

oppaga

Justification Review



February 2001

Report No. 01-08

DCF's Adult Services Program Meeting Goals; Data Reliability, Case Management Need Work

at a glance

- Program services have been effective in preventing further harm to adult victims of abuse, neglect, or exploitation and in keeping disabled adults in private homes rather than keeping them in more costly nursing homes. However, the program should be more timely in closing adult protective investigation cases.
- Some program data are unreliable, which impedes effective program management and accountability.
- The program lacks statutory authority to provide case management for optional state supplementation recipients, even though this activity represents one-half of the program's case management workload.
- The program could reduce the number of optional state supplement case management visits, which would reduce the need for 23.75 FTE positions (\$885,000) or free staff to do other work.
- Further privatization of the case management function for disabled adults is not currently feasible.

Purpose

This report presents the results of our program evaluation and justification review of the Department of Children and Families' Adult Services Program. State law directs the Office of Program Policy Analysis and Government Accountability (OPPAGA) to conduct justification reviews of each program during its second year of operating under a performance-based program budget.¹ Our office is to review each program's performance and identify alternatives for improving services and reducing costs. Appendix A summarizes our conclusions regarding each of nine areas the statute directs OPPAGA to consider in a program evaluation and justification review.

Background

The Adult Services Program serves some of Florida's most vulnerable residents. Among the program clients are residents who are unable to protect themselves from being abused, neglected, or exploited by another person, such as a caregiver, or are victims of self-neglect. Clients also include disabled adults aged 18 through 59 who need assistance to remain in their own homes or with caregivers. The Legislature's intent is to provide services to these clients to prevent them from being further harmed or to avoid more costly nursing home care.

¹ Section 11.513, F.S.

Justification Review

The Adult Services Program has two components.

- **Adult protective services** are intended to prevent further harm from occurring to adults who are victims of abuse, neglect, or exploitation.
- **In-home services for disabled adults** provide care to help clients remain in family-type living arrangements in private homes and avoid placement in nursing homes.

Adult Protective Services

Chapter 415, *Florida Statutes*, establishes a program designed to protect vulnerable adults from abuse, neglect, and exploitation. These vulnerable adults may experience abuse, neglect, or exploitation by second parties or may fail to take care of themselves adequately.²

Florida statutes require any person who knows or has reasonable cause to suspect any abuse, neglect, or exploitation of vulnerable adults to report that information to the Florida Abuse Hotline.³ Allegations may include physical abuse, environmental neglect, inadequate food, mental injury, exploitation by deception and intimidation, and conditions hazardous to the victim's health. The hotline screens these allegations to determine whether the information meets the criteria of an abuse report. As shown in Exhibit 1, the number of adult abuse reports has increased by 65% since Fiscal Year 1993-94.

Adult protective services include the functions discussed below.

Adult protective investigations are conducted for all abuse reports. These investigations determine whether there is evidence that abuse, neglect, or exploitation occurred; whether there is an immediate and long-term risk to the victim; and whether the victim needs additional services to safeguard his or her well-being.

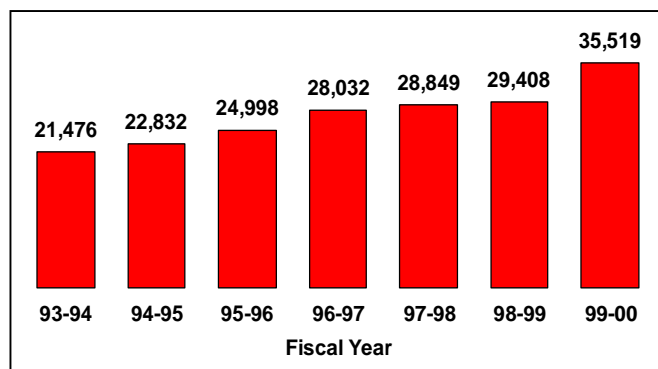
² Section 415.102(26), *F.S.*, defines "vulnerable adult" as "a person 18 years of age or older whose ability to perform the normal activities of daily living or to provide for his or her care or protection is impaired due to a mental, emotional, physical, or developmental disability or dysfunction, or brain damage, or the infirmities of aging."

³ Section 415.1034, *F.S.*

Abuse report investigations must be completed within 60 days of their commencement. (Appendix B shows a flow chart of the adult abuse report investigation process.)

Exhibit 1

The Number of Reports Alleging Abuse, Neglect, or Exploitation of Vulnerable Adults Has Risen in Recent Years



Source: Department of Children and Families, Florida Abuse Hotline Information System.

Case management is provided to clients who need additional services in order to be protected from further harm. Case management may be intensive, involving frequent contact with the victim (such as two or three visits a week) and typically lasts for three to six months. Case management may involve removing victims from an unsafe environment and relocating them to a setting where their needs can be safely and suitably met, such as a nursing home or an assisted living facility. Some clients may receive optional state supplementation (OSS), which is a stipend consisting of state and federal funding that enables them to avoid institutionalization and to live in an assisted living facility or adult family care home.⁴ Case management for OSS recipients includes assessing clients for eligibility and need for care, developing case plans, periodic client visits, and annually reassessing eligibility.

Referral services are provided to some clients to help ensure that they are not re-victimized in the future. Referrals to state or local social

⁴ For calendar year 2000, the OSS stipend is \$697 per month, of which the state's maximum obligation is \$228. For Fiscal Year 2000-01, the Legislature appropriated \$26.5 million of general revenue funding for these stipends.

services agencies may include services such as meals, periodic home visits, personal care, transportation assistance, and related support services.

In-home services for disabled adults

Chapter 410, *Florida Statutes*, establishes a program that encourages providing care for disabled adults in family-type living arrangements in private homes as an alternative to institutional or nursing home care. Program clients are disabled adults aged 18 through 59 years with permanent physical or mental limitations that restrict their ability to perform normal activities of daily living and their capacity to live independently. During Fiscal Year 1999-2000, the program served 4,485 disabled clients.

The program provides case management and support services. Case management involves assessing client needs and eligibility, arranging for services, and periodically reviewing the effectiveness and continued need for services. Support services include personal care assistance to help clients conduct activities of daily living such as bathing, grooming, eating, and dressing. Caregivers who reside with clients may also receive a stipend (\$100 per month) to assist them with the cost of providing housing, food, clothing, and incidentals for the client.

Program organization

The Department of Children and Families administers the Adult Services Program. The central Adult Services Program office in

Tallahassee is responsible for administrative and policy development functions such as planning, budgeting, quality assurance, and ensuring the integrity of program data. The department also administers the Florida Abuse Hotline in Tallahassee to receive reports alleging abuse, neglect, or exploitation of any vulnerable adult.⁵

Program services are provided locally through the department's 15 service district offices (see Appendix C). District staff conduct adult protective investigations and provide case management and referral services for adult abuse victims. District staff also either directly provide or contract with private service providers for case management and support services for disabled clients. The district offices are responsible for monitoring the performance of these private providers.

Program resources

For Fiscal Year 2000-01, the Legislature appropriated \$40.6 million for the Adult Services Program. This includes \$23.9 million for the adult protective services component and \$16.7 million for the in-home services for disabled adults component. The Legislature authorized 589 FTEs for the program for Fiscal Year 2000-01.

The program receives funding from several sources, of which the largest single source (63%) is general revenue. Exhibit 2 shows the sources of program funding for Fiscal Year 2000-01.

⁵ The Florida Abuse Hotline telephone number is 1-800-962-2873.

Exhibit 2

Most Adult Services Funding Comes from the State's General Revenue Account

Funding source	Adult Protective Services	In-Home Services for Disabled Adults	Total
General Revenue Fund	\$16,094,401	\$9,370,410	\$25,464,811
Administrative Trust Fund	2,989,595	325,195	3,314,790
Tobacco Settlement Trust Fund	59,846	1,846,838	1,906,684
Social Services Block Grant Trust Fund	4,807,744	442,708	5,250,452
Operations and Maintenance Trust Fund	0	4,708,858	4,708,858
Total	\$23,951,586	\$16,694,009	\$40,645,595

Source: General Appropriations Act for Fiscal Year 2000-01.

Program Performance —

To assess the program's performance, we analyzed performance-based program budgeting (PB²) data for Fiscal Years 1998-99 and 1999-2000 and other relevant performance information. Our assessment was hindered by weaknesses in the department's client information system. Due to these weaknesses, the program was unable to provide basic information such as the number of clients receiving some specific program services. This is problematic because it impedes the department's ability to provide the Legislature and other policymakers with reliable performance data and hinders program managers' efforts to effectively manage the program. However, we were able to use selected department data to assess the extent to which program services are successful in preventing adult abuse victims from being further harmed, in closing adult protective investigations in a timely manner, and in keeping disabled adults out of nursing homes.

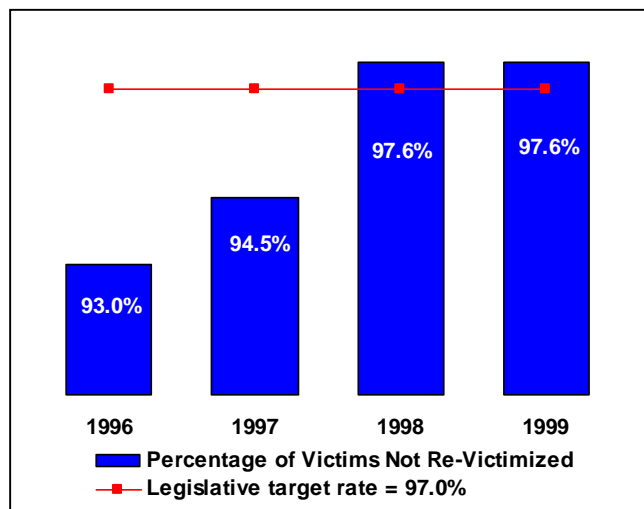
We concluded that the program has generally met its legislative goals in protecting clients from further harm and in keeping disabled clients in their own homes and thus avoiding placement in nursing homes. However, the program could be more timely in closing abuse investigation cases.

Program services help to protect adult abuse victims from further harm

A primary program goal is to provide services to adult victims of abuse, neglect, or exploitation to reduce their risk of further harm. Of the 1,950 adult abuse victims who received program services during calendar year 1999, only 47 (2.4%) were subsequently re-victimized within six months after their case was closed. This level of performance meets the department's internal standard that 97% of program clients will not be further victimized within six months of case closure. As shown in Exhibit 3, the department has met this target in the past two fiscal years.

Exhibit 3

The Percentage of Victims Receiving Services Who Are Not Re-victimized Has Met the State Target for the Most Recent Two Years



Source: Department of Children and Families, Florida Abuse Hotline Information System.

As shown in Exhibit 4, clients who receive services are less likely to be re-victimized than clients who do not need services and much less likely to be re-victimized than clients who are deemed by program staff to need services, but who specifically decline to receive needed services. This indicates that program services are beneficial in helping to prevent re-abuse from occurring.

Exhibit 4

Clients Who Were Victimized During 1999 and Received Services Were Less Likely to Be Re-Victimized than Victims Who Did Not Receive Services

Category	Number		Percentage
	Number	Re-Victimized	Re-Victimized
Received services	1,950	47	2.4%
Services not needed	2,484	88	3.5%
Services refused	418	30	7.2%

Source: Department of Children and Families, Florida Abuse Hotline Information System.

The department should be more timely in closing adult protective investigations

As expressed in s. 415.104(4), *Florida Statutes*, the department is to close all adult protective

investigation cases within 60 days from the time the investigation begins. Failure to close investigative cases in a timely manner may negatively affect clients because it leaves an uncertainty about the victims' risk of further abuse, neglect, or exploitation. For the past two fiscal years, the department has fallen short of meeting this requirement. As shown in Exhibit 5, only 63% of all protective investigation cases were closed within 60 days.

Exhibit 5

Although Performance Improved Last Year, Many Investigations Remain Open Too Long

Fiscal Year	Total Number of Cases Closed	Number of Cases Closed Within 60 Days	Percentage of Cases Closed Within 60 Days
1998-99	27,363	16,100	58.8%
1999-2000	31,819	20,080	63.1%

Source: Department of Children and Families, Florida Abuse Hotline Information System.

Although some investigative cases are kept open longer than 60 days for valid reasons, such as awaiting evidence, judicial extensions, or law enforcement delays, the department's most recent monthly backlog report shows that such cases may comprise only a minority of the cases open past 60 days. For December 2000 there were 911 cases left open longer than 60 days, but in only 273 of them (30%) was a valid reason given for them to remain open. In the remaining 638 cases (70%) program staff failed to report a valid reason for remaining open.

Disabled adults receiving services avoid more costly nursing home placements

Another important program goal is to keep disabled adults in their own homes or in the homes of caregivers in order to prevent their placement in nursing homes or other institutions. This goal is important because it is much less costly to provide clients with program services (\$2,900 annually) than to provide them with care in a publicly supported nursing home (\$35,400 per year). The Legislature has established a standard that 99% of program clients receiving in-home services should remain in their own homes rather than

be placed in nursing homes. For Fiscal Year 1999-2000, 4,413 of 4,485 disabled clients receiving in-home services (98.4%) were able to remain in private homes rather than be placed in nursing homes.⁶

Clients are generally satisfied with the program services they receive

Another legislatively approved indicator of program effectiveness is the extent to which clients are satisfied with the services they receive. While not a PB² measure, the department periodically conducts surveys of a representative sample of clients to assess their satisfaction with program services. The department uses the results of these surveys to improve the quality of its services.

Results of the most recent client satisfaction survey, conducted in the spring of 1999, indicate that program clients are generally satisfied with the services they receive. For example, 91% of clients who had been subjects of adult protective investigations indicated overall satisfaction with the investigative process, which was a significant improvement over the overall satisfaction rate of 70.2% recorded during the previous survey that was conducted in 1997. In addition, 94.9% of disabled adults surveyed in 1999 expressed overall satisfaction with the in-home services they received.

Unreliable performance data impedes effective program management and accountability

There are substantial problems with the reliability of some program data. Program staff have identified difficulties in the recent past with inaccurate client counts for some program services, and we encountered data inconsistencies during our fieldwork that were difficult to reconcile. To address data reliability problems program officials have taken several actions.

- Program staff have reverted to collecting some client output data manually in

⁶ In order for the standard to be met, 27 additional clients would have needed to remain in private homes during the year.

response to reliability problems. For example, all of the districts report manual client counts for the in-home services for disabled adults, and at least five districts use manual counts or local systems to report the number of OSS recipients receiving case management.

- The adult services program office updated its data procedures in January 2000 to improve consistency of data entry among the districts for client registration, demographic information, and caseload data. This effort has been supplemented with periodic policy memoranda on data entry when appropriate, and adult protective services supervisors regularly discuss data-related issues at statewide supervisors' meetings.
- Program administrators acknowledge that manual data entry (often done in batches) is a chronic source of errors. In response, district staff periodically review samples of case records against the data record to minimize the occurrence of such errors.

Program Efficiency ———

Program efficiency would be improved by clarifying the department's statutory authority to conduct case management for optional state supplementation (OSS) recipients, and reducing the frequency of case management visits to many OSS clients. Further privatization of the program's case management function would not be feasible at this time.

One of the program's primary activities is to provide case management for clients. In practice, there are three client populations that receive case management services: adult abuse victims, OSS recipients, and disabled adults who receive in-home services. Adult abuse victims who receive protective supervision typically require frequent visitations (i.e., two or three times a week) for a three- to six-month period. OSS recipients are visited periodically to review the appropriateness of their placement and assess their continuing eligibility to receive the stipend; however, as described in the following section, case management for this client population lacks statutory authority.

Disabled adults who receive in-home services also are visited periodically to develop and review case plans for services that will prevent them from being placed in nursing homes.

The department could not provide us with reliable information on the caseload or workload for case management of these three client populations individually. However, based on our discussions with program staff about their workload and a district survey conducted by the department, we estimate that case management staff spend between 10% and 80% of their case management time with OSS clients. The number varies by district. The remainder of case managers' time is split between protective supervision clients and disabled clients receiving in-home services.

Program lacks statutory authority to provide OSS case management

While the department has been providing case management to OSS recipients since 1974, it lacks the statutory authority for this function. Section 409.212, *Florida Statutes*, authorizes the department to provide optional state supplementation (OSS) payments to eligible clients, but does not authorize it to provide case management to these clients. Case managers establish eligibility for elderly and disabled clients, evaluate their need for care, prepare case plans for them, and periodically review the stability and suitability of their placements.

Although many OSS clients are not victims of abuse, neglect, or exploitation, the department has historically provided case management services to this population through its Adult Services Program Office. In recent years, Adult Services Program staff have transferred the case management responsibility for some OSS clients to the department's mental health and developmental disabilities programs, as appropriate. However, program officials estimate that most OSS clients are still provided case management through the Adult Services Program.

Department officials believe that case management for OSS clients is an appropriate and necessary function to implement the OSS payment provisions authorized by Florida law.

These officials believe that case management helps to keep OSS clients free from abuse, neglect, or exploitation because it allows program staff to periodically review the status of OSS clients' physical and emotional health, and the stability of their living arrangements. They also believe that case management enables program staff to periodically assess the quantity and quality of services that OSS clients receive and make the necessary modifications to help protect them from harm.

In a January 1999 report to the Legislature, the department acknowledged that it lacks statutory authority for OSS case management.⁷ That report discussed the need for legislative policy guidance to reflect current departmental operations and provide accountability for the services that OSS clients receive. The report contained two recommendations related to this need, and both called for clarifying amendments to the OSS enabling statute (in Ch. 409, *Florida Statutes*). One was to create a specific statutory authority for department staff to provide services to OSS recipients, while the other was to provide statutory authority for the department to develop rules that would further define the services provided in connection with OSS subsidies. However, the recommendations have not been adopted by the Legislature, and the department continues to lack authorization for this function.

OSS case management visit reductions could reduce FTEs or free staff for other work

While the case management standard for OSS recipients is for them to receive quarterly visits, program officials believe that clients who are stable in their current placements need to be visited only annually. Central program office and district staff indicated that many OSS clients are satisfactorily placed in assisted living facilities or adult family care homes and thus do not require quarterly visitations. These staff told us that the annual eligibility reassessments would be sufficient to ensure that these clients remain stable in their current living arrangements.

Although the department could not quantify the number of OSS clients who could receive less frequent case management visits, it has recently improved its process to identify OSS clients who could be visited only annually. In May 2000, the department revised the instrument that district staff use to make a determination as to the clients' suitability for reducing their case management to annual reassessments only. Among the criteria that clients are to meet in order to qualify for annual visitations are that the client must have resided in their current placement for at least six months, be able to vocalize their needs, and be residing in a facility with no known licensure problems related to the quality of client care or safety and no known problems related to abuse, neglect, or exploitation. To meet this last criterion, program staff are required to review licensure records maintained by the Agency for Health Care Administration and protective investigation records maintained by the Florida Abuse Hotline.

Conducting annual (rather than quarterly) assessments for those OSS clients who qualify for them represents an opportunity for a reduction of program staff and cost savings. Program staff indicate that 5.75 case management positions could be reduced statewide, but their analysis exempts three districts with high OSS populations that they believe require a higher degree of staff attention. If positions in those districts were also included, an additional 14 case management positions could be eliminated. Also, the department's analysis did not include any supervisory or support staff positions, but if they are included proportionally to the rest of the program's case management staffing, there would be an additional four positions available for elimination. Thus, there would be a total of 23.75 positions that could be eliminated, with an associated cost savings of \$885,000.

The acting program director agreed that the OSS case management workload could be reduced, but he asserted that the resources saved by reducing OSS case management should be redirected to other activities. One such option would be to provide protective supervision for victims who are currently not

⁷ Department of Children and Families, *Report on the Optional State Supplementation Program*, January 1999.

receiving this service. He estimated that protective supervision is currently provided to less than one-fourth of the victims who could benefit from it. The number of protective investigations conducted rose 21% during Fiscal Year 1999-2000 over the previous year, raising the prospect that a declining percentage of victims will be able to receive protective supervision in the future. However, the decision to reduce or reallocate staff should be addressed by the Legislature.

Further privatization of the case management function for in-home services for disabled adults is not currently feasible

Since 1988, the department has contracted with private agencies to provide program services for disabled adults. During Fiscal Year 1999-2000, the department contracted with 21 private providers to supply regular direct services to clients, and these services contracts accounted for 68% of the funds available for client services. The remaining non-contractual funds are used for purchase orders and vouchers for other services and supplies that are acquired from the private sector.

During that same year, the department also contracted with private agencies to provide case management services for disabled adults in 8 of the department's 15 service districts. Program staff provided case management in 6 other districts, while case management services in one district were provided by a combination of district and private agency staff. Private case management is generally used in the predominantly urban areas of the state, while department case managers are used in the more rural areas of the state.

While the department has not analyzed the cost-effectiveness of expanding the current level of privatization, program officials and private provider representatives indicated that it was not feasible to further expand privatization of case management for disabled adults at this time. They identified three obstacles to further privatization.

- Private agencies are generally uninterested in providing case management to clients in rural areas because the long distances they

would need to travel to cover the area would not be worthwhile. One provider said that while some higher paying services might pay enough to justify the effort, the overall mix of services would not.

- The relatively limited amount of funding available for the in-home services (only three districts have services budgets that exceed \$180,000) means that administrative costs that would be incurred to cover the private providers' case management costs would be unacceptably high. For example, a provider of services in one rural district indicated that its contract with the department for services was limited to \$12,500, whereas its contract with the Department of Elder Affairs for services to elders was for more than \$1.2 million, a difference of scale that made case management worthwhile for the larger contract, but not for the smaller one.
- District program administrators expressed concern about reductions in services to clients. One district determined not to pursue a contract for privatized case management services after it concluded that in order to pay for privatized case management, it would have to terminate the direct services it currently provides to 25 clients.

Conclusions and Recommendations —

Program services have been reasonably effective in preventing further harm to adult victims of abuse, neglect, or exploitation, and disabled adults are continuing to be served in their own homes or in homes of caregivers rather than being placed in more costly nursing homes. However, the program should be more timely in closing adult protective investigation cases. In Fiscal Year 1999-2000, the program closed 63.1% of these investigations within the statutory requirement of 60 days. We recommend that the department emphasize closure of cases within 60 days in compliance with the law.

The department has substantial problems with the reliability of some program data, primarily outputs such as the number of clients receiving specific services. While the department has taken steps to improve the reliability of its performance data, additional actions are needed. We recommend that central program office staff continue to work with district staff to develop reliable data reporting mechanisms, to ensure that accurate data are available for management purposes and general accountability.

To clarify program responsibilities relative to the program's case management function for optional state supplementation recipients, we recommend that the Legislature amend the OSS enabling statute (in Ch. 409, *Florida Statutes*) to authorize department staff to provide case management to OSS recipients and develop OSS case management rules to provide additional details and guidance in providing this needed function. The responsibility to provide case management for OSS recipients has evolved as a distinct function for adult services staff, but it is not necessarily related to the program's currently defined statutory responsibilities, so this legislative clarification is needed.

However, we also recommend that the department discontinue quarterly case management visits to OSS recipients who are stable enough in their current placements to require only annual visitations. Reducing the program's case management workload by visiting these clients less frequently could result in a reduction of 23.75 FTE staff positions and a savings of \$885,000. Alternatively, the resources

could be used to support district staff to do other work, such as providing more victims with protective supervision case management. We recommend that the department provide the Legislature with reliable information about the protective supervision workload so that the Legislature can make an informed choice on which of these two options it should implement in making appropriations for Fiscal Year 2001-02.

The current level of privatization for the program's case management function for in-home services for disabled adults appears to be appropriate. Further privatization is not currently feasible because providers are unwilling to provide case management in areas of the state in which department employees currently provide case management. We recommend that the department develop a formal cost-effectiveness analysis for the districts where case management is not yet privatized and identify potential providers for those areas. If the analysis indicates that providing case management services through contracts with private providers would be cost-effective for the state, the districts should proceed with further privatization.

OPPAGA provides objective, independent, professional analyses of state policies and services to assist the Florida Legislature in decision making, to ensure government accountability, and to recommend the best use of public resources. This project was conducted in accordance with applicable evaluation standards. Copies of this report in print or alternate accessible format may be obtained by telephone (850/488-0021 or 800/531-2477), by FAX (850/487-3804), in person, or by mail (OPPAGA Report Production, Claude Pepper Building, Room 312, 111 W. Madison St., Tallahassee, FL 32399-1475).

The Florida Monitor: <http://www.oppaga.state.fl.us/>

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John W. Turcotte, OPPAGA Director

Appendix A

Statutory Requirements for Program Evaluation and Justification Review

Section 11.513(3), *Florida Statutes*, provides that OPPAGA program evaluation and justification reviews shall address nine issue areas. Our conclusions on these issues as they relate to the adult services programs are summarized in Table A-1.

Table A-1

Summary of the Program Evaluation and Justification Review of the Adult Services Programs

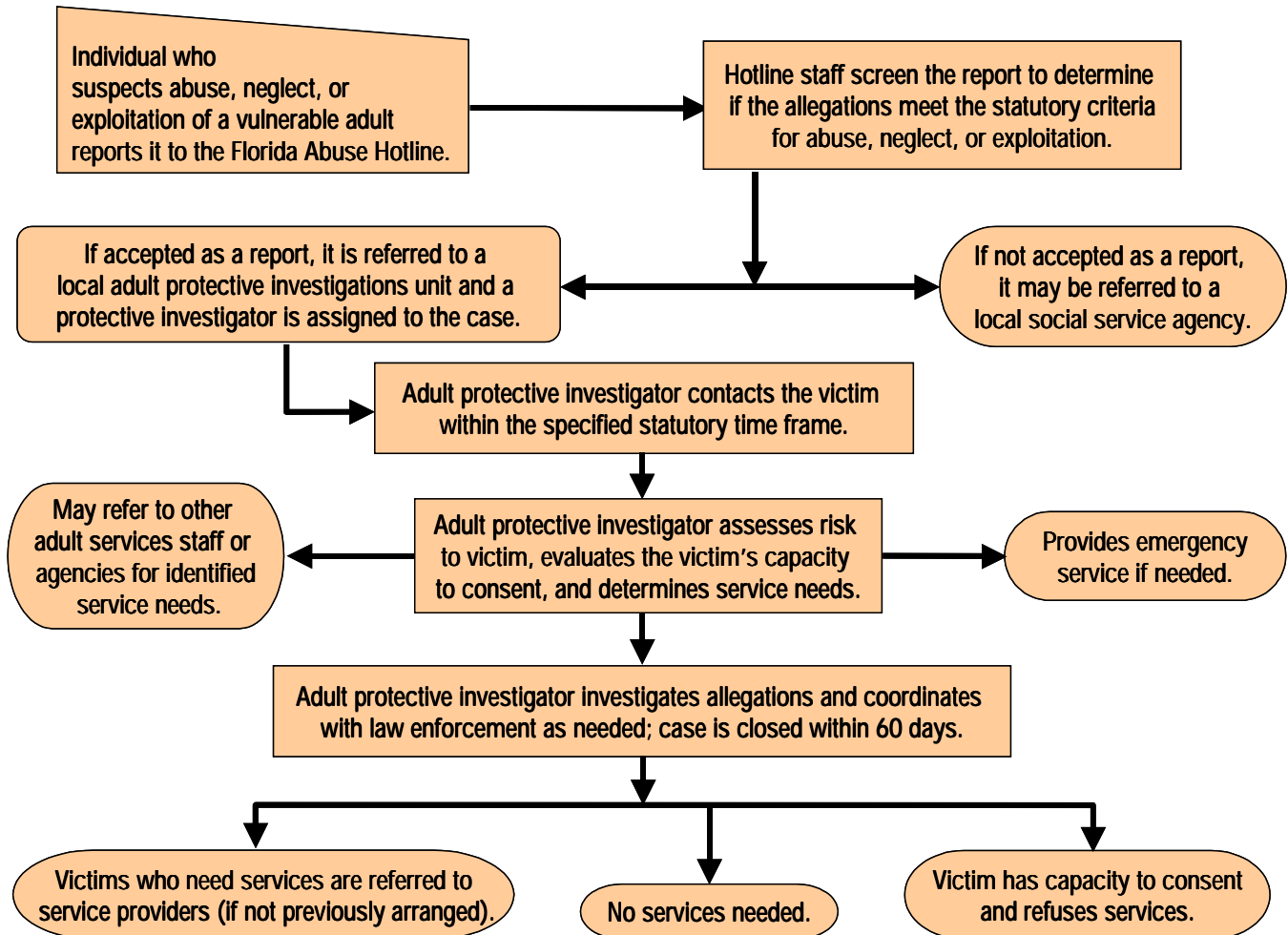
Issue	OPPAGA Conclusions
The identifiable cost of the program	The Legislature appropriated \$40.6 million for the Adult Services Program. This includes \$23.9 million for adult protective services and \$16.7 million for in-home services for disabled adults.
The specific purpose of the program, as well as the specific public benefit derived therefrom	The program is intended to prevent further harm from occurring to vulnerable adults who are victims of abuse, neglect, or exploitation. Services to victims provide a public benefit by addressing immediate safety concerns and providing appropriate interventions to avoid recurrence. The program is also intended to help non-elderly disabled adults remain in family-type living arrangements in private homes and avoid placement in nursing homes. The public benefits from the much lower costs associated with such services compared with nursing home placement.
Progress towards achieving the outputs and outcomes associated with the program	The program has generally met its legislative goals in protecting victims from further harm and in keeping disabled clients in their own homes and thus avoiding placement in nursing homes. However, the program should be more timely in closing adult protective investigation cases.
An explanation of circumstances contributing to the state agency's ability to achieve, not achieve, or exceed its projected outputs and outcomes, as defined in s. 216.011, <i>F.S.</i> , associated with the program	We were able to use selected department data to assess the program's progress towards achieving legislative goals, but our assessment was hindered by certain data limitations, such as inconsistent client counts. Such limitations impede the department's ability to provide the Legislature and other policymakers with reliable performance data. They also hinder program managers' efforts to effectively manage the program.
Alternative courses of action that would result in administering the program more efficiently and effectively	The Legislature should amend the optional state supplementation (OSS) enabling act to authorize the department to conduct case management for these clients, thus clarifying current practice. The department could reduce its case management visits for some OSS clients; this could result in a reduction of 23.75 FTE staff positions and an associated staff cost of \$885,000. Alternatively, these positions could be directed to other functions, such as providing more victims with protective supervision services. Also, we concluded that further privatization of the case management function for in-home services for disabled adults is not currently feasible.
The consequences of discontinuing the program	Adult protective services are the predominant way for victims named in the 35,519 reports made during Fiscal Year 1999-00 to receive attention for their immediate safety needs and intervention and support to ensure that victimization does not recur. If those services were discontinued, victims would not receive services to end the victimization, and deaths from adult abuse and neglect (51 deaths in Fiscal Year 1998-99) could increase. In-home services for disabled adults help keep program clients out of nursing homes. Without that assistance, the public cost of serving those clients in nursing homes would be much higher.

Issue	OPPAGA Conclusions
Determination as to public policy; which may include recommendations as to whether it would be sound public policy to continue or discontinue funding the program, either in whole or in part	The program provides beneficial services to vulnerable adult victims of abuse, neglect, and exploitation and to non-elderly disabled adults who require some assistance to avoid nursing home placement. This review identifies some actions for the Legislature and the department to improve the efficiency of case management provided to OSS recipients.
Whether the information reported pursuant to s. 216.03(5), <i>F.S.</i> , has relevance and utility for the evaluation of the program	Program staff monitor the program's performance by tracking several performance measures. We were able to use selected department data to make conclusions about the program's overall effectiveness.
Whether state agency management has established control systems sufficient to ensure that performance data are maintained and supported by state agency records and accurately presented in state agency performance reports	Some department data (such as client counts for some functions) are not necessarily reliable. Central program office staff should continue to work with district staff to develop reliable data reporting mechanisms, including manual client counts when necessary, to ensure that accurate data are available for management purposes and general accountability.

Source: OPPAGA analysis.

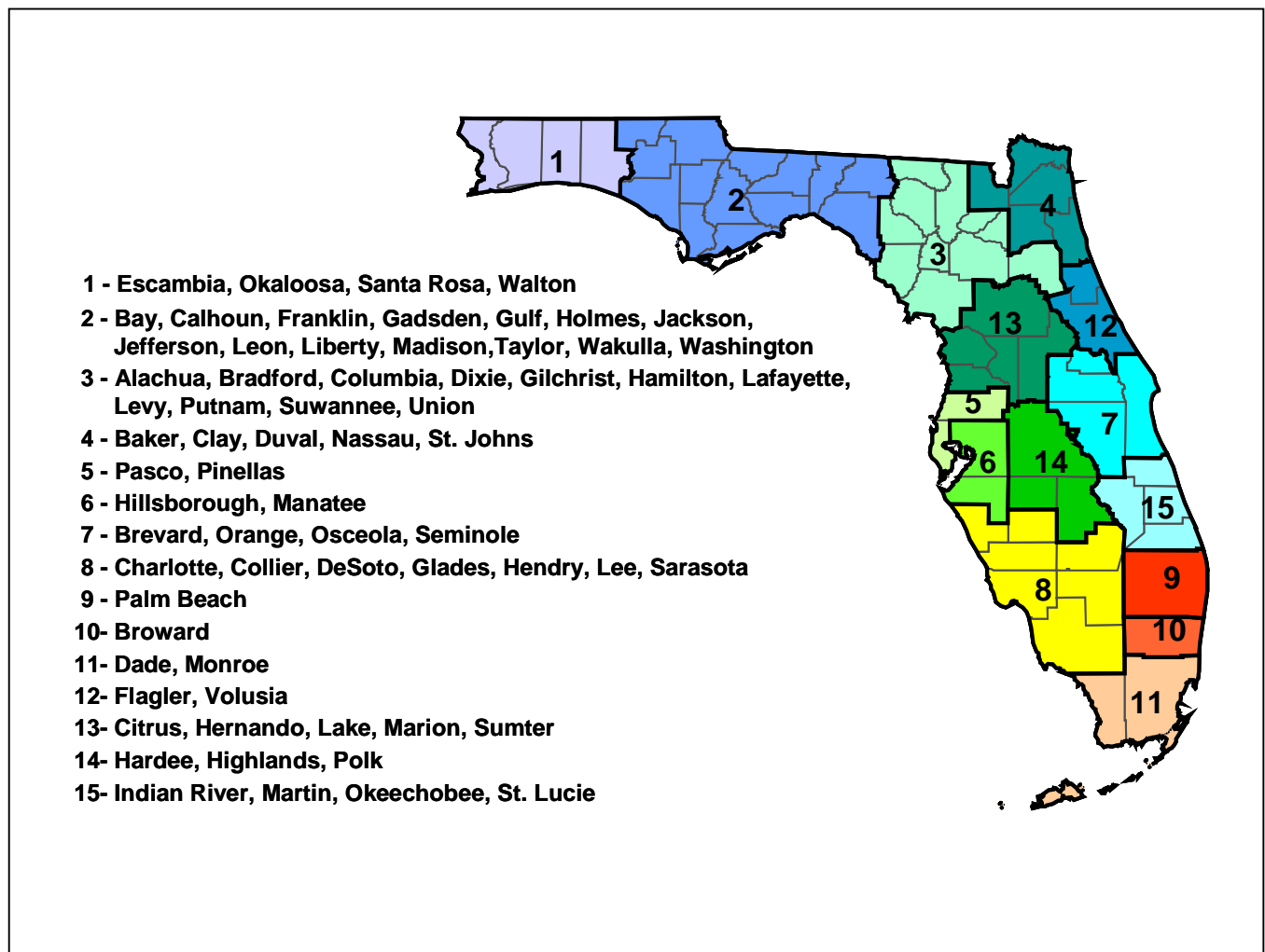
Appendix B

Adult Protective Investigation Process



Source: Department of Children and Families.

Appendix C
Department of Children and Families
15 Service Districts



Source: Department of Children and Families.

Justification Review
Appendix D
Agency Response



Jeb Bush
Governor

Kathleen A. Kearney
Secretary

January 31, 2001

Mr. John W. Turcotte, Director
Office of Program Policy Analysis and
Government Accountability
Post Office Box 1735
Tallahassee, Florida 32302

Dear Mr. Turcotte:

Thank you for your January 2 letter providing the preliminary findings and recommendations of your justification review entitled "DCF's Adult Services Program Meeting Goals; Data Reliability, Case Management Need Work."

Our response to the findings and recommendations found in your review is enclosed. If I may be of further assistance, please let me know.

Very truly yours,

/s/
Judge Kathleen A. Kearney
Secretary

Enclosure

1317 Winewood Boulevard Tallahassee, Florida 32399-0700

*The Department of Children and Families is committed to working in partnership
with local communities to ensure safety, well-being and self-sufficiency for the people we serve.*

RESPONSE TO OPPAGA'S JUSTIFICATION REVIEW ENTITLED:
"DCF'S ADULT SERVICES PROGRAM MEETING GOALS; DATA RELIABILITY,
CASE MANAGEMENT NEED WORK"

RECOMMENDATION 1

The Department should emphasize the closure of cases within 60 days in compliance with the law.

DEPARTMENT'S RESPONSE:

The Department tracks those cases not closed within 60 days (backlog) on a monthly basis. District staff have been working overtime in order to try to manage the backlog. However, for FY 1999-2000, the number of adult abuse, neglect, and exploitation cases increased by 21 percent. During FY 2000-2001, the workload is expected to increase another 20 percent. Without additional protective investigation staff, it will be extremely difficult to manage this workload. It should be noted that the safety of the victim is always the first priority for protective investigators. The backlog is often the result of not completing the paperwork necessary to close the case. We will continue to emphasize the closure of cases within 60 days, but our ability to do so will be contingent upon workload.

RECOMMENDATION 2

Central program office staff should continue to work with district staff to develop reliable data reporting mechanisms to ensure that accurate data are available for management purposes and general accountability.

DEPARTMENT'S RESPONSE:

The Department will make every effort to improve data reliability.

RECOMMENDATION 3

The Legislature should amend the Optional State Supplementation (OSS) enabling statute (Chapter 409, F.S.) to authorize Department staff to provide case management to OSS recipients and develop OSS case management rules to provide additional details and guidance in providing this needed function.

DEPARTMENT'S RESPONSE:

The Department will submit a legislative proposal for the 2002 session amending Chapter 409, F.S., as recommended. Subsequent to the passage of these revisions, rules will be developed addressing case management functions.

RECOMMENDATION 4

The Department should discontinue quarterly case management visits to OSS recipients who are stable enough in their current placements to require only annual visitations.

DEPARTMENT'S RESPONSE:

This policy was implemented in May 2000. The Department has already discontinued quarterly case management visits for 90 percent of the OSS recipients who are living in stabilized living arrangements.

RECOMMENDATION 5

Reducing the program's OSS case management workload by visiting these clients less frequently could result in a reduction of 23.75 staff positions and a savings of \$885,000. Alternatively, the resources could be used to support district staff to do other work, such as providing more victims with protective supervision case management.

The Department should provide the Legislature with reliable information about protective supervision workload so that the Legislature can make an informed choice on which of these two options it should implement in making appropriations for Fiscal Year 2001-02.

DEPARTMENT'S RESPONSE:

The most recent information provided by district staff indicates that there are only two districts that have not moved appropriate clients to annual assessments. When these districts move their OSS clients to annual assessments, two case manager positions can be freed for other purposes. It should be noted that since the annual assessment policy was implemented in May 2000, nine positions have been reclassified to protective services-related positions because of the high investigation workload -- an indication that the Department has already explored and acted on this option to the extent possible with the exception of two positions.

RECOMMENDATION 6

The Department should develop a cost effectiveness analysis for districts where case management is not yet privatized and identify potential providers for those areas.

DEPARTMENT'S RESPONSE:

This option has been reviewed yearly with the same basic results. The Department provides case management primarily in rural areas where we have been unable to find contract providers. Even if providers were available, the contracted cost of case management for Adult Services clients is averaged statewide at \$30.31 per hour plus a minimum of 5% overhead. Department employees provide case management services at an estimated cost of \$14.47 per hour and the administrative overhead is covered by other Department programs, so privatization is not expected to be cost effective. Further, because of the way these programs are funded, the cost of privatized case management would have to be taken from existing contract funds, resulting in decreased levels of services or termination of current clients from the program.