



# CFSR Round 4: Measurement and Sampling

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## PART II: PROGRAM IMPROVEMENT PLAN MEASUREMENT

MARCH 9, 2022



# Children's Bureau Presenters

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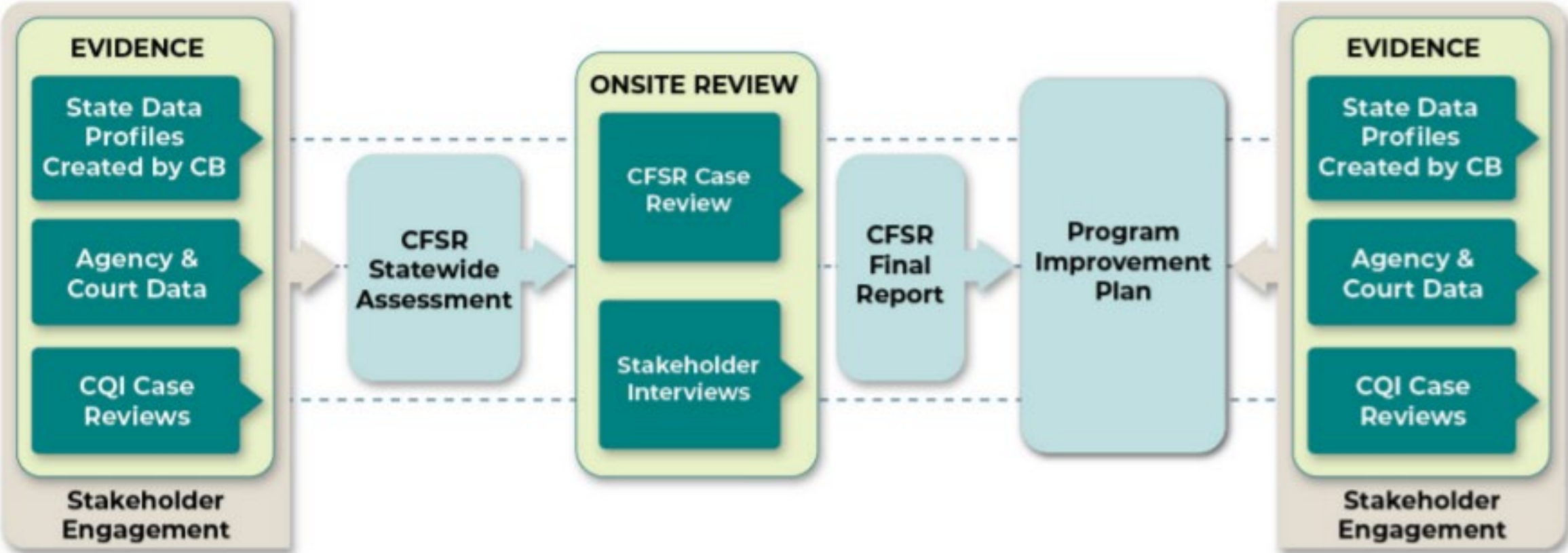


# Agenda

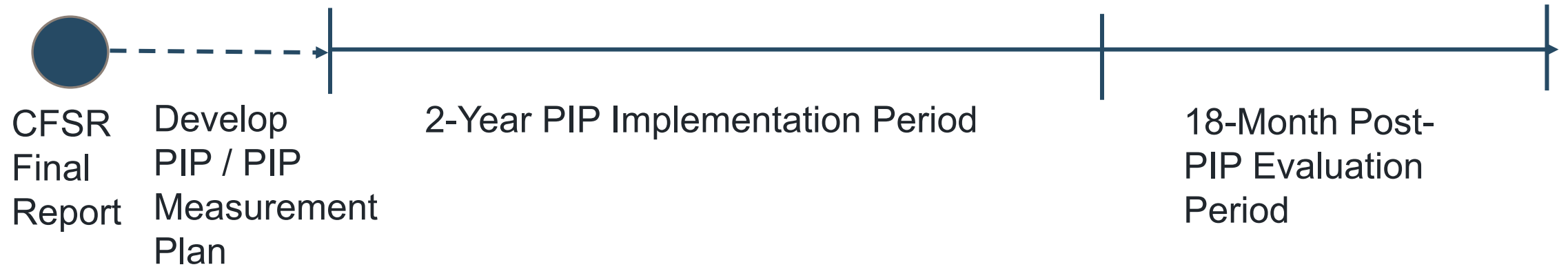
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- Program Improvement Plan (PIP) Measurement Requirements
- Statewide Data Indicators: Baselines, Goals, and Achieving Required Amount of Improvement
- Case Review Items: Case Populations, Sites, Sampling, Baselines, Goals, and Achieving Required Amount of Improvement
- Item 1 Aggregate Measure: Baselines, Goals
- Timeframes for PIP Measurement
- Resources
- Questions

# CFSR Process



# Timeframes for PIP Measurement



# PIP Measurement Requirements

## Safety Outcome 1

SWDI: Maltreatment in foster care

SWDI: Recurrence of maltreatment

Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment

## Safety Outcome 2

Item 2: Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care

Item 3: Risk and Safety Assessment and Management



# PIP Measurement Requirements

## Permanency Outcome 1

SWDI: Permanency in 12 months for children entering foster care

SWDI: Permanency in 12 months for children in foster care 12 to 23 months

SWDI: Permanency in 12 months for children in foster care 24 months or more

SWDI: Reentry to foster care in 12 months

SWDI: Placement stability

# PIP Measurement Requirements

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## Well-Being Outcome 1

Item 12: Needs and Services of Child, Parents, and Foster Parents

Item 13: Child and Family Involvement in Case Planning

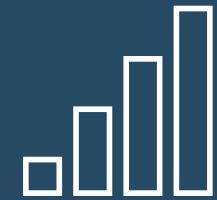
Item 14: Caseworker Visits With Child

Item 15: Caseworker Visits With Parents



# PIP Measurement Statewide Data Indicators

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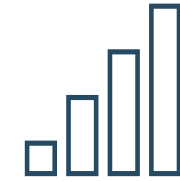


# Statewide Data Indicators (SWDIs)

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- Observed Performance, National Performance, and Risk-Standardized Performance (RSP) are all reported in Data Profiles
- States are provided Data Profiles twice yearly (February and August) that show state performance on the indicators
- August 2022 Data Profiles initiate the start of CFSR Round 4

# National Performance (NP) and Risk Standardized Performance (RSP)



- **Observed Performance** is how a state performs on an indicator
- **National Performance** is how the nation performed on an indicator
  - Calculated and fixed throughout Round 4
- **Risk-Standardized Performance (RSP)** is a measure of a state's performance after risk adjustment
  - Identifies whether performance is statistically worse, no different, or better than NP

# SWDI Requirements for PIP/ PIP Measurement

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- Most recent reporting periods in the profiles will be used to determine state performance
- States will be required to address each indicator where the RSP is worse than national performance
- All data profiles transmitted between the statewide assessment and PIP approval will be considered when determining PIP requirements

# Example: Permanency in 12 months (entries)

State	Data Profile Transmitted With Statewide Assessment & Used to Determine Conformity	Updated Data Profile Available When Final Report is Completed	Subsequent Data Profiles Prior to PIP Approval	Include in PIP?
State A	Worse	No Different	Better	No
State B	Worse	No Different	No Different	No
State C	Better	No Different	Worse	No
State D	No Different	No Different	No Different	No
State E	Worse	Worse	Worse	Yes
State F	Worse	Worse	Better	No



# SWDI Baselines

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- Baselines for each indicator will be established using the state's Observed Performance
- State's baselines will be Observed Performance for the most recent 12-month reporting period at the time of the CF SR Final Report

# SWDI Goals

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State improvement goals will be established for each indicator

- State improvement goals are calculated using the state's past 3 years of observed performance
- There are “caps” and “floors” on the improvement goal to constrain the required amount of improvement
- These national caps and floors will be set and fixed for each indicator for Round 4 based on all states' performance data
- Calculation steps are detailed in Technical Bulletin #13



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# Required Amount of Improvement

## Pathway 1

Observed Performance meets the improvement goal

## Pathway 2

RSP is better or no different than National Performance

- Two simultaneous pathways to achieve required amount of improvement; determined by whichever pathway occurs first
- Once achieved, further reporting for PIP measurement purposes ends
- States are required to complete related PIP strategies/interventions



# Data Quality (DQ)

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- When state performance on an indicator(s) cannot be calculated due to DQ issue(s), the state will be required to:
  - Include the indicator in the PIP Measurement Plan
  - Include strategies to correct the quality of the data in the PIP
- DQ issues need to be resolved to determine substantial conformity and to calculate baselines and goals
- More about DQ issues will be included in TB 13 update

# PIP Measurement Case Review Sampling Plans

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# Case Review Populations



- Case populations for PIP measurement same as CFSR
  - Foster care population: AFCARS-reportable case population
  - In-home services population:
    - Cases open 45+ days for services and/or case management
    - Includes trial home visit (THV) cases when only placement during sampling period is THV and lasts 45+ days from start of sampling period (no other children in family are in foster care)
    - Non-foster care cases specified in the state's Child and Family Services Plan (CFSP) (funded by title IV-B)
- \* IHS case population will not include families that only received a CPS investigation/assessment response

# PIP Measurement Sites



- PIP measurement sites will be aligned with PIP implementation sites (all or subset)—sites targeted to receive PIP interventions/strategies
- Considerations for selecting PIP implementation and measurement sites:
  - Metro site and/or site with largest case population
  - Sufficient case population
  - Demonstrated improvement needs
  - Areas of strength—continued implementation, new learning
  - Selected PIP strategies, alignment of target population
  - Readiness to implement
  - Status of CQI Change and Implementation processes



# Baselines and PIP Measurement Periods

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- Baselines will be established post-CFSR onsite review after PIP implementation sites are determined and all or a subset of those sites are identified for PIP measurement (Measurement Period 1)
- States are encouraged to complete baselines within 6 months of start of PIP Implementation Period, and must be completed within 12 months
- Measurement periods will consist of a unique population of cases; no advancing/rolling of measurement periods
- States are encouraged to complete reviews/measurement periods as frequently as possible



# PIP Measurement Sample Sizes

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- Minimum 33 applicable cases for each item regardless of sample size
- Number of cases reviewed based on state proposals and minimum sample size requirements:
  - Minimum 65 cases (40 FC and 25 IHS) for states with 7- to 12-month measurement periods
  - Minimum 33 cases (20 FC and 13 IHS) for states with 6-month or shorter measurement periods
- Considerations: capacity, number of measurement sites, CQI change and implementation processes, maximizing measurement opportunities

# Sampling and Period Under Review

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- **Sampling frame:** Universe of cases from which the random sample is drawn
- **Sampling period:** Time period from which cases in the sampling frame are drawn
  - Foster care: 6-month period
  - In-home services: Same 6-month period plus an optional additional 45 days to account for cases opened on the last day of the sampling period
- **Period under review (PUR):** Begins at the start of the sampling period and ends when the case review is completed or when the case is closed, whichever occurs first

# Sampling Periods, Periods Under Review, and Sampling Approach



- Sampling periods will be 6 months (with option to extend 45 days for in-home services)
- To maintain a more consistent range of PURs, states are encouraged to use a rolling monthly or quarterly sampling approach (i.e., the sampling period advances 1 month/quarter per month/quarter of the review period)
- States are encouraged to use a PUR between 7 and 9 months, no longer than 15 months. Results using shorter PURs will reflect more recent case practice and more likely detect changes from PIP implementation activities



# Required Amount of Improvement for PIP Case Review Item Measures



# Required Amount of Improvement

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- Required amount of improvement based on the state's baseline performance:
  - The higher a state performs at baseline, the smaller the required amount of improvement
  - The lower a state performs at baseline, the larger the required amount of improvement
- Goals will be set based on a state's own performance and will differentiate between states with high and low baseline performances

# Required Amount of Improvement

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Required amount of improvement will be adjusted based on how the state performs at baseline to calculate two values:

- *Sustained Improvement Goal*: Aligned with research principles relying on multiple data points to detect change using small samples
  - *High-Performance Value*: Set above the sustained improvement goal to increase likelihood that a single performance value represents change
- \* Calculation steps are detailed in CFSR Technical Bulletin #13

# Achieving Required Amount of Improvement

## Pathway 1

Meet or exceed the **sustained improvement goal** using any three PIP measurement periods

## Pathway 2

Meet or exceed the **high-performance value** in any one PIP measurement period

- Two simultaneous pathways to achieve required amount of improvement; determined by whichever pathway occurs first
- Once achieved, further reporting for PIP measurement purposes ends
- States required to complete related PIP strategies/interventions

# Example: Required Amount of Improvement



# Pathway 1: Sustained improvement goal

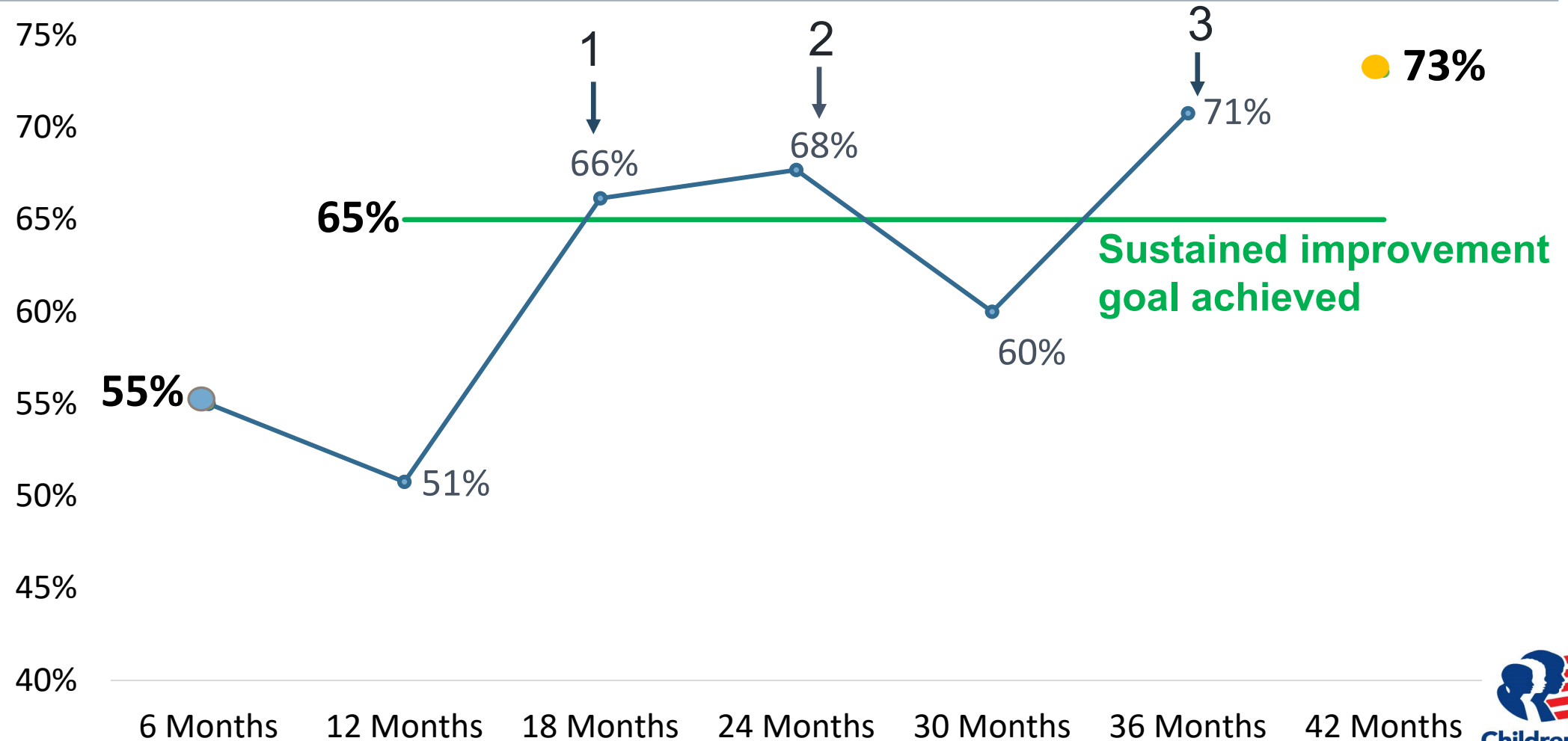
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Meet or exceed the **sustained improvement goal** using any three measurement periods

- Qualitative measurement using small samples often relies on multiple data points to demonstrate change
- Repeated measurements increases confidence that meaningful change is detected

# Example 1: Sustained Improvement Goal Achieved

Meet or exceed the sustained improvement goal in any three measurement periods



# Pathway 2: High-performance value

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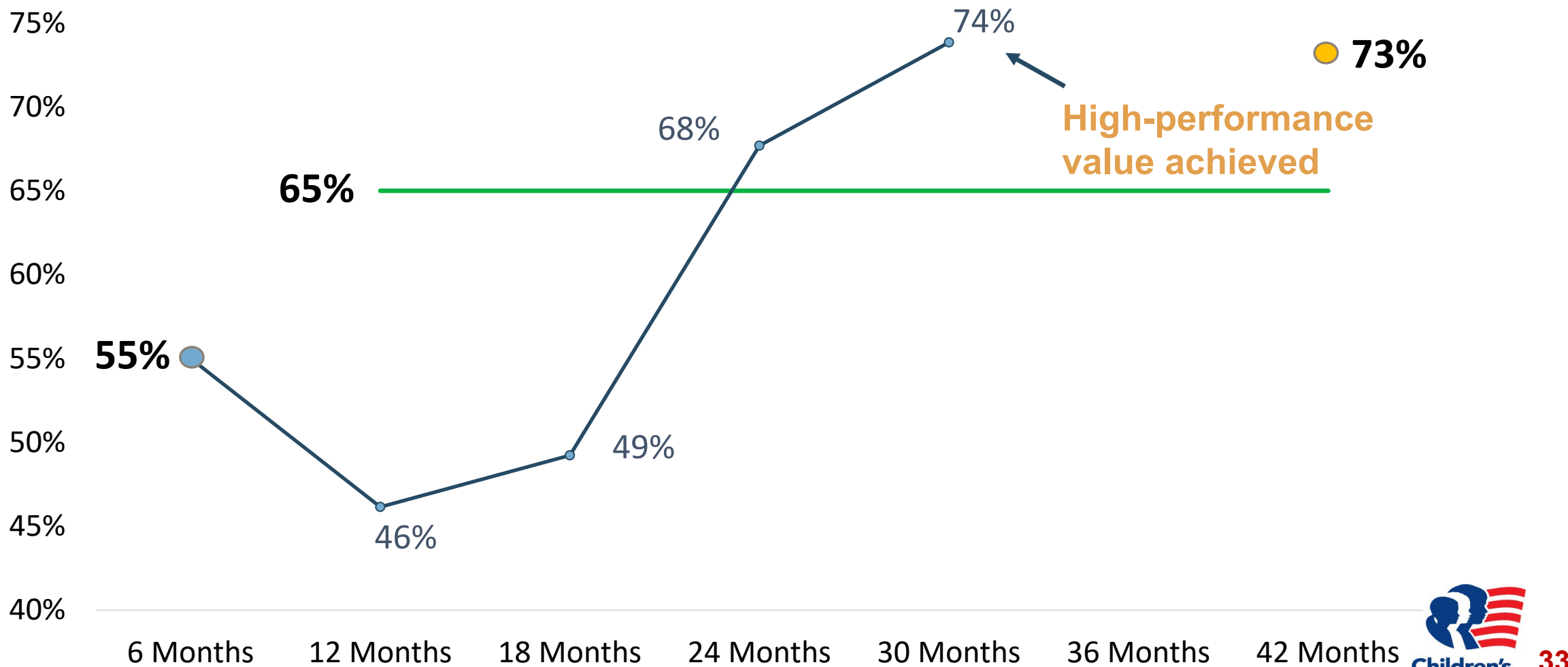
Meet or exceed the **high-performance value** in any one measurement period

- Ability to achieve required amount of improvement using a single measurement period by reaching a high-performance value
- High-performance value is set well above the sustained improvement goal to strengthen confidence that change in performance is detected using single measurement point

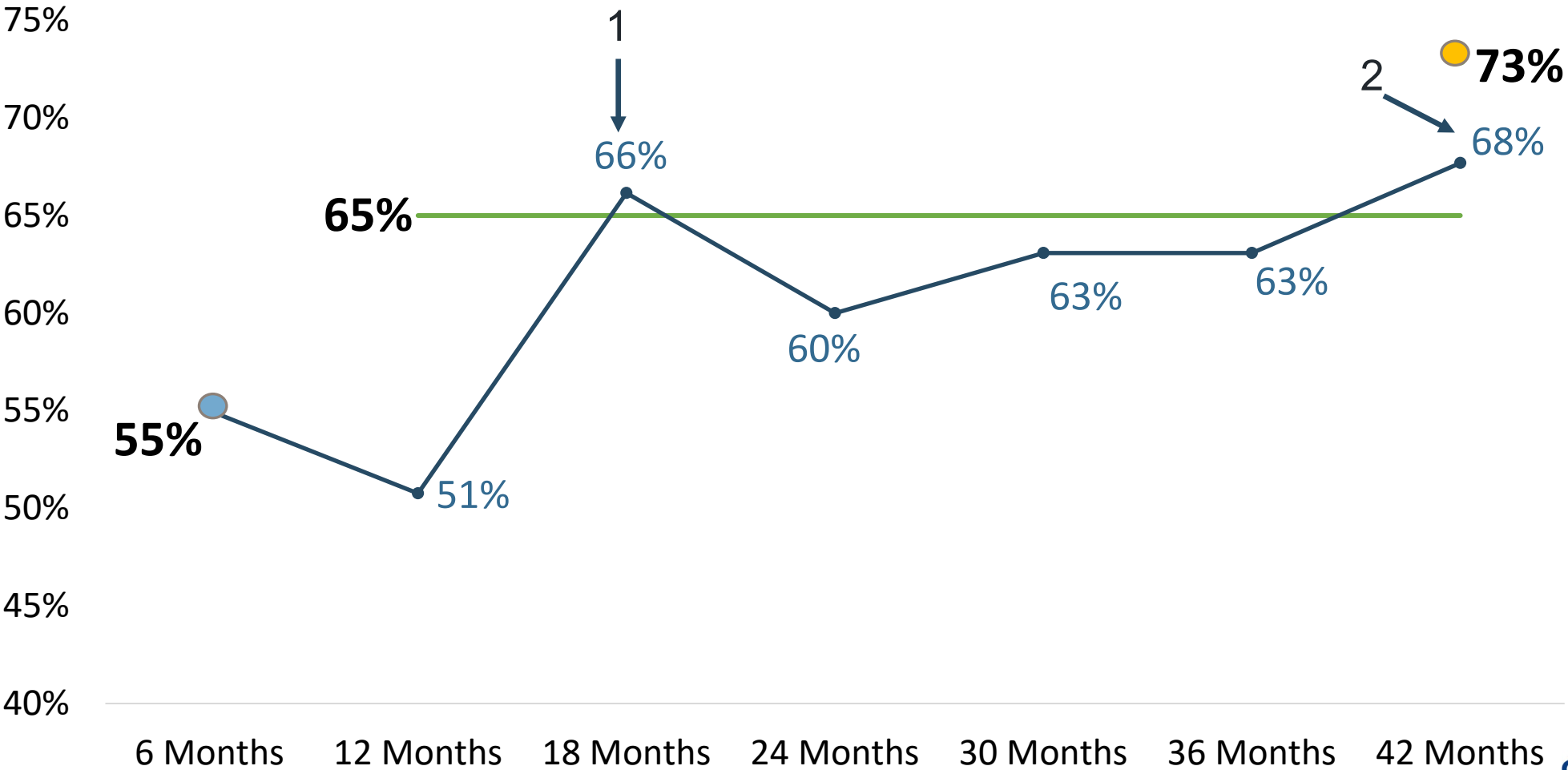


# Example 2: High-Performance Value Achieved

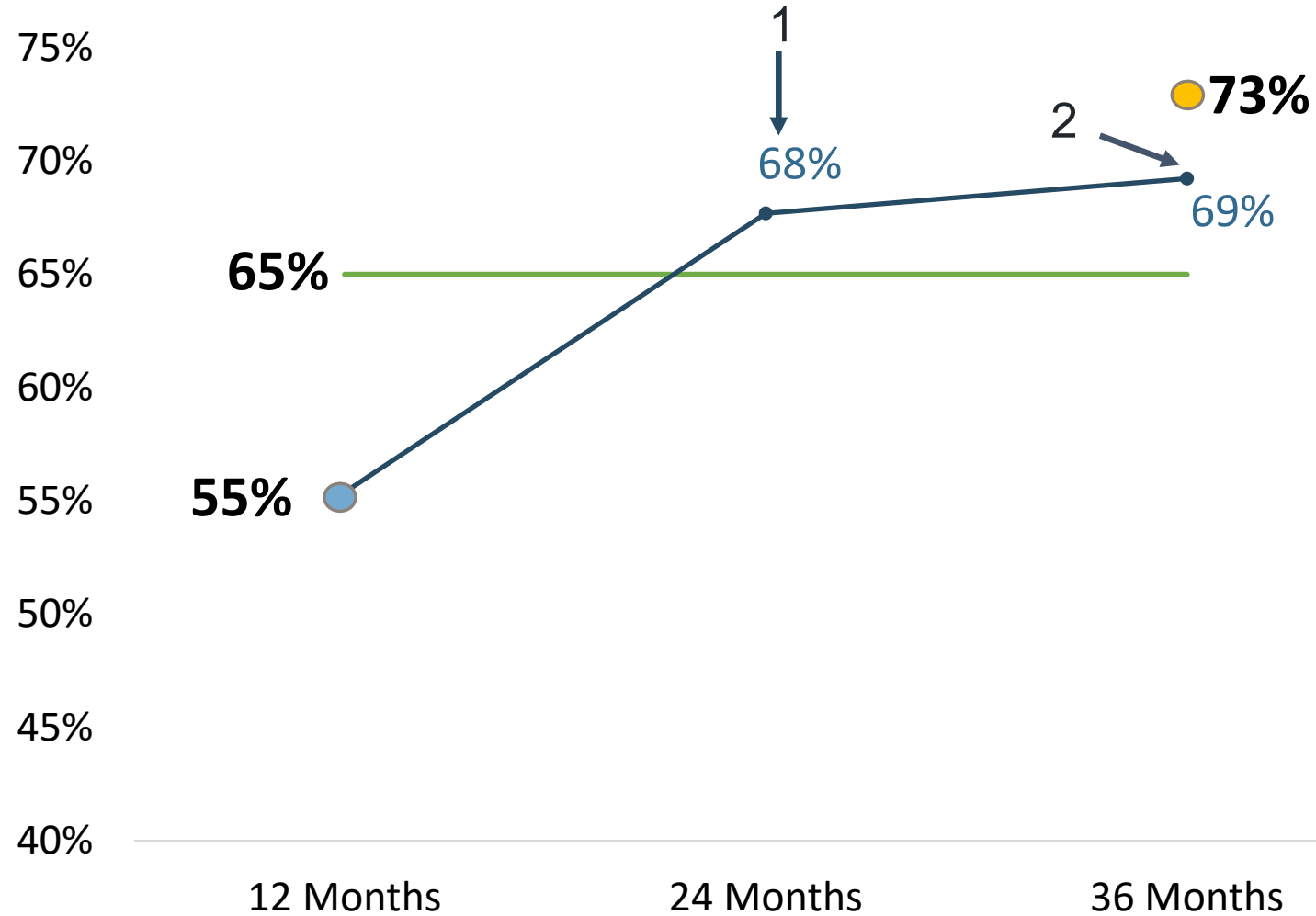
Meet or exceed the high-performance value in any one measurement period



# Example 3: Neither Sustained Improvement Goal Nor High-Performance Value Achieved



# Example 4: Use of 12-Month Measurement Periods



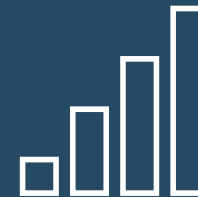
Using 12-month measurement periods results in fewer measurement opportunities



# Item 1

## Aggregate Data Measure

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# Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment

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States required to measure Item 1 are encouraged to use a statewide aggregate data measure

# children who received face-to-face contact  
according to agency timeframes

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# children identified in screened-in CPS reports  
that require face-to-face contact



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# Item 1 Aggregate Measure

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- Required amount of improvement based on state baseline performance
- Maximum improvement amount capped at 3% and the adjustment begins at baseline performance of 50%
  - Using up to 3% provides a reasonable amount of required improvement
  - Large improvement amounts are unrealistic when using entire population of child subjects in reports
- Annual, 12-month measurement periods after the baseline
- Goal achievement: Meet or exceed the goal in any single measurement period

# Questions ?

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# Resources

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## [Technical Bulletin #13](#)

- Amendment with Round 4 national performance values coming spring 2022

## [Capacity Building Center for States CFSR Statewide Data Indicator Toolkit](#)

- Includes Data Profile Quick Reference Guide, 2-page indicator fact sheets, FAQs, syntax for DQ checks and SWDI. Resources will be updated for Round 4

## [CB CFSR Information Portal](#)

- Case review data and reports and SWDI visualization available in the Online Monitoring System (OMS)
- Round 4 information and resources