Children’s Bureau Presenters

- Jennifer M. Haight, Director, Division of Performance Measurement and Improvement
- Roger Stanton, Ph.D., Social Science Research Analyst, Data Analytics and Reporting Team
- Tammy White, Ph.D., Social Science Research Analyst, Data Analytics and Reporting Team and Measurement and Sampling Committee
- Elizabeth Jones-Ferguson, Child Welfare Data Specialist, Child and Family Services Review Team and Measurement and Sampling Committee
Agenda

- 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

**EVIDENCE**
- State Data Profiles Created by CB
- Agency & Court Data
- CQI Case Reviews

**Stakeholder Engagement**

**ONSITE REVIEW**
- CFSR Case Review
- Stakeholder Interviews

**ONLINE REVIEW**
- CFSR Final Report

**Program Improvement Plan**

**EVIDENCE**
- State Data Profiles Created by CB
- Agency & Court Data
- CQI Case Reviews

**Stakeholder Engagement**
Timeframes for PIP Measurement

- CFSR Final Report
- Develop PIP / PIP Measurement Plan
- 2-Year PIP Implementation Period
- 18-Month Post-PIP Evaluation Period
### PIP Measurement Requirements

<table>
<thead>
<tr>
<th>Safety Outcome 1</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SWDI:</strong> Maltreatment in foster care</td>
</tr>
<tr>
<td><strong>SWDI:</strong> Recurrence of maltreatment</td>
</tr>
<tr>
<td><strong>Item 1:</strong> Timeliness of Initiating Investigations of Reports of Child Maltreatment</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Safety Outcome 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Item 2:</strong> Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care</td>
</tr>
<tr>
<td><strong>Item 3:</strong> Risk and Safety Assessment and Management</td>
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</tbody>
</table>
## PIP Measurement Requirements

<table>
<thead>
<tr>
<th>Permanency Outcome 1</th>
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</thead>
<tbody>
<tr>
<td>SWDI: Permanency in 12 months for children entering foster care</td>
</tr>
<tr>
<td>SWDI: Permanency in 12 months for children in foster care 12 to 23 months</td>
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<tr>
<td>SWDI: Permanency in 12 months for children in foster care 24 months or more</td>
</tr>
<tr>
<td>SWDI: Reentry to foster care in 12 months</td>
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<tr>
<td>SWDI: Placement stability</td>
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</table>
## PIP Measurement Requirements

<table>
<thead>
<tr>
<th>Well-Being Outcome 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 12: Needs and Services of Child, Parents, and Foster Parents</td>
</tr>
<tr>
<td>Item 13: Child and Family Involvement in Case Planning</td>
</tr>
<tr>
<td>Item 14: Caseworker Visits With Child</td>
</tr>
<tr>
<td>Item 15: Caseworker Visits With Parents</td>
</tr>
</tbody>
</table>
PIP Measurement
Statewide Data Indicators
Statewide Data Indicators (SWDIs)

• 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

- 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)

<table>
<thead>
<tr>
<th>State</th>
<th>Data Profile Transmitted With Statewide Assessment &amp; Used to Determine Conformity</th>
<th>Updated Data Profile Available When Final Report is Completed</th>
<th>Subsequent Data Profiles Prior to PIP Approval</th>
<th>Include in PIP?</th>
</tr>
</thead>
<tbody>
<tr>
<td>State A</td>
<td>Worse</td>
<td>No Different</td>
<td>Better</td>
<td>No</td>
</tr>
<tr>
<td>State B</td>
<td>Worse</td>
<td>No Different</td>
<td>No Different</td>
<td>No</td>
</tr>
<tr>
<td>State C</td>
<td>Better</td>
<td>No Different</td>
<td>Worse</td>
<td>No</td>
</tr>
<tr>
<td>State D</td>
<td>No Different</td>
<td>No Different</td>
<td>No Different</td>
<td>No</td>
</tr>
<tr>
<td>State E</td>
<td>Worse</td>
<td>Worse</td>
<td>Worse</td>
<td>Yes</td>
</tr>
<tr>
<td>State F</td>
<td>Worse</td>
<td>Worse</td>
<td>Better</td>
<td>No</td>
</tr>
</tbody>
</table>
SWDI Baselines

• 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 CFSR Final Report
SWDI Goals

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
Required Amount of Improvement

- 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

**Pathway 1**
Observed Performance meets the improvement goal

**Pathway 2**
RSP is better or no different than National Performance
Data Quality (DQ)

• 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
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

- 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

• 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

- **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

• 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

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

- 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

**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
Example: Required Amount of Improvement

<table>
<thead>
<tr>
<th>Percentage</th>
<th>6 Months</th>
<th>12 Months</th>
<th>18 Months</th>
<th>24 Months</th>
<th>30 Months</th>
<th>36 Months</th>
<th>42 Months</th>
</tr>
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<tbody>
<tr>
<td>40%</td>
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<tr>
<td>45%</td>
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<td>50%</td>
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<td>55%</td>
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<td>60%</td>
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<tr>
<td>65%</td>
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<td>70%</td>
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</tr>
<tr>
<td>75%</td>
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</tbody>
</table>

Baseline Performance: 55%
Sustained Improvement Goal: 65%
High-Performance Value: 73%
Pathway 1: Sustained improvement goal

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

Sustained improvement goal achieved

- 65%
- 66%
- 68%
- 60%
- 71%
- 73%

6 Months 12 Months 18 Months 24 Months 30 Months 36 Months 42 Months
Pathway 2: High-performance value

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.

- 12 Months: 55%
- 24 Months: 65%
- 36 Months: 68%
- 42 Months: 73%
Item 1
Aggregate Data Measure
Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment

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
- # children identified in screened-in CPS reports that require face-to-face contact
Item 1 Aggregate Measure

• 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 ?
Resources

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