

2016 Program Report Card: Caregiver Support Team, Department of Children and Families

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

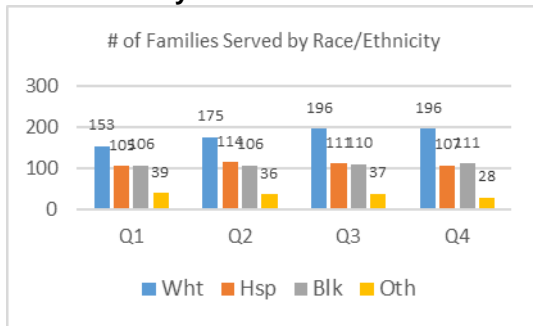
Contribution to the Result: The Caregiver Support Team will prevent the disruption of placements and increase stability and permanency by providing timely in-home interventions with a child and family. For kinship families, this intensive in-home service is provided at the time the child is first placed with the family. The service will be available at critical points for the duration of the placement when additional supports are deemed necessary.

Program Expenditures	State Funding	Federal Funding	Other Funding	Total Funding
Actual SFY 15	\$4,438,524	0	0	\$4,438,524
Estimated SFY 16	\$4,502,387	0	0	\$4,502,387

Partners: Foster and pre-adoptive families, bio-families and DCF

How Much Did We Do?

The number of families served by Race/Ethnicity



Story behind the baseline:

The above trend in data is reflective of the Department's initiative to provide intensive in-home services to kinship and core foster and pre-adoptive families to achieve greater stability. The data for Q4 shows a decrease of 12 distinct families served from Q3 (454) to Q4 (442). Overall, the CST program has grown significantly from 157 distinct families in 2014, 618 in 2015 and 815 in 2016. This increase is due to continued and increased knowledge in the service resulting in a higher number of referrals. CST has the capacity to serve 676 cases statewide. Race data shows that White families comprise 44% (196/442) of all cases, followed by AA families at 25% (111/442), and then Hispanic families at 24% (107/442).

Trend: ▲

How Well Did We Do It?

Number of days from referral to episode start



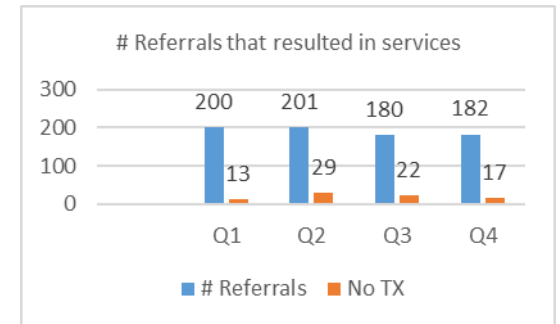
Story behind the baseline:

The average number of wait days for this most recent quarter is 12.3 days from the date of the referral to the start date of services. The goal is that no family wait more than 14 days from the referral date. Support and engagement to families are crucial and should occur as quickly as possible upon a new placement. There has been a slight increase in wait times as compared to last quarter, a trend that will continue to be assessed. The average number of wait days for the entire SFY 2016 is 11.2 days.

Trend: ◀▶

How Well Did We Do It?

Number of referred families engaged in CST services



Story behind the baseline:

As noted in the above graph, a significant number of referred families engage in CST services (93% this most recent quarter, a 5% increase from Q3). This speaks to the majority of foster families' willingness to engage in services and accept support by the Department and CST providers. Since Q1 and Q2 there has been a slight decline in number of referrals to CST. This is a trend that will be carefully monitored each quarter to ensure that referrals are being made for all qualifying families.

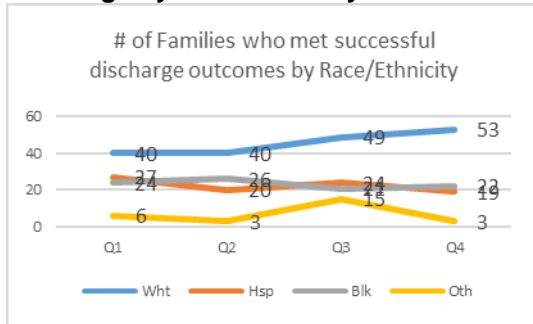
Trend: ▲

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

Is Anyone Better Off?

The number of families who met successful treatment outcomes upon discharge by Race/Ethnicity



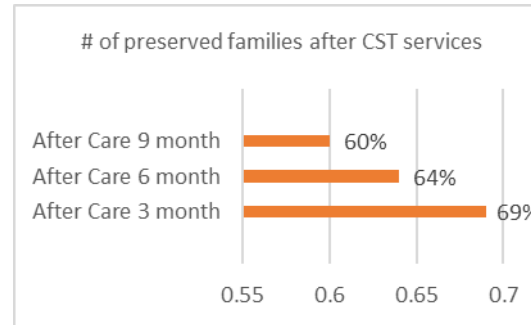
Story behind the baseline:

One of the goals of CST is to help children maintain stability in placement and ultimately contribute to their success and permanency. The data for SFY 2016 shows that 75% (392/524) of all discharges either met treatment outcomes and successfully discharged from the program, or had children reunify with their families of origin, were adopted, or placed with kin. 46% (182/392) of all successful discharges were White families, followed by 24% of AA families (90/392), 23% (90/392) Hispanic families, and 7 (27/392) were of other/mixed race. The remaining 25% of discharges were primarily due to either the child disrupting from the home or the family discontinuing services.

Trend: ◀▶

Is Anyone Better Off?

The number of families who evidence continued stability after CST services



Story behind the baseline:

The data from this most recent quarter shows that 69% of children remained in their families after CST services at the 3 month interval, or were discharged to a permanent home. The numbers begin to decline at the 6 month and 9 month intervals however this data is only pertinent to families who wish to stay connected and respond to CST after discharge from the service. This data is also family level, not client level, resulting in some nuances which are further being explored with providers.

Trend: ◀▶

Proposed Actions to Turn the Curve:

Scope of Service enhancements are underway to ensure greater consistency with data collection and operational definitions. CST identifies barriers around data collection to be due to the “client” being the “family”. For example, if a family is caring for a sibling group of three, the sibling group is counted as one in PIE (one family unit), therefore if one child discharges to a higher level of care and two children remain in the home, the discharge data is not able to reflect all outcomes. CST providers will be attending the Circle of Security training in August 2016 and recently attended the LIST life skills training to enhance their ability to support and serve families and children. Utilization among regions has been assessed to determine wait lists and cross partnership to ensure all possible slots are filled. Partnership with Solnit has also been established to ensure that CST serves youth upon discharge home to prevent disruption.

Data Development Agenda:

Workgroup with Caregiver Support Team providers began in May 2016 where it was determined that providers would begin to collect identified data in the same manner and submit on a quarterly basis. A standardized template will be shared with all of the providers so that they can collect their own RBA data. Each individual provider will submit their report card to this PDOC and this data will supplement the already entered information in our Provider Information Exchange (PIE) database.