



May 5, 2021

## **ESA Full Service Case Management Contract Monitoring Summary Quarter 1: January - March 2021**

Below is a summary of monitored performance areas, successes, areas of concern for the first quarter of 2021, and action steps for the next quarter.

- A. Case Transfer/Assessment** – During this quarter, case transfer between the Department of Health and Human Services (DHHS) investigative team and Saint Francis continues to function normally while experiencing minimal problems during the process. Saint Francis accepted all referrals from DHHS with recommendations for services, interventions, and strategies to address safety concerns. Saint Francis met the required 2-hour time frame to implement services for families. DHHS and Saint Francis leadership representatives met during the quarter on January 5, 2021, and February 2, 2021, to discuss any problems or barriers that occurred during the previous month. These meetings helped facilitate open communication between the two teams.
- B. Case Management/Supervision** – Two performance measures reflect Saint Francis' successes with case management:
- Saint Francis continues to exceed the goal for Absence of Recurrence of Maltreatment within 12 Months (goal is to be greater than 92.1%). DHHS Continuous Quality Improvement (CQI) data for the Eastern Service Area indicates that Saint Francis achieved minimal instances of recurrence of maltreatment with the following performance noted: 96.2% for January, 96.0% for February, and 96.4% for March.
  - Saint Francis continues to meet the goal of reducing the percentage of Children who Re-enter Foster Care within 12 Months of Discharge (goal is <8.3%). DHHS CQI data for the Eastern Service Area indicates that Saint Francis had 3.5% of children re-entering foster care for January, 3.7% for February, and 6.2% for March.

### **Item of concern:**

- Saint Francis has not met the target goal for Monthly Face to Face Contact with Youth (target 100%) or Monthly Face to Face Contact with Non-court Involved Children (target 100%). Saint Francis was able to have monthly face to face contact with 89.9% of youth in January, 93.0% of youth in February, and 92.76% in March. Starting April 1, 2021, the target goal for the state changed to 95% to match the federal target.

**Next Steps:**

DHHS requested a Corrective Action Plan to address issues related to meeting the statewide target for contact with children. This Corrective Action Plan was submitted by Saint Francis and approved by DHHS on February 12, 2021. Since the implementation of this Corrective Action Plan Saint Francis has increased performance in this area as evidenced through DHHS CQI data showing 93.3% for February (reported in March), and 92.76% in March (reported in April). To ensure this continues to be a focus, Saint Francis Director teams report to the Executive Director of Operations bi-weekly regarding the number of contacts made during that period.

**C. Service Array** - Saint Francis provides services intended to support and assist children, youth, and families. The intervention services offered by Saint Francis include:

- Assessments and evaluations used to facilitate treatment
- Psychiatric services
- Counseling
- Domestic violence services, victim counseling, and batterer intervention
- In-home interventions to include short-term mobile response teams for crisis stabilization
- Out-of-home placement
- Parent education
- Substance abuse services
- Sexual abuse services for victims and perpetrators
- Services for youth identified as survivors of sexual abuse and/or sex trafficking
- Drug testing services
- Mentoring for children and parents
- Mental health services (trauma-informed care)
- Life skills training
- Translator/Interpreter services

Saint Francis uses the Consultation and Information Sharing Framework®, which creates a supportive and consistent infrastructure for critical thinking, decision making, supervision, family involvement, and practice improvement. Saint Francis has started to explore other case staffing models for future use.

Saint Francis works closely with DHHS to plan and implement the Federal Family First Prevention Services Act (FFPSA) services in the Eastern Service Area. Saint Francis has entered into a Memorandum of Understanding (MOU) with Daybreak for Trauma Focused Cognitive Behavioral Therapy (TF-CBT) and is currently working with the Visiting Nurses Association (VNA) and Nebraska Children's Home Society on an MOU for Healthy Families America. In the meantime Saint Francis has been referring families to Healthy Families America which is available in the community. Saint Francis has also provided innovative ideas for implementation strategies that will support both agencies in achieving specific goals across Nebraska, such as, requiring Evidence Based Practices within specific prevention services that are consistent with the State of

Nebraska's Five year FFPSA plan. Saint Francis has also encouraged providers to develop innovative services to present to Saint Francis to implement as services become available.

Saint Francis reported that it has worked with a multi-disciplinary team to create several new, innovative services that utilize FFPSA evidence-based practices in their delivery to best meet the needs of children and families. Currently, Request for Qualifications is posted to the Saint Francis website for Qualified Residential Treatment Program (QRTP) and Integrated Family Care which requires Motivational Interviewing components, Intensive Family Preservation, and Intensive Family Reunification services that require a proposal for a Well-Supported or Supported Evidence Based Practice by the provider, Resource Family Homes which require the foster parent to be trained in Motivational Interviewing, and Integrated Family Care which requires components of Motivational Interviewing. Additionally, Saint Francis has amended the requirements for Family Support services to require Motivational Interviewing within service delivery.

- D. Service Monitoring** - Saint Francis subcontractors are monitored for contract compliance and are required to provide supporting documentation to Saint Francis Ministries through monthly reports. Subcontracted services are evaluated routinely to assess for any potential gaps in those services or new service needs. Saint Francis maintains service referral data for all services and this data is evaluated monthly to assess for potential gaps in service. This process allows Saint Francis to work with providers regarding staffing capacity and was used during this quarter to assist in determining capacity and services for upcoming contracts in FY 2021.

Saint Francis implemented a file audit system for subcontractors although Saint Francis noted that the results of subcontractor file audits are not available for this quarter but the results of reviews will be included in subsequent quarterly reports.

- E. Educational Opportunities** – During this quarter school districts in the Eastern Services Area have encouraged families to re-engage in in-person learning. Saint Francis has worked to support the educational outcomes for children and youth through collaboration with the school district, foster parents, childcare, and other after-school program providers, as well as the internal transportation team, to ensure the transition back to in-person learning has been as smooth as possible.

Saint Francis contracted with the local family organization, Nebraska Family Support Network, to provide Peer-to-Peer mentoring services for families with children who are experiencing urgent behavioral and/or emotional challenges in their schools. Saint Francis made 44 referrals during the quarter to this Family Peer Mentoring program with Nebraska Family Support Network.

- F. Community Engagement** - Saint Francis demonstrated community engagement efforts through holding quarterly provider and stakeholder meetings, attending

quarterly Judges' meetings, and community meetings that included, but were not limited to:

- Douglas Eyes of the Child (2<sup>nd</sup> Wednesday of every month)
- Sarpy Eyes of the Child (3<sup>rd</sup> Friday of every month)
- Youth Impact (Every Thursday)
- Nebraska Indian Child Welfare Coalition meetings (3<sup>rd</sup> Friday of every month)
- South Omaha Juvenile Justice Forum (2<sup>nd</sup> Friday of every month)
- RED Meeting Urban League of Nebraska (2<sup>nd</sup> Friday of every month)
- Juvenile Justice Reform Initiative- Families Work Group (3<sup>rd</sup> Tuesday of every month)
- Judge Meeting (3/31/21)
- Saint Francis Provider Meeting (4/1/21)

Saint Francis' Indian Child Welfare Act (ICWA) Specialist has monthly contact with local tribes along with case managers and the DHHS ICWA Specialist to conduct a case review for each child who is eligible or registered as a member of these tribes. The Saint Francis ICWA Specialist participates in monthly Nebraska Indian Child Welfare Coalition phone calls.

**G. Resource Family/Foster Parent Homes** – During the first quarter of 2021, Saint Francis succeeded in meeting several performance measures related to the foster care system in the Eastern Service Area.

- Saint Francis showed improvement this quarter regarding the percent of Children in Foster Care Placed in Relative/Kinship Homes with 60.3% for January, 60.6% for February, and 62% for March; the goal is to be greater than 58.7%.
- Saint Francis continues to perform better than the targeted goal of incidents of Maltreatment in Foster Care. The federal target is less than 7.00 incidents per 100,000 days of out-of-home care. DHHS CQI data for the Eastern Service Area indicates that Saint Francis lowered the number of incidents during this quarter with 2.12 incidents for January, 2.49 incidents for February, and 2.51 incidents for March.
- Saint Francis consistently met the goal for Placement Stability this quarter (average of less than 4.12 placement changes per 1,000 days of all youth in foster care for 12 months). DHHS CQI data shows that children in the care of Saint Francis had an average of 3.3 moves for January, 3.27 moves for February, and 3.41 moves for March.
- Saint Francis met the placement stability goal for the Percentage of Children in Foster Care for Less than 12 Months with Fewer than Two Placement Changes by achieving 88.6% for January, 89.8% for February, and 88.6% for March; the goal is to be greater than 86%.
- Saint Francis showed a slight decrease this quarter but did continue to meet the goal for Placement Stability for Children in Foster Care 12-24 Months with Fewer than Two Placement Changes achieving 67% for January, 68.2% for February, and 67.5% for March; the goal is to be greater than 65.4%.

- This quarter Saint Francis met the target goal for Placement Stability of Children in Care 24 months or more, with Fewer than 2 Placements (the goal is to be greater than 41.8%). Saint Francis was below the target for January at 44.9%, but for February data reports indicate Saint Francis was above the target, at 43.9%, and for March, 44.4%.

**Item of concern:**

Saint Francis needs to increase the number of licensed relative and kinship homes in the Eastern Service Area to maintain family connections for children and increase drawdown of available Title IV-E funding. Data for recruitment and retention of foster homes is not available at the writing of this report but will be assessed in the quarter 2 report.

**Next Steps:**

- a. Saint Francis is working to increase the number of licensed foster homes in the Eastern Service Area with contracted vendors.
- b. Saint Francis and DHHS are exploring options to increase the amount of licensed relative and kinship foster homes to maximize Title IV-E funding. DHHS has established a formalized process on March 8, 2021, for Saint Francis to provisionally license relative and kinship foster homes so that Saint Francis will comply with the contract.

**H. Workforce** –The percentage average of monthly caseload size in compliance for Saint Francis Case Managers was 52.8% for January, 47.1% for February, and 44.0% for March.

**Next Steps:**

DHHS requested a Corrective Action Plan during this quarter and after review and several rounds of feedback, the plan submitted by Saint Francis was approved on April 1, 2021. Saint Francis has developed several strategies to meet the state standard for caseload ratio, including targeted recruitment and retention strategies, and weekly review of caseload ratios at every supervisory level to determine barriers to success. Based on the Corrective Action Plan, Saint Francis defines the indicator of success as a 10% increase in compliance every month.

**I. Maximizing Public and Private Funds** – Saint Francis maintains a listing of non-paid resources, along with private partners that provide services using private funding. To support the requirement and the implementation of the Families First Prevention Services Act, Saint Francis reported that it has entered into a Memoranda of Understanding with Daybreak for TF-CBT and with Boys Town for Multi-Systemic Therapy to provide services to children and families using public funds outside of child welfare dollars and private grant funds. These services include evidence-based clinical services and services to improve parental functioning. Additionally, Saint Francis is speaking with VNA and the Nebraska Children’s Home Society to enter into a Memoranda of Understanding for Healthy Families America.

Saint Francis participates in several community collaboration meetings, including Douglas and Sarpy County Systems of Care, where information about community-based and region funded services are shared and is brought back to the organization. Saint Francis has formed partnerships with several subcontractors and non-contracted agencies that allow access to grant-funded services for children, parents, and families, such as human trafficking programs with the Indigo Program and Salvation Army, permanency services through Wendy's Wonderful Kids, and housing programs through Heartland Family Services.

Saint Francis noted difficulty tracking Economic Assistance programs for families through the Nebraska Family Online Client User System (NFOCUS), as there is no current functionality within that system to extract data for families who were offered or referred for these kinds of services except by hand count. DHHS regularly does a case review on the utilization of Economic Assistance Services; however, during this quarter, this review was postponed due to the point in time case reviews for the Eastern Service Area. Saint Francis has created a process to capture this information temporarily. While the information is preliminary, Saint Francis reported that the overwhelming majority of families served through case management services have been referred to or are receiving economic assistance.

- J. Utilization Management** – Saint Francis developed the Care Center service coordination to provide oversight in the referral process for services and placements. The care center reviews trends, discusses identified gaps, and plans for the next steps. During this quarter, Saint Francis Care Center service coordination processed service referrals from the DHHS initial assessment team and ongoing case management. As noted in the Case Transfer/Assessment section above, 201 cases were transferred to ongoing case management services with Saint Francis. No issues were reported in arranging services for these cases.

A case review was conducted for case management in the Eastern Service Area and results of this review will be available in the next quarter.

During the first quarter, Saint Francis used non-relative licensed homes on average for 51% of placements.

Saint Francis requested permission to place 13 youth out of state due to court orders or lack of facilities in Nebraska that would be able to serve these youth. Saint Francis made referrals for all in-state facilities before seeking placement out-of-state.

On March 23, 2021, CFS Program Staff met with Saint Francis regarding the criteria for a Qualified Residential Treatment Program (QRTP).

**K. Administrative Review** –

1. Grievances - Saint Francis has a Customer Care Department that responds to concerns and helps find a positive resolution to most issues while remaining neutral and objective. During the quarter there were 26 Customer Care Contacts

for the ESA. DHHS received five grievances and one complaint regarding Saint Francis which have been addressed and resolved to the extent possible.

2. Background Checks - Saint Francis submitted a Corrective Action Plan to address compliance with background checks of new employees. This plan was approved on February 8, 2021, and Saint Francis reported on March 5, 2021, that it is 100% compliant in completing background checks for all new employees. On April 9, 2021, Saint Francis reported that it continues to be 100% compliant with having all necessary background checks received and cleared prior to the start date of each employee.

**Next Steps:**

- a. DHHS is completing a file audit for Saint Francis employees from April 19 through April 21, 2021. Results from this audit will be available on April 30, 2021.
  - b. DHHS will continue to monitor employee files to ensure 100% compliance with the background check requirement.
3. Court Room Issues – During this quarter, several court issues have been reported from the Douglas County Separate Juvenile Court which have resulted in but not limited to: No Reasonable Efforts Findings, motions for contempt of court, and removal of Saint Francis case manager from two cases.

**Next Steps:**

- a. DHHS is working closely with Saint Francis to resolve and reduce the issues reported by the Douglas County Juvenile Court. Weekly meetings are held with SFM leadership and DHHS Attorneys to identify and overcome any barriers.
  - b. Saint Francis Attorneys are working with Case Management teams to better prepare Case Managers for court hearings.
  - c. DHHS leadership provides a weekly tracking report to Saint Francis leadership noting the court issues by each Judge for the previous week.
  - d. Saint Francis submitted a plan to address court issues on April 23, 2021.
4. Financial Review – During the first quarter, DHHS established an emergency contract with Saint Francis which adds \$24 million to the contract through February 2023. Saint Francis has been consistently sending financial information on time which includes: Statement of Functional Expenses, Statement of Financial Position, Aging Reports, and Cash Flow Statements along with the Transaction Journal. Saint Francis sent January expenditure details on February 19, 2020; February details on March 23, 2020, and March details are expected to be delivered on or before April 30, 2021.

DHHS and Saint Francis are currently working to establish a system to track Saint Francis' direct services to accurately reflect the percentage to meet Nebraska Revised Statute 43-4204. The CFS Internal Auditor sent emails to the

Saint Francis Finance team on February 1, 16, and 18, 2021 to discuss financial reporting that needed to comply with the state statute. The CFS Deputy Director of Finance, CFS Federal Aide Administrator, and CFS Internal Auditor met with the DHHS Chief Financial Officer and his staff on March 18, 2021, to discuss how to approach this issue with Saint Francis.

**Next Steps:**

The DHHS Chief Financial Officer has scheduled a meeting with the Saint Francis Finance team to resolve the financial reporting issue.

- L. Information Systems** - DHHS continues to use the information portal system, which is accessible for Saint Francis to view reports on performance specific to the Eastern Service Area. This system continues to be used to provide updates on performance metrics and authorization of services.

DHHS continues to use a Business SharePoint webpage to serve as a repository for guidance and policy documents, training information, and documents related to case management. This Sharepoint webpage was established in January 2020 and is available for Saint Francis leadership to access.

Saint Francis utilizes the Nebraska Family Online Client User System (NFOCUS) as the case management Child Welfare Information System and authorization system for services.

**Corrective Action Plans:**

Please see attached Corrective Action Plan Compliance report.

**Conclusion**

During this quarter, Saint Francis experienced several struggles while also seeing successes and improvements in key performance areas. Saint Francis continues to not meet the requirements of caseload standards and licensing of relative homes, as well as, a noted increase in the number of court related issues and concerns. Saint Francis continues to work diligently with community partners to better serve families in the Eastern Service Area.

DHHS will continue to partner and provide guidance to Saint Francis to recognize areas for improvement and create action steps to meet expected outcomes for children and families served in the Eastern Service Area.

CC: Stephanie L. Beasley, Director  
Alger Studstill, Jr., Deputy Director  
Lori Harder, Service Area Administrator  
Doug Beran, Deputy Director  
Camas Holder, Service Area Administrator  
Bryan Gilliland, Financial Auditor



Lucas Atkinson, Contract Administrator  
Cori Ulane, Contract Monitor  
William Clark, Saint Francis Ministries, President and CEO  
Matt Stephens, Saint Francis Ministries, Vice President, Children and Family Services  
Nancy Montanez-Johner, Saint Francis Ministries, Regional Vice President