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*Sunset Review*  
OFFICE OF PROGRAM POLICY ANALYSIS  
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**Florida Government  
Accountability Act  
Sunset Reviews**

The act establishes the process, criteria, and schedule for the Legislature to assess whether state agencies and advisory committees need to continue to exist.

The following agencies are on the second year schedule for Sunset Reviews to be conducted by July 1, 2009.

- Department of Children and Families
- Department of Community Affairs
- Department of Management Services
- Department of State

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## OPPAGA Reports on the Department of Children and Families - 2000-2008

### 2008

***DCF Takes Action to Improve Implementation of State's Community-Based Care Initiatives***, Report No. 08-52, September 2008. As recommended in our 2007 report, the Department of Children and Families has taken action to strengthen the state's community-based care system. The department has trained child welfare staff on recent statutory changes affecting child welfare and worked with the community-based care lead agencies to develop and implement strategies to help ensure that appropriate placement options are available for children in out-of-home care. The department has also created reporting mechanisms to oversee lead agencies' use of their increased funding flexibility.

***All But One Aging Resource Center Is Fully Implemented***, Report No. 08-51, September 2008. As of August 2008, the Department of Elder Affairs completed Aging Resource Center implementation at 10 of the 11 area agencies on aging, and is in the final stages of approving the last center. The Department of Elder Affairs continues to provide technical assistance to the centers, primarily through conference calls, quarterly meetings, and its contract management staff.

The department and centers are working on three enhancements to the elder services system. These are making their information and referral data system more publically accessible and compatible with the department's data systems; taking a more active role with the Nursing Home Diversion Program; and working with the Department of Children and Families to develop a method for obtaining signatures from clients who provide Medicaid application information to the centers over the phone.

The centers spent \$2.2 million of the \$3.3 million available during Fiscal Year 2007-08. The department continues to pursue federal approval for a method to maximize available funding.

The department and the Aging Resource Centers need to give priority to developing a standard measure for evaluating the centers' performance in streamlining Medicaid eligibility determination for seniors.

***DCF Improves Contract Oversight of Lead Agencies; Fiscal, Quality, and Performance Assessment Are Undergoing Change***, Report No. 08-39, June 2008. As recommended in our 2006 report, the Department of Children and Families has made changes to strengthen contract

oversight of lead agencies by improving its ability to track contractual noncompliance and establishing a training program for contract monitoring staff. The department is working to improve other components of its oversight system by

- bringing fiscal monitoring back in-house after outsourced fiscal monitors failed to meet contractual obligations,
- redesigning its quality assurance system,
- implementing a new automated child welfare data system, and
- developing better ways to examine performance data and target critical client outcomes.

As these components are in transition, it is too early to determine the effect of these changes on the department's ability to effectively oversee lead agencies. Future OPPAGA reports will continue to assess the department's oversight of the community-based care system.

**The Governance Structure of Florida's Early Education Programs Presents Some Administrative Challenges,** Report No. 08-35, June 2008. Florida's families with young children can receive early education services through a continuum of state and federal programs. The state's largest early education programs, School Readiness and Voluntary Prekindergarten, received approximately \$1 billion in Fiscal Year 2007-08.

Currently, the Agency for Workforce Innovation, Department of Education, and Department of Children and Families are responsible for various aspects of implementing the state's early education programs. However, each agency's program responsibilities are not always consistent with its mission as perceived by stakeholders.

While the division of program responsibilities among three agencies has several strengths, it also has resulted in some instances of inconsistent program direction, insufficient coordination, and duplication. State agency managers acknowledged many of these issues and have begun taking steps to address them.

The Legislature may wish to consider three governance structure options to address the inefficiencies and duplication in the current system.

**Department of Children and Families Has Strengthened Its Contract Oversight System,** Report No. 08-32, May 2008. In response to our 2006 report, the

Department of Children and Families has strengthened its accountability system to better identify and resolve vendor compliance problems. Department contract monitoring reports now provide more information to help contract managers and vendors develop corrective action plans. In addition, the department has enhanced its contract reporting data system to enable staff to better track and analyze vendor noncompliance and monitor whether vendors have completed required tasks to correct deficiencies. The department also has established a procedures manual and training program for contract monitoring staff and their supervisors. While these steps have improved the department's vendor accountability system, it is too early to determine their impact in reducing vendor noncompliance with contract requirements. Future OPPAGA studies will continue to assess the department's outcomes in this area.

**Responsibility for the Education of Exceptional Students in Residential Treatment Facilities Needs Clarification,** Report No. 08-27, April 2008. Approximately 2,850 exceptional students were in residential facilities across the state as of October 2007. Most of these students were housed in Department of Juvenile Justice facilities. However, 469 were placed in residential treatment facilities regulated by the Department of Children and Families, the Agency for Persons with Disabilities, and the Agency for Health Care Administration.

Typically, the school district in which a residential facility is located assumes responsibility for providing and funding the educational services for exceptional students in the facility. However, districts usually are not involved in the decision to place exceptional students in residential facilities. They also often do not receive prior notification of placements, which hinders their ability to begin delivering educational services in a timely manner.

State policy should be clarified regarding the financial responsibility for educational services provided to exceptional students in residential treatment facilities.

***Incompetent to Proceed Adjudications Increasing***, Report No. 08-17, March 2008. Persons deemed incompetent to proceed must undergo competency restoration training before they can stand trial for criminal charges. Defendants who are deemed a danger to themselves or others are served in secure forensic facilities, while others receive competency restoration training in the community under conditional release. The estimated cost to restore competency in community settings is lower than that of forensic facilities.

The number of defendants with mental illness adjudicated incompetent to proceed is estimated to have doubled over the last four fiscal years. This increase is due, in part, to an increase in felony arrests and felony filings, as well as greater numbers of persons with mental illness coming into contact with the criminal justice system.

***Statewide Implementation of Aging Resource Center Initiative Is Substantially Complete***, Report No. 08-14, March 2008. The department and the area agencies on aging continue to make progress implementing the Aging Resource Center initiative. In September 2007, the Department of Elder Affairs designated the five remaining area agencies as Aging Resource Centers. The department has provided adequate support and technical assistance to the area agencies through site visits, conference calls, quarterly meetings, and help in coordinating with the Department of Children and Families.

The area agencies report positive results from becoming Aging Resource Centers. These results include wider recognition as seniors' gateway to services, more control over access to services, improved communication among agencies responsible for Medicaid eligibility determination, and more statewide uniformity in the information collected about information and referral services.

In October 2007, the department began to use federal Medicaid funds for Aging Resource Center staff positions that spend all of their time on Medicaid-related activities. The department has not finished developing a process for using federal funds to partially fund staff positions that spend a portion of their time on Medicaid-related activities.

***ACCESS Improved Productivity; Additional Refinements Would Better Manage Workload***, Report No. 08-13, March 2008. The 2003 Legislature directed the

Department of Children and Families to significantly redesign the state's public assistance program and reduce staffing and funding. In response, the department established the ACCESS electronic application, which makes it easier for many clients to apply for benefits. The department also made other program changes that increased staff productivity.

However, an unexpected increase in the volume of applications has outpaced productivity gains. The workload increase proved hard to manage and slowed processing times because planned technology enhancements are not yet in place. Splitting responsibilities for helping clients made it difficult for clients who need assistance from department staff to navigate the system. While planned technology changes are expected to decrease client confusion and reduce staff workload, the department needs to further improve technology and reorganize staff duties to fully address this situation.

***The Delays in Screening Sexually Violent Predators Increase Costs; Treatment Facility Security Enhanced***, Report No. 08-10, February 2008. While the Sexually Violent Predator Program has addressed some problems identified by prior reports, other deficiencies still exist.

- Offenders often spend extended periods in detention while awaiting the outcome of the civil commitment process, increasing program costs and diminishing effectiveness.
- The registry of mental health experts maintained by the Justice Administrative Commission lists few psychologists specializing in sex offender evaluations.
- The new program vendor has not fully implemented its enhanced specialized treatment component for developmentally disabled offenders.
- Adding a community re-entry phase would enhance the program's long-term effectiveness.
- While facility security has improved, the program should refine the categories of reportable incidents to better track safety and security at the treatment facility.

***Pilot to Outsource CBC Program Oversight Encountered Setbacks; Effectiveness Unknown***, Report No. 08-09, February 2008. Due to a variety of problems, implementation of the pilot project to outsource oversight of two child welfare lead agencies has been substantially delayed. The outsourced program monitoring provider, Chapin Hall, used the Department of Children and Families' quality assurance system. Problems with the quality assurance system hindered the provider's ability to successfully implement program oversight. Chapin Hall's success was also negatively affected because the pilot lead agencies disagreed with the findings in one of its monitoring reports.

The department has since worked with Chapin Hall to modify its quality assurance methodology to produce useful monitoring results. However, due to setbacks a lapse of almost two years occurred in state quality assurance reviews for the pilot lead agencies. As a result, the effectiveness of outsourcing department program oversight is unknown at this time.

Chapin Hall is helping the department and lead agencies evaluate performance and track outcomes for children over time. The pilot project shows promise in developing more meaningful performance measures for lead agencies, but Chapin Hall is still in the process of evaluating lead agency data as an interim step toward producing a final set of measures.

***Additional Strategies Would Help Address the Barriers to Successful Adoptions***, Report No. 08-06, January 2008. Barriers to successful adoptive placements include finding families who want to adopt children with special needs, a lack of information about the children available for adoption, potential parents' confusion and frustration in navigating the adoption process, a lack of post-adoption services, and the unwillingness of relatives to disrupt a biological family.

Lead agencies, their subcontractors, and the department use various strategies to address these barriers. They use multiple strategies for recruiting adoptive parents, matching adoptive families with available children, and helping ensure post-adoption permanency. The department has developed initiatives to assist lead agencies in recruiting adoptive families and finding placements for children.

To better ensure successful adoption placements, the department and lead agencies should improve potential adoptive families' access to information,

address frustrations and make the process less cumbersome, change policies and practices, and establish lead agency positions to help manage post-adoption services.

***Lead Agencies Structure Their Adoption Programs in a Variety of Ways***, Report No. 08-05, January 2008. Community-based care lead agencies use three arrangements to structure their foster child adoption programs: services primarily provided by subcontractors, a combination of in-house and subcontracted staff, or services primarily provided in-house. Lead agency administrators generally prefer to use in-house staff or contracted service providers and only use fee-for-service child placing agencies to a limited degree.

Lead agencies also use three models of progressing children's cases through their systems of care from foster care to adoption finalization. Lead agencies may keep a child's case with one case manager for the life of the case, transfer a child's case from the original case manager to an adoption specialist, or assign an adoption specialist to coordinate and assist a primary case manager. Lead agencies report advantages and disadvantages to each approach.

## **2007**

***An Aggressive Schedule Set to Complete Implementation of Aging Resource Centers***, Report No. 07-38, September 2007. The Department of Elder Affairs has established a reasonable readiness assessment process to help the eight remaining area agencies transition to Aging Resource Centers. The department has provided instructions to the area agencies for revising their transition plans, promulgated an administrative rule, and issued a readiness assessment checklist. The department has set an aggressive schedule to accomplish the bulk of the initiative between July and December 2007, and to complete implementation by April 2008. To assist agencies throughout this process, the department and area agencies established several forms of technical assistance.

To successfully implement the initiative, the department needs to establish a framework to enable the area agencies to obtain Medicaid reimbursement for their administrative activities. The department plans to initially pursue reimbursement for area agency employees who spend all of their time on Medicaid-related activities, and then for employees who spend a portion of their time on Medicaid-related activities.

The department and area agencies continue to work on creating a common information and referral data system for the initiative.

**Department of Elder Affairs Resumes Transition Activities for Aging Resource Center Initiative**, Report No. 07-20, March 2007. After a year delay, the department resumed Aging Resource Center transition activities in December 2006. The department has developed a framework for a revised transition process, and in February 2007 it contracted with the eight area agencies that were not pilot sites. The department contracted with each area agency for approximately \$200,000 to begin transition activities.

The department is still developing details for how it will monitor and evaluate the transition, and it needs to release guidance documents that will be essential to the area agencies. In February 2007, the department decided not to conduct its planned evaluation of the three pilot sites.

The department made significant progress in promulgating the Aging Resource Center rule since our last report. Due to deficiencies in the current Aging Resource Center information and referral system, the department has decided to replace the system. To successfully move forward and implement Aging Resource Centers statewide, the department has several challenges to address.

**Several Factors Can Delay Eligibility Determination for Medicaid Long-Term Care**, Report No. 07-12, February 2007. Although the Department of Elder Affairs' Comprehensive Assessment and Review for Long-Term Care Services (CARES) Program fulfills many functions, its primary function is to conduct medical eligibility determination for Medicaid nursing home care or other long-term care services. The CARES Program is also responsible for assisting elders who apply for the Nursing Home Diversion Program.

Delays in receiving physician forms, regional workload issues, and client unavailability can lengthen the time it

takes the CARES Program to determine medical eligibility for long-term care services. To a large extent these factors remain outside the program's control. Delays in receiving physician forms, the Department of Children and Families' financial eligibility determination process, and the Medicaid managed care payment system contribute most to the time that elapses before an individual can be enrolled in the Nursing Home Diversion Program.

Current state initiatives may help address these delays. The Legislature and agencies could consider other options, such as improving inter-agency electronic communication or reducing the CARES Program's workload, but each of these options has potential barriers to implementation.

**Improved Fiscal and Quality Oversight Is Needed for the Independent Living Program**, Report No. 07-11, February 2007. The Department of Children and Families needs to improve fiscal oversight of the Independent Living program to ensure that program resources are used as intended and in compliance with state and federal guidelines. For example, some Fiscal Year 2005-06 data indicates many lead agencies exceeded federal per-client spending limits; however, the department lacks the capability to determine whether this actually occurred. At the same time, some lead agencies did not spend all of the funds earmarked for the program, including federal funds. The department did not have accurate and timely information needed to detect that lead agencies were not spending program resources as intended, but has since made changes that should make this information more readily available.

The department lacks the information necessary to ensure lead agencies provide the statutorily mandated array of services to 13-17-year-olds. Department and lead agency oversight tools do not fully assess the services provided to this population and rarely assess the services provided to the 18 and older population. In addition, while the department has made some progress, it has not yet finished developing contractual standards and outcome measures for the Independent Living program as directed by the Legislature.

**CBC Pilot Project Implementation Delayed But Proceeding; Other Initiatives Implemented,** Report No. 07-03, January 2007. The Department of Children and Families implemented the outsourced oversight components of the community-based care pilot project with some delays. The department has also implemented grant funding and fixed-price contracts to provide the pilot lead agencies with greater funding flexibility.

Stakeholders indicate that the pilot project has produced benefits including objective review by qualified entities, more frequent and meaningful fiscal monitoring reports, and streamlined administrative processes. However, the pilot project faces challenges in outsourcing monitoring functions that were being restructured and are untested, and completing a final plan detailing how some aspects of monitoring will be conducted.

The department has implemented the federal Title IV-E waiver, statutory changes to permanency planning requirements, and grant funding and fixed-price contracts for all lead agencies statewide.

## **2006**

**Further Contracting Enhancements Would Help DCF Correct Vendor Noncompliance,** Report No. 06-72, December 2006. To address the requirements of Ch. 2005-222, *Laws of Florida*, the Department of Children and Families has strengthened its contract accountability structures by establishing new contracting procedures for obtaining public university and college services and requiring annual on-site or desk reviews of vendors. The department also has improved its contract oversight systems and taken steps to better ensure staff compliance with these requirements.

To further strengthen its accountability systems, the department should make five additional changes to enhance its ability to identify and resolve vendor compliance problems.

Require staff to provide sufficient detail in monitoring reports to develop corrective action plans.

Include interim objectives and timeframes in corrective action plans to gauge vendor progress in addressing serious noncompliance areas.

Establish a system for tracking and analyzing repeat findings of noncompliance.

More clearly define the criteria used to rate contract monitoring reports.

Develop a strong training program and manual for contract monitoring staff.

**Aging Resource Center Initiative Has Not Moved Beyond the Pilot Sites,** Report No. 06-62, September, 2006. Two of the three Aging and Disability Resource Center pilot sites have shown progress in meeting requirements, while the Department of Elder Affairs determined that the remaining center did not make sufficient system changes to warrant renewal of its contract. However, the department has begun discussions with this center to work toward resuming its contract.

The department has delayed implementation of the Aging Resource Center initiative beyond the pilot sites. It has not resumed readiness assessment activities, completed the statutorily required Aging Resource Center rule, or updated guidance documents that it reported would be complete by December 2005. It plans to further delay progress while it contracts with an outside evaluator to assess the effectiveness of the pilot sites.

The web-based information and referral system that was intended to help the pilot sites improve access to services has several deficiencies that have limited its usefulness and delayed progress in expanding access to services. The department also needs to automate its revised intake screening tool, which includes data elements not incorporated in the current tool.

**While Some Steps Have Been Taken, Office on Homelessness Needs to Enhance Efforts to Assist the Homeless Population Within the State,** Report No. 06-59, August 2006. While Florida continues to do well on a statewide basis in obtaining dedicated federal funding for the homeless, many local providers of homeless services continue to receive less than their pro-rata share of federal grants. The State Office on Homelessness has taken steps to address this concern, but needs to continue its efforts. The office also needs to continue to develop and disseminate guidelines for helping homeless persons access and enroll in mainstream programs, such as Temporary Assistance to Needy Families and food stamps.

Progress has been made at the state and local level in developing discharge planning processes to help prevent inmates, persons receiving mental health

services, and children leaving foster care from becoming homeless.

***Child Welfare System Performance Mixed in First Year of Statewide Community-Based Care,*** Report No. 06-50, June 2006. Since the transition to community-based care, foster children are obtaining permanent placements more quickly, but high percentages of children experience reabuse and return to foster care. More foster children also experience frequent moves among foster care placements.

Community-based care has had a generally positive effect on state foster home capacity, with more foster homes and beds now available statewide and fewer foster homes over their licensed capacity. However, foster parents continue to express concerns about board rates and communication with providers.

Case managers have experienced some positive changes under community-based care, with lower caseloads and position vacancy rates. However, starting salaries are also lower and staff turnover is higher.

To help ensure that the transition to community-based care improves overall performance, the department should

target critical outcomes that have not shown improvement, and

provide additional guidance for lead agency quality assurance reviews of subcontractors.

***Adult Protective Services Takes Steps to Improve Coordination with Local Law Enforcement Agencies,*** Report No. 06-47, May 2006. The Department of Children and Families' Adult Protective Services units have signed working agreements with all but one of the state's 346 local law enforcement agencies. Some of these agreements have lapsed but are being renewed. Several of the department's service districts have taken additional steps to improve cooperation and coordination with local law enforcement agencies, including providing in-service training and designating points of contact. The department's central office should meet with state law enforcement associations to establish statewide policies to promote coordination between the program and local law enforcement agencies.

***Substance Abuse and Mental Health Corporation Made Progress But Needs More Narrow Focus,*** Report No. 06-21, March 2006. During its second year

of operation, the corporation has improved its outreach to state agencies and has more fully addressed its statutory responsibilities. However, the corporation continues to focus its policy recommendations only on the Department of Children and Families (DCF) and Agency for Health Care Administration (AHCA) and needs to address all agencies in the substance abuse and mental health systems.

To date, the corporation's work has not had a substantive impact on state mental health and substance abuse system outcomes, with the exception of improving data collection and analysis between DCF and AHCA. However, the corporation can play a needed role for the state by providing independent analyses of the state's substance abuse and mental health systems; accordingly, the corporation should be given more time and be continued beyond its October 2006 sunset date.

To improve the corporation's effectiveness, the Legislature should consider narrowing the corporation's focus to improving interagency coordination with a specific set of goals for it to achieve. The corporation should facilitate meetings among agencies involved in the substance abuse and mental health systems to solve interagency coordination issues.

***Aging and Disability Pilot Sites Are Making Progress; Future of Other Centers Uncertain,*** Report No. 06-20, March 2006. The three pilot Aging and Disability Resource Centers are making progress and the Department of Elder Affairs plans to conduct follow-up readiness assessment activities to document the extent to which the centers have implemented required functions. The department also has introduced a new web-based information and referral system at the pilot sites.

The department has addressed prior OPPAGA recommendations by

distributing outsourcing guidelines to help ensure that any outsourcing of center functions would be in the best interest of the elders being served and properly monitored,

developing a method for assessing each center's timeliness in Medicaid eligibility determination, and improving the readiness assessment process.

However, the department halted its readiness activities for Aging Resource Centers and has requested that the Legislature repeal the statute authorizing the initiative.

***The Department of Children and Families Has Taken Steps to Address 2005 Contracting Law,*** Report No. 06-16, February 2006. As directed by the 2005 Legislature, the Department of Children and Families has taken steps to address major weaknesses in its contract management and monitoring processes. These actions have included revising its contract management and monitoring procedures and processes and establishing an Office of Quality Management responsible for contract monitoring and quality assurance functions. The department is also in the process of improving the delivery of training it provides to new contract managers.

To better address staff training needs and improve its contract review process, the department should offer a condensed version of certification training for veteran contract managers, develop and implement a training program for contract monitors, and streamline its central office contract review and approval process.

A subsequent OPPAGA report will address the effectiveness of the department's efforts to improve its contract management and monitoring functions.

***Centralizing DCF Substance Abuse and Mental Health Programs Produced Benefits,*** Report No. 06-12, February 2006. The department has restructured the substance abuse and mental health programs to support the centralized organizational structure required by law. The centralized structure created some challenges but has produced several benefits, including improved system outcomes, better service coordination, more streamlined functions, greater use of evidenced-based practice, and enhanced data collection and analysis. Therefore, the current structure and placement of the substance abuse and mental health programs should be continued beyond the October 2006 sunset date.

Some additional changes could further streamline functions and improve system outcomes:

- consolidating the programs' budget unit and the program functions of supported employment and supported housing, and designating an entity to convene regular meetings of state agencies involved in the mental health system.

***Additional Improvements Are Needed as DCF Redesigns Its Lead Agency Oversight Systems,*** Report No. 06-05, January 2006. To address problems in its system for monitoring child welfare lead

agencies, the department is proposing to redesign many of its oversight processes. While some of these changes are promising, additional steps will be needed to resolve critical weaknesses in the department's oversight of community-based lead agencies and the subcontractors that provide direct child protective services. Specifically, the department needs to

- establish a strong training program for its contract monitoring staff;
- successfully implement the long-delayed HomeSafenet information system and a lead agency viability monitoring system;
- develop additional ways to ensure that lead agencies comply with contract provisions;
- develop a certification process to ensure that lead agencies are willing and have the capability to assume additional quality assurance responsibilities; and

provide additional written guidance and training to department zone and lead agency quality assurance staff to assist with the planned transfer of additional quality assurance responsibilities to lead agencies.

## **2005**

***Improvements in Independent Living Services Will Better Assist State's Struggling Youth,*** Report No. 05-61, December 2005. Youth in foster care have poor academic outcomes compared to non-foster youth, due in part to their lack of school permanency, disabilities, disciplinary problems, and homelessness. In addition, former foster youth often struggle with self-sufficiency after leaving the foster care system.

To address this problem, the Legislature expanded services to assist former foster youth and created three funding sources to financially assist these youths' transition to adulthood. However, relatively few youth receive aid—in Fiscal Year 2003-04, slightly more than a quarter (28%) of potentially eligible former foster youth received financial assistance through the program. There is no data on whether the remaining youth qualified for or desired assistance, as the Department of Children and Families does not have a method to track these youth. The department has recommended to its community-based providers not to keep "waiting list" data pending formal rule promulgation.



The department should improve its oversight of community-based care providers by requiring contracts to meet minimum performance standards, and it should revise its contract monitoring to reflect programmatic improvement rather than contract compliance.

**Child Welfare Legal Services Makes Some Improvements, But Other Changes Needed**, Report No. 05-47, September 2005. The Department of Children and Families has made improvements in Child Welfare Legal Services by reducing caseloads for Child Welfare Legal Services attorneys and adopting some national best practices. The department is taking preliminary steps to enhance professional development opportunities, establish a case management system, and implement a quality management system for Child Welfare Legal Services attorneys. However, the department has not yet finished addressing these recommendations.

**Aging Resource Center Initiative Is Moving Ahead, But Needs Additional Work**, Report No. 05-45, August 2005. The Department of Elder Affairs has selected three area agencies on aging as the pilot sites for Aging Resource Centers, provided technical assistance, performed readiness assessments, and approved two centers to begin operations. During its implementation and evaluation of the pilot sites, the department also addressed several OPPAGA recommendations and took other actions to better implement the Aging Resource Center system.

However, the department has not completed certain critical system components. To help ensure successful implementation of the Aging Resource Center system statewide, the department needs to

- complete its web-based information and referral system and provide accompanying training;
- address how to outsource the functions of a center within the new system;
- establish an outcome measure to assess the timeliness of Medicaid eligibility determination; and
- give agencies not selected as pilot sites additional guidance and time to meet Aging Resource Center requirements.

**After Further Delay, DCF Redesigning Child Welfare Training and Taking Steps to Clarify Case Transfer**, Report No. 05-40, August 2005. Although the Department of Children and Families has taken

preliminary steps, it has not yet implemented a new child welfare training program as required by the 2003 Legislature due to procurement and design problems. Currently, the department has interim contracts, which will expire December 31, 2005, with two state universities to provide pre-service and certification training for investigators and caseworkers. The department is redesigning its training program and plans to have it fully implemented in early 2006.

To help clarify the roles of protective investigators and lead agency case managers in case transfer and case planning, the department has started identifying best practices and revising program rules. The department also should develop a model working agreement for lead agencies and investigation entities.

The department has developed and implemented a new quality assurance monitoring system for the child protection program and completed two rounds of lead agency quality assurance reviews. The department used data from the initial round of reviews to create a baseline from which to measure future progress or areas needing improvement.

**Disabilities Groups Should Improve Coordination, But Duplication of Activities Appears to Be Low**, Report No. 05-39, July 2005. Florida has many statewide entities that address the interests of persons with disabilities. These entities provide indirect services to persons with disabilities, such as reviewing, investigating, and monitoring the services that are provided by state programs; supporting legislation, programs, and policies; providing legal assistance to program clients; and promoting public awareness of the needs of persons with disabilities. Sixteen of these entities received \$5.9 million in state funding in Fiscal Year 2003-04.

Although the missions of some of the entities are similar, duplication of activities among the entities appears to be low. Some coordination among the entities is occurring, but efforts to improve coordination are impeded by the large number of entities providing indirect services and a lack of awareness of specific disabilities. To improve coordination, this report provides a directory of the groups.

**The Substance Abuse and Mental Health Corporation Has Not Addressed Its Responsibilities Fully**, Report No. 05-17, March 2005. The Legislature created the Substance Abuse and Mental Health Corporation in

2003 to oversee the publicly funded substance abuse and mental health systems. In 2004, the corporation focused on its legislative directive to review Medicaid's transition to managed behavioral health care and worked primarily with DCF and AHCA.

The corporation has not worked closely with other state agencies involved with the substance abuse and mental health systems to address its other eight statutory responsibilities. Of these, the corporation has addressed one fully, partially addressed three, and has not addressed four. To fully meet its responsibilities, the corporation should complete required memoranda of agreement with state agencies and analyze data and develop processes to improve the coordination, quality, and efficiency of the state's substance abuse and mental health programs.

The corporation is scheduled to sunset on October 1, 2006, unless reenacted by the Legislature. While the corporation's work during 2004 evinces useful beginning steps, it will be difficult to justify its continuing existence unless it more fully addresses its statutory responsibilities.

***Child Welfare Transition Nearly Complete; Budget Allocation and Oversight Systems Need Strengthening,*** Report No. 05-12, March 2005. The Department of Children and Families has nearly completed the transition to community-based care. As of January 31, 2005, the department had signed 21 services contracts with 19 lead agencies to provide child protective services in 65 counties. It plans to sign a services contract with one additional lead agency in 2005.

The department has taken recommended steps to improve the transition process, and it is in the process of implementing a system to monitor lead agency viability. However, the department has experienced continuing delays in completing the HomeSafenet system and has not yet implemented a process for tracking technical assistance requests from lead agencies.

Also, to help ensure that the community-based care initiative is successful, the department needs to

- improve its methodology for allocating funds to lead agencies and strengthen oversight of eligibility determination for federal Title IV-E funding, and
- further refine its contract monitoring system.

***Centralizing DCF Substance Abuse and Mental Health Programs Provides Benefits But Also Challenges,***

Report No. 05-07, February 2005. The recent reorganization of the Department of Children and Families substance abuse and mental health programs from a decentralized to a centralized structure provides several benefits, including

- greater program visibility;
- greater coordination within and between the substance abuse and mental health programs;
- faster decision making;
- increased standardization of policies and practices;
- enhanced oversight and accountability for facilities, personnel, and contracting.

To fulfill their new responsibilities, central office program managers need to improve communication so that other programs outside of the department are aware of the new structure, and familiarize themselves with local operational and service delivery issues. District program supervisors need to maintain close working relationships with other programs inside and outside the department.

The substance abuse and mental health programs may experience further changes if the department makes them part of the zone structure.

***DOEA Has Taken Reasonable Steps to Begin the Aging Resource Center Initiative,*** Report No. 05-06, February 2005. The Aging Resource Center initiative is intended to reduce fragmentation in the elder services system and provide easier access to services. Area Agencies on Aging will take on the responsibilities of Aging Resource Centers or Aging and Disability Resource Centers.

The Department of Elder Affairs (DOEA) and Area Agencies on Aging have met the initial legislative deadlines for developing the initiative. DOEA also has established criteria and an instrument that are appropriate for selecting area agencies to transition.

DOEA needs to take several steps to help ensure effective implementation of the new system.

- Include other key stakeholders in additional planning and implementation activities.
- Evaluate and make changes to its intake screening tool as necessary.
- Timely complete the remaining critical components in the system's framework.

***Economic Impact of Homelessness Is Significant; Improvements Needed at State and Local Levels,***

Report No. 05-01, January 2005. The economic impact of homelessness in Florida is significant, with the state, local, and federal governments spending at least \$168 million annually for programs and services to assist the homeless. This total excludes expenses incurred by local entities such as the police, courts, emergency service providers, hospital emergency rooms, and some private charities in dealing with homeless persons, as these costs are not tracked by homeless coalitions, service providers, or government agencies.

Statewide, Florida is doing well in obtaining dedicated federal funding for the homeless. However, some areas of the state have not done well in accessing federal funding.

State agencies assist local homeless efforts by providing technical assistance, direct services, and funding. However, some state agency practices and administrative requirements of mainstream programs could be improved.

Coordination among local homeless service providers is occurring, but could be improved by increased participation of service providers and full implementation of their computerized information systems.

## 2004

***Independent Living Minimum Standards Recommended for Children in Foster Care,***

Report No. 04-78, November 2004. The Department of Children and Families' Independent Living Transition Services Program provides children and young adults formerly in foster care with services and financial assistance to help them successfully transition into adulthood. As directed by law, this report recommends standards for providing independent living transition services. These standards are organized into eight areas:

- life skills;
- housing;
- education;
- employment;
- health;
- aftercare and transition;
- training; and
- data collection and evaluation.

We also provide examples of programs throughout the state that are working to follow these practices.

***Most Adult Protection Working Agreements Signed, But Have Had Limited Effectiveness,***

Report No. 04-73, October 2004. The Adult Protective Services Program investigates abuse, neglect, and exploitation and provides social services to protect vulnerable adults from harm. The program also coordinates with local law enforcement to secure the safety of the victim and adult protective investigator and to investigate possible criminal activity. To ensure proper cooperation and coordination, the Legislature required the program to establish working agreements with all jurisdictionally responsible county sheriff's offices and local police departments.

The program has signed working agreements with 342 of 346 law enforcement agencies, but the agreements have had limited effectiveness. Several problems relating to a lack of coordination between the program and local law enforcement continue to delay the provision of adult protective services and/or hinder criminal investigations.

To improve effectiveness, the program should work with local law enforcement to increase training at the local level, establish written local protocols, and conduct periodic meetings. The program also should improve coordination by designating a contact person at each local law enforcement agency and adult protection unit, and conducting periodic meetings with the Florida Sheriffs Association and Florida Police Chiefs Association.

***DCF Implements Recommendations, But Some Delays Still Occurring in Residential Mental Health Assessment Process,***

Report No. 04-67, September 2004. The Department of Children and Families and the Agency for Health Care Administration (AHCA) have taken steps to improve the process used to assess children for residential mental health placements, as recommended by our 2003 report. The department required districts to report reasons for assessment delays and take corrective actions, and it has clarified roles and timeframes for these assessments. In addition, AHCA's contractor for assessment services is now tracking and following up on children who fail to appear at assessments.

However, some delays are still occurring and the contractor is meeting only one of its three timeliness performance standards. Primary reasons for these

delays are changes in department policy that increased assessment workload and new judicial rules that require children to be represented by an appointed guardian ad litem and create the potential for additional hearings. The department, AHCA, and the contractor are working to address these delays.

**DCF Improves Readiness Assessment Process; However, Additional Changes Are Needed,** Report No. 04-67, September 2004. The Department of Children and Families has made changes to address our prior recommendations, strengthening its process for determining community-based lead agency readiness to provide child protective services. The department also is making progress in improving its data and accountability monitoring systems.

However, the department needs to take additional action to strengthen the readiness assessment process and its ability to monitor lead agency viability. The department should

- collect and track information on lead agency technical assistance requests to better identify statewide training needs;
- better enforce statutory provisions requiring community alliance members to participate in the readiness assessment review;
- continue its efforts to complete HomeSafenet implementation; and
- implement a comprehensive, coordinated process for monitoring lead agency viability.

**Sexually Violent Predator Program Is Reducing Backlog, But Still Not Timely** Report No. 04-63, August 2004. The Sexually Violent Predator Program is not meeting statutory deadlines for processing cases. Legal delays often result in offenders spending extended periods of detention while awaiting the outcome of the commitment process.

Because commitment processes have not been completed prior to the end of prison terms, the state has spent \$15 million to detain persons who were later released rather than committed. However, the program is reducing the backlog of persons waiting to complete the commitment process.

A small portion (5%) of offenders screened out by the commitment process and released have been subsequently arrested for new sex crimes; the program should revisit these cases to determine if any systemic

improvements can be made in the assessment and commitment process.

The program has strengthened experience and education requirements for private evaluators who conduct the clinical and annual sexually violent predator evaluations, as we recommended.

**Children's Advocacy Centers Authorized to Receive State Funds, But Need Additional Accountability,** Report No. 04-55, August 2004. Since our 2002 report, the Legislature has created funding sources for children's advocacy centers. However, the Florida Network of Children's Advocacy Centers needs to take additional steps to establish a statewide accountability system.

**Many Children Receiving Intensive Exceptional Student Education Services Are Served by Multiple Programs; No Unnecessary Duplication of Services Found,** Report No. 04-39, June 2004. Over half of the children with disabilities receiving intensive services from Florida's Exceptional Student Education (ESE) program also receive therapeutic or support services from at least one other state-funded program. In Fiscal Year 2000-01, state, federal, and local expenditures totaled \$464.9 million for the 11,984 children receiving intensive services from the ESE program and one or more additional programs.

To avoid duplication, services to children served by two or more programs must be carefully coordinated. While several coordination mechanisms exist and available documentation indicates that services are not unnecessarily duplicative, coordination levels between schools and agencies vary throughout the state. The Department of Education is taking steps to encourage more coordination.

**No Lead Agencies Have Earned Excess Federal Funds for Several Years,** Report No. 04-25, March 2004. As recommended in our prior report, the Legislature expanded the Department of Children and Families' excess federal earnings distribution program, which enables private community-based entities providing child protection services to receive additional federal funding. However, no lead agency has earned these funds in several years due to unavailability of TANF and limited general revenue funds to match federal dollars.

Although the 2002 Legislature directed the department to develop a proposal to use excess federal earnings to

reduce the financial risk to lead agencies, it has not done so. The department was required by law to submit a final proposal to the Legislative Budget Commission by December 31, 2002. Department officials said they expected to submit a proposal in Fiscal Year 2004-05.

**DCF's Lead Agency Readiness Assessment Process Meets Statutory Requirements, But Needs Strengthening**, Report No. 04-15, February 2004. Although the Department of Children and Families' new process to determine district and lead agency readiness meets legislative intent, the process should be strengthened to better ensure that community-based providers are ready to assume responsibility for child welfare services. While the department is taking steps to improve the process, it should also further improve its readiness instrument and require lead agencies to submit business plans before finalizing its contracts with these organizations. Finally, the department should strengthen its data and accountability monitoring systems. As required by law, we will continue to monitor department progress in future reviews.

**Child Welfare Legal Services Should Be Provided by DCF or Private Law Firms**, Report No. 04-05, January 2004. Child Welfare Legal Services attorneys represent the Department of Children and Families (DCF) at each stage of dependency proceedings. We examined four options for providing this service: contracting with other government entities, for-profit law firms, and not-for-profit entities, and retaining the service within DCF.

We concluded that there are two feasible options—contracting with private law firms and retaining the function within DCF. Transferring the responsibility to state attorneys or the Attorney General is not feasible because they do not wish to expand their involvement in the function. Contracting with lead agencies is not feasible as it would create potential conflicts of interest.

Contracting with private law firms would have uncertain cost impacts. If the service is retained within DCF, the department should take steps to improve staff professional development and accountability. The department also should adopt best practices to improve the services regardless of how they are provided. The Legislature also should consider clarifying whose interests are represented by Child

Welfare Legal Services attorneys in dependency proceedings.

**DCF Needs to Improve Child Protection Staff Training and Clarify DCF and Lead Agency Roles**, Report No. 04-03, January 2004. There is no single optimal mix of specific services for addressing the needs of families involved in child protection investigations. Rather, services must be tailored to meet the unique needs of each family. The availability of services to families does affect the frequency of reabuse. Some evidence links the availability of family services to the workload and turnover of protective investigators, but it is not a primary factor.

As the department shifts additional responsibility to community-based care providers, it needs to address three issues:

- implementing an effective training system that provides child welfare workers the necessary skills to perform their work successfully;
- clearly delineating the responsibilities of district and sheriff's office child protective investigators and lead agency caseworkers; and
- developing effective quality assurance monitoring systems to ensure fiscal integrity and quality services by its contracted providers.

## 2003

**Economic Self-Sufficiency Performance Mixed; Food Stamp Improvements Could Yield Federal Bonuses**, Report No. 03-52, October 2003. The Economic Self-Sufficiency (ESS) Program helps low-income individuals and families become self-sufficient. While the program has improved its timeliness in processing applications for services, its continuing high food stamp error rates have resulted in Florida receiving federal penalties totaling over \$2.2 million for federal Fiscal Years 2001 and 2002. Improved performance could qualify Florida for federal bonus funding beginning in federal Fiscal Year 2003. While the program's efforts to prevent and recover overpayments have yielded an overall positive return on investment, monies collected in overpayments have not covered costs for the past two years.

**Child Protection Program Makes Needed Changes But Lacks Data for Evaluating Results of Initiatives**, Report No. 03-09, January 2003. The Department of Children and Families' Child Protection Program implemented several recommendations made in our 2001

report. The program is now responding faster to hotline calls and monitoring private provider performance more effectively. However, the program continues to experience a large backlog of child protection investigations.

It would be premature to determine results of actions taken by the program to improve performance in the past year. But even when the actions have been in place long enough, the program still will lack reliable data for gauging effects of some of these initiatives, such as district efforts to recruit and retain new foster parents, and whether the program is beginning investigations within required time limits.

**Improvements Needed in the Department of Children and Families Adult Services Program**, Report No. 03-08, January 2003. To avoid expensive nursing home placement, the Adult Services Program serves vulnerable adult victims of abuse as well as disabled adults. This report reviews program performance, suggested operational improvements, and actions taken by the Department of Children and Families in response to two 2001 OPPAGA reports.

- The program has been timely in commencing investigations but not in closing them, resulting in a backlog of cases.
- Both a statewide uniform needs assessment and a funding allocation system are needed to ensure that the highest priority disabled adults are served first.
- Moving 233 general revenue clients to the Medicaid Waiver Program could save at least \$319,000 in state general revenue.
- The program's accountability system, including performance data and monitoring and oversight, needs improvement. Data on the number of elder abuse referrals made to the Department of Elder Affairs continues to be faulty.
- The department has not implemented working agreements with law enforcement as mandated by the 2000 Legislature nor has it implemented a uniform fee assessment and collection system for clients eligible to pay for services, although the collection system may not be cost-effective.
- The program could not document that it has implemented our recommendation to reduce optional state supplementation (OSS) case management visits and thus save state general revenue.

**Residential Mental Health Assessment Process Working Well with Minor Delays**, Report No. 03-03, January 2003. Prior to 2000, procedures for placing a child in residential mental health facilities lacked standard criteria, allowed potential provider conflicts of interest, and did not provide reviews to prevent children from languishing in treatment.

OPPAGA reviewed the new process required by Ch. 2000-265, *Laws of Florida*, as implemented by the Department of Children and Families and the Agency for Health Care Administration. Pursuant to Ch. 2000-265, *Laws of Florida*, the Department of Children and Families and the Agency for Health Care Administration implemented a new process for assessing dependent children for placement in residential mental health treatment facilities. OPPAGA found that

- the majority of children assessed between December 2001 and November 2002 were recommended for more intensive residential treatment rather than community-based treatment;
- assessment costs are set by contract with a private firm and do not vary across the state;
- delays do occur in the assessment process, but are not substantial; and
- there is no need to expand the professional groups who conduct assessments.

## 2002

**The Department Still Lacks Data Needed to Assess the Child Safety Administrative Review Process,** Report No. 02-65, December 2002. The Department of Children and Families is still working to develop an information system that can provide the data needed to determine if it is taking appropriate and adequate measures to prevent further harm to abused and neglected children. The department planned to implement the needed component to its HomeSafenet information system by October 2002. However, its implementation has been put on hold. Until the department puts the Child Safety Assessment component in place and conducts appropriate data verification, it will lack data needed to assess the effectiveness of its administrative review process. As a result and more than three years later, the Legislature continues to lack assurance that its mandate that the department closely examine at-risk children is having the intended effect.

**Child Care Program Implements Recommendations to Improve Licensing and Enforcement Activities,** Report No. 02-61, November 2002. In response to our 2000 report, the Department of Children and Families' Child Care Program has implemented some but not all of our recommendations. The program has provided staff training on identifying and classifying violations and is developing a statewide child care licensing information system. In addition, the Florida Partnership for School Readiness followed our recommendation to use a single data reporting system to track subsidized child client information.

However, the department has not provided additional staff training on how and when provisional licenses should be issued, and it has not completed annual monitoring of its child care licensing units. Also, the department has not conducted the evaluation of the family child care home licensure and registration system as required by law.

**Delays Reduced But Persist in the State's Juvenile Competency Program,** Report No. 02-54, October 2002. Since our prior report, the Department of Children and Families has made progress in reducing admission and discharge delays in the Juveniles Incompetent to Proceed Program. Average admission delays have been reduced from 61 to 39 days, while average discharge delays have been lowered from 58 to 47 days. These reductions have resulted in more children

attending competency training and lower costs to restore competency. The reductions are attributed to the creation of a 48-bed facility exclusively used for secure competency training, and better communication with stakeholders.

Despite an improvement, significant discharge delays persist. These delays reduce the number of children who can be served and consume 10% of the program's budget.

**Mental Health Institutions Program Acted on Three OPPAGA Recommendations,** Report No. 02-46, September 2002. In response to our 2000 report, the Department of Children and Families' Mental Health Institutions Program has acted to implement our recommendations. The department has

- expanded community-based services for clients in civil institutions and placed clients in more appropriate settings;
- increased forensic bed capacity; and
- established priorities for forensic facility capital improvement projects.

However, the lack of specific community forensic service funds has limited the department's ability to divert individuals from incarceration and commitment to a forensic hospital. Forensic admissions continue to increase and outpace the department's ability to admit individuals within the statutorily required time frame of 15 days.

**Children's Advocacy Centers Appear Beneficial But Have Limited Accountability,** Report No. 02-44, August 2002. Children's advocacy centers are local entities that coordinate the efforts of agencies involved in certain child protective investigations in the counties where they operate. Their goals are to reduce trauma to child victims of abuse and neglect and to coordinate the various activities involved in the investigation process. Some literature and stakeholders indicate that children's advocacy centers improve coordination and make the process less traumatic to children. However, children's advocacy centers have a limited statewide accountability system and limited information on their efficiency and outcomes.

While the state's 20 children's advocacy centers are primarily funded by local donations and grants, the Legislature has appropriated funds to five children's advocacy centers since Fiscal Year 1999-2000. If future

state funding is provided to children's advocacy centers an accountability system is needed.

**Domestic Violence Program Improves Coordination, But Lacks Data on Long-Term Effects of Services**, Report No. 02-19, March 2002. In response to our 2000 report, the Department of Children and Families' (DCF) Victims of Domestic Violence Program acted to improve coordination with the Child Protection Program. Specifically, DCF mandated that family service counselors complete competency-based pre-service training as part of the certification process. The department also required child protection staff to complete a risk assessment and background screening for all household members in all reports received. Finally, DCF has continued to monitor certified domestic violence shelters and child protection offices to ensure that they have effective departmental agreements.

However, the program has not collected information to assess whether its services help victims remain permanently safe from domestic violence. Instead, it has planned a new monitoring initiative for safety plans beginning in July 2002 to improve program effectiveness. Nevertheless, we continue to believe the program should collect data to improve assessment of its long-term effectiveness.

**Child Protection Program, Department of Children and Families**, Report No. 02-16, March 2002. The Child Protection Program provides for the care, safety, and protection of abused or neglected children through five major services—the Florida Abuse Hotline, protective investigations, in-home services, out-of-home services, and adoptions. We found that the program has improved in many areas since our March 2001 report, but is still not meeting some goals. We also found that the number of foster homes increased, but more homes are needed for hard to serve children. Moreover, the program continues to face challenges in retaining qualified child protection staff. After planning delays, the program's new information system, HomeSafenet, is being implemented, but has resulted in gaps in data for Fiscal Year 2000-01.

## **2001**

**Legislature Should Establish Foster Care Excess Federal Earnings Program Despite Slow Start**, Report No. 01-38, August 2001. The Department of Children and Families has slowly implemented a pilot program to distribute excess federal earnings that support foster care and adoption assistance. Although the one eligible lead agency earned \$209,690 in Fiscal Year 1999-2000, as of June 30, 2001, the department had not been billed for or disbursed these funds to the lead agency.

Preliminary indications are that the pilot is having positive effects by providing an incentive for the lead agency to modify its internal processes to maximize federal earnings. The lead agency plans to use earnings for additional foster care services and adoption assistance payments. Because these increased services will be eligible for additional federal reimbursement, they will generate an estimated additional \$273,689 in federal funds. However, because the lead agency has not yet received these funds, it is not possible to assess their impact on client outcomes.

The pilot is set to expire on June 30, 2002. As it is having positive effects and state policy is to continue to privatize child protection services, we recommend that the Legislature continue the pilot and establish the program. The department should periodically report to the Legislature how lead agencies use excess earnings.

**Alcohol, Drug Abuse and Mental Health Program Taking Steps to Implement Recommendations**, Report No. 01-34, July 2001. In response to our 1999 report, the Department of Children and Families' Alcohol Drug Abuse and Mental Health Program has taken steps to implement our recommendations. The department has

- put into practice new service arrangements to better coordinate client services in a few districts;
- expanded its use of case rate contracts with its assertive community treatment initiative;
- revised program rules to emphasize quality of care in its monitoring of substance abuse providers; and
- improved its data reporting procedures.



The department should continue to implement our recommendations. The department should extend service arrangements that effectively coordinate services into other districts. The department should continue to focus its monitoring of service providers on the quality of care they provide. It can do so by developing practice guidelines and performance measures and standards appropriate to the type of services provided and the severity of clients' illness.

**Child Protection Program**, Report No. 01-12, March 2001. The Child Protection Program provides for the care, safety, and protection of abused or neglected children through five major services – the Florida Abuse Hotline, protective investigations, in-home services, out-of-home services, and adoptions. During Fiscal Year 1999-2000, 235,823 calls were made to the Florida Abuse Hotline, of which 164,464 were serious enough to be investigated. During the same time period, the program identified 76,494 victims of abuse and neglect, provided protective supervision to 27,249 families, provided out-of-home services to 31,329 children, and placed 931 children in adoptive homes.

Our review of the program determined that

- the program provides beneficial services to clients and should be continued;
- the department is the appropriate state agency to be responsible for child protection services;
- the program has not met its legislative goals for keeping children safe from abuse and neglect and for finding children permanent homes and must take additional steps to implement more effective child protection strategies; and
- the department must address the challenges it faces in transitioning foster care and related services to community-based care lead agencies.

**DCF's Adult Services Program Meeting Goals; Data Reliability, Case Management Need Work**, Report No. 01-08, February 2001. 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.

**Client Characteristics and Outcomes Are Similar for Both Administrative and Judicial Review of Child Abuse Cases**, Report No. 01-06, February 2001. This is the second of two reports on the Department of Children and Families' administrative review process for child abuse investigations. In this report, we compare the characteristics and outcomes of children whose child protection investigations were subsequently examined by the department's administrative review process and those whose cases were reviewed through the court system. Our analysis of child abuse reports that were investigated and closed during the period from January 3, 2000, through September 30, 2000, determined that

- children in both groups have similar demographic profiles and similar types of verified maltreatment, and
- about one-fourth of the children in both groups had subsequent alleged abuse reports.

**High-Risk Elder Victims of Abuse, Neglect, or Exploitation Quickly Served; Data Problems Remain**, Report No. 01-04, January 2001. Although the number of elder victims of abuse, neglect, or exploitation referred from the Department of Children and Families (DCF) to the Department of Elder Affairs (DOEA) has increased in most areas of the state, these caseload increases have not impeded DOEA's ability to serve high-priority clients. However, the caseload increases have resulted in more lower-priority clients being placed on DOEA waiting lists.

Despite improvements, DCF and DOEA data do not provide a complete and accurate assessment of the number of elder victims of abuse, neglect, or exploitation referred to DOEA or the timeliness of services provided to them. Problems include discrepancies in the number of referrals reported, lack of capacity to report why some high-risk referrals are

not served in a timely manner, and aggregate reporting of services for lower-risk referrals.

Cooperation between DCF and DOEA in serving elder victims of abuse, neglect, or exploitation generally has increased or been maintained as a result of the 1998 law changes. But there are problems in some areas of the state that should be addressed.

**2000**

**72% of Youths Restored to Competency, Able to Move to Delinquency Proceedings**, Report No. 00-27, December 2000. The Juveniles Incompetent to Proceed Program restores the adjudicative competency of 72% of the mentally ill and mentally retarded children court-ordered to participate in competency restoration training. Training is most effective for mentally ill children. The \$4.2 million program served 266 children in Fiscal Year 1999-2000.

More than half of children complete training within six months; 90% complete training within a year. After training, children are returned to the juvenile justice system to continue with delinquency proceedings.

The program is an improvement over the way juvenile competency was handled before Florida's juvenile competency statute was passed in 1996. However, community partners raise concerns about methods used to assess juvenile competency; delays securing services and placements for children; and delays discharging children from the program. Some of these issues are outside the department's influence.

**Child Care Program, Florida Department of Children and Families**, Report No. 00-16, November 2000. The Child Care Program regulates child care providers, provides training for child care personnel, and provides subsidized child care services to children at-risk of abuse and neglect and children who come from economically disadvantaged families. At the end of Fiscal Year 1999-2000, the program reported regulating 14,620 child care providers and providing subsidized child care services to a monthly average of 124,793 children.

Our review of the program determined that

- The program provides beneficial services to clients and to Florida's citizens;
- The program's licensing function should remain with the Department of Children and Families, but

subsidized child care is currently being transferred to the Florida Partnership for School Readiness;

- The program's licensing and enforcement efforts are reasonably effective in ensuring healthy and safe child care environments;
- The program is serving 100% of its subsidized child care clients in two priority groups;
- The program and the Legislature have taken several steps to increase the quality of care in regulated child care settings and to address the subsidized child care needs of working-poor clients;
- Efforts must be made to address enforcement problems that reduce the program's regulatory effectiveness; and
- Additional steps must be taken to effectively implement the 1999 school readiness legislation.

**Mental Health Institutions Program, Florida Department of Children and Families**, Report No. 00-13, October 2000. The program provides beneficial services to clients as well as a public safety benefit to Florida's citizens. Many institutional clients could be served in less costly and less restrictive community treatment settings. Some clients remain in forensic hospitals after restoration of mental competencies because of either limited community treatment alternatives or a lack of mental health services in jails.

**Effectiveness and Monitoring of Martin Treatment Center for Sexually Violent Predators**, Report No. 00-12, September 2000. This report assesses the performance of Liberty Behavioral Healthcare, Inc., the contractor the Department of Children and Families hired to operate the Martin Treatment Center for Sexually Violent Predators, and examines the department's monitoring of the Liberty contract. The United States Supreme Court has held that civil commitment programs such as Florida's are constitutional if they provide bona fide treatment in a non-punitive environment.

Our review found that Liberty's treatment team leaders had appropriate education and experience, though the department and Liberty should establish standards for continuing education for staff.

The physical space at Martin Treatment Center is not conducive to treatment and restricts the routine provision of vocational and recreation services. However, Liberty has taken steps to improve the living

and treatment environment and some of the constraints should be addressed when the program is moved to a specially renovated facility at DeSoto Correctional Institution in November 2000. Nevertheless, the program should develop a vocational education plan to prioritize use of vocational resources.

Liberty's treatment model has evolved over the course of the first year, and treatment planning is improving. However, treatment progress has not been well documented. The program needs to develop and implement a data collection plan to better track resident progress. The Legislature needs to revise the Jimmy Ryce Act to address the need to supervise and treat committed individuals in the community as the final stage before release from the program. One person has already been released from the program without transition.

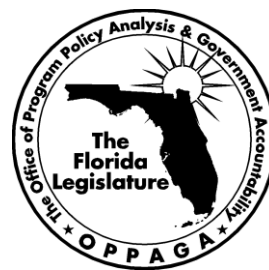
Residents at the facility have sexual impulse problems and sexual activity does occur between residents. The program should continue to monitor such activity and, from a therapeutic perspective, take necessary steps to address such behavior. In addition, the department should investigate an after-hours, off-site event at which sexual misconduct of Liberty employees was alleged to have taken place.

***Domestic Violence Shelters Keep Victims Safe, Need Data on Long-Term Effects***, Report No. 00-03, August 2000. The victims of domestic violence program has successfully kept victims of domestic violence safe when they are in shelter. For three consecutive years, the program has met its "zero incidents" performance standard.

The percentage of clients in shelter for 72 hours or more with a family safety plan in effect is below the current legislative standard.

The Department of Children and Families lacks data on the program's long-term impact on preventing further abuse of victims. The certified domestic violence centers should report more information on victims' previous experiences in attempting to break free from domestic violence.

The lack of cooperation between certified domestic violence centers and child protection staff can hinder staff from determining the best course of action for the family. The centers and the department have developed several strategies to improve their interaction, and the department should monitor the effectiveness of these efforts.



# *The Florida Legislature*

## *Office of Program Policy Analysis and Government Accountability*

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### **The Florida Government Accountability Act Sunset Reviews**

The 2006 Legislature passed the Florida Government Accountability Act (Ch. 2006-146, *Laws of Florida*) to create a Sunset review process. The act

- establishes the process, criteria, and schedule for the Legislature to assess whether state agencies and advisory committees need to continue to exist;
- provides for the creation of a Legislative Sunset Advisory Committee and describes the membership and organization of the committee and committee duties; and
- requires reports and assistance from state agencies and the Legislature's Office of Program Policy Analysis and Government Accountability (OPPAGA).

Using these reports and other information, the Sunset Advisory Committee is to produce a report that includes recommendations to abolish, continue, or reorganize an agency or advisory committee under review.

### **Second Year Schedule for Agency Reviews**

Agencies to be reviewed by July 1, 2010:

- (a) Department of Children and Family Services
- (b) Department of Community Affairs
- (c) Department of Management Services
- (d) Department of State

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