their removal from their home.
- (d) Children have permanency and stability in their living arrangements.
- (e) Family relationships and connections are preserved for children.
- (f) Families have enhanced capacity to provide for their children’s needs.
- (g) Children receive appropriate services to meet their educational needs.
- (h) Children receive services to meet their physical and mental health needs.
- (i) Children develop the capacity for independent living and competence as an adult.”

The Children’s Bureau established seven data indicators for Round 3 of the Child and Family Services Reviews (CFSR-3) to support the three ASFA goals and outcomes. The national standards and calculations of state performance for CFSR-3 are being revised by the United States Children’s Bureau, but the initial standards and measured performance of Florida, other states and areas within Florida are presented in this report as important indicators of safety and permanency. The Children’s Bureau measures both “observed” (actual) performance and “risk standardized” performance, which is adjusted according to the median age of children served and entry rates into foster care. Only “observed performance” is presented in this report.

CFSR Safety Outcome 1: Children Are, First and Foremost, Protected From Abuse and Neglect
- Maltreatment in Foster Care
- Recurrence of Maltreatment

CFSR Permanency Outcome 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 foster care 12 to 23 months
- Permanency in 12 months for children in foster care 24 months or more
- Re-entry to foster care in 12 months
- Placement stability
Organization of Indicators in this Section

The indicators in this section of the report are grouped into the following sections:

**Caseload Indicators**
- Mix of Services: In-Home and Out-of-Home
- Out-of-Home Care Population in Context: General Population and Children Investigated
- Out-of-Home Care, Removals and Discharges

**Safety Outcome Indicators**
- Maltreatment in Foster Care
- Maltreatment During Services
- Maltreatment after Termination of Services

**Permanency Outcome Indicators**
- Permanency in 12 months for children entering foster care
- Permanency in 12 months for children in foster care 12 to 23 months
- Permanency in 12 months for children in foster care 24 months or more
- Re-entry to foster care in 12 months

**Drivers of Timely Permanency**
- Caseworker Visits
- Children’s Legal Services

**Well-Being of Children in Care**
- Trends in Placement Types
- Maintaining Connections: Placement Stability
- Maintaining Connections: Siblings
- Maintaining Connections: Proximity of Placement
CBC Caseload Indicators
Protection of Children in their Own Homes

Mix of Case-Managed Services: In-Home Services vs. Out-of-Home Care

Two CBC outcomes required by law are “Children are safely maintained in their homes, if possible and appropriate” and “Services are provided to protect children and prevent their removal from their home,” so more unsafe children should be protected in their own homes.

Florida Statewide Trend

In late 2013 the number of children in out-of-home care began to increase while the number of children protected in their own homes remained flat. The gap between the two continues to widen.

Circuit/CBC Comparisons

There is significant variation in the services mix and the relationship between the numbers of children being actively protected and one of our best indicators of need – children in investigations.

![Graph showing children protected in-home vs. out-of-home care]

![Graph showing average number of children actively receiving services per 100 children investigated by type]

Source: Child Welfare Services Trend Reports and Child Protective Investigation Trend Reports
Florida’s Out-of-Home Care Population in Context

Florida’s out-of-home care population has grown since 2013. Changes in Florida parallel changes nationally. These charts show trends and the relative size of Florida’s out-of-home care population to the general population of children and children in investigations, an indicator of need.

Long-Term Trends: Florida vs. National Average

**Children in Out-of-Home Care Population Trend**

The number of children in out-of-home care nationally dropped sharply in 2000-10, but Florida’s decrease was sharper than the decrease for the nation as a whole. Increases since 2014 are not reflected in these charts, as 2014 is the last year for comparable national data.

**Children Removed/Foster Care Entries Trend**

Florida’s reduction in removals in 2007-10 was much more dramatic than the gradual national reduction. Both Florida and the nation have experienced recent increases in removals.
Children in Out-of-Home Care Compared to Child Population

Although states have differing populations (e.g., income and poverty) and maltreatment reporting requirements, comparing the out-of-home care population to the general child population is one way to see the relative size of Florida’s out-of-home care population.

**Long-Term Trends: Florida vs. National Average**

In 2000-06, Florida’s out-of-home care rate per 1,000 children in the general population was above the national average. From 2007 to 2014, Florida has been below the national average.

**Florida Compared to Other States**

Florida’s out-of-home care rate per 1,000 children in 2014 (the most recent year available) was relatively low compared to most states. Several states have rates that are twice as high as Florida’s.
Children in Out-of-Home Care Compared to Child Population

Florida Statewide Trend

Children in care compared to the general population declined in the last decade from around seven per thousand in 2004-05 through 2006-07 to around 4.5 per thousand in 2009-10 through 2013-14. The rate has increased over the last two fiscal years to 5.5 per 1,000, but is still below the seven per 1,000 level that was the norm in 2004-05 through 2006-07.

Circuit/CBC Comparisons

Although the statewide rate for the last fiscal year was 5.5 per 1,000 children in the general population, there is wide variation.
Children in Out-of-Home Care Compared to Children Investigated

Children removed and placed in out-of-home care are not taken from the general population, but from those in investigations, so the number of children investigated is a better indicator of need. However, the relative size of the out-of-home care population is affected by permanency performance as much as removal rate.

Long-Term Trends: Florida vs. National Average

The Florida and national out-of-home care rate per 100 children investigated have been declining, but Florida’s rate is much lower.

Florida Compared to Other States

Florida’s out-of-home care rate per 100 children investigated was one of the lowest in the nation in 2014, due in part to Florida’s high reporting rate. Pennsylvania’s very low reporting (children investigated) rate is related to its extremely high rate on this indicator.
Children in Out-of-Home Care Compared to Children Investigated

**Florida Statewide Trend**

The rate has increased for the last three fiscal years, with the FY 2015-16 rate approaching the FY 2006-07 level. Although this comparison is to children investigated, it is important to remember that the increase in out-of-home care is primarily due to a decrease in discharge rates, rather than an increase in removal rates, as illustrated on the following pages.

**Circuit/CBC Comparisons**

There is wide variation around the state, with the highest rates over twice as high as the lowest rates.
Relationship between Out-of-Home Care, Removals and Discharges

Changes in the children in out-of-home care (OHC) population -- up or down -- are driven by changes in removals/entries and discharges/exports. Note the gaps between the two lines:

- Removals (red) above discharges (green) result in OHC increase.
- Discharges (green) above removals (red) result in OHC decrease.

National Trend

This chart shows that the national reduction in OHC 2007-11 was driven by reduction in removals. The recent increase in OHC was driven by increases in removals with no increase in discharges.

Florida Statewide Trend

Florida was similar to the national trend, but with steep reductions in removals and OHC in 2007-09. Simultaneous increase in removals and decrease in discharges in 2014 drove the OHC increase.
Children Exiting Foster Care per 100 in Care

In order to compare states and communities, discharges in a period are compared to the number of children in care at the end of the period.

*Long-Term Trends: Florida vs. National Average*

Using national data to compare total exits each Federal Fiscal Year (FFY) to children in care at the end of the FFY, Florida’s rate was just below the national average in 2000, but has been consistently above the national average from 2003 through 2014.

*Florida Compared to Other States*

The last available national data was for Federal Fiscal Year 2014, ending September 30, 2014. Comparing all exits in FFY 2014 to children in care September 30, Florida’s exit rate of 68.7 is above the national average of 60.1.
Children Exiting Foster Care per 100 in Care

*Florida Statewide Trend*

Florida’s rate in the last two fiscal years has been at the lowest point in the last decade.

*Circuit/CBC Comparisons*

There is wide variation in discharge rates across the state.
CBC Safety Outcome Indicators
Relative Safety by Status of Services

Child Safety Trends: Comparison of Three Indicators

Children continue to be safer while receiving services than after termination of services, as evidenced by the relative percentages of the three indicators on the following chart. The following trends are also shown:

- The percent of children with no verified maltreatment during case-managed in-home services has remained steady at around 97% and was 96.9% in January-March 2016.
- The percent of children with no verified maltreatment within six months after termination of case-managed services improved for those closures in July--September 2015 to 96.2%.
- The percent of children with no verified maltreatment within six months of termination of Family Support Services continued at a lower level than the other indicators, with those closures in July-September 2015 at 93.8%.

NOTE: Measuring safety performance requires follow-up periods for maltreatment after termination of services plus two months for completion of any subsequent investigations, so this chart and others in this section include the most recent available quarters.
Individual Safety Indicators

Maltreatment in Foster Care

Maltreatment in foster care is a rare event compared to the three safety indicators in the last chart, so it is measured as a rate per 100,000 days in care in the federal Child and Family Services Review, Round 3 (CFSR-3). It answers the question, “Of all children in foster care during a 12-month period, what is the rate of victimization, per day of care?”

Denominator: Of children in care during a 12-month period, total number of days these children were in care as of the end of the 12-month period.

Numerator: Of children in the denominator, total number of substantiated or indicated reports of maltreatment (by any perpetrator) during a foster care episode within the 12-month period.

Florida Compared to Other States

The national standards and calculations of state performance for CFSR-3 are being revised; however, Florida’s “observed” (not “risk standardized”) 9.02 rate for the period under review does not meet the initial standard.
Maltreatment in Foster Care

The national standards and calculations of state performance for CFSR-3 are being revised. Florida’s calculated rates are somewhat different from the rate appearing in the federal data profile used for CFSR-3, which uses AFCARS and NCANDS files submitted by states. Our rates are higher than on the last page, but useful for making internal comparisons and measuring progress.

Florida Statewide Trend

Florida has shown overall improvement in the last six years. Maltreatment in out-of-home care is a rare event compared to maltreatment during in-home services.

Circuit/CBC Comparisons

There is wide variation around the state on this indicator. Areas with fewer than 30 reports with verified are identified (see “n= xx” for each area). Some differences on this indicator and other safety indicators are likely due to differences in reporting maltreatment to the Hotline, differences in verification rates, and use of kinship care, which typically has higher rates than licensed care.
Maltreatment during Case-Managed Services

Children receiving case-managed in-home services include:

- Children found to be unsafe and needing ongoing assessment, planning, services, and frequent case manager visits to ensure safety while preventing removal and placement.
- Children receiving post-placement supervision.

As this service is for “unsafe” children with potential for removal, it is not surprising that some may have verified maltreatment while receiving these services. As with other recurrence indicators, measurement is influenced by verification rates.

Florida Statewide Trend

There is no standard for this indicator, but performance has been flat the last few years.

[Graph showing percentage of children receiving in-home services who were not maltreated during services statewide over fiscal years 2010-11 to 2015-16.]

Circuit/CBC Comparisons

The variation by area on this indicator is not as great as on many other indicators.

[Graph comparing percent of children receiving in-home services who were not maltreated during services by Circuit/CBC for children served July 2015 - May 2016.]

Source: FSFN CCWDRU report #1109, "Children Who Are Not Neglected or Abused During In-Home Services"
Maltreatment after Termination of Case-Managed Services

Just as it is important to ensure safety of children receiving services, it is also important that supervision not be terminated prematurely, if the risk of subsequent maltreatment remains high.

**Florida Statewide Trend**

Florida has shown steady progress on this indicator.

![Graph showing percent children terminated from case managed services who were not maltreated within six months statewide.]

**Circuit/CBC Comparisons**

The high rate of non-recurrence on this indicator indicates that children are generally safe after termination of services. Data for the entire fiscal year is used for this indicator so as not to have extremely high or low rates for some of the smaller service areas.
Permanency Indicators
Timely Achievement of Permanency

Permanency within 12 Months from Three Starting Points

The federal Child and Family Services Review, Round 3 (CFSR-3) includes three indicators of timely permanency, plus a companion indicator of re-entry into care after discharge. Each of the three timely permanency indicators measures achievement of permanency within 12 months for a different cohort of children, based on a certain period or date.

- **Entry Cohort.** This indicator measures the proportion of children in a cohort of children who were removed and entered care in the same period and achieved permanency within 12 months of removal.
- **In Care 12-23 Months Cohort.** This indicator measures the proportion of children in a cohort of children who were in care 12-23 months on the same date and achieved permanency within 12 months of removal.
- **In Care 24+ Months Cohort.** This indicator measures the proportion of children in a cohort of children who were in care 24 or more months on the same date and achieved permanency within 12 months of removal.

The national standards and calculations of state performance for CFSR-3 are being revised. The following chart shows that Florida’s performance has been above the initial national standards on all three indicators for the last six years. Performance on the entry cohort indicator has declined in the last two years, but is still above the national standard. Performance on the in-care 12-23 months indicator is consistently above the national standard. Performance on the in-care 24+ months cohort has improved and is also significantly above the national standard.

![Chart showing Florida’s performance on permanency indicators]
Permanency in 12 Months for Children Entering Care

This is the first of the CFSR-3 permanency indicators. It answers the question, “Of all children who enter care in a 12-month period, what percent discharged to permanency within 12 months of entering care?”

Denominator: Number of children who enter care in a 12-month period.
Numerator: Number of children in the denominator who discharged to permanency within 12 months of entering care.

Florida Compared to Other States

Florida’s “observed” (not “risk standardized”) performance of 47.1% for children removed in April 2013 – March 2014 was significantly above the initial national standard and was among the top states in the nation in the period used for CFSR-3. The apparently “old” period used is due to the federal methodology pairing this indicator with the re-entry into care indicator.


Source: Children's Bureau, Florida data from "CFSR-3 Data Profile" (9/2016). Other states data from CFSR Round 3 Statewide Data Indicators Workbook" (5/2015)
Permanency in 12 Months for Children Entering Care

Florida Statewide Trend

Florida’s performance has been declining since the period used for our CFSR-3, but remains just above the initial national standard.

Circuit/CBC Comparisons

Although Florida’s statewide performance is above the CFSR-3 initial national standard, half the areas are below the standard.
Permanency in 12 Months for Children in Care 12-23 Months

This permanency indicator answers the question, “Of all children in care on the first day of a 12-month period who had been in care (in that episode) between 12 and 23 months, what percent discharged to permanency within 12 months of the first day?”

Denominator: Number of children in care on the first day of a 12-month period, who had been in care (in that episode) between 12 and 23 months.

Numerator: Number of children in the denominator who discharged to permanency within 12 months of the 1st day.

Florida Compared to Other States

National standards and calculations of state performance for CFSR-3 are being revised; however, Florida’s “observed” (not “risk standardized”) performance in 2015-16 was significantly above the CFSR-3 initial standard and higher than most states in the nation in the comparison period.

![Graph showing observed performance per state](chart.png)
Permanency in 12 Months for Children in Care 12-23 Months

*Florida Statewide Trend*

Florida’s performance has declined since the 2013 cohort used for our CFSR-3, but continues to exceed the initial national standard.

*Circuit/CBC Comparisons*

Florida’s high performance on this indicator is seen throughout the state.
**Permanency in 12 Months for Children in Care 24+ Months**

This permanency indicator answers the question, “Of all children in care on the first day of a 12-month period, who had been in care (in that episode) for 24 months or more, what percent discharged to permanency within 12 months of the first day?”

Denominator: Number of children in care on the first day of a 12-month period, who had been in care (in that episode) for 24 months or more.

Numerator: Number of children in the denominator who discharged to permanency within 12 months of the 1st day.

**Florida Compared to Other States**

The national standards and calculations of state performance for CFSR-3 are being revised; however, Florida’s “observed” (not “risk standardized”) performance in 2015-16 was significantly above the CFSR-3 initial standard and higher than most states in the comparison period.


*Source: Children's Bureau, Florida data from "CFSR-3 Data Profile" (9/2016), Other states data from CFSR Round 3 Statewide Data Indicators Workbook" (5/2015)*
Permanency in 12 Months for Children in Care 24+ Months

**Florida Statewide Trend**

Florida’s performance has improved since the 2013 cohort used for our CFSR-3, and is significantly above the initial national standard.

**Circuit/CBC Comparisons**

Florida’s high performance on this indicator is seen throughout the state.
Re-entry to Foster Care

Areas with high performance on the entry cohort indicator tend to have high re-entry rates.

Re-entry to Foster Care in 12 Months

This permanency indicator is paired with the entry cohort and answers the question, “Of all children who enter care in a 12-month period, who discharged within 12 months to reunification, live with relative, or guardianship, what percent re-entered care within 12 months of their discharge?

Denominator: Number of children who enter care in a 12-month period, who discharged within 12 months to reunification, live with relative, or guardianship.

Numerator: Number of children in denominator who re-enter care within 12 mos. of discharge.

Florida Compared to Other States

The national standards and calculations of state performance for CFSR-3 are being revised. Florida’s “observed” (not “risk standardized”) performance in 2013-14 was better than the CFSR-3 initial standard and better than most states in the comparison period. However, our own measured performance (next page) indicates that we are not meeting the standard.
**Re-entry to Foster Care in 12 Months**

*Florida Statewide Trend*

Although the national CFSR-3 indicator is the percent that re-entered care (initial standard 8.3%), Florida expresses the indicator positively as the percent that did not re-enter care (initial standard 91.7%). Florida’s performance in 2012-13 and 2013-14 has continued to be below the initial standard after April 2011 – March 2012, the period under review for CFSR-3.

**Circuit/CBC Comparisons**

Unlike the timely permanency indicators, Florida’s low performance on this indicator is observed in most of the state.
Drivers of Timely Permanency
Caseworker Visits with Children in Care

According to the US Children’s Bureau,
Achieving permanency in a timely manner for children in foster care can be linked in part to the frequency and quality of caseworker visits with children. During the first and second rounds of the Child and Family Services Reviews (CFSRs), an association was found between caseworker visits measures and positive outcomes for children in foster care. For example, frequent contact between the caseworker and the child was associated with better ratings on CFSR Permanency Outcome 1: Children have permanency and stability in their living situations.

Title IV-B of the Social Security Act requires states to collect data on monthly caseworker visits for children in foster care. The caseworker visits data include the percentage of children visited each full month they were in care, as well as the proportion of those visits that occurred in the homes where the children were then living.

**Percentage of Children Receiving Monthly Caseworker Visits**
This federal indicator answers the question, “Of the children in care, what percent received monthly caseworker visits?”

- **Denominator:** The number of complete calendar months all children in the reporting population spent in care. This denominator, expressed in “visit months,” is aggregated over all children and refers to the number of months in which visits should have occurred.
- **Numerator:** The number of monthly caseworker visits made to the children in the reporting population, where if a child is visited more than once in a month, only one visit is counted.

**Florida Compared to Other States**
Florida is consistently one of the top states for seeing children on a monthly basis.
Percentage of Monthly Visits that Occurred in the Home of the Child

This related federal indicator answers the question, “Of the children visited, what percent of the visits were in the home of the child?”

Denominator: The number of monthly caseworker visits made to children in the reporting population – the numerator of the last indicator.

Numerator: The number the number of monthly visits made to children in the reporting population that occurred in the child’s home.

**Florida Compared to Other States**

Florida is also consistently one of the top states in the percentage of monthly visits that were made in the child’s home.

**Circuit/CBC Comparisons**

Florida’s exemplary performance is consistent throughout the state. Florida’s similar indicator measures percent of visits completed within 30 days of the last visit and is consistently near 100%.

Source: US Children’s Bureau, Report Builder
Children’s Legal Services Indicators

Judicial handling time is key to timely permanency and there is wide variation among the circuits.

Reunification Goal after 15 Months & No Termination of Parental Rights Activity

**Circuit Comparisons**

The statewide average was 8.0% on June 30 with wide variation among the circuits.

Timeliness of Termination of Parental Rights, from Petition to Order

**Circuit Comparisons**

The statewide median was 153 days in FY 2015-16, with wide variation among the circuits.
Time from Removal Date to Disposition Order

_Circuit Comparisons_

The statewide median was 60 days in FY 2015-16, with wide variation, compared to a statewide target of 90 days.
Federal law requires that a case plan be designed to achieve a safe placement in the least restrictive (most family-like) setting available and in close proximity to the home of the parent(s) when the goal is reunification. When children must be removed, priority is given to placement with kin, both relatives and unrelated persons, with significant relationship to the child before removal.

**Florida Statewide Trend**

The recent growth in OHC has been met primarily by increased use of kinship placements.

**Circuit/CBC Comparisons**

There is a wide range in use of kinship care to reduce trauma, maintain connections, and reduce costs of care. Stratification by use of group care is provided in subsequent charts.
Stable Placements that Maintain Connections

Placement Stability

This CFSR-3 indicator answers the question, “Of all children who enter care in a 12-month period, what is the rate of placement moves, per 1,000 days of foster care?

Denominator: Of children who enter care in a 12-month period, total number of days these children were in care as of the end of the 12-month period.

Numerator: Of children in the denominator, total number of placement moves during the 12-month period.

Florida Compared to Other States

The national standards and calculations of state performance for CFSR-3 are being revised; however, Florida’s “observed” (not “risk standardized”) performance of 4.69 in 2015-16 did not meet the CFSR-3 initial standard of 4.12 moves per 1,000 days in care.
Placement Stability

**Florida Statewide Trend**

Statewide performance has been slightly better than the initial national standard of 4.12 moves per 1,000 days in foster care over the last six years. Florida’s application of the federal algorithm appears to be slightly different from federal calculations, which are being revised.

**Circuit/CBC Comparisons**

Most areas have high measured performance on this indicator, but a few areas averaged many placement moves last fiscal year, and this affected statewide performance.
Percent of Siblings Placed Together

Our understanding of sibling relationships and the role they play in the lives of children in foster care has deepened over the past decade. Research has demonstrated that sibling relationships are important to children’s development and emotional well-being. Sibling relationships are now understood as playing a vital role in helping children achieve developmental milestones and in providing emotional support, companionship and comfort in times of change. These relationships are crucial for children and youth in foster care as siblings often are the “family” that they can claim and that can provide them with a sense of identity and belonging.

**Florida Statewide Trend**

Statewide performance for this measure peaked on June 30, 2013 at 66.6% but since that point has declined and is consistently below Florida’s own standard of 65%.

**Circuit/CBC Comparisons**

Most areas are near the 65% standard.
Proximity of Placement to Community of Removal

Normalcy for foster children, maintenance of family connections, parent-child visitation, and school stability require that children be placed in proximity of the neighborhood or community of removal. Keeping the child in the same community from which the child was removed will also promote family reunification.

Title IV-E of the Social Security Act (42 U.S.C. 674) requires:
“A plan for ensuring the educational stability of the child while in foster care, including . . . assurances that each placement of the child in foster care takes into account the appropriateness of the current educational setting and the proximity to the school in which the child is enrolled at the time of placement; and an assurance [of coordination with] local educational agencies . . . to ensure that the child remains in the school in which the child is enrolled at the time of each placement,” and that “each child has a case plan designed to achieve placement in a safe setting that is the least restrictive (most family like) and most appropriate setting available and in close proximity to the parents' home, consistent with the best interest and special needs of the child.”

Some states are using Geographic Information Systems (GIS) to organize and analyze data in terms of geographic location. Most often a visual representation of the data is developed by plotting the data points on a map. For many foster care agencies nationwide, GIS is a powerful tool: it can help agency staff track the location of available foster homes, map the locations of schools and their catchment areas, and allow foster family recruiters to focus their efforts on the areas with the greatest need. Other states focus on recruiting and maintaining foster families within the school districts, with a focus on recruiting in the towns with the highest removal rates, reaching out to principals and administrators of schools to help raise awareness about the need for foster families.

Children in Licensed Out-of-Home Care Placed Outside Removal Circuit and County

Florida Statewide Trend

In the last few years, there has been a slight reduction in the percent of children placed outside their removal circuit, while the percent placed outside their removal county has remained stable.
Proximity of Placement to Community of Removal

*Circuit/CBC Comparisons*

**Children in Licensed Out-of-Home Care Placed Outside Removal County**

There is wide variation across circuits, with urban areas generally placing more children within their removal county, and more rural areas placing more children outside their removal county.

**Children in Licensed Out-of-Home Care Placed Outside Removal Circuit**

The percent of children placed outside of their removal circuit is lower than for the percent of children placed out-of-county, as many children that are not placed in their home county are placed in a neighboring county within their home circuit.
Placement in Family Setting

Federal law mandates that a case plan include a discussion of how the plan is designed to achieve a safe placement for the child in the least restrictive (most family-like) setting available.

Although there is an appropriate role for group care in the continuum of foster care settings, there is consensus across multiple stakeholders that most children and youth, but especially young children, are best served in a family setting. Stays in group care should be based on the specialized behavioral and mental health needs or clinical disabilities of children. It should be used only for as long as is necessary to stabilize the child or youth so they can return to a family-like setting. One of the original seven ASFA outcomes was “Reduce placements of young children in group homes or institutions.”

A December 2014 report by the Office of Program Policy Analysis and Government Accountability (OPPAGA) described the process for determining placement in group care as follows. “Lead agencies must place all children in out-of-home care in the most appropriate available setting after conducting an assessment using child-specific factors. Lead agencies must consider placement in residential group care if specific criteria are met—the child is 11 or older, has been in licensed family foster care for six months or longer and removed from family foster care more than once, and has serious behavioral problems or has been determined to be without the options of either family reunification or adoption. In addition, the assessment must consider information from several sources, including psychological evaluations, professionals with knowledge of the child, and the desires of the child concerning placement.”

Percent of Children in Licensed Care Placed in Group Care

Circuit/CBC Comparisons

The proportion of children of all ages in licensed care who are placed in group care ranges from 10% to more than a third.
Children in Group Care by Age Group

**Florida Statewide Trend**

The statewide number of children aged 6-12 in group care has increased sharply since 2014.

**Circuit/CBC Comparisons**

**Children Aged 0-5 Years in Licensed Care Placed in Group Care**

One of the original seven ASFA outcomes was Outcome 7: “Reduce placements of young children in group homes or institutions.” While the percentage of very young children placed in group care is generally quite low, three areas had more than 10% of children aged 0-5 placed in group care on June 30, 2016.
Children Aged 6-12 Years in Licensed Care Placed in Group Care

The percentage of children in group care increases with age, with one area having almost twice the percentage of children aged 6-12 in group care compared to the statewide level.

Children Aged 13-17 Years in Licensed Care Placed in Group Care

Most CBC lead agencies have 50% or more children in this age range placed in a group home environment, with three CBCs having between 70% and 80% and one having over 80%.
Educational Achievement of Foster Children

One of Florida’s nine statutory CBC outcomes is “Children receive appropriate services to meet their educational needs.” Children in licensed and kinship foster care are atypical of children in the general population and have many challenges before they enter care, as reflected in the indicators in this section. Children are removed and placed in foster care because of maltreatment by their parents or guardians. Most of these children were born into poverty. There is a growing body of research on the effects of early maltreatment on brain development. All children in foster care have experienced loss and trauma, but are no different from other children in learning, growing, playing with friends their age, and needing the love and stability a permanent home provides.

Research has found that maltreatment results in lower academic achievement:

- Maltreated children have lower verbal and math scores.
- Neglected children have poorer academic performance than physically maltreated children.
- Maltreated children have higher rates of absenteeism from school than non-maltreated peers.
- Maltreated children are at substantially higher risk of repeating a grade.
- Maltreated children are at increased risk of dropping out before high school graduation.
- Maltreated children are more likely to be referred for special education services.
- Maltreated children are more likely to exhibit poor social skills and classroom behavior.


A study by the Vera Institute of Justice, “What Keeps Children in Foster Care from Succeeding in School,” found that foster children face roadblocks other economically disadvantaged children do not face, including those that effect academic performance:

- Foster children avoid social interactions with peers to hide their foster care status and blame themselves, not foster care or schools, for their poor achievement.
- Foster parents and caseworkers were not aware of academic progress.
- School staff was not aware of foster care events that led to missed tests and assignments.

The median amount of time that a child spends in foster care is just over a year, with children entering care throughout the year and with episodes typically overlapping academic years. Child welfare agencies may not be able to reverse the many effects of maltreatment before removal and placement, including academic performance, but they can avoid further disruptions in school through placement near the child’s school and can work with the school system to ensure stability.

Children in foster care frequently change schools – when they enter foster care, when they move from one home to another, and when they return home. Research shows that children who change schools frequently make less academic progress than their peers and fall farther behind with each school change. School instability makes it difficult for children to develop supportive relationships with teachers or peers. Children in foster care frequently face delays in school enrollment or are placed in the wrong classes or schools, often due to missing, incomplete, or delayed school records.

The new federal Every Student Succeeds Act provides for collaboration between education and child welfare agencies to promote school stability and success. Children in foster care must remain in their “school of origin” unless a determination is made that it not in their best interest, including consideration of the appropriateness of the current educational setting and the proximity to the school in which the child is enrolled at the time of placement. If a change is warranted, foster children can enroll immediately in a new school, even without providing records. If transportation to the school of origin is needed, it must be provided.
Educational Stability

*Circuit Comparisons*

Although the child welfare system does not have direct control over school success, it does have control over school changes related to removal and placement. Compare to earlier charts on placement outside the removal county and circuit.

Percent of Children with Disabilities

*Circuit Comparisons*

The percent of non-DCF children with identified disabilities is consistent across the state. The percentages for DCF foster children are much higher and highly variable across school districts.
Appropriate Grade Level for Age

*Circuit Comparisons*

Seventy-eight percent of non-DCF children aged 7-18 were at the appropriate grade level, compared to only 53 percent for DCF foster children.

![Graph showing Maltrated Children in Foster Care and Other Students Aged 7-18 Percent in Appropriate Grade Level for Age School Year 2014-15](source)

Percent Dropping Out in School Year

*Circuit Comparisons*

The dropout rate in grades nine through 12 for non-DCF children was only two percent, compared to six percent for DCF foster children, with two areas having extremely high dropout rates.

![Graph showing Maltreated Children in Foster Care and Other Students in Grades 9-12 Percent Who Dropped Out of School During School Year 2014-15](source)
Physical and Mental Health Needs

One of Florida’s nine statutory CBC outcomes is “Children receive services to meet their physical and mental health needs.” Considerable progress has been made in the last few years in providing regular medical and dental services.

Medical Services

*Florida Statewide Trend*

Statewide performance improved from less than 80% in 2011 to more around 97% in the last few years, with a slight dip in the last year.

*Source: FSIN OCYDRU #1056 - “Children in Foster Care Who Received Medical Services within the Last Twelve Months”*

*Circuit/CBC Comparisons*

Most areas are above the 90% level on this indicator.

*Source: OCYDRU Report #1056 - “Children in Foster Care Who Received Medical Services within the Last Twelve Months”*
Dental Services

**Florida Statewide Trend**

Statewide performance improved from around 65% in 2011 to more than 90% in the last few years.

**Circuit/CBC Comparisons**

Most areas are above the 90% level on this indicator.
**Preparation for Independent Living as Adults**

Two of Florida’s nine statutory CBC outcomes are “Children receive appropriate services to meet their educational needs” and “Children develop the capacity for independent living and competence as an adult.”

**Young Adults Aging Out Enrolled in Education Programs**

For children who don’t achieve permanency prior to reaching adulthood, it is crucial that they are prepared for life after foster care by the time they “age out” of care. This is one indicator of that preparation for adulthood, but does not control for any of the many variables that influence this preparation, including time in care and the child’s education level when entering care. Note that few children aged out in the last quarter, which explains some of the very low percentages (see “n= xx” for each area).