

**DEPARTMENT OF CHILDREN
AND FAMILIES**

**INDEPENDENT LIVING TRANSITION SERVICES,
FOSTER CARE LICENSING, AND PROVIDER
PERFORMANCE MEASURES**

Operational Audit



SECRETARY OF THE DEPARTMENT OF CHILDREN AND FAMILIES

The Department of Children and Families is established by Section 20.19, Florida Statutes. The head of the Department is the Secretary who is appointed by the Governor and subject to confirmation by the Senate. During the period of our audit, the following individuals served as Department Secretary or Interim Secretary:

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DEPARTMENT OF CHILDREN AND FAMILIES

Independent Living Transition Services, Foster Care Licensing, and Provider Performance Measures

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DEPARTMENT OF CHILDREN AND FAMILIES

Independent Living Transition Services, Foster Care Licensing, and Provider Performance Measures

SUMMARY

This operational audit of the Department of Children and Families (Department) focused on evaluating the actions taken by the Department and five community-based care lead agencies (CBCs) to correct deficiencies disclosed in our report No. 2011-176 related to the administration of the Independent Living Transition Services (ILTS) Program.¹ This audit also focused on the Department's administration and monitoring of foster care licensing and the setting and monitoring of contracted service provider performance measures, and included a follow-up on findings noted in our report No. 2011-037.

We found that, while steps had been taken by the Department and the CBCs to address the findings included in our report Nos. 2011-037 and 2011-176, opportunities continue to exist to enhance the administration of the ILTS Program and to improve the monitoring of foster care licensing and provider performance.

INDEPENDENT LIVING TRANSITION SERVICES

Finding No. 1: Federal funds from the Chafee Foster Care Independence Program and Chafee Education and Training Voucher (ETV) Program, as well as State funds, were used to provide assistance to ineligible young adults, including young adults who should have aged out of the ILTS Program at age 23.

Finding No. 2: ETV Program-funded payments were made in excess of established Program payment limits. Additionally, the Department and the CBCs had not implemented monitoring procedures to identify excess payments or payments made to ineligible young adults.

Finding No. 3: In some instances, the CBCs coded payments to the incorrect ILTS Program service type and made payments for ineligible adolescents.

Finding No. 4: The CBCs did not always maintain documentation to demonstrate that Road-to-Independence Program benefits were paid to eligible Program participants in appropriate amounts.

Finding No. 5: The CBCs did not always maintain documentation to demonstrate that timely assessments, staffings, delinquency record and background checks, and services worker contacts were performed for adolescents receiving ILTS Program services.

Finding No. 6: The CBCs did not fully utilize the Florida Safe Families Network (FSFN) to document and maintain adolescent assessment and staffing information.

Finding No. 7: The Department did not always timely deactivate FSFN access privileges when users separated from Department employment.

FOSTER CARE LICENSING

Finding No. 8: The Department's regional offices could not always demonstrate that the CBCs' foster care re-licensing activities had been subjected to appropriate monitoring.

PROVIDER PERFORMANCE MEASURES

Finding No. 9: The Substance Abuse and Mental Health Program's provider performance measure standards were set below the Department's performance measure standards specified in its Long Range Program Plans and, in some cases, were set significantly below the providers' prior year performance results.

¹ During the 2013 Legislative Session and subsequent to our audit field work, the ILTS Program was redesigned, effective January 1, 2014. Our audit procedures evaluated Department and CBC activities related to the ILTS Program requirements in effect during our audit field work and through December 31, 2013.

Finding No. 10: The Department did not always document a periodic comparison of Substance Abuse and Mental Health Program service providers' actual performance to the performance measure standards incorporated in the providers' contracts.

BACKGROUND

The mission of the Department is to protect the vulnerable, promote strong and economically self-sufficient families, and advance personal and family recovery and resiliency. For the purposes of administration and field operations, the Department is organized into six geographic regions. Each region is composed of two or more circuits that are responsible for the provision of community services.

Pursuant to State law,² the responsibilities of the Department include, but are not limited to, the adoption of rules for the administration of the Independent Living Transition Services Program, licensure of family foster homes, and oversight of the Department's contracted service providers' performance for the Family Safety and Preservation Services and the Substance Abuse and Mental Health Programs. State law³ requires the Department to outsource the provision of foster care and related services Statewide by contracting with community-based care lead agencies (CBCs). As of February 2012, the Department had entered into 20 contracts totaling \$3.2 billion with 19 CBCs.

FINDINGS AND RECOMMENDATIONS

Independent Living Transition Services

The Independent Living Transition Services (ILTS) Program is one of the programs administered by the community-based care lead agencies (CBCs). The goal of the ILTS Program is to assist older children in foster care and young adults, who age out of foster care, obtain the life skills and education necessary to make the transition to independent living and employment, have a quality of life appropriate for their age, and assume personal responsibility for becoming self-sufficient adults. As shown in Table 1, the ILTS Program is funded from Federal grants for the Chafee Foster Care Independence (Chafee) Program and the Chafee Education and Training Vouchers (ETV) Program and State General Revenue and, according to Department accounting records, ILTS Program expenditures totaled approximately \$52.3 million during the 2010-11 fiscal year and \$49 million during the 2011-12 fiscal year. Included in these fiscal year amounts are administrative and support services expenditures totaling approximately \$11.6 million and \$13 million, respectively, and financial assistance payments totaling approximately \$40.7 million and \$36 million, respectively. The administrative and support services expenditures consisted of staff salaries and expenses for case coordination and support services to youth and qualifying young adults.

² Sections 409.175(5)(a), 409.1451, 409.1671(3)(e), 394.4573, 394.78, and 397.321(8), Florida Statutes (2012).

³ Section 409.1671, Florida Statutes (2012).

Table 1
ILTS Program Expenditures and Client Counts
for the 2010-11 and 2011-12 Fiscal Years

Service Type	Program Expenditures		Client Count	
	2010-11	2011-12	2010-11	2011-12
Administrative and Support Services Expenditures ^a	\$11,626,648	\$13,066,982	N/A	N/A
Financial Assistance Payments:				
SIL	408,919	276,761	135	76
AcSS	448,780	628,794	647	561
TSS	4,591,816	5,208,321	1,709	1,527
RTI Program Awards	35,204,423	29,858,300	3,890	3,418
Totals	\$52,280,586	\$49,039,158	6,381	5,582
Funding Source	2010-11	2011-12		
ETV Program ^b	\$ 2,396,966	\$ 2,396,966		
Chafee Program ^b	5,764,276	5,764,276		
State General Revenue	44,119,344	40,877,916		
Totals	\$52,280,586	\$49,039,158		

^a Because the Pre-Independent Living and Life Skills services do not provide for direct payments to adolescents, ILTS Program expenditures for adolescents receiving those services are included within the Administrative and Support Services Expenditures service type.

^b The ETV Program and Chafee Program expenditures include only the Federally funded amounts. The State's share of Chafee Program and ETV Program expenditures is included in the State General Revenue amount.

Source: Compiled from Department records.

The ILTS Program was designed to assist two age groups: adolescents and young adults. During the period of our audit and through December 31, 2013, adolescents in foster care (aged 13 but not yet 18) could receive, based on their age, Pre-Independent Living, Life Skills, and Subsidized Independent Living (SIL) services, which may be cumulatively referred to as Adolescent Services.⁴ Adolescents could also receive SIL financial assistance payments. Until permanency was established, individuals receiving Adolescent Services remained subject to the requirements of case plans and judicial reviews, which included independent living staffings, assessments, and supervision. Young adults, aged 18 but not yet 23, who were formerly in foster care could receive financial assistance payments related to Aftercare Support Services (AcSS), the Road-to-Independence (RTI) Program, and Transitional Support Services (TSS), which may be cumulatively referred to as Young Adult Services. Table 1 depicts the ILTS Program administrative and support services expenditures, as well as the Young Adult and SIL financial assistance payments and client counts, and shows the amounts of expenditures by funding source and service type for the 2010-11 and 2011-12 fiscal years. Additionally, **EXHIBIT A** of this report describes the various ILTS Program components and types of services provided during those fiscal years.

Pursuant to State law,⁵ the CBCs must comply with statutory requirements and, to facilitate ILTS Program administration in accordance with law, the Department established rules⁶ for the Program. In addition, the Department provided ILTS Program oversight and the contracts between the Department and the CBCs specify that

⁴ During the 2013 Legislative Session, the ILTS Program was redesigned by passage of Senate Bill 1036. According to Chapter 2013-178, Laws of Florida, the changes to the ILTS Program are effective January 1, 2014.

⁵ Sections 409.1451(10) and 409.1671 Florida Statutes (2012).

⁶ Department Rules, Chapters 65C-31 and 65C-28, Florida Administrative Code.

the CBCs are to plan, administer, and coordinate the delivery of client services; ensure compliance with State laws and Federal regulations (including those related to eligibility determination); compensate service providers; administer financial assistance payments to clients; and monitor subcontractors.

To determine whether the CBCs complied with administrative and programmatic requirements, the Department performed contract monitoring and fiscal monitoring. Specifically:

- The Department's Contract Oversight Unit (COU) monitored the CBCs based on the scope specified by the contract managers. Such scope may or may not have included ILTS Program activities. Depending on the scope specified, topic-specific tools were utilized for the monitoring. Effective July 1, 2010, COU monitoring of the CBCs was limited to once a year, and administrative monitoring was limited to once every 3 years if the CBC was accredited.⁷ **EXHIBIT B** summarizes the COU's monitoring of 17 CBCs' administration of the ILTS Program during the 2010-11 and 2011-12 fiscal years, and indicates where noncompliance was detected and if a corrective action plan was required.
- The Department performed fiscal monitoring on a continual basis through review of CBC monthly expenditure reports, CBC policies and procedures, subcontractor monitoring reports prepared by the CBCs, and available Florida Safe Families Network (FSFN) data. In addition, on-site fiscal monitoring was performed for 16 CBCs at least once during the period July 2010 through June 2012. However, as the CBCs administered multiple Department programs, the fiscal monitoring performed was not specifically focused on ILTS Program expenditures.

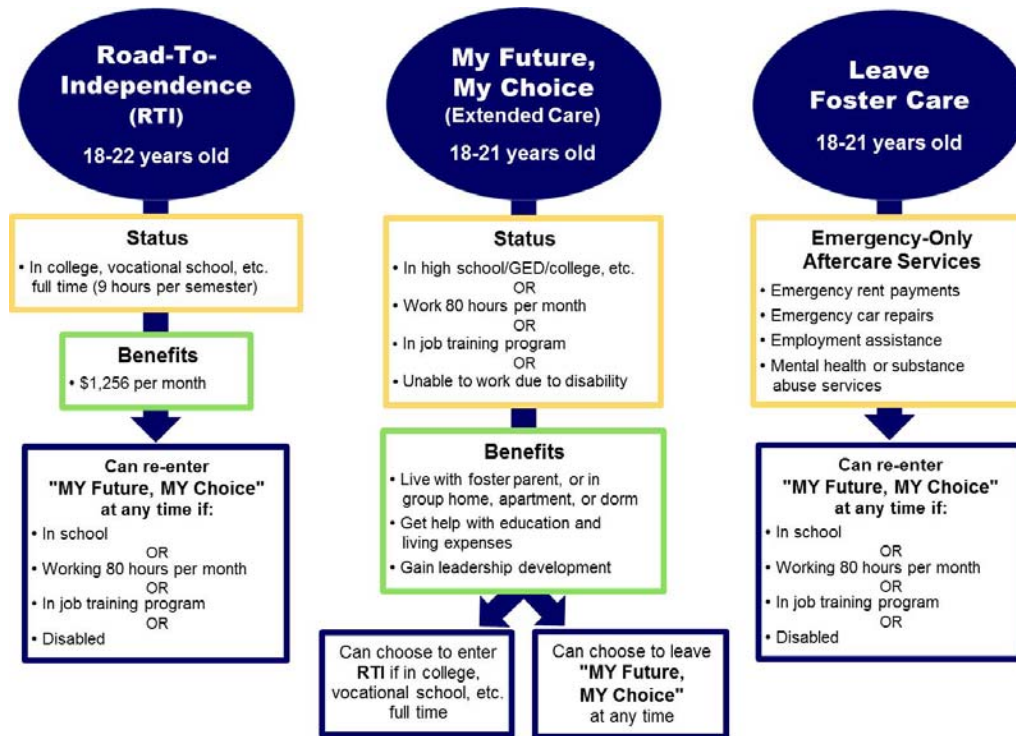
During the 2013 Legislative Session and subsequent to our audit field work, the ILTS Program was redesigned, effective January 1, 2014, to allow youth to stay in foster care until they are 21 years of age if certain requirements, such as staying in school or working, are met. The redesigned ILTS Program incorporates changes to the RTI Program and also changes the manner in which services are provided to adolescents by requiring the CBCs to pay a supplemental room and board payment to foster care parents for providing independent life skills and normalcy supports to children placed in their care who are 13 through 17 years of age.⁸ Chart 1 summarizes the redesigned ILTS Program options for youth in foster care when they reach 18 years of age.

⁷ Pursuant to Section 402.7306(1), Florida Statutes, accreditation can be obtained through the Joint Commission, the Commission on Accreditation of Rehabilitation Facilities, or the Council on Accreditation.

⁸ Chapter 2013-178, Laws of Florida, the *Nancy C. Detert Common Sense and Compassion Independent Living Act*.

Chart 1

**Options for Youth in Foster Care at Age 18
Pursuant to Chapter 2013-178, Laws of Florida**



Source: Department Web site.

Our audit procedures evaluated Department and CBC activities related to the ILTS Program requirements in effect during our audit field work and through December 31, 2013. We selected 5 of the 19 CBCs for testing: Big Bend Community Based Care, Inc. (BBCBC); Community Based Care of Central Florida (CBCCF); ChildNet, Inc. (ChildNet); Eckerd Community Alternatives (Eckerd); and Family Support Services of North Florida, Inc. (FSSNF). As discussed in the following findings, we found that, although the Department and five selected CBCs had taken some action to correct the deficiencies noted in our report No. 2011-176, further improvements are needed to ensure that the ILTS Program is administered in accordance with applicable laws, rules, and other guidelines.

Finding No. 1: Young Adult Age Eligibility

Young adults receiving financial assistance under the ILTS Program may receive assistance through State General Revenue funding or the Federal Chafee or ETV Programs, subject to certain age requirements. For example, the ETV Program provides a young adult with assistance up to \$5,000 per year, but assistance is limited to only those young adults, up to age 23, who attend a post-secondary school, either part-time or full-time. Assistance under the Chafee Program is available to young adults for any of the services identified in State law⁹ (RTI, AcSS, and TSS) up to age 21. Young adults who do not qualify for services funded by the Chafee or ETV Programs may receive State-funded Young Adult Services, which are available to young adults aged 18 but not yet 23.

For the period April 2011 through February 2012, we analyzed payments totaling approximately \$13.1 million that were funded by the Chafee and ETV Programs and State sources, and made by the five selected CBCs to 1,581 young

⁹ Section 409.1451(5), Florida Statutes (2012).

adults. Our analysis disclosed that, as similarly noted in our report No. 2011-176, finding No. 4, the CBCs made some payments to young adults who did not meet the applicable age eligibility requirements. Specifically:

- Due to the absence of CBC measures designed to timely detect when young adults turn 21 years of age, the CBCs made Chafee Program-funded payments totaling \$281,646 to 94 young adults (4 at the BBCBC, 13 at the CBCCF, 9 at ChildNet, 14 at Eckerd, and 54 at the FSSNF) who exceeded the maximum age limitation.
- The CBCs made State-funded and ETV Program-funded payments totaling \$16,173 to 12 young adults (5 at the CBCCF, 3 at ChildNet, and 4 at Eckerd) after their 23rd birthdays. Of this amount, \$13,661 was for payments based on the CBCs' policies to pay young adults for the entire month of their 23rd birthday instead of prorating payments up to their birthdates. Payments totaling \$2,512 were made to one young adult when the ChildNet CBC failed to timely terminate automatic direct deposit payments on her 23rd birthday.

In response to our audit inquiry, Department management stated that they had not established a practice of periodically analyzing, according to age, payments made to young adults to verify that the CBCs were issuing payments in compliance with applicable program requirements. Absent such analysis and CBC-implementation of effective processes for identifying when a young adult achieves the maximum age limit for applicable services and timely discontinuing payments, improper payments may occur.

Recommendation: We recommend that the CBCs implement procedures to timely detect changes in the eligibility status of young adults receiving ILTS Program assistance and, as appropriate, timely discontinue payments or revise the funding source. We also recommend that the Department periodically analyze ILTS Program payments to verify the age eligibility of the applicable young adults.

Finding No. 2: ETV Program Payment Limit

Federal regulations limit the ETV Program portion of the RTI award amount to the lesser of \$5,000 annually or the cost of attendance established by the applicable educational institution. Since the State is reimbursed by the ETV Program for 80 percent of the amount of each young adult's RTI award related to educational services, the Department established an associated annual payment limit of \$6,250.

As similarly noted in our report No. 2011-176, finding No. 5, our analysis of \$1,728,426 ETV Program-funded payments made by the five selected CBCs to 376 young adults during the period July 2011 through February 2012, disclosed that 51 young adults had received ETV Program-funded payments in excess of the annual payment limit. Payments in excess of the annual limit totaled \$22,048 and ranged from \$30 to \$3,072. CBC staff provided various reasons for the excess payments, including:

- For 2 cases with excess payments totaling \$796 at the BBCBC, ETV Program-funded payments made to third parties on behalf of the young adults were not reflected in the FSN reports generated to track ETV Program-funded payments.
- For 26 cases with excess payments totaling \$18,146 at two CBCs (14 cases at the CBCCF and 12 cases at Eckerd), although manual procedures had been established to monitor the ETV Program payment limit, those procedures were not effective to prevent or detect the excess payments.
- Staff at the ChildNet CBC indicated that they did not have specific procedures to monitor the ETV Program payment limit. We noted 23 cases with excess payments totaling \$3,106 at the ChildNet CBC.

Department staff indicated that, as an additional control, evaluations of ETV Program-funded payments made by the CBCs and their subcontractors were periodically performed by Department staff and, when instances of excess payments were detected, the CBCs were instructed to reclassify amounts exceeding the limit to either Chafee Program or State General Revenue funding sources. However, we noted that no such evaluations had been performed by Department staff for the 2010-11 and 2011-12 fiscal years.

Absent monitoring of the ETV Program payment limit, the Department has limited assurance that ETV Program-funded payments will not exceed the annual limit, or that any payments made in excess of the limit will be timely detected and reclassified to appropriate funding sources.

Recommendation: We recommend that the CBCs implement procedures to effectively monitor the ETV Program payment limit. Additionally, we recommend that the Department routinely perform monitoring of payments made by the CBCs and the CBC subcontractors to ensure that any educational services payments funded by the ETV Program in excess of the annual ETV Program payment limit are timely identified and reclassified to appropriate funding sources.

Finding No. 3: ILTS Program Financial Assistance Payments and Coding

Pursuant to State law,¹⁰ financial assistance is available for various ILTS Program service types. As shown in **EXHIBIT A**, each ILTS Program service type has its own set of services with specific eligibility requirements, financial limitations (payment limits), and funding sources. For example, SIL financial assistance is available to assist adolescents, aged 16 to 18, live independently of the daily care and supervision of an adult, with the maximum rate of assistance based on the amount an individual can earn working a 40-hour week at the Federal minimum wage.¹¹ RTI, AcSS, and TSS financial assistance is available to young adults aged 18 to 23. AcSS financial assistance may include, for example, the costs of services related to mentoring and job training. Similarly, TSS financial assistance is for services such as counseling, employment, and education services that are critical to the young adult's efforts to achieve self-sufficiency and develop a personal support system.

To facilitate the reporting and tracking of expenditures for each service type, the CBCs were responsible for properly coding the ILTS Program financial assistance payments in the FSN, or the Interim Child Welfare Services Information System (ICWSIS),¹² based on the type of service provided. To determine whether the five CBCs included in our audit properly coded financial assistance payments, we examined CBC records and case file documentation related to a total of 40 young adults (20 who received AcSS financial assistance payments totaling \$29,540 and 20 who received TSS financial assistance payments totaling \$16,467) for the period April 2011 through February 2012. We also reviewed documentation related to our analysis of 51 other individuals who had received RTI Program and SIL payments totaling \$360,570 during the period July 2011 through February 2012. We found that the CBCs coded payments made to 10 young adults to the incorrect service type. Specifically:

- Payments totaling \$14,682 made to 2 young adults for RTI Program services were incorrectly coded by CBCCF staff to the TSS service type.
- Payments totaling \$10,340 made to one young adult were incorrectly coded by FSSNF staff to the RTI Program instead of the TSS service type.
- One young adult received \$1,067 for a housing deposit, clothing allowance, and rental payment as allowed by service types AcSS and TSS. However, BBCBC staff coded the payment, along with the young adult's monthly \$515 SIL stipend, to the SIL service type.
- Four young adults received payments of \$56, \$93, \$190, and \$242, respectively, that were coded by ChildNet (1 young adult) and FSSNF (3 young adults) CBC staff, along with the individuals' \$1,256 monthly RTI Program stipend, to the RTI Program instead of the TSS service type.

¹⁰ Section 409.1451(4)(c) and (5)(a) and (c), Florida Statutes (2012).

¹¹ Department Rule 65C-28.009(8)(a), Florida Administrative Code.

¹² ICWSIS was the predecessor system to FSN for client placement and payment data. Department memorandum directed the CBCs to fully utilize FSN for financial processing by July 2011.

- For 2 young adults, Eckerd CBC staff coded payments of \$400 and \$710, respectively, along with the individuals' \$1,256 monthly RTI Program stipend, to the RTI Program instead of the AcSS service type.

We also noted that, although individuals 18 years of age or older are not eligible to receive SIL payments, the BBCBC provided both a \$1,135 RTI and a \$515 SIL payment to two young adults in the month of their 18th birthdays. As a result, each young adult received \$394 more than the \$1,256 RTI maximum monthly payment.

In response to our audit inquiries, staff at the applicable CBCs indicated that unfamiliarity with the Department's coding structure or untimely communication of changes in the young adult's or adolescent's service type caused the errors. Coding errors limit both the CBCs' and the Department's ability to accurately track and report ILTS Program financial assistance by service type and, as a result, financial assistance limitations may be exceeded. Although, effective January 1, 2014, the ILTS Program service types will change, proper coding of payments will still be necessary to ensure accurate detail reporting and tracking of ILTS Program expenditures.

Recommendation: We recommend that the Department and the CBCs provide training to staff responsible for coding ILTS Program payments and ensure that changes in service types are timely communicated.

Finding No. 4: Road-to-Independence Award Needs Assessment

RTI awards to pay for living and educational expenses are provided to eligible young adults who are enrolled full-time in high school, accredited adult education programs, vocational training programs, or post-secondary educational institutions. State law¹³ requires the CBCs to determine the RTI award amount based on an assessment of the living and educational needs of each young adult and that, in determining the amount of the RTI award, consideration be given to all income, including other grants, scholarships, waivers, earnings, and other income, that may be received by the young adult. To provide guidance to the CBCs for the conduct of needs assessments for eligible young adults, the Department established rules, issued guidelines, and developed high school needs and post-secondary needs assessment documents for CBC use.

We noted in our report No. 2011-176, finding No. 1, that the Department and the CBCs did not require that actual living and educational expenses be utilized as a basis for determining the amounts of the RTI Program awards made to youth who were high school students. Additionally, for youth who were post-secondary students, the Department and CBCs were unable to provide documentation supporting the appropriateness of the amounts of the RTI awards. As part of our follow-up procedures, we examined 19 RTI needs assessments, 9 of which were high school needs assessments with related monthly awards ranging from \$25 to \$1,256 and 10 of which were post-secondary or vocational training needs assessments with related monthly awards ranging from \$475 to \$1,256. We found that:

- The Department had not updated the high school needs assessment document to provide for a determination of the living and educational expenses of the young adults. In response to our audit inquiry, Department staff indicated that they were still considering how best to address amending the high school needs assessment.
- Of the ten post-secondary or vocational students' needs assessments, two at the CBCCF did not adequately document the students' living and educational needs or account for the tuition and fee exemptions. The failure to maintain adequate documentation limits the assurance that RTI awards are correctly calculated. Additionally, the failure to accurately determine living and educational needs and to consider any tuition and fee waivers increases the likelihood that the award amount will exceed the amount authorized.

¹³ Section 409.1451(5)(b), Florida Statutes (2012).

As previously discussed, effective January 1, 2014, RTI Program requirements will change. The changes will redefine RTI Program eligibility to exclude high school students and will establish a monthly benefit for youth based upon where they reside while attending a postsecondary school. As such, the RTI Program needs assessment requirements described in this finding may no longer be applicable. Notwithstanding the impending changes to the RTI Program, the results of our testing demonstrate the need for improved documentation to adequately support the appropriateness of amounts paid to eligible RTI Program participants.

Recommendation: We recommend that the Department and the CBCs ensure that adequate documentation is maintained to demonstrate that RTI Program benefits are paid in appropriate amounts to eligible Program participants.

Finding No. 5: Adolescent Services

To assist in a successful transition into adulthood, the Department provides ILTS Program services to adolescents in foster care. To document and monitor an adolescent's progress, State law¹⁴ and Department rules¹⁵ set forth specific tasks to be performed by services workers.¹⁶ These tasks included, based on the service types provided, assessments, staffings, delinquency record and background checks, and services worker contacts. Specifically:

- Assessments for adolescents were required at ages 13, 15, and 17. Assessments were to help determine the training and services needed for an adolescent to begin learning life skills, to measure life skills development and determine each adolescent's strengths and needs, and to determine the adolescent's skills and ability to live independently and become self-sufficient.
 - Adolescents receiving Pre-Independent Living services were to be assessed within 30 days of their 13th birthday or, if the adolescent was placed in the custody of the Department after their 13th birthday, within 60 days after the date of the court order placing the adolescent in Department custody.
 - Adolescents receiving Life Skills services were to be assessed within 30 days of their 15th birthday, or the date of the court order placing the adolescent in Department custody if after the adolescent's 15th birthday.
 - During the month following his or her 17th birthday, each adolescent in licensed out-of-home care was to be provided an independent living assessment, separate and distinct from the previous independent living assessment.
- Staffings were required annually for adolescents aged 13 and 14 and once every 6 months for adolescents aged 15, 16, and 17. Staffings included the development of plans for meeting the identified needs of the adolescents and included topics such as educational and work goals, needed life skills, SIL services, RTI awards, permanency arrangements, and plans for living arrangements after age 18 and also addressed the progress of the adolescent and any obstacles faced. The CBCs individually developed policies and procedures providing the timing of the required staffings. For example, the procedures for four of the five CBCs included in our audit required that the staffings be performed within the same time frame as the assessments. The fifth CBC had a policy requiring the staffings be performed within 90 days of the child's birthday.
- While a teen, aged 16 or 17, was receiving SIL services, services workers were to assess the teen's living arrangements and, if applicable, have a delinquency record check performed through the Department of Law Enforcement and the Department of Juvenile Justice and background checks conducted for any household

¹⁴ Section 409.1451(4), Florida Statutes (2012).

¹⁵ Department Rule 65C-28.009, Florida Administrative Code.

¹⁶ A services worker is an individual who is accountable for service delivery regarding safety, permanency, and well-being for a caseload of children and families under supervision. Services workers include individuals assigned to assist young adults who are receiving independent living services.

member aged 12 and over.¹⁷ Additionally, during the first 3 months the teen was receiving SIL services, the services workers were to have contact with the teen at intervals of twice a week, or approximately 26 contacts per teen. At least one contact a week was required to be in the teen's residence. After 3 months, the number of contacts could be reduced to no fewer than one each month in the teen's residence.

As part of our prior audit follow up, we tested the CBCs' case management documentation and case files for teens receiving Adolescent Services during the period April 2011 through February 2012 to determine whether the required assessments, staffings, delinquency record and background checks, and services worker contacts were timely performed.

Assessments and Staffings

As similarly noted in our report No. 2011-176, finding No. 7, and as shown in Table 2, our audit tests of CBC case documentation for 40 of the 1,504 adolescents receiving Pre-Independent Living services and Life Skills services disclosed that the required assessments and staffings were not always timely performed and, in one case, an assessment was not performed.

Table 2
Adolescent Assessments and Staffings
Summary of Audit Test Results

	BBCBC	CBCCF	ChildNet	Eckerd	FSSSNF	Totals
ASSESSMENTS:						
Pre-Independent Living Services:						
Number of Assessments Examined	4	5	3	6	3	21
Number of Assessments Performed Late	2	-	2	-	-	4
Number of Days Assessments Were Late	16-72	-	48-109	-	-	16-109
Number of Assessments Not Performed	1	-	-	-	-	1
Life Skills Services:						
Number of Assessments Examined	3	5	3	5	3	19
Number of Assessments Performed Late	2	4	1	-	-	7
Number of Days Assessments Were Late	32-54	13-298	239	-	-	13-298
STAFFINGS:						
Pre-Independent Living Services:						
Number of Staffings Examined	4	5	3	5	3	20
Number of Staffings Performed Late	2	-	2	-	-	4
Number of Days Staffings Were Late	61-105	-	47-49	-	-	47-105
Number of Staffings Not Performed	1	-	-	-	-	1
Life Skills Services:						
Number of Staffings Examined	3	5	3	5	3	19 ^a

^a The 19 Life Skills Services staffings we examined were performed timely.

In response to our audit inquiries, CBC staff stated that the untimely assessments and staffings resulted from receiving late notifications or referrals when adolescents became eligible for Pre-Independent Living or Life Skills services.

¹⁷ Department Rule 65C-28.009(7)(e)7.e., Florida Administrative Code.

Delinquency Record and Background Checks and Services Worker Contacts

As similarly noted in our report No. 2011-176, finding No. 6, and as shown in Table 3, our tests of four CBCs' case files for 10 of the 28 teens receiving SIL services during the period April 2011 through February 2012 disclosed instances in which the performance of required delinquency record and background checks and services worker contacts were not always documented.

Table 3
Delinquency Record and Background Checks and Services Worker Contacts
Summary of Audit Test Results

	BBCBC	CBCCF	ChildNet	Eckerd	FSSSNF	Totals
DELINQUENCY RECORD AND BACKGROUND CHECKS:						
Number of Delinquency Record Checks Required	1	1	-	-	1	3
Number of Delinquency Record Checks Not Documented as Performed	-	1	-	-	-	1
Number of Background Checks Required	2	1	1	-	1	5
Number of Background Checks Not Documented as Performed	1	1	-	-	-	2
SERVICES WORKER CONTACTS:						
Number of Teens with Twice-a-week Contacts Required (First 3 Months)	4	1	1	-	2	8
Number of Teens with Twice-a-Week Contacts Not Documented	4 ^a	1	1	-	2	8
Number of Teens with Residential Contacts Required	4	1	1	-	2	8
Number of Teens for whom Residential Contacts Not Documented	4	1	-	-	1	6
Number of Missed or Unsupported Residential or Other Contacts	47	5	4	-	7	63
Number of Teens for whom Monthly Residential Contacts Required Subsequent to First 3 Months of SIL Services	3	2	1	-	3	9
Number of Teens for whom Monthly Residential Contacts Not Documented	-	-	-	-	1	1

^a According to BBCBC case file documentation, contact was not made in one teen's residence for 9 of the 13 weeks included in the teen's first 3 months of SIL services.

In most instances, CBC staff could not explain why documentation was not available to demonstrate that the delinquency record and background checks had been conducted and the required services worker contacts had been made. However, CBC staff did indicate that some delinquency record and background checks and contacts were not performed due to a lack of coordination among services workers.

As previously discussed, effective January 1, 2014, the manner in which ILTS Program services will be provided to adolescents will change and the requirements discussed in this finding related to assessments, staffings, delinquency record and background checks, and services worker contacts may no longer be applicable. Notwithstanding the redesign of the ILTS Program, the results of our testing disclosed continued CBC noncompliance with the Program laws and rules in effect until December 31, 2013, and demonstrate the need for improvements in the CBCs' administration of the ILTS Program.

Recommendation: For the proper and effective administration of the ILTS Program, we recommend that the Department ensure that the CBCs take appropriate action to demonstrate compliance with all the Program requirements established by law and rule.

Finding No. 6: Florida Safe Families Network

FSFN is a Statewide automated child welfare information system that automates the collection of Federally mandated child welfare data and serves as the official case record. FSFN is used to document and integrate various aspects of child welfare case practice and service delivery, including intake and investigation, assessment and case planning, financial management, resource and provider management, and service delivery tracking. For the ILTS Program, FSFN is used to document and track the services provided to adolescents in Department custody who are aged 13 but not yet 18 and young adults aged 18 but not yet 23 who exited foster care at age 18. Information related to key case management activities surrounding the preparation and transition of youth as they move toward adulthood and ultimately exit care is also maintained in FSFN.

We noted in our report No. 2011-176, finding No. 8, that, although system capabilities were available, the CBCs were not required to utilize FSFN to report ILTS Program data. Subsequent to that report, the Department issued a number of publications providing guidance to the CBCs on FSFN use. However, our review of the five CBCs' ILTS Program case management data in FSFN for 40 of the 1,504 adolescents receiving Pre-Independent Living and Life Skills services disclosed instances at each CBC in which required case management activities were not documented in FSFN. Specifically, the CBC services workers had not documented in FSFN the information gathered during the assessments and staffings for 22 adolescents (2 at the BBCBC, 7 at the CBCCF, 4 at ChildNet, 7 at Eckerd, and 2 at the FSSNF). Alternatively, the CBCs continued to document the adolescents' case management activities in internal databases or purchased software applications.

While case management activities were documented and tracked separately by the CBCs, the use of the Statewide, system, FSFN, to record ILTS Program information and case management data would enable the Department to more closely track and monitor the services provided and efforts made to assist adolescents in foster care and eligible young adults become able to live independently as adults.

Recommendation: We again recommend that the Department direct the CBCs to fully utilize FSFN's functionality related to the ILTS Program.

Finding No. 7: Timely Deactivation of FSFN Access Privileges

The Department established policies and procedures governing access to the Department's network and systems, including FSFN, for new, reassigned, or terminated employees and contractors. For terminated employees, those procedures direct:

- The last supervisor of the terminated employee to notify the Department's Data Security staff to revoke all access;
- The Human Resource Unit to notify the Data Security staff of all terminated employees; and
- The Data Security staff to suspend or revoke a user access code within 15 minutes of the notification from the Human Resources Unit.

Our review of FSFN access privileges for 24 of the 1,481 employees who had separated from Department employment during the period July 2010 through February 2012, disclosed that the privileges for 17 former employees had not been timely deactivated. The access privileges for 12 of the 17 former employees remained active for periods ranging from 4 to 287 days after the employees' termination dates. FSFN access privileges for the other 5 former employees had not been deactivated as of May 30, 2012, although the employees' employment had terminated from 194 to 698 days prior to that date. Subsequent to our audit inquiry, the Department deactivated FSFN access for 2 of

the 5 former employees and indicated that FSFN access was currently appropriate for the other 3 former employees as they had been subsequently rehired by the Department or a child-placing agency.¹⁸

Absent the timely deactivation of employee access privileges upon termination, the risk is increased that access privileges could be misused by the former employee or others. In response to our audit inquiry, the Department's Human Resources Unit staff provided documentation to support that, beginning in January 2012, automated lists of terminated employees were provided daily to Data Security staff. These lists, if properly and timely prepared and utilized, should help ensure the timely deactivation of terminated employee access privileges.

Recommendation: We recommend that the Department continue its efforts to promptly deactivate terminated employee access privileges to the Department's network and information technology applications, including FSFN.

Foster Care Licensing

Family foster homes are private residences in which children who are unattended by a parent or legal guardian are provided 24-hour care.¹⁹ They are among the various facilities that make up the Department's program of emergency shelters, runaway shelters, foster homes, group homes, and other facilities that provide shelter and care for dependent children who must be placed away from their families.²⁰ During the period July 1, 2011, through February 29, 2012, approximately 3,525 family foster home licenses were issued or renewed.

Pursuant to State law,²¹ the Department established licensing requirements for family foster homes to protect the health, safety, and well-being of all children placed at these facilities. These licensing requirements addressed, for example:

- The operation, conduct, and maintenance of the homes;
- The provision of food, clothing, educational opportunities, services, equipment, and individual supplies to assure the healthy physical, emotional, and mental development of the children served;
- The appropriateness, safety, cleanliness, and general adequacy of the premises, including fire prevention and health standards, to provide for the physical comfort, care, and well-being of the children served;
- The good moral character of personnel based upon screening, education, training, and experience requirements; and
- Satisfactory evidence of financial ability to provide care for the children.

State law²² provides that the Department may authorize a licensed child-placing agency²³ to conduct the licensing study of a family foster home and then certify to the Department that the home met the Department-established licensing requirements. Child-placing agencies are often CBCs or CBC subcontractors. Department rules²⁴ specify

¹⁸ Pursuant to Department Rule 65C-30.001, Florida Administrative Code, a child-placing agency is a Department-licensed entity that places or arranges for the placement of a child in a family foster home, residential child caring agency, or approved adoptive home, and provides any of the necessary adoptive services listed under Department Rule 65C-15.001(2), Florida Administrative Code.

¹⁹ Section 409.175(2)(d), Florida Statutes.

²⁰ Section 409.165, Florida Statutes.

²¹ Section 409.175(5), Florida Statutes.

²² Section 409.175(6)(b), Florida Statutes.

²³ Department Rule 65C-30.001(20), Florida Administrative Code, defines a child-placing agency as any person, corporation, or agency, public or private, which is licensed pursuant to Section 409.175, Florida Statutes, and places or arranges for the placement of a child in a family foster home, or any corporation or agency under contract with the Department as a lead agency.

²⁴ Department Rules 65C-13.025(7) and 65C-13.028(5), Florida Administrative Code.

the processes for licensing and re-licensing foster family homes. The rules indicate that when the child-placing agency is not a CBC, the child-placing agency should submit the licensing or re-licensing application packet to the appropriate CBC for review. The CBC is then to submit the licensing or re-licensing application packet to the applicable Department regional office. The Department's regional office, prior to issuing a license, is to ensure that the application packet is complete and that all licensing requirements have been met.

During the 2009-10 fiscal year, the Department began revising the family foster home re-licensing process to allow the CBCs to review the packets and then attest, in writing, to Department regional staff that the applicant met all the family foster home re-license requirements established by State law and Department rule. The Department referred to this revised process as the "Attestation Model." During the 2011-12 fiscal year, the Department expanded the Attestation Model to include initial licensure of family foster homes and noted that CBC participation in the Attestation Model was still optional. To incorporate the Attestation Model in Department rules, proposed changes to the rules were noticed in December 2012 and July 2013.²⁵

Finding No. 8: Monitoring of CBC Re-licensing Activities Under the Attestation Model

According to Department memoranda, under the Attestation Model, Department regional office staff are to verify, prior to issuing a license, that the CBC properly completed the Attestation Form and had it notarized. Periodically, regional office staff are to review a sample of licensing and re-licensing packets to monitor the quality of the CBC activities performed under the Attestation Model.

As part of our audit, we evaluated the Department's family foster home re-licensing activities during the period July 2011 through February 2012, including the Department's regional offices' monitoring of CBC activities performed under the Attestation Model. For the five regional offices that had implemented the Attestation Model, we found that documentation was not always available to demonstrate adequate monitoring of CBC re-licensing activities. Specifically:

- One regional office had implemented the Model in July 2011, and was to conduct re-licensing packet reviews on a quarterly basis. However, the regional office could not produce the review tools for 3 of 12 reviews required for the quarter-ending September 2011. According to regional office staff, the reviews had been performed but the review tools documenting the reviews were subsequently deleted from the computer where they had been maintained and back-ups had not been created.
- Another regional office had implemented the Model in July 2009 and, during the period July 2009 through October 2011, was to conduct re-licensing packet reviews on a quarterly basis. However, regional office staff stated that documentation of the reviews was not maintained until the office began conducting semi-annual reviews in November 2011.

Absent adequate documentation of the Department's monitoring efforts, including re-licensing packet reviews, the Department cannot demonstrate that the regional office staff adequately monitored the quality of the CBCs' foster family home re-licensing activities. Such monitoring would help ensure that the foster family homes met the licensing requirements necessary to protect the health, safety, and well-being of children placed in the homes.

Recommendation: We recommend that the Department ensure that documentation is maintained to demonstrate the regional offices' timely and proper monitoring of the CBC family foster home re-licensing activities performed under the Attestation Model.

²⁵ Florida Administrative Register, Volume 38, No. 91 (dated December 14, 2012) and Volume 39, No. 128 (dated July 2, 2013).

Provider Performance Measures

The Department's statutory duties include the planning, evaluation, and implementation of complete and comprehensive Statewide programs of mental health, substance abuse, and services for dependent children and their families. To carry out its responsibilities, State law²⁶ authorizes the Department to contract with service providers throughout the State for the administration of services. As of February 2012, the Department had approximately 785 multi-year contracts totaling \$8.2 billion with various providers for mental health and substance abuse services and services for dependent children and their families.

The Department is directed by State law²⁷ to include in its service provider contracts performance measures to evaluate the outcomes and level of services provided by the service providers. State law²⁸ indicates that the standards in contracts should be adjusted to enable the Department to meet legislatively established Statewide standards. In addition, State law²⁹ requires the Department to annually submit to the President of the Senate and the Speaker of the House of Representatives a report describing the compliance of providers that provide substance abuse treatment programs and mental health services under contract with the Department. Specifically, that report is to describe the status of compliance with the annual performance standards established by the Legislature and must address the providers that meet or exceed performance standards, the providers that did not achieve performance standards for which corrective action measures were developed, and the providers whose contracts were terminated due to failure to meet the requirements of the corrective plan.

In addition to the service provider performance measures, State law³⁰ requires that performance measures and standards for Department programs be incorporated into the Department's Long-Range Program Plan (LRPP) submitted to the Governor and Legislature. Table 4 shows, for the 2010-11 fiscal year, examples of Department performance measures, standards, and results for the Family Safety and Preservation Services (FS) and the Substance Abuse and Mental Health (SAMH) Programs.

²⁶ Sections 394.457(3), 397.321(4), and 409.1671(1)(a), Florida Statutes.

²⁷ Sections 409.1671(3)(e) and 394.4573(3), Florida Statutes.

²⁸ Section 409.1671(3)(e), Florida Statutes.

²⁹ Section 394.745, Florida Statutes.

³⁰ Section 216.013, Florida Statutes.

Table 4
Department Performance Measures and Standards and Results
for the 2010-11 Fiscal Year

Program	Performance Measure Code	Performance Measure	Performance	
			Standard	Result
Family Safety and Preservation Services ^a	M0389	Percent of children reunified within 12 months of the latest removal.	65.0%	68.0%
	M0391	Percent of adoptions finalized within 24 months of the latest removal.	40.0%	50.9%
	M0671	Percent of children in out-of-home care 24 months or longer on July 1 who achieved permanency prior to their 18 th birthday and by June 30.	33.6%	33.8%
	M05178	Percent of children removed within 12 months of a prior reunification.	9.9%	11.0%
	M05180	Percent of children in out-of-home care at least 8 days but less than 12 months who had two or fewer placements.	87.0%	86.0%
Substance Abuse Services ^{a, b}	M0725	Percent of children who successfully complete substance abuse treatment.	48.0%	69.9%
	M0752	Percent of children with substance abuse who live in a stable housing environment at the time of discharge.	93.0%	95.0%
	M0753	Percentage change in clients who are employed from admission to discharge.	10.0%	14.0%
	M0755	Percent of adults who successfully complete substance abuse treatment.	51.0%	63.4%
	M0756	Percent of adults with substance abuse who live in a stable housing environment at the time of discharge.	94.0%	86.0%
Mental Health Services ^{a, b}	M0003	Average annual days worked for pay for adults with severe and persistent mental illness.	40	34
	M0012	Percent of school days seriously emotionally disturbed children attended.	86.0%	91.3%
	M0703	Percent of adults with serious mental illness who are competitively employed.	24.0%	18.0%
	M0742	Percent of adults with serious and persistent mental illnesses who live in a stable housing environment.	90.0%	95.2%
	M0743	Percent of adults in forensic involvement who live in a stable housing environment.	67.0%	77.4%
	M0744	Percent of adults in mental health crisis who live in stable housing environment.	86.0%	93.8%
	M0778	Percent of children with emotional disturbances who live in stable housing environment.	95.0%	99.8%
	M0779	Percent of children with serious emotional disturbances who live in stable housing environment.	93.0%	99.0%
	M0780	Percent of children at risk of emotional disturbance who live in stable housing environment.	96.0%	93.4%

Sources:

- ^a Performance measure codes, performance measures, performance standards, and Family Safety and Preservation Services performance results obtained from Department LRPPs for the 2011-12 through 2015-16 fiscal years and the 2012-13 through 2016-17 fiscal years.
- ^b Substance Abuse and Mental Health Services performance results obtained from *Fiscal Year 2010-2011 Legislative Status Report, Compliance with Annual Performance Outcome Standards, Per Section 394.745, Florida Statutes, SAMH Program*.

As part of our audit, we evaluated the Department's methodology and procedures for setting performance standards and monitoring FS and SAMH Program service provider performance.

Finding No. 9: Performance Standards

Department-established procurement and contract management procedures³¹ provide contract development guidance to staff. These procedures specify that the contract document consists of the standard contract and a unique Attachment 1 addressing terms not covered in the standard contract, such as provider performance standards and evaluation methodology. For SAMH contracts, the unique attachment is referred to as the *Program-Specific Model Attachment 1* (PSMA1) and is generally developed by each program office. The PSMA1 is to include the minimum programmatic information required on a Departmentwide basis for the provision of services and management of the contract.

³¹ Children and Families Operating Procedure 75-2: *Contract Management System for Contractual Services*.

The FS and SAMH service provider contracts we reviewed that had been entered into during the period July 2010 through February 2012, contained the required Attachment 1 or PSMA1 which described the contract performance measures, performance measurement terms, and performance evaluation methodology. The SAMH PSMA1s also included an Exhibit D, *Substance Abuse and Mental Health Required Performance Outcomes and Outputs*, listing the various performance standards that may apply to a SAMH service provider. Some of these performance standards were the same performance standards shown in the Department's LRPPs and, consequently, were designated as Statewide Targets (standards) on Exhibit D.

For 15 contract performance measures with Statewide standards (9 included in 5 FS Program contracts and 6 included in 5 SAMH Program contracts), we compared the contract performance standards to the standards included in the Department's LRPPs. We found that, the Statewide standards listed in each FS program contract Attachment 1 agreed with those in the Department's LRPPs. However, as shown in Table 5, we also found that the Statewide standards for all 6 performance measures specified in each SAMH contract PSMA1 Exhibit D were below the performance standard shown in the LRPP for the corresponding fiscal year.

Table 5
SAMH Contract Performance Measure Standards Compared to
Long-Range Program Plan Performance Standards

Program	Contract Number	Performance Measure Code	Performance Measure	Fiscal Year	Contract Statewide Standard ^a	LRPP Performance Standard ^b
Substance Abuse and Mental Health Services	ID102	M0756	Percent of adults with substance abuse who live in a stable housing environment at the time of discharge.	2011-12	80%	94%
	IH606	M0003	Average annual days worked for pay for adults with severe and persistent mental illness.	2011-12	30	40
		M0703	Percent of adults with serious mental illness who are competitively employed.	2011-12	15%	24%
	JD258	M0755	Percent of adults who successfully complete substance abuse treatment.	2010-11	50%	51%
	JH333	M0752	Percent of children with substance abuse who live in a stable housing environment at the time of discharge.	2011-12	85%	93%
	NH215	M0780	Percent of children at risk of emotional disturbance who live in a stable housing environment.	2011-12	90%	96%

Sources:

^a Department SAMH Program contract files.

^b Department LRPPs for the 2011-12 through 2015-16 fiscal years and the 2012-13 through 2016-17 fiscal years.

In response to our audit inquiries, SAMH Program management indicated that Statewide standards specified in the PSMA1 Exhibit Ds were developed separately from the Department's LRPPs and the contracts were developed and negotiated at the regional offices by contract managers who did not report to SAMH Program headquarters staff. Accordingly, the different lines of communication within the Department's organizational structure contributed to inconsistent standard setting for SAMH service provider contracts.

In addition to the Statewide standards, the FS and SAMH service provider contracts also included non-Statewide performance standards that were unique to a particular provider. We reviewed 27 performance measures with non-Statewide standards (3 selected from 2 FS Program contracts and 24 selected from 15 SAMH Program contracts) and noted that, for 4 of the 24 SAMH Program performance measures, the performance standards incorporated into the 2 applicable contracts were set significantly below the service providers' prior year performance results, absent any justification or written explanation. As shown in Table 6, for those 4 measures, the contract performance standards had been set 34 to 1,141 percent below the providers' prior year performance results.

Table 6

**SAMH Program Contracts with 2011-12 Fiscal Year Contract Performance Standards
Significantly Below the Providers' Prior Year Performance Result**

Program	Contract Number	Performance Measure Code	Performance Measure	(1)	(2)	Percent Different ((2)-(1))/(1)
				Contract Performance Standard ^a	Prior Year Performance Result ^{a, b}	
Substance Abuse and Mental Health Services	PH201	M0052	Minimum number of children with substance abuse problems served.	35	47	34%
		M0031	Minimum number of children with serious emotional disturbances served.	150	719	379%
	PH203	M0761	Children at risk of substance abuse problems: minimum number of children participating in level 1 prevention programs.	2,500	31,026	1,141%
		M0785	Adults at risk of substance abuse problems: minimum number of adults participating in prevention services served.	700	4,517	545%

Sources:

^a Department contract files.

^b Department's Performance Dashboard Application.

Establishing performance standards in SAMH Program service provider contracts that are consistent with the Statewide standards established in the Department's LRPPs would assist the Department in meeting the legislatively established annual performance standards. Also, by setting service provider contract performance standards at or above the providers' prior year performance results, the Department may be better able to ensure consistent, or encourage enhanced, levels of provider performance.

Recommendation: We recommend that, when performance measures relate to standard services delivered by all SAMH Program providers, the Department align the service providers' contract performance standards with the Department's performance standards. For those performance measures with standards that are unique to a service provider, we recommend that the Department establish procedures that require contract performance standards be set at or above the provider's prior performance results, unless Department management determines that justification for lower standards exists. For those instances where lower standards are justified, the procedures should provide guidance to staff for determining the lower standards and require that justification for the lower standards be documented in the contract file.

Finding No. 10: SAMH Program Provider Performance Monitoring

Provider performance related to the FS Program CBC contracts and a majority of the SAMH Program contracts is measured using FSFN or Substance Abuse Mental Health Information System (SAMHIS) data. Department staff then post the performance measurements monthly, quarterly, or annually to the Performance Dashboard Application³² accessible via the Department's Web site. For other contracts in which a provider's actual performance is not measured using FSFN or SAMHIS data, the measurement is based on performance data reported by the provider as specified in the contracts. The Department's contract managers, pursuant to State law³³ and Department procedures,³⁴ are required to periodically identify and document any differences between the required contract performance measure and the provider's actual performance. When a provider fails to meet and comply with the

³² The Department's Performance Dashboard Application provides outcome and output data at the service provider, regional, and State levels.

³³ Section 402.7305(3)(f), Florida Statutes.

³⁴ Children and Families Operating Procedure 75-2: *Contract Management System For Contractual Services*.

performance measures, the Department may allow the provider a reasonable period of time to correct the performance deficiencies before terminating the contract.

Our evaluation of the Department's efforts to periodically monitor and document provider performance for the 2010-11 fiscal year disclosed instances in which the contract manager's review of provider performance was not performed timely or documentation of the review was not available. For 30 contracts, we selected 59 performance measures (29 included in 15 FS Program contracts and 30 included in 15 SAMH Program contracts) and reviewed relevant contract file documentation. As discussed below and shown in Table 7, we found that:

- For 6 performance measures included in 3 SAMH Program contracts, Department contract managers did not maintain documentation demonstrating that actual provider performance had been compared to the contract performance standards. Absent documentation, we compared provider performance to the contract standards and noted that, for 3 of the measures included in 2 SAMH Program contracts, the providers' actual performance was below 90 percent³⁵ of the contract standard. However, there was no documentation demonstrating that the contract managers had contacted the providers regarding the underperformance.
- Although we requested, the contract manager could not locate the provider's actual performance data or documentation to support the former contract manager's evaluation for 2 performance measures included in a SAMH Program contract. These 2 measures were also not displayed in the Performance Dashboard Application.
- For 2 performance measures included in 2 SAMH Program contracts, the contract managers' reviews of provider performance was documented and indicated that the providers' actual performance was below 90 percent of the contract standards for the year. However, the contract managers did not follow up with the providers until almost 6 months after year end.

Table 7

SAMH Program Contract Performance Measures Monitoring

Program	Contract Number	Performance Measure Code	Contract Performance Standard	Actual Performance Results	Percent of Actual to Standard	Documentation of Performance Review Available?
Substance Abuse and Mental Health Services	JH311	M0016	630	355	56.3%	No
		M0742	93.0%	86.0%	92.5%	No
	JH323	M0703	15.0%	13.9%	92.4%	No
		M0018	210	333	158.6%	No
	ZHL21	M0759	95.0%	Not Available ^a	-	No
		M0016	200	Not Available ^a	-	No
	IH590	M0032	100	86	86.0%	No
		M0378	65.0%	54.2%	83.3%	No
	GHJ21	M0703	15.0%	12.4%	82.7%	Yes
		M0012	86.0%	92.2%	107.2%	Yes
	PHJ08	M0725	55.0%	50.0%	90.9%	Yes
		M0752	85.0%	67.0%	78.8%	Yes

^a Not available as the provider's actual performance data was not displayed in the Department's Performance Dashboard Application.

Sources: Department contract documents, contract manager files, and monitoring documentation.

For the instances noted above, Department staff indicated that either the contract manager did review the providers' performance but did not document his or her review within the contract file or, due to contract manager turnover,

³⁵ According to the *Fiscal Year 2009-10 Legislative Status Report, Compliance and Annual Performance Outcome Standards, Per Section 394.745, Florida Statutes, SAMH Program*, the Department considered providers that met at least 90 percent of their standard contract targets as successful and did not require corrective action.

documentation of the reviews could not be located. Additionally, SAMH Program management indicated that there was no Statewide policy or procedure addressing the actions to take related to underperforming providers or specifying a time period during which performance deficiencies must be corrected.

Absent appropriate documentation, the Department cannot demonstrate that provider performance was adequately monitored or that any underperformance was timely addressed. A Statewide policy or procedure establishing guidelines for contract managers to follow when performing and documenting their reviews of provider performance, as well as providing guidance for identifying, and time frames for following up with, underperforming providers, would help ensure that providers meet the contract performance standards and may also uncover issues, such as data reporting errors, that could affect the accurate measurement of provider performance.

Recommendation: We recommend that the Department's SAMH Program management implement policies and procedures addressing contract manager monitoring of provider performance. Such policies and procedures should include documentation requirements, as well as guidance for identifying, and time frames for following up with, underperforming providers.

PRIOR AUDIT FOLLOW-UP

Except as discussed in the preceding paragraphs, the Department had taken corrective actions for the findings included in our report Nos. 2011-037 and 2011-176.

OBJECTIVES, SCOPE, AND METHODOLOGY

The Auditor General conducts operational audits of governmental entities to provide the Legislature, Florida's citizens, public entity management, and other stakeholders unbiased, timely, and relevant information for use in promoting government accountability and stewardship and improving government operations.

We conducted this operational audit from December 2011 to November 2012 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

This operational audit focused on evaluating the actions taken by the Department and five selected community-based care lead agencies (CBCs) to correct deficiencies disclosed in our report No. 2011-176 related to the administration of the Independent Living and Transitional Services Program. This audit also focused on the Department's administration and monitoring of foster care licensing and the setting and monitoring of contracted service provider performance measures, and included a follow-up on findings noted in our report No. 2011-037. The overall objectives of the audit were:

- To evaluate management's performance in establishing and maintaining internal controls, including controls designed to prevent and detect fraud, waste, and abuse, and in administering assigned responsibilities in accordance with applicable laws, administrative rules, contracts, grant agreements, and other guidelines.
- To examine internal controls designed and placed in operation to promote and encourage the achievement of management's control objectives in the categories of compliance, economic and efficient operations, the reliability of records and reports, and the safeguarding of assets, and identify weaknesses in those internal controls.

- To determine whether management had corrected, or was in the process of correcting, all applicable deficiencies disclosed in audit report Nos. 2011-037 and 2011-176.
- To identify statutory and fiscal changes that may be recommended to the Legislature pursuant to Section 11.45(7)(h), Florida Statutes.

This audit was designed to identify, for those programs, activities, or functions included within the scope of the audit, deficiencies in management's internal controls, instances of noncompliance with applicable governing laws, rules, or contracts, and instances of inefficient or ineffective operational policies, procedures, or practices. The focus of this audit was to identify problems so that they may be corrected in such a way as to improve government accountability and efficiency and the stewardship of management. Professional judgment has been used in determining significance and audit risk and in selecting the particular transactions, legal compliance matters, records, and controls considered.

As described in more detail below, for those programs, activities, and functions included within the scope of our audit, our audit work included, but was not limited to, communicating to management and those charged with governance the scope, objectives, timing, overall methodology, and reporting of our audit; obtaining an understanding of the program, activity, or function; exercising professional judgment in considering significance and audit risk in the design and execution of the research, interviews, tests, analyses, and other procedures included in the audit methodology; obtaining reasonable assurance of the overall sufficiency and appropriateness of the evidence gathered in support of our audit's findings and conclusions; and reporting on the results of the audit as required by governing laws and auditing standards.

Our audit included the selection and examination of transactions and records. Unless otherwise indicated in this report, these transactions and records were not selected with the intent of statistically projecting the results, although we have presented for perspective, where practicable, information concerning relevant population value or size and quantifications relative to the items selected for examination.

An audit by its nature does not include a review of all records and actions of agency management, staff, and vendors, and as a consequence, cannot be relied upon to identify all instances of noncompliance, fraud, abuse, or inefficiency.

In conducting our audit we:

- Obtained an understanding of the Department's FSFN and SAMHIS information technology general and application controls, assessed the risks of those controls, evaluated whether selected general and application information technology controls were in place, and tested the effectiveness of the controls.
- Obtained and reviewed the Department's 6-month responses to report Nos. 2011-037 and 2011-176, reviewed Department policies and procedures and other documentation, inquired of Department personnel regarding Department efforts to correct the noted deficiencies, and performed various audit procedures, as addressed below, to determine if corrective action was taken.

Independent Living and Transitional Services (ILTS) Program

- For five selected CBCs: Big Bend Community Based Care, Inc. (BBCBC); Community Based Care of Central Florida (CBCCF); ChildNet, Inc. (ChildNet); Eckerd Community Alternatives (Eckerd); and Family Support Services of North Florida, Inc. (FSSNF), examined case file and payment documentation and analyzed ILTS Program data for the period April 1, 2011, through February 29, 2012, to determine the extent of the CBCs' compliance with governing laws, rules, and Department guidelines. Specifically:
 - Examined case file documentation and available FSFN data for 21 (4 from the BBCBC, 5 from the CBCCF, 3 from ChildNet, 6 from Eckerd, and 3 from the FSSNF, and) of the 441 adolescents who received Pre-Independent Living services.

- Examined case file documentation and available FSN data for 19 (3 from the BBCBC, 5 from the CBCCF, 3 from ChildNet, 5 from Eckerd, and 3 from the FSSNF) of the 1,063 adolescents who received Life Skills services.
 - Examined case file documentation for 10 (4 from the BBCBC, 2 from the CBCCF, 1 from ChildNet, and 3 from the FSSNF) of the 28 teens who received Subsidized Independent Living (SIL) financial assistance.
 - Examined case file and payment documentation for 20 (3 from the BBCBC, 4 from the CBCCF, 4 from ChildNet, 4 from Eckerd, and 5 from the FSSNF) of the 232 young adults who received Aftercare Support Services (AcSS) financial assistance.
 - Examined case file and payment documentation for 20 (3 from the BBCBC, 8 from the CBCCF, 3 from ChildNet, 4 from Eckerd, and 2 from the FSSNF) of the 590 young adults who received Transitional Support Services (TSS) financial assistance.
 - Examined case file documentation, including needs assessments, for 19 (3 from the BBCBC, 5 from the CBCCF, 5 from ChildNet, 3 from Eckerd, and 3 from the FSSNF) of the 1,241 young adults who received Road to Independence (RTI) financial assistance.
- For 1,500 individuals, analyzed ILTS Program payment data totaling approximately \$9.7 million during the period July 1, 2011, through February 29, 2012, to determine the reasonableness of payments coded to multiple service types and paid to individuals within the same month.
 - Analyzed approximately \$1.7 million in Chafee Education and Training Vouchers Program funds expended on behalf of 376 young adults during the period July 1, 2011, through February 29, 2012, to determine whether the amounts expended for each recipient exceeded the \$6,250 annual payment limit.
 - Analyzed approximately \$11.5 million in RTI payments and \$81,809 in SIL payments made during the period July 1, 2011, through June 30, 2012, to determine whether the amounts expended exceeded the annual and monthly payment limits of \$15,072 and \$1,256, respectively. Reviewed documentation for 51 individuals who received a monthly payment exceeding the \$1,256 monthly payment limit.
 - Analyzed RTI, SIL, TSS, and AcSS payments totaling approximately \$13.1 million and made during the period April 1, 2011, through February 29, 2012, to determine whether payments were improperly made to young adults who should have aged out of the ILTS Program at age 23.
 - Analyzed approximately \$4.2 million in Chafee Foster Care Independence Program funds expended during the period April 1, 2011, through February 29, 2012, to determine whether Chafee Program funds were improperly used to provide assistance for young adults over the age of 21.
 - Performed other analytical procedures to determine whether adolescents who received ILTS Program services during the period July 1, 2010, through February 29, 2012, met applicable eligibility criteria, such as having been in foster care longer than 6 months and exiting foster care at age 18.
 - Evaluated FSN data for 40 (7 from the BBCBC, 10 from the CBCCF, 6 from ChildNet, 11 from Eckerd, and 6 from the FSSNF) of the 1,504 adolescents who received Pre-Independent Living and Life Skills services during the period April 1, 2011, through February 29, 2012, to determine the extent to which the CBCs were utilizing the system for ILTS Program case management.
 - Reviewed the FSN access privileges for 24 of the 1,481 employees who separated from Department employment during the period July 2010 through February 2012 to determine whether the access privileges had been timely deactivated.

Foster Care Licensing

- Interviewed Department regional office staff to obtain an understanding of the family foster care licensing and re-licensing policies and procedures and obtained a listing of the CBCs performing re-licensing under the Attestation Model.

- Evaluated Department family foster care licensing and re-licensing processes to determine whether those processes ensured and documented that only qualified providers who met the applicable requirements were licensed to provide out-of-home care to children who must be placed away from their families.
- Inspected 28 (4 from the BBCBC, 4 from the CBCCF, 4 from ChildNet, 8 from Eckerd, and 8 from the FSSNF) of the 3,525 licensing packets processed by the five CBCs and the Department's regional offices during the period July 2011 through February 2012 to determine whether the licensing process was performed in compliance with governing laws, rules, and other guidelines.
- Reviewed memoranda of agreement, documentation related to 25 monitoring reviews, and CBC contract file documentation from the Department's six regional offices to evaluate the adequacy of the Department's monitoring of the CBCs' family foster home re-licensing activities performed under the Attestation Model.

Provider Performance Measures

- Interviewed Department staff to obtain an understanding of the methodology and procedures used to set provider performance targets and for reporting, documenting, and monitoring provider performance outcomes for FS and SAMH Program service provider contracts.
- Obtained and analyzed actual provider performance data posted to the Department's Performance Dashboard Application, comparing, in some cases, the actual performance to the performance standards listed in FS and SAMH Program service provider contracts to identify declining provider performance, detect instances of potential provider underperformance, and select contracts for further testing.
- From the population of 785 FS and SAMH Program contracts:
- Inspected documentation associated with 7 FS and 18 SAMH Program contracts to determine whether 42 selected performance measure targets included in one or more of those 25 contracts were properly set according to Department methodology, reasonable when compared to the Department-level targets for the same measures or the provider's prior performance, and that any deviations from Department-level targets or the provider's prior performance were identified and justified.
- Requested and reviewed documentation for 15 FS and 15 SAMH Program contracts related to 59 selected performance measures including in one or more of those 30 contracts to determine whether the Department's contract managers had adequately monitored provider performance and documented provider compliance with governing laws, rules, and Department procedures.

Other

- Performed various other auditing procedures, including analytical procedures, as necessary, to accomplish the objectives of the audit.
- Communicated on an interim basis with applicable State officials to facilitate the timely resolution of issues involving controls and noncompliance.
- Prepared and submitted for management response the findings and recommendations that are included in this report and which describe those matters requiring corrective action.

AUTHORITY

Section 11.45, Florida Statutes, requires that the Auditor General conduct an operational audit of each State agency on a periodic basis. Pursuant to the provisions of Section 11.45, Florida Statutes, I have directed that this report be prepared to present the results of our operational audit.



David W. Martin, CPA
Auditor General

MANAGEMENT'S RESPONSE

In response letters dated September 6, 2013, through September 20, 2013, the Interim Secretary of the Department and the 5 CBCs at which we evaluated activities related to the ILTS Program requirements provided responses to our audit findings and recommendations. The letters are included as **EXHIBIT C**.

EXHIBIT A
INDEPENDENT LIVING TRANSITION SERVICES (ILTS) PROGRAM
DESCRIPTION OF PROGRAM COMPONENTS AND TYPES OF SERVICES PROVIDED

Program Components and Types of Services	Examples of Specific Services Provided	Age Group Served	Foster Care Status	Initial Request for Services	Academic Requirements	Ongoing Determination Basis	Payment Limits	Funding Source
Pre-Independent Living	Life skills training, educational field trips, and conferences.	13 but not yet 15	In Department custody. ^a	N/A	N/A	Annual staffing.	NA ^c	Federal Chafee Program and State General Revenue.
Life Skills	Independent living skills training, including training to develop banking and budgeting skills, interviewing skills, parenting skills, and time management or organizational skills, educational support, employment training, and counseling.	15 but not yet 18	In Department custody. ^a	N/A	N/A	Staffing every 6 months.	NA ^c	Federal Chafee Program and State General Revenue.
Subsidized Independent Living (SIL)	Financial assistance for living arrangements that allow the child to live independently of the daily care and supervision of an adult.	16 but not yet 18	In Department custody for at least 6 months prior to entering SIL, with a goal of either adoption, long-term licensed care, or independent living. ^a	N/A	Full-time educational program making adequate progress.	Continue to demonstrate independent living skills.	Based on what an individual can earn working a 40-hour week at the Federal minimum wage.	Federal Chafee Program and State General Revenue.
Aftercare Support (AcSS)	Housing, electric, water, gas, sewer service, food, mentoring, tutoring, mental health services, substance abuse counseling, life skills classes, parenting classes, job and career skills training, counselor consultations, temporary financial assistance, and financial literacy skills training.	18 but not yet 23 ^b	Leave foster care at age 18.	Prior to age 23.	N/A	N/A	NA ^c	Federal Chafee Program and State General Revenue.
Transitional Support (TSS)	Financial, housing, counseling, employment, education, mental health, disability, and other services.	18 but not yet 23 ^b	Be or have been in the legal and/or physical custody of Department at age 18 and spent at least 6 months in foster care before age 18. ^a	Prior to age 23.	N/A	Transition plan completed every 3 months.	NA ^c	Federal Chafee and ETV Programs and State General Revenue.
Road to Independence (RTI) Awards	Financial assistance for education.	18 but not yet 23 ^b	In licensed foster care or SIL at age 18 or currently living in licensed foster care or SIL or, after reaching age 16, adopted from foster care or placed with a court-approved dependency guardian and spent a minimum of 6 months in foster care immediately preceding such placement or adoption and spent at least 6 months in foster care before age 18.	Prior to age 21.	Full-time enrollment in post-secondary, high school, or GED program.	Annual renewal, maintain adequate progress.	\$1,256 per month and \$15,072 per year.	Federal Chafee and ETV Programs and State General Revenue.

^a “In Department custody” refers to foster care placements.

^b Federal Chafee Program assistance is available up to age 21 and ETV Program assistance is available to age 23 only if the young adult attends a post-secondary school.

^c NA – No applicable payment limit.

Sources: Department Rules 65C-28.009 and 65C-31, Florida Administrative Code, and Section 409.1451, Florida Statutes (2012).

EXHIBIT B
SUMMARY OF CONTRACT OVERSIGHT UNIT (COU) MONITORING
FOR THE ILTS PROGRAM DURING THE 2010-11 AND 2011-12 FISCAL YEARS

CBC Lead Agency	COU Monitoring Report Date	Pre-Independent Living	Life Skills	Subsidized Independent Living	Aftercare Support	Transitional Support	Road to Independence	Corrective Action Plan Required?
Lakeview Center	6/2/2011	NA	NA	NA	NA	NRF	NA	No
	8/6/2012	CD	CD	NA	CD	CD	CD	Yes
Partnership for Strong Families, Inc.	6/2/2011	CD	CD	CD	NRF	CD	CD	Yes
Family Support Services of North Florida, Inc.	4/26/2011	CD	CD	CD	CD	NRF	CD	No
Community Partnership for Children, Inc.	1/13/2011	NA	CD	NA	NA	CD	CD	No
	2/6/2012	CD	CD	CD	NA	NA	CD	Yes
St. Johns County Board of County Commissioners	10/20/2010	CD	CD	NA	NRF	NRF	CD	Yes
	9/29/2011	NRF	NRF	NA	NA	NA	NA	Yes
Kids First of Florida, Inc.	1/12/2011	CD	CD	NA	NRF	NRF	NRF	Yes
	9/27/2011	CD	CD	NA	NA	NA	NA	Yes
Sarasota Family YMCA, Inc.	12/9/2010	CD	CD	NRF	NA	CD	CD	Yes
	12/2/2011	CD	CD	CD	NA	NRF	CD	Yes
Eckerd Community Alternatives	5/19/2011	CD	CD	NA	NRF	CD	CD	Yes
	8/16/2012	CD	CD	NA	NRF	NRF	CD	Yes
Children's Network of Southwest Florida, Inc.	6/17/2011	CD	CD	CD	NRF	NRF	CD	Yes
	7/17/2012	CD	CD	CD	NRF	CD	CD	No
Community Based Care of Central Florida, Inc.	1/4/2012	CD	CD	CD	CD	CD	CD	Yes
Community Based Care of Brevard, Inc.	4/3/2012	CD	CD	CD	CD	CD	CD	Yes
Our Kids of Miami-Dade/Monroe, Inc.	2/7/2011	CD	CD	CD	NA	NA	NA	Yes
	9/19/2012	CD	CD	NA	CD	CD	CD	Yes
Kids Central, Inc.	6/13/2011	CD	CD	NRF	NRF	NRF	NRF	Yes
	8/6/2012	CD	CD	NA	NA	NRF	NRF	Yes
Heartland for Children, Inc.	4/7/2011	CD	CD	CD	NRF	NRF	NRF	Yes
	2/6/2012	CD	CD	NA	CD	NRF	CD	Yes
United for Families, Inc.	4/12/2011	CD	CD	NRF	NRF	NRF	CD	Yes
	6/5/2012	CD	CD	NRF	NRF	NRF	NA	Yes
Child and Family Connections, Inc.	5/10/2012	CD	CD	CD	NA	NA	CD	Yes
ChildNet, Inc.	4/22/2011	CD	CD	CD	NRF	NRF	CD	Yes
	3/15/2012	CD	CD	NRF	NA	NA	CD	Yes

Legend:

CD - Compliance deficiencies related to the provision of services identified in the applicable monitoring report.

NRF - No reported findings, area was included in the scope of the on-site monitoring.

NA – Provision of services not included in the scope of the on-site monitoring.

Source: Department monitoring reports.

EXHIBIT C
MANAGEMENT'S RESPONSES

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EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES



State of Florida
Department of Children and Families

Rick Scott
Governor

Esther Jacobo
Interim Secretary

September 20, 2013

Mr. David Martin
Auditor General
G74 Claude Pepper Building
111 West Madison Street
Tallahassee, FL 32399-1450

Dear Mr. Martin:

Thank you for your August 7 letter and the accompanying preliminary and tentative audit findings and recommendations on the audit of *Independent Living Transition Services, Foster Care Licensing, and Provider Performance Measures*. The Department generally concurs with the findings of your report. Our responses to the findings and recommendations are attached.

If you or your staff have any questions about Independent Living Transition Services or Foster Care Licensing findings, please contact Andrea Tulloch, Director of Child Welfare, at 850-922-2298. For questions about the Provider Performance Measures findings, please contact Hayden Mathieson, Director of Substance Abuse and Mental Health, at 850-921-8461.

We appreciate the work of your staff and look forward to working with them on future engagements.

If I may be of further assistance, please let me know.

Sincerely,

A handwritten signature in black ink, appearing to read "Est Jacobo".

Esther Jacobo
Interim Secretary

Attachment

1317 Winewood Boulevard, Tallahassee, Florida 32399-0700

Mission: Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

RESPONSE TO PRELIMINARY AND TENTATIVE AUDIT FINDINGS

FLORIDA DEPARTMENT OF CHILDREN AND FAMILY SERVICES

INDEPENDENT LIVING TRANSITION SERVICES,

FOSTER CARE LICENSING, AND

PROVIDER PERFORMANCE MEASURES

Operational Audit

INDEPENDENT LIVING TRANSITION SERVICES (ILTS) PROGRAM

Finding No. 1: Federal funds from the Chafee Foster Care Independence Program and Chafee Education and Training Voucher (ETV) Program, as well as State funds, were used to provide assistance to ineligible young adults, including young adults who should have aged out of the ILTS Program at age 23.

Recommendation: We recommend that the CBCs implement procedures to timely detect changes in the eligibility status of young adults receiving ILTS Program assistance and, as appropriate, timely discontinue payments or revise the funding source. We also recommend that the Department periodically analyze ILTS Program payments to verify the age eligibility of the applicable young adults.

Department Response: The Department concurs. It is critical that the community based care (CBC) services providers develop procedures that allow for the timely detection of changes in the eligibility status of young adults receiving ILTS Program assistance and, as appropriate, discontinue payments or change funding sources in a timely manner.

Four major changes to Section 409.1451, Florida Statutes, enacted during the 2012-13 Florida Legislative Session, will support improved CBC oversight of ILTS payments. These four major changes include:

- Educational stipend payments are limited to young adults currently enrolled in eligible postsecondary academic institutions. Young adults completing secondary and GED educational programs will no longer be eligible for educational support service payments.
- Educational stipend payment eligibility requires young adults to provide the Department and CBC access to their academic records.
- Educational stipend payments are set at a fixed rate of \$1,256 monthly.
- Young adults cannot receive simultaneous financial payments from multiple ILTS programs.

These changes will not be universally implemented across the entire ILTS population on January 1, 2014. Section 409.175, Florida Statutes, (2013 ed.) permits young adults participating in Road-to-Independence (RTI) prior to January 1, 2013 to continue in the existing RTI program until they exit the

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

program or cease to meet the eligibility requirements under which they entered. As the legislative changes become fully integrated into the ILTS system, CBCs should gain better control over ILTS payments because:

- The number of participants in the educational stipend payment program will be reduced. Lower participant number will require less fiscal monitoring of the educational stipend payments.
- The Department and CBCs will have direct access to participant's educational records, which will make it easier to identify changes in participants' academic records that would deem them ineligible for continued payments.
- The educational stipend payment will be set to a fix rate of \$1,256 per month. This should eliminate educational stipend overpayments.
- Without simultaneous multiple payments from multiple ILTS programs going to one participant, the potential financial coding errors should lessen and monitoring will be simplified.

In addition to the statutory changes outlined above, the Department is in the process of reorganizing ILTS program structure and staffing. The Department has designated a FTE that will be coordinating with the Department, Contract Oversight Unit and CBC service providers on issue related to ILTS contract compliance and continued improvement.

Finding No. 2: ETV Program-funded payments were made in excess of established Program payment limits. Additionally, the Department and the CBCs had not implemented monitoring procedures to identify excess payments or payments made to ineligible young adults.

Recommendation: We recommend that the CBCs implement procedures to effectively monitor the ETV Program payment limit. Additionally, we recommend that the Department routinely perform monitoring of payments made by the CBCs and the CBC subcontractors to ensure that any educational services payments funded by the ETV Program in excess of the annual ETV Program payment limit are timely identified and reclassified to appropriate funding sources.

Department Response: The Department concurs. As noted above, changes enacted during the 2012-13 Legislative Session fixed the educational stipend payment amount at the fixed rate of \$1,256 monthly and eliminated the ability of young adults to receive simultaneous payments from multiple ILTS programs. These changes should simplify CBC monitoring efforts of possible overpayments. In addition to the statutory changes outlined above, the Department is in the process of reorganizing ILTS program structure and staffing. Specifically, the Department has designated an FTE that will coordinate with the Office of Child Welfare, the Contract Oversight Unit and CBC service providers on issues related to ILTS contract compliance and continued improvement.

Finding No. 3: In some instances, the CBCs coded payments to the incorrect ILTS Program service type and made payments for ineligible adolescents.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

Recommendation: We recommend that the Department and the CBCs provide training to staff responsible for coding ILTS Program payments and ensure that changes in service types are timely communicated.

Department Response: The Department concurs. All hiring and training activities of CBC level staff are conducted and managed at the CBC level. Any issue related to increased or improved training in these areas must be addressed at the CBC level; however, the Department's Community-Based Care (CBC) Fiscal Oversight Unit (FOU) continues to provide oversight of the fiscal components of Florida's outsourced child welfare system. FOU staff continually conduct onsite visits to community-based care lead agencies to develop tools for monitoring and to provide technical assistance to community-based care lead agencies and the Department's contract managers on fiscal issues.

Finding No. 4: The CBCs did not always maintain documentation to demonstrate that Road-to-Independence Program benefits were paid to eligible Program participants in appropriate amounts.

Recommendation: We recommend that the Department and the CBCs ensure that adequate documentation is maintained to demonstrate that RTI Program benefits are paid in appropriate amounts to eligible Program participants.

Department Response: The Department concurs. As noted earlier, laws enacted during the 2012-13 Legislative Session fixed the educational stipend at \$1,256 monthly. This will ensure that program recipients are receiving the appropriate amount.

Finding No. 5: The CBCs did not always maintain documentation to demonstrate that timely assessments, staffings, delinquency record and background checks, and services worker contacts were performed for adolescents receiving ILTS Program services.

Recommendation: For the proper and effective administration of the ILTS Program, we recommend that the Department ensure that the CBCs take appropriate action to demonstrate compliance with all the Program requirements established by law and rule.

Department Response: The Department concurs. During the 2012-13 Legislative Session, major changes were made to the manner in which teens between the ages of 13-17 are provided Life Skills training. Section 409.145, Florida Statutes now requires foster parents of teens between the ages of 13-17 to receive a supplemental payment of 10 percent of the current teen foster care board rate as payment for supporting normalcy activities and Life Skills acquisition.

Additional statutory changes require coordination of case planning activities between case management and foster parents to identify and develop teen's Life Skills. At each Judicial Review, the foster parent is required to submit signed documentation attesting that the teen was provided an opportunity to develop the identified Life Skills and the results of the foster parent's efforts. These

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

changes should help ensure that case management, foster parents and the court are fully engaged in the development, delivery, and oversight of Life Skills training for teens in foster care.

Finding No. 6: The CBCs did not fully utilize the Florida Safe Families Network (FSFN) to document and maintain adolescent assessment and staffing information.

Recommendation: We again recommend that the Department direct the CBCs to fully utilize FSFN's functionality related to the ILTS Program.

Department Response: The Department concurs. As a result of changes enacted during the 2012-13 Legislative Session, major modifications are being made to the Florida Safe Families Network (FSFN) Independent Living module. Projected statewide training on new and modified FSFN functionality is projected to be complete by December 20, 2013. The Department will once again emphasize to CBCs the importance of utilizing all FSFN functionality.

Finding No. 7: The Department did not always timely deactivate FSFN access privileges when users separated from Department employment.

Recommendation: We recommend that the Department continue its efforts to promptly deactivate terminated employee access privileges to the Department's network and information technology applications, including FSFN.

Department Response: The Department of Children and Families continues its efforts to promptly deactivate terminated employee access privileges to the Department's network and information technology applications, including FSFN. Upon termination or separation of an employee from the Department, Data Security and Human Resources staff are immediately notified, and deactivation of security access is completed in a timely manner. As an additional security measure, automated lists of terminated employees are provided daily to Data Security staff to validate that security privileges are deactivated.

FOSTER CARE LICENSING

Finding No. 8: The Department's regional offices could not always demonstrate that the CBCs' foster care re-licensing activities had been subjected to appropriate monitoring.

Recommendation: We recommend that the Department ensure that documentation is maintained to demonstrate the regional offices' timely and proper monitoring of the CBC family foster home re-licensing activities performed under the Attestation Model.

Department Response: The Department concurs. As a result of reviewing practices and procedures surrounding the licensing process, including the attestation model for licensing, the Department staff at headquarters and in the regions have agreed on the following measures to increase accountability in the Community-Based Care re-licensing process:

- Establish a calendar for quarterly attestation packet reviews that is agreed upon and shared with Regional licensing staff, CBC contract managers, and CBC licensing staff.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

- Create a shared drive folder at the Regional office specifically for documenting quarterly re-licensing reviews.

PROVIDER PERFORMANCE MEASURES

Finding No. 9: The Substance Abuse and Mental Health Program's provider performance measure standards were set below the Department's performance measure standards specified in its Long Range Program Plans and, in some cases, were set significantly below the providers' prior year performance results.

Recommendation: We recommend that, when performance measures relate to standard services delivered by all SAMH Program providers, the Department align the service providers' contract performance standards with the Department's performance standards. For those performance measures with standards that are unique to a service provider, we recommend that the Department establish procedures that require contract

performance standards be set at or above the provider's prior performance results, unless Department management determines that justification for lower standards exists. For those instances where lower standards are justified, the procedures should provide guidance to staff for determining the lower standards and require that justification for the lower standards be documented in the contract file.

Department Response: This finding documents inconsistency in the establishment of standards for performance measures. The Department accepts these findings as reported.

The Department has taken action to align contract performance standards to the Long Range Program Plan process through the implementation of the Managing Entity business model. As of July 1, 2013, the Department has fully implemented a Managing Entity business model for the management of the majority of its SAMH client service contracts. Under this model, the Department contracts with seven regional administrative service organizations for the administration of all subcontracts with SAMH service providers within specific catchment areas. This model allows the Department to implement a more standardized approach to contract management, while encouraging administrative efficiencies and quality improvement initiatives within each region.

As part of the Managing Entity contract, the Department has aligned the standards in the Managing Entity contracts to the Department standards established in the Long Range Program Plan. Managing Entities are responsible for contracting with local behavioral health providers, and for ensuring that performance at the subcontractor level meets or exceeds Department targets. The Managing Entity has discretion to adjust individual subcontractor targets below the Department's target, but with the understanding that the overall system of care must meet or exceed the Department's expectations.

As part of the Department's review of Managing Entity performance, targets may be adjusted as part of the Long Range Program Plan process. The Department will ensure that overall performance expectations meet or exceed Long Range Program Plan targets and that subcontractor targets are adjusted, when indicated, to reflect trends in performance.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

Finding No. 10: The Department did not always document a periodic comparison of Substance Abuse and Mental Health Program service providers' actual performance to the performance measure standards incorporated in the providers' contracts.

Recommendation: We recommend that the Department's SAMH Program management implement policies and procedures addressing contract manager monitoring of provider performance. Such policies and procedures should include documentation requirements, as well as guidance for identifying, and time frames for following up with, underperforming providers.

Department Response: The preliminary findings document inconsistent performance measure evaluation practices related to contracts managed by SAMH Program in the Department's Southeastern and Central Regions during Fiscal Years 2010-11. The Department accepts these findings as reported. Prior to this preliminary report, the Department took actions to improve contract management performance as part of the implementation of the Managing Entity model.

The Managing Entities are now responsible for all contract management functions previously conducted by Department staff, including the requirement to conduct routine performance analyses of each subcontracted provider according to standards in the Department's Operating Procedures. Each Managing Entity is now required to report on subcontractor provider compliance with performance measures, including those established in the Long Range Program Plan.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES



September 6, 2013

David Martin, CPA
Auditor General
State of Florida
G74 Claude Pepper Building
111 West Madison St.
Tallahassee, FL 32399-1450

Dear Mr. Martin:

The following is our statement of our proposed corrective actions for the preliminary and tentative finding Nos. 1, 2, 3, and 5:

1. Since the change from ICWSIS to FSFN, the standard practice for our CBC had been to maintain an excel spreadsheet for youth in RTI status in order to monitor youth turning 21. Now the financial reports provided from FSFN include dates of birth. Current practice is to end date the service on the youths 21st birthday at the same time the service is created to avoid overpayment of Chafee Program funds. We also review the date of birth for each child on the financial reports to identify any that may have been missed and identify those that need to be changed to another funding source during the following month.
2. ETV funding caps are being monitored using financial reports in FSFFN. ETV funds are tracked for each child to determine the appropriate time to end service and start under another funding source. Payment download pages are pulled from FSFN to assure calculations are accurate and avoid overspending of ETV program funds.
3. Training is scheduled for staff in preparation of implementing the new IL Legislation as it will be in effect January 1, 2014. This legislation, albeit the rule has not be promulgated, would discontinue SIL going forward and the current SIL youth will attrition out quickly as they are few.

BUILDING STRONGER FAMILIES IN OUR COMMUNITY
525 NORTH MARTIN LUTHER KING JR. BLVD. TALLAHASSEE, FLORIDA 32301 (850)410-1020 (850)4101076
WWW.BIGBENDCBC.ORG

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

4. Again, due to new IL Legislation the new rule needs to be promulgated before we can move forward with a plan as Life Skill Assessments and services responsibility will lie with the caretakers. It is believed that background checks would remain a case management responsibility as well as frequent visits.

Should there be any questions please contact Pam East, COO, 410.1020.

Respectfully,


Mike Watkins, CEO

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES



September 11, 2013

Mr. David W. Martin, CPA
Auditor General
State of Florida
G74 Claude Pepper Building
111 West Madison Street
Tallahassee, Florida 32399-1450

Dear Mr. Martin,

Please find enclosed our agency's response to the Department of Children and Families, Independent Living Transition Services Audit.

Please let me know if you need any additional assistance at (321) 441-2060.

Sincerely,

Glen Casel
President / Chief Executive Officer

Enclosure



Administrative Support Center • 4001 Pelee St, Ste 200, Orlando, FL 32817
Ph (321) 441-2060/Fax (407) 681-0560



EXHIBIT C (CONTINUED) MANAGEMENT RESPONSES

CBCCF Response to the Auditor General
Department of Children and Families
Independent Living Transition Services Audit

Finding No. 1: Federal funds from the Chafee Foster Care Independence Program and Chafee Education and Training Voucher (ETV) Program, as well as State funds, were used to provide assistance to ineligible young adults, including young adults who should have aged out of the ILTS Program at age 23.

- Due to the absence of CBC measures designed to timely detect when young adults turn 21 years of age, the CBCs made Chafee Program-funded payments totaling \$281,646 to 94 young adults (13 at the CBCCF) who exceeded the maximum age limitation.
- The CBCs made State-funded and ETV Program-funded payments totaling \$16,173 to 12 young adults (5 at the CBCCF) after their 23rd birthdays. Of this amount, \$13,661 was for payments based on the CBCs' policies to pay young adults for the entire month of their 23rd birthday instead of prorating payments up to their birth dates.

AG Recommendation: We recommend that the CBCs implement procedures to timely detect changes in the eligibility status of young adults receiving ILTS Program assistance and, as appropriate, timely discontinue payments or revise the funding source. We also recommend that the Department periodically analyze ILTS Program payments to verify the age eligibility of the applicable young adults.

CBCCF Response:

The CBCCF Service Authorization, Placement and Payment Procedure has been implemented and attached to include a specific and thorough review process by our Independent Living Managers, Information & Eligibility and Finance staff to ensure that the Chafee age limit of 21 years old and the ETV/Overall ILTS payment age limit of 23 years old are not exceeded. On a monthly basis, FSFN payment data (invoice information) is used to create monthly reports. The FSFN payment data is used to validate that Chafee, ETV and Overall ILTS age limits have not been exceeded on the FSFN side utilizing the CBCCF IL Chafee & ETV Age Limits and Children Age Out CBCCF - IL Turning 23 years old Reports. CBCCF will continue to pay the young adult throughout their 23rd birthday month using other funding sources including non-DCF. Furthermore, the CBCCF FSFN Solomon Reconciliation Policy has been implemented as a final check and balance to ensure that if incorrect ILTS payment codes were used for a young adult past their 21st and 23rd birth dates, respectively, the payment is immediately updated in FSFN to an alternative funding source and re-classed or recouped in our CBCCF Solomon Accounting system.

Finding No. 2: ETV Program-funded payments were made in excess of established Program payment limits. Additionally, the Department and the CBCs had not implemented monitoring procedures to identify excess payments or payments made to ineligible young adults.

- For 26 cases with excess payments totaling \$18,146 at two CBCs (14 cases at the CBCCF), although manual procedures had been established to monitor the ETV Program payment limit, those procedures were not effective to prevent or detect the excess payments.

AG Recommendation: We recommend that the CBCs implement procedures to effectively monitor the ETV Program payment limit. Additionally, we recommend that the Department

EXHIBIT C (CONTINUED) MANAGEMENT RESPONSES

CBCCF Response to the Auditor General
Department of Children and Families
Independent Living Transition Services Audit

routinely perform monitoring of payments made by the CBCs and the CBC subcontractors to ensure that any educational services payments funded by the ETV Program in excess of the annual ETV Program payment limit are timely identified and reclassified to appropriate funding sources.

CBCCF Response:

The CBCCF Service Authorization, Placement and Payment Procedure has been implemented and attached to include a specific and thorough review process by our Independent Living Managers, Information & Eligibility and Finance staff to ensure that the ETV limit of \$6250 is not exceeded. On a monthly basis, FSFN payment data (invoice information) is used to create monthly reports. The FSFN payment data is used to validate that ETV spending limit has not been exceeded on the FSFN side utilizing the CBCCF ETV Spending Limits Report. Furthermore, the CBCCF FSFN Solomon Reconciliation Policy has been implemented as a final check and balance to ensure that if the ETV funding code is incorrectly used exceeding the ETV spending limit, the payment is immediately corrected in FSFN and re-classed in our CBCCF Solomon Accounting system.

Finding No. 3: In some instances, the CBCs coded payments to the incorrect ILTS Program service type and made payments for ineligible adolescents.

- Payments totaling \$14,682 made to 2 young adults for RTI Program services were incorrectly coded by CBCCF staff to the TSS service type.

AG Recommendation: We recommend that the Department and the CBCs provide training to staff responsible for coding ILTS Program payments and ensure that changes in service types are timely communicated.

CBCCF Response:

CBCCF has provided ongoing training regarding the correct use of RTI, TSS or Aftercare program coding and required documentation needed for each payment to our CBCCF Independent Living & Information & Eligibility staff and our Independent Living subcontractor. In addition, CBCCF has assigned a dedicated Information & Eligibility staff member to receive and review all required application documentation prior to FSFN coding and release of payment. If the required documentation to substantiate the payment is not received by our staff, then the IL payment utilizing RTI, TSS or Aftercare program coding will not be authorized and released by CBCCF.

Finding No. 4: The CBCs did not always maintain documentation to demonstrate that Road-to-Independence Program benefits were paid to eligible Program participants in appropriate amounts.

- Of the ten post-secondary or vocational students' needs assessments, two at the CBCCF did not adequately document the students' living and educational needs or account for the tuition and fee exemptions. The failure to maintain adequate documentation limits the assurance that RTI awards are correctly calculated. Additionally, the failure to accurately determine living and educational needs and to consider any tuition and fee waivers increases the likelihood that the award amount will exceed the amount authorized.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

CBCCF Response to the Auditor General
Department of Children and Families
Independent Living Transition Services Audit

AG Recommendation: We recommend that the Department and the CBCs ensure that adequate documentation is maintained to demonstrate that RTI Program benefits are paid in appropriate amounts to eligible Program participants.

CBCCF Response:

CBCCF's Independent Living Managers and then subsequently, the dedicated Information & Eligibility staff member will receive and review all application documentation including the required needs assessment adequately documenting the students' living and educational needs and also accounting for any tuition and fee exemptions prior to FSFN coding and release of payment. The Information & Eligibility staff will hold the application and payment until the needs assessment is correctly updated and resubmitted by our Independent Living subcontractor.

Finding No. 5: The CBCs did not always maintain documentation to demonstrate that timely assessments, staffings, delinquency record and background checks, and services worker contacts were performed for adolescents receiving ILTS Program services.

AG Recommendation: For the proper and effective administration of the ILTS Program, we recommend that the Department ensure that the CBCs take appropriate action to demonstrate compliance with all the Program requirements established by law and rule.

CBCCF Response:

CBCCF has issued and received Corrective Action from our current Independent Living subcontractor. We will continue to monitor their compliance on all program requirements established by law and rule until December 31, 2013.

Finding No. 6: The CBCs did not fully utilize the Florida Safe Families Network (FSFN) to document and maintain adolescent assessment and staffing information.

- Specifically, the CBC services workers had not documented in FSFN the information gathered during the assessments and staffings for 22 adolescents (7 at the CBCCF).

AG Recommendation: We again recommend that the Department direct the CBCs to fully utilize FSFN's functionality related to the ILTS Program.

CBCCF Response:

CBCCF has provided FSFN training to our current Independent Living subcontractor and we will continue to monitor compliance regarding this issue.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

CBCCF Response to the Auditor General
Department of Children and Families
Independent Living Transition Services Audit

CBCCF Service Authorization, Placement and Payment Procedure

A. Independent Living Monthly Stipend

1. The CBCCF Information & Eligibility Staff (IES) Designee, CBCCF Operations Representative and the Independent Living Coordinator meet on a monthly basis to review Independent Living youth services.
 - New youth to the program are identified.
 - Youth with services ending are identified.
 - Youth with changes to services or changes to monthly stipend amounts are identified.
 - Youth who are receiving ETV services are reviewed for spending limits in the service category.
 - IL applications are scanned to the FSFN File cabinet.
2. The IES Designee will review and verify the IL log used in the money IL meeting for the following information:
 - New youth to the program were input onto the IL Log with correct service and amount as indicated on the IL application.
 - Youth's foster care placement was end dated in FSFN and ARGOS.
 - The rate does not exceed the needs assessment rate.
 - The authorization is still current and valid.
 - The child is over 18 years of age and under 23 years of age.
 - Youth who are receiving ETV services have not exceeded the \$6250.00 spending limit for the service category.
3. If any of these elements cannot be verified or are found to not meet requirements, the IES Designee will contact the CBCCF Operations Representative and/or the Independent Living Coordinator for more information and supporting documentation.
4. Once the IL Log has been reviewed for accuracy the IES Designee will review the monthly Youth receiving ETV funds report generated utilizing past FSFN service data for the fiscal year to ensure the service limits have not been exceed.
5. Once the IL Log and the ETV report are reviewed for accuracy the IES Designee will input the service information into FSFN.
6. Upon completion of IL service entry into FSFN, the FSFN Pre authorization reports will be scheduled, the report will be run, the service payments reviewed and reconciled to the monthly IL log.
7. Once the FSFN Pre Authorization report and the IL log reconcile, the IES Designees will schedule the FSFN Pending Invoice Report, run the report, and ensure the pending invoices scheduled for release reconcile to the FSFN pre authorization report.
8. The IES Designee will send the FSFN Pending Invoices and the monthly IL log to the IES Manager for review, authorization and invoice release to finance for payment.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

CBCCF Response to the Auditor General
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CBCCF Finance FSFN Solomon Reconciliation Procedure

It is the policy of Community Based Care of Central Florida to reconcile FSFN reports to Solomon reports each time payment files are received and at month end.

A. Review FSFN data at upload

1. The Accounting Manager reviews the FSFN export spreadsheet sent by the Information & Eligibility Staff (IES). The spreadsheet includes date, batch number, batch amount, and service type.
2. If data looks acceptable, the Accounting Manager imports the information into Solomon for payment.
3. The Accounting Manager compares the Solomon AP Edit Report total to the total amount released by IES.
4. Checks are cut if no variances are discovered.
5. All variances are researched in Solomon and with IES.

B. Pull OCA roll up reports

1. The Accountant pulls OCA roll up reports from FSFN BOE (Business Objects Enterprise) during the first week of every month.
2. Reports are pulled based on the contract number. Separate reports are pulled for Seminole County and Orange / Osceola Counties.
3. The reports must be pulled with the transaction month being set to the month that just ended. The service month will be every month that has transpired year to date plus the next month. EXAMPLE – when reconciling October payments, the transaction month will be October, but the service months will be July, August, September, October and November.
4. Reports must be pulled and saved in two formats – PDF (which is the version included with our monthly invoice submission) and CSV (which can be converted to excel format to allow for sorting of data prior to comparison).

C. Pull Custom Report from FRX

1. The Accountant or Director of Finance pulls the Custom Report from FRX during the first week of every month.
2. The Custom Report provides monthly and year to date revenue and expense amounts by subaccount number based on Solomon data.

D. Complete OCA Reconciliation spreadsheet

1. Information from the FSFN import files is entered into the OCA Reconciliation spreadsheet by OCA / Subaccount number.
2. Information from the Custom report is entered into the OCA Reconciliation spreadsheet by OCA / Subaccount number.
3. Current month general ledger accruals and prior month accrual reversals are added to the OCA Reconciliation spreadsheet.
4. Payments to Great Oaks Village (GOV) included in the OCA Roll up reports are deducted on the OCA Reconciliation report for Orange and Osceola counties. These payments go directly to GOV bypassing CBCCFL, so the payments will not be reflected in our detail general ledger.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

CBCCF Response to the Auditor General
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5. General ledger adjustments are noted on the OCA Reconciliation report (voided checks, etc.).
 6. All information is totaled to a variance column.
 7. Comments are added to explain the variances.
- E. Export detail general ledger reports**
1. Detail general ledger reports are exported from Solomon for all subaccounts / OCAs that have a variance on the OCA Reconciliation report.
- F. Compare detail general ledger reports to OCA Roll up reports**
1. Detail general ledger reports are compared to OCA roll up reports by OCA, payee, child, month and amount to pin point variances.
- G. Research all variances**
1. Once variances have been identified, Solomon Vendor Maintenance module is used to review all payments made to the payee and child to determine if payments were previously made in Solomon and FSFN is being updated, or payments have been previously reflected in FSFN and Solomon is being updated
 2. Argos client information is also used to research variances
 3. IES is contacted for help in resolving variances as needed.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES



Board of Directors

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Patricia Rowe-King

Samuel Ambrose

Sarah Thomas

September 6, 2013

Mr. David W. Martin
Auditor General
State of Florida
G74 Claude Pepper Building
111 West Madison Street
Tallahassee, Florida 32399

Dear Mr. Martin,

Enclosed is ChildNet's corrective action plan in response to the findings and recommendations of your audit of the Department of Children and Families Independent Living Transition Services program. ChildNet does not dispute the findings and recognizes this as an opportunity to improve our processes and the services delivered to our youth.

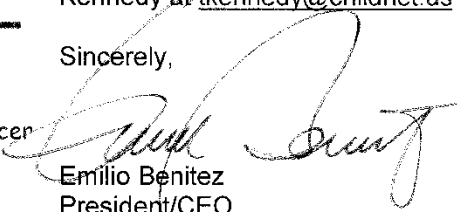
Should any additional information be needed please contact the Assistant Vice President of Adoption and Youth Services, Theresa Kennedy at tkennedy@childnet.us.

Emilio Benitez

President/

Chief Executive Officer

Sincerely,


Emilio Benitez
President/CEO

Our Mission:

To protect abused,
abandoned and
neglected children in
the communities
we serve.



313 N. State Road 7 • Plantation, FL 33317 • Phone (954) 414-6000 • Fax (954) 414-6019 • www.ChildNet.us
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EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

ChildNet 2013 Independent Living



Finding	Action Items	Target Date	Leads	Comments / Updates
Finding 1: Young Adult Age Eligibility	- A tracking sheet has been developed to include the youth's birthdate. Each month after payments are distributed the spreadsheet will be reviewed to ensure that the appropriate funding category was used. In the event payment was coded incorrectly the correction will be made in the system. - ChildNet finance staff will attend any future training offered by the Department of Children and Families. - A sample of cases will be reviewed to determine compliance and this item will be deemed complete with 90% compliance.	By the 10th of each month TBD by DCF 12/31/2013	Faye Jackson- Financial Information Systems Coordinator Department of Children and Families Kraig Keller- Director of Continuous Quality Improvement	

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

ChildNet 2013 Independent Living



Finding	Action Items	Target Date	Leads	Comments / Updates
Finding 2: ETV Program Payment Limit	- Each month after payments are distributed a spreadsheet is created of all clients receiving ETV funding to track the monthly stipend issued to ensure that total funding in this category does not exceed \$6,250. In the event a client total stipend is greater than the balance left on the ETV tracking log the amount of the excess will be charged to the Road to Independence funding. - ChildNet finance staff will attend any future training offered by the Department of Children and Families. - A sample of cases will be reviewed to determine compliance and this item will be deemed complete with 90% compliance.	By the 10 th of each month	Faye Jackson-Financial Information Systems Coordinator	
		TBD by DCF	Department of Children and Families	
		12/31/2013	Kraig Keller-Director of Continuous Quality Improvement	

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES



ChildNet 2013 Independent Living

Finding	Action Items	Target Date	Leads	Comments / Updates
Findings 3: ILTS Program Financial Assistance Payments and Coding	More frequent communication between finance and program staff regarding the processing of application will take place. Each department has identified a single point of contact.	Began 8/1/2013	Faye Jackson- Financial Information Systems Coordinator	
	Refresher training will be provided to program staff to ensure the appropriate funding sources are being used.	9/30/13	Debbie Juliano- Administrative Assistant Youth Services Yasmin Mendoza Director of Youth Services	
	ChildNet program and finance staff will attend any future training offered by the Department of Children and Families.	TBD by DCF	Department of Children and Families	
	A sample of cases will be reviewed to determine compliance and this item will be deemed complete with 90% compliance.	12/31/2013	Donna Skees AVP of Administration	

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

ChildNet 2013 Independent Living



Finding	Action Items	Target Date	Leads	Comments / Updates
Finding 5: Adolescent Services	Assessment for Subsidized Independent Living: Advocate will conduct a home assessment/walk through of the proposed residence prior to the youth moving in and a complete home study of the youth's home environment using the unified home study within 2 weeks of the youth's move in date. If there will be adults or other youth residing in the home than the home study must be approved prior to placement. Background checks of any household member aged 12 and over and delinquency record check, if applicable, will be included in the home study packet.	To begin 8/30/2013	Yasmin Mendoza	As of 12/31/2013 the Subsidized Independent Living Program will no longer be an option for youth as it has been taken out of statute.
	Assessment of youth 13, 15, and 17: Independent Living Unit Staff Assistant (IL-USA) will send email correspondence by the 5th of the month to foster home, group home, and shelter providers of all upcoming or past due assessments for youth in licensed care. IL-USA will conduct weekly follow-up with providers until assessment is completed and submitted.	To begin 9/1/13	Yasmin Mendoza	
	Once the assessment is received the IL-USA will complete the assessment scoring and log the completion on the IL Master Tracking Log.	To begin 9/1/13	Yasmin Mendoza	



ChildNet 2013 Independent Living

EXHIBIT C (CONTINUED) MANAGEMENT RESPONSES

Finding	Action Items	Target Date	Leads	Comments / Updates
	IL-USA will provide the original Assessment and Scoring to the primary Child Advocate and a copy will be scanned to the IL Advocate for data entry into FSFN and filing in the FSFN filing cabinet.	To begin 9/1/13	Yasmin Mendoza	
	A sample of cases will be reviewed to determine compliance and this item will be deemed complete with 90% compliance.	12/31/13	Kraig Keller	
	IL Staffings for 13, 14, 15, 15.5, 16, 16.5, 17, 17.5 & 17.9: Staffings will continue to be scheduled by the IL-USA and chaired by the designated staff. At the end of each scheduled staffing day the staffing chair will provide documentation as to which staffings were completed or missed. If the staffing was completed a signed copy will be scanned to the IL-USA who will scan a copy into the FSFN filing cabinet. If the staffing does not occur the IL-USA will inform the primary Child Advocate and Supervisor that they will need to conduct the IL staffings with the youth prior to the end of the month. Once the staffing is completed they are to scan a copy to the IL-USA who will scan a copy into the FSFN filing cabinet.	To begin 9/1/13	Yasmin Mendoza	

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES



ChildNet 2013 Independent Living

Finding	Action Items	Target Date	Leads	Comments / Updates
	- The IL-USA will continue to track all completed staffings on the master tracking log, updates to the log will be made on a weekly basis. - A sample of cases will be reviewed to determine compliance and this item will be deemed complete with 90% compliance.	To begin 9/1/13 12/31/2013	Yasmin Mendoza Kraig Keller	

Page 6 of 6

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES



100 Starcrest Drive | Clearwater, Florida 33765
P (727) 461-2990 | F (727) 442-5911
EckerdCBC.org

Accreditations
PRAESIDIUM

September 16, 2013

David W. Martin, CPA
Auditor General of the State of Florida
G74 Claude Pepper Building
111 West Madison Street
Tallahassee, FL 32399-1450

Re: Eckerd Community Alternatives Written Response to Report No. 2011-176

Camelot Community Care, in Partnership with Eckerd Community Alternatives, has reviewed and assessed the findings as reported by the State of Florida Auditor General. Pursuant to contract # ECA-ILS-CCC-FY14 to provide Independent Living Transition Services to youth and young adults ages 13 through age 22, Camelot Community Care and Eckerd Community Alternatives have identified the following corrective action to address finding Nos. 1, 2 and 3.

Finding No.1: Federal Funds from the Chafee Foster Care Independence Program and Chafee Education and Training Voucher (ETV) Program, as well as State Funds, were used to provide assistance to ineligible young adults, including young adults who should have aged out of the ILTS at age 23.

Corrective Action: Camelot Community Care has instituted a reporting mechanism to insure the Chafee eligible service recipients' age is tracked to insure the proper code/funding source is utilized once the young adults reach the age of 21. In addition, Camelot Community Care has instituted a reporting mechanism to monitor and prepare for a youth approaching their 23rd birthday, the age of ineligibility. This reporting mechanism will insure that state-funded and ETV-funded payments will not be administered past a recipients 23rd birthday but instead payment will be prorated up to their birthday. These mechanisms will be validated by both Camelot's Director of Independent Living Services and Quality Assurance Specialist on a monthly basis.

Finding No. 2: ETV Program-funded payments were made in excess of established program payment limits. Additionally, the Department and the CBC's had not implemented monitoring procedures to identify excess payments or payments made to ineligible young adults.

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES



Corrective Action: Camelot Community Care has instituted a reporting and tracking mechanism to insure ETV Program-funded payments, specific to the post-secondary RTI award, are monitored on a monthly basis to insure the payment limit of \$6250 is not exceeded. This mechanism will be validated by both Camelot's Director of Independent Living Services and Quality Assurance Manager on a monthly basis.

In addition, Eckerd Community Alternatives Revenue Management Department will review the "Payment by Child" report quarterly from FSFN to ensure that the youth receiving ETV funds do not exceed the limit of \$6250. A quarterly report will allow Revenue Management to project the date the recipient will reach the limit of \$6250 allowing for an additional validation.

Finding No. 3: In some instances, the CBCs coded payments to incorrect ILTS program service type and made payments for ineligible adolescents.

Corrective Action: Camelot Community Care has instituted a policy to insure a two tier validation approach to monitor eligibility and the appropriate code payment type for each area of service. The two tier approach consists of the ILS Director identifying the service and code type in the "Monthly Check Request" report, which will subsequently be validated by Camelot's Quality Assurance Specialist.

In conclusion, as a result of training provided to Camelot Community Care ILS administrative staff and through ongoing quality assurance monitoring conducted by Camelot Community Care and Eckerd Community Alternatives, the above findings have been addressed to avoid any further future findings.

Sincerely,

Loyita Shirley
Chief of Community Based Care
Eckerd Community Alternatives

EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES



4057 Carmichael Avenue-Suite 101
Jacksonville, FL 32207
Phone 904-421-5800 Fax 904-421-5801

September 16, 2013

Mr. David W Martin
Auditor General
State of Florida
G74 Claude Pepper Building
111 West Madison Street
Tallahassee, Florida 32399-1450

Dear Mr. Martin:

Thank you for the preliminary and tentative findings related to the review of our Independent Living Transition Services for FY 10-11 and into FY 11-12. Below is the statement of explanation and corrective action for the three findings.

Finding No1: Federal funds from the Chaffee Foster Care Independence Program and Chaffee Education and Training Voucher (ETV) Program, as well as State funds, were used to provide assistance to ineligible young adults, including young adults who should have aged out of the ILTS Program at age 23.

During the time the payment system was changing from ICWSIS to FSNF, Family Support Services of North Florida (FSSNF) made payments to 54 young adults who exceeded the maximum age limitation.

Corrective Actions: In June 2012 FSSNF notified DCF Contract Manager and DCF Finance of the error and reclassified the payments as directed.

FSSNF implemented and continues to follow a process to report and review recipient ages prior to making payments from Chaffee funds.

Finding No 3: In some instances, the CBCs coded payments to the incorrect ILTS Program service type and made payments for ineligible adolescents.

Payments totaling \$10,340 made to one young adult were incorrectly coded by FSSNF staff to the RTI ETV Program instead of the TSS ETV service type.

FSSNF IL staff did not realize that there were two types of ETV and that they needed to identify the correct type for each youth to use ETV funding.



EXHIBIT C (CONTINUED)
MANAGEMENT RESPONSES

Corrective Actions: FSSNF made IL staff aware that ETV payment requests needed to identify if the youth is in RTI or in TSS. The change form that is used to communicate with finance was updated to include that information.

Three young adults received ETV payments that were coded by FSSNF staff, along with the individual's \$1,256 monthly RTI Program stipend, to the RTI Program instead of to the TSS service type.

FSSNF accepts the findings.

Corrective Actions: FSSNF will revise its practices to ensure that payments to RTI OCA do not exceed \$1,256.00 per month.

Finding No 5: The CBCs did not always maintain documentation to demonstrate that timely assessments, staffing, delinquency record and background checks, and service worker contacts were performed for adolescents receiving ILTS Program services.

FSSNF had two youth in SIL that were reviewed. FSSNF has continually improved processes over the years to ensure child safety and adherence to statute and code.

Corrective Actions: FSSNF now has a dedicated FTE to monitor Independent Living activities for teens, including SIL. This person staffs the case when an SIL application is made and ensures all required documentation is completed; then monitors worker compliance with visits and conducts compliance staffing when contacts or other required activities are not completed.

Thank you for the opportunity to provide an explanation and corrective action for each of the findings.

Sincerely,



E. Lee Kaywork
Chief Executive Officer



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