



FY 2017 Q4 Program Report Card: Community Support for Families (CSF), 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: Community Support for Families engages families who have received a Family Assessment Response and connects them to concrete, traditional, and non-traditional resources and services in their community. CSF is contracted to provide services to 2,448 families annually.

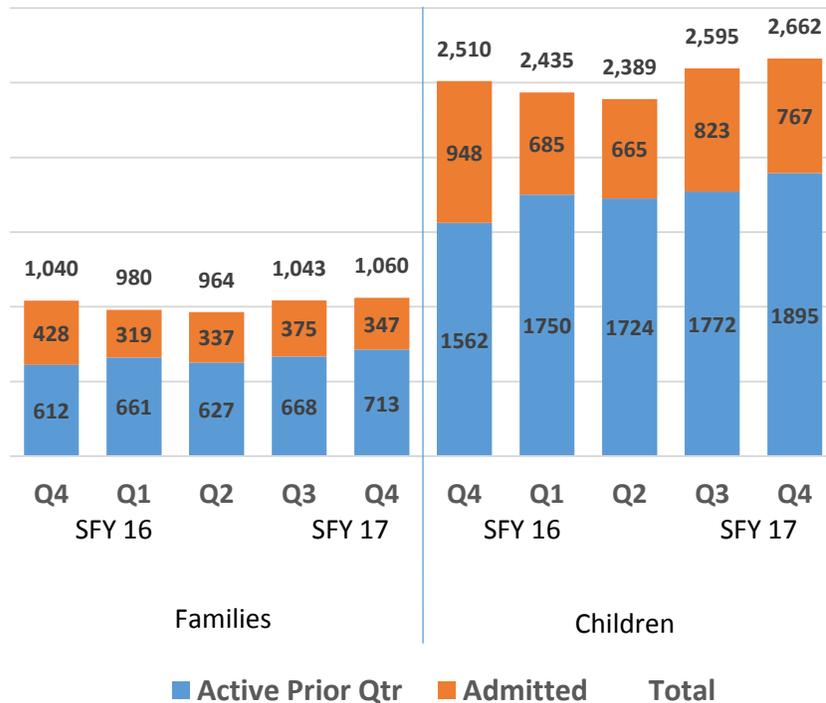
Partners: DCF, Families, UCONN, ABH, Community Social Service Agencies

Program Expenditures	State Funding	Total Funding
Community Support for Families	\$8,038,439	\$8,038,439
Wrap Funding	\$1,373,710	\$1,373,710
UCONN School of Social Work (PIC)	\$250,000	\$379,420

How Much Did We Do?

The number of **families** and **children** during fourth quarter of SFY 2017.

CSF Families and Children Served*



Story behind the baseline: The chart to the left shows the total number of families and associated children served by CSF from SFY 2016 to Quarter 4 of SFY 2017 (excludes evaluation only cases). The number of families and children served has remained relatively stable over time.

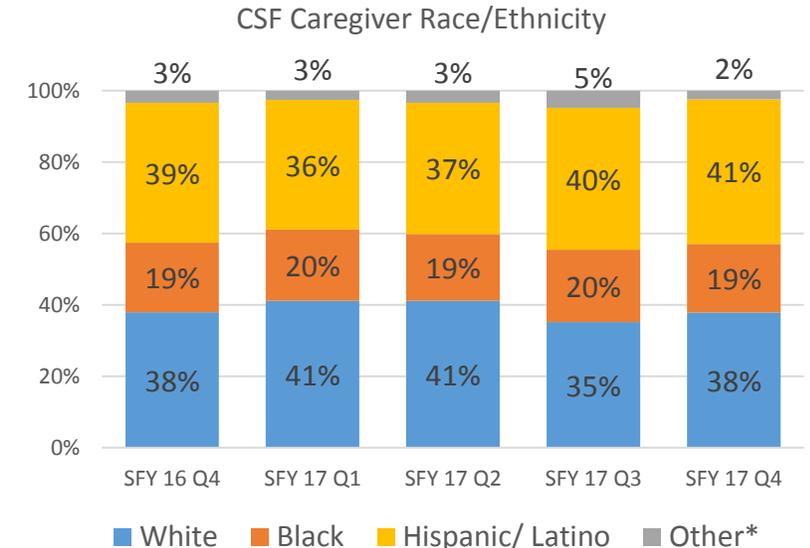
Since implementation, 20% of families sent to FAR received a CSF disposition. For this quarter, 12% of families had a CSF disposition. There has been some staff turnover within the program but most of the programs are functioning at capacity.

CSF program utilization continues to be as expected:

- Average LOS is just over 4 months (139 days).
- 68.5% of families referred are low/very low risk; 30.5% moderate; and 0.6% high.

Families continue to experience improved outcomes with longer lengths of service. This has been communicated with providers and continued discussions will occur. UConn is exploring risk and protective factors to better understand families that successfully exit and the needs of those families who do not successfully exit the program.

Trend: ◀▶



*Other includes: "Other" and "Multi-Racial."

Story behind the baseline: White and Hispanic families continue to be the highest populations served by the program. The percentages have fluctuated with no pattern. Compared to FAR overall, CSF has a larger proportion of Hispanic/Latino families. Overall in FAR, 49% of families are White, 18% are Black, 28% are Hispanic/Latino, and 5% are other.

Age of Children Served by CSF

- Mean age of children across all CSF episodes is 8.10.
- Children 0-5: 34.7% statewide, slight increase from prior quarter.

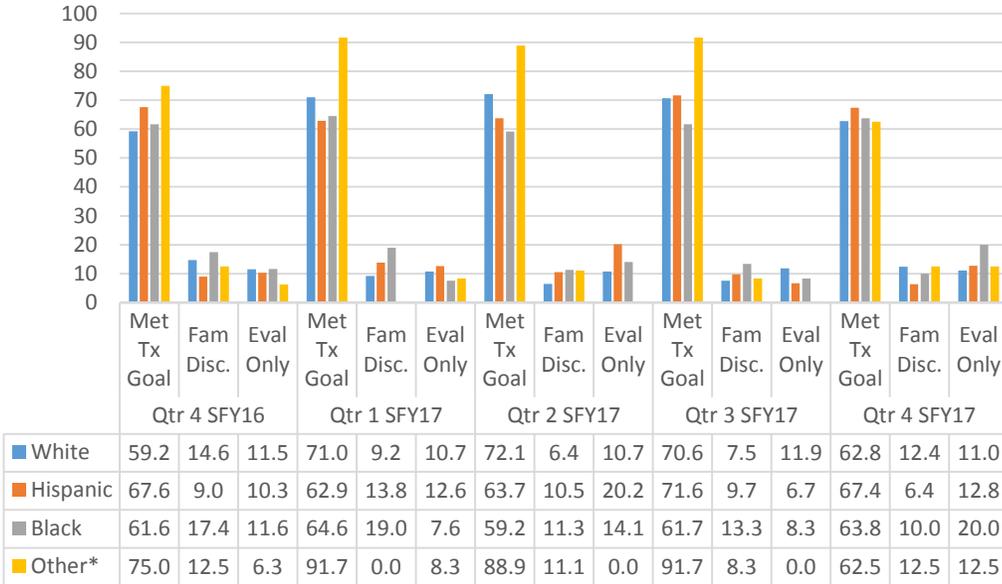
Trend: ◀▶

*NOTE: The methodology of these analyses were updated starting Q1 SFY17 to represent Unique families and children instead of their episodes.



How Well Did We Do It?

Percent of Top 3 Reasons for Discharge by Race/Ethnicity



*Other includes: "Other" and "Multi-Racial."

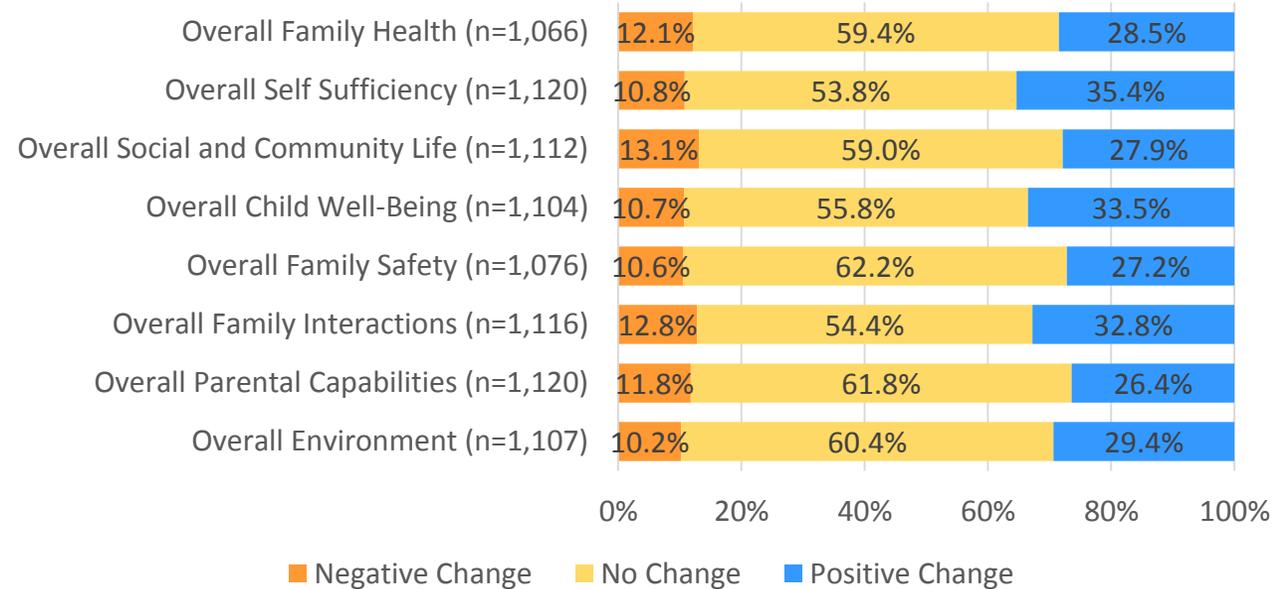
Note: "Other" represents a low number of cases (n<=10).

Story behind the baseline: A positive indicator of CSF performance, 'Met Treatment Goals' continues to be the most common discharge reason. While Black families have consistently had one of the higher percentage of families who have discontinued CSF, this difference is not associated with a higher incidence of subsequent or substantiated subsequent reports. UCONN is conducting further analysis to determine length of service and reasons for discontinuance to inform future development.

Note: Evaluation Only represents 12.6% of the total reason for discharge in the current qtr.

Trend: ▲

Direction of Change in Overall Scores Intake to Closure valid responses (from 1,145 paired records)



Story behind the baseline:

In October 2015, the NCFAS-G was added to enhance analysis of families being served. Stability (no change) or a positive change between intake and closure would be expected with the CSF population. Most families fall within the baseline (i.e. an adequate level of functioning) or strength scores at intake. There is improvement or stability noted from intake to closure in all domains of the NCFAS-G. The highest rate of improvement was in the domain of economic self-sufficiency, followed by child well-being and environment. These scores indicate positive program effects. They also give more information about the needs of CSF families at intake and closure.

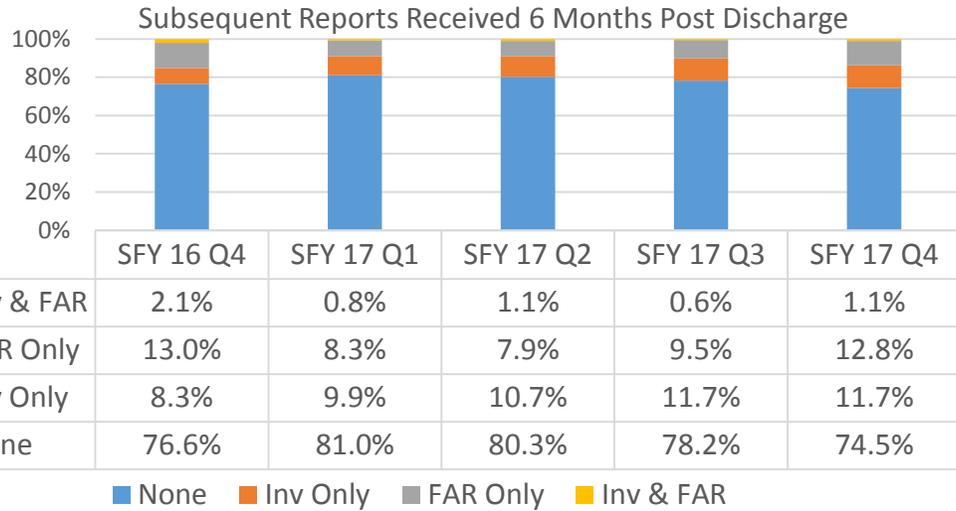
Trend: ▲



FY 2017 Q3 Program Report Card: Community Support for Families (CSF), Department of Children and Families

Is Anyone Better Off?

The percentage of families who received a subsequent report statewide by Quarter.



Substantiated Subsequent Reports				
SFY 16	SFY 17			
Quarter 4	Quarter 1	Quarter 2	Quarter 3	Quarter 4
4.7%	4.5%	4.7%	4.6%	5.3%

Story behind the baseline:

These trends have been relatively stable over time with SFY 17 Q1 having the lowest percentage of subsequent reports. This data includes families that were discharged 6 months prior to the start of the specified quarter.

Like last year, the current data indicates that the majority of CSF families have not received a subsequent report within 6 months of discharge, with 5.3% of families receiving a substantiated subsequent report in the 4th quarter of SFY 2017. Factors leading to subsequent reports include the following: history of prior investigations, caregiver having their own CAN history, and reporting four or more children involved with the CAN incident.

Trend: ▲

Proposed Actions to Turn the Curve

- Inclusion of investigation cases to evaluate intake practice and allow for comparisons.
- Build upon Survival Analysis to understand root cause.
- Establishment and dissemination of Quarterly Dashboards.
- Statewide Meeting will be scheduled in November to share/review CSF and FAR data to allow for regional discussions (5 year anniversary).
- Reviewing regional practices from point of entry through CSF closure to identify best practices and sharing/learning of what is working well to address regional challenges.
- UCONN focusing on Family Satisfaction Surveys to identify best practices for the administration, collection of feedback and to increase completion rates.

Data Development Agenda

- UConn and ORE Collaboration to refine data elements and enhance quality of analysis/evaluation of FAR and CSF.
- UConn has received extracts of investigations data and is analyzing data and establishing alternative plan for evaluation given expungement issue.
- UConn will continue to refine and expand its survival analysis models to explore risk and protective factors.
- UConn will provide quarterly service delivery data reports to CPAs/DCF.