2016 Program Report Card: Family and Community Ties Foster Care, Department of Children and Families

Quality of Life Result: Connecticut children grow up stable, safe, healthy, and ready to lead successful lives.

Contribution to the Result: Family and Community Ties (FaCT) is a foster care model that combines a wraparound approach to service delivery with professional parenting for children with serious psychiatric and behavioral problems. This service is differentiated from other foster care services by the frequency and intensity of clinical contact and the flexibility in providing “whatever it takes” to preserve the placement of a child in a family setting. FaCT families receive support and supervision from private foster care agencies with the purpose of stabilizing and/or ameliorating a child's mental/behavioral health issues, facilitating children’s timely and successful transition into permanent placements (e.g., reunification, adoption, or independent living), and achieving individualized goals and outcomes based upon a comprehensive, multifocal care plan.

<table>
<thead>
<tr>
<th>Program Expenditures</th>
<th>State Funding</th>
<th>Federal Funding</th>
<th>Other Funding</th>
<th>Total Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actual SFY 15</td>
<td>6,865,815</td>
<td>0</td>
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<td>6,865,815</td>
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<td>Estimated SFY 16</td>
<td>6,549,069</td>
<td>0</td>
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<td>6,549,069</td>
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</tbody>
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Partners: Bio-families, Community agencies and services, FaCT foster families and agencies, DCF

How Much Did We Do?
The number of FaCT level children served by Race/Ethnicity

How Well Did We Do It?
Percent of children who remain stable, without disruption in FaCT

Story behind the baseline:
The above trend in data is reflective of the Department's initiative to decrease reliance on congregate care and place children with families. The FaCT service has thus been increasingly identified as the more appropriate placement for many youth in residential settings. In SFY 2013, 25 children were served, in SFY 2014, 70 children were served, and in SFY 2015, 90 children were served. This most recent SFY 2016, 108 children have been served.

Story behind the baseline:
Placement stability is being defined as any child who remains in care and/or has been discharged to a permanent placement. Since 2013, the percent of placement stability has increased by 4%. In 2013, 18/25 children remained stable. In 2014, 49/70 children remained stable, and in 2015, 62/93 children remained stable. In SFY 2016, 75/108 children have remained stable or have been discharged to a permanent placement (69% stability rate).

Trend: ▲

Trend Going in Right Direction? ▲ Yes; ▼ No; ◄► Flat/ No Trend

How Well Did We Do It?
Percent of children in FaCT who do not require a higher level of care

Story behind the baseline:
There has been a significant decline in children who require a higher level of care (i.e. psychiatric hosp., group home, etc.) while in FaCT. The data shows an increase in stability of 49% between SFY 2013 and SFY 2015. With the increase in FaCT placements, this is significant in that it shows the capability of the FaCT service to meet the complex psychiatric and behavioral needs of the children and youth being served. In SFY 2016, 93% of FACT level children did not require a higher level of care (4/56 children were discharged to a higher level of care).

Trend: ▲
Quality of Life Result: Connecticut children grow up stable, safe, healthy, and ready to lead successful lives.

Is Anyone Better Off?
The percentage of children who evidence improved functioning measured by Ohio Scales

Story behind the baseline:
Data for the past SFY 2016 shows that out of 56 discharges, 10 entries were completed. 20% show a 5 point improvement in functioning. Providers have been informed that this is an expectation per their Scope of Service.

Proposed Actions to Turn the Curve:
- Define “disruption” and capture all placement moves.
- Track all unplanned respite moves in PIE.
- Continue to increase recruitment and retention in FaCT to allow for greater # of matches.
- Scope revisions to include emphasis on permanency outcomes.
- Providers required to utilize the Ohio Scales to assess approved functioning in youth served and will more consistently enter this data into PIE.

Data Development Agenda:
- Establish in PIE an indicator to differentiate FaCT level children in DCF Core and kinship homes from FaCT licensed homes (Sept 2016 build). This will allow for more sophisticated analysis of the different cohorts of youth and families being served by the providers.
- Add data elements into PIE to allow tracking of all unplanned respite moves for a more accurate understanding of disruption volume.
- Collection of FaCT Administrative Data to be requested through IT (goal met: 12/15).