(FY2019 Appropriation Act - Public Act 207 of 2018)

March 31, 2019

Sec. 503. (1) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue to develop actuarially sound case rates for necessary child welfare services that achieve permanency by the department and private child placing agencies in a prospective payment system under a performance-based funding model.

(2) From the funds appropriated in part 1 for adoption support services, the department shall allocate \$50,000.00 by December 31 of the current fiscal year to conduct an actuarial study on rates paid to private child placing agencies for adoption incentive payments. The actuarial study shall include a full cost prospective rate payment system and shall identify and analyze contractual costs paid through the case rate developed by an independent actuary.

(3) By October 1 of the current fiscal year, from the funds appropriated in part 1 for adoption support services, the department shall allocate \$950,000.00 of state general fund/general purpose and any eligible federal matching funds to increase rates paid to adoption service providers by up to 10% for adoption placement, adoption finalization, and adoption permanency in all rate categories.

(4) By March 1 of the current fiscal year, the department shall provide to the senate and house appropriations committees on the department budget, the senate and house fiscal agencies and policy offices, and the state budget office a report on the full cost analysis of the performance-based funding model. The report shall include background information on the project and give details about the contractual costs covered through the case rate.

(5) In accordance with the final report of the Michigan child welfare performance-based funding task force issued in response to section 503 of article X of 2013 PA 59, the department shall continue an independent, third-party evaluation of the performance-based funding model.

(6) The department shall only implement the performance-based funding model into additional counties where the department, private child welfare agencies, the county, and the court operating within that county have signed a memorandum of understanding that incorporates the intentions of the concerned parties in order to implement the performance-based funding model.

(7) The department, in conjunction with members from both the house of representatives and senate, private child placing agencies, the courts, and counties shall continue to implement the recommendations that are described in the workgroup report that was provided in section 503 of article X of 2013 PA 59 to establish a performance-based funding for public and private child welfare services providers. The department shall provide quarterly reports on the status of the performance-based contracting model to the senate and house appropriations subcommittees on the department budget, the senate and house standing committees on families and human services, and the senate and house fiscal agencies and policy offices.

(8) From the funds appropriated in part 1 for the performance-based funding model pilot, the department shall continue to work with the West Michigan Partnership for Children Consortium on the implementation of the performance-based funding model pilot. The consortium shall accept and comprehensively assess referred youth, assign cases to members of its continuum or leverage services from other entities, and make appropriate case management decisions during the duration of a case. The consortium shall operate an integrated continuum of care structure, with services provided by both private and public agencies, based on individual case needs. The consortium shall demonstrate significant organizational capacity and competencies, including experience with managing risk-based contracts, financial strength, experienced staff and leadership, and appropriate governance structure.



The Michigan Department of Health and Human Services (MDHHS) continues to lead and utilize the Child Welfare Partnership Council to ensure stakeholder involvement in the implementation of the performance-based funding model. MDHHS has collaborated with Kent County MDHHS staff and the Kent County provider community involved in the West Michigan Partnership for Children (WMPC) to continue supporting the Kent County pilot.

The performance-based case rate funding model is intended to improve outcomes for children and families; allow for the effective allocation of resources to promote local service innovation, create service efficiencies, and incentivize service providing agencies to be accountable for achieving performance standards. The funding model reinforces positive outcomes and reinvests savings for continued improvements in the community. For example, as more children safely return home from foster care more quickly, the savings that result from returning/keeping children in their homes can be reinvested in developing services that will fortify and support the community to prevent other children from entering foster care in the first place.

| | | Fiscal Year 2019 | | | | |
|---------------------------------|---------------------|------------------|------------------|-----|--|--|
| | Fiscal Year 2018 | October 2018 | December 2018 | | | |
| New Referrals (Entries) | 488 | 45 | 21 | 40 | | |
| Children Discharged (Exits) | 398 | 45 | 25 | 39 | | |
| Census at the end of the Period | 890 | 876 | 872 | 867 | | |

Data Overview

Data Source: Data Warehouse Data Run Date: 2/28/19

| | | | Fiscal Year 2019 | | | |
|--|---------------------|-----|------------------|------------------|------------------|--|
| Discharge Reasons | Fiscal Year 2018 | | October 2018 | November 2018 | December 2018 | |
| Reunification with Parents | 192 | 48% | 24 | 10 | 11 | |
| Adoption | 140 | 35% | 11 | 13 | 21 | |
| Guardianship | 29 | 7% | 6 | 1 | 6 | |
| Emancipation | 25 | 6% | 4 | 1 | 1 | |
| Living with Relatives | 5 | 1% | 0 | 0 | 0 | |
| Other (AWOL, Transfer to another agency) | 7 | 2% | 0 | 0 | 0 | |
| Total Discharges | 398 | | 45 | 25 | 39 | |

Data Source: Data Warehouse

Data Run Date: 2/28/19

| Placement Settings for Children | | | | | | | | |
|--|--|------------------|-------------|------------------|------|------------------|-----|--|
| | | Fiscal Year 2019 | | | | | | |
| | *Placement Utilization During FY18 | | ober 018 | November 2018 | | December 2018 | | |
| Total Children | 1275 | 8 | 876 872 | | 72 | 867 | | |
| Foster Home | 43% | 377 | 43% | 381 | 44% | 358 | 41% | |
| Relative | 26% | 247 | 28% | 254 | 29% | 252 | 29% | |
| Parental Home | 9% | 86 | 10% | 80 | 9% | 89 | 10% | |
| Residential Care | 10% | 71 | 8% | 65 | 7% | 68 | 8% | |
| Adoptive Home | 5% | 44 | 5% | 42 | 5% | 44 | 5% | |
| Independent Living | 2% | 16 | 2% | 15 | 2% | 15 | 2% | |
| Fictive Kin | 2% | 15 | 2% | 15 | 2% | 11 | 1% | |
| Shelter | 1% | 5 | 1% | 5 | 1% | 8 | 1% | |
| Guardian | 0.1% | 3 | 0.3% | 3 | 0.3% | 6 | 1% | |
| Other (Jail, Detention, AWOL, Hospital) | 2% | 12 | 1% | 12 | 1% | 16 | 2% | |

Data Source: Data Warehouse.

*Placement utilization in FY18 is total days of care in each

placement setting divided by the total days of care in the FY. 1275 is total children served during FY18.

Data Run Date: 2/28/19

Key Performance Indicators

| | | | | ***WMPC FY19 Performance by Month | | | |
|---------------------------------|----------|------------------------------------|-------------------------------|-----------------------------------|------------------|------------------|--|
| Key Performance Indicators | Standard | *Statewide FY 18 Performance | **WMPC FY18 Performance | October 2018 | November 2018 | December 2018 | |
| Caseworker-Child Visits | 95% | 81% | 88% | 94% | 94% | 95% | |
| Caseworker-Parent Visits | 85% | 60% | 63% | 65% | 65% | 61% | |
| Parent-Child Visits | 85% | 45% | 52% | 53% | 49% | 45% | |
| Worker-Supervisor Conferences | 95% | 92% | 96% | 98% | 96% | 97% | |
| Initial Service Plan Timeliness | 95% | 75% | 70% | 71% | 71% | 90% | |
| Updated Service Plan Timeliness | 95% | 86% | 89% | 90% | 90% | 86% | |
| Supervisor Approval Timeliness | 95% | 88% | 87% | 92% | 92% | 85% | |
| Initial Medical Exam Timeliness | 85% | 85% | 84% | 82% | 69% | 100% | |
| Annual Medical Exam Timeliness | 95% | 86% | 84% | 88% | 67% | 86% | |
| Initial Dental Exam Timeliness | 90% | 85% | 77% | 66% | 67% | 64% | |
| Yearly Dental Exam Timeliness | 95% | 80% | 86% | 78% | 75% | 79% | |

'Data Retrieved: Monthly Management Report, September 2018, 12-month data

"Data Retrieved: MDHHS Kent County Reports- 10-1-17 to 9-30-18, Run Date: 2/26/19

*** Data Retrieved: MDHHS Kent County Reports by Month, Run Date: 2/26/19

| Expenses-Cash Basis | FY18 | Q1 FY19 | FY19 Projected Spending Compared to FY18 |
|---|------------------|-----------------|--|
| Foster Care Administration | \$ 15,240,083.09 | \$ 3,911,336.35 | |
| Caregiver Maintenance Expenses | \$ 3,648,409.83 | \$ 1,034,042.94 | <u>↑</u> |
| Enhanced Foster Care Maintenance & Administration/Incentives/Treatment Foster Care Administration | \$ 1,053,168.40 | \$ 769,196.58 | ſ |
| Residential Expenses | \$ 10,525,555.18 | \$ 2,119,644.14 | \downarrow |
| Shelter Expenses | \$ 1,167,662.32 | \$ 270,065.76 | \downarrow |
| Ancillary Services | \$ 1,325,452.85 | \$ 349,205.64 | 1 |
| Adoption Administration | \$ 1,337,244.52 | \$ 432,870.00 | <u>↑</u> |

Data Source: FY18-WMPC Accounting Report, FY19-Q1 Cost Report

Key Innovations and Status Updates

- WMPC continued to serve children in the Enhanced Foster Care Program. Enhanced Foster Care is a family-based service that provides individualized treatment for children in general foster care who present with intensive behavioral or emotional needs that was introduced by WMPC in December 2017. Between January 1, 2018 – December 31, 2018, WMPC provided this service to 115 children.
- Since implementing Enhanced Foster Care in January 2018, WMPC has decreased placements in residential settings by five percentage points. Residential settings are very effective at addressing treatment needs of children who require this level of treatment and service. WMPC has observed that by providing increased services and supports in the home, residential placement expenses can be reduced while maintaining children in the least-restrictive, most family-like setting that meets their needs. Based on WMPC expenditures on residential placements in the first three months of fiscal year 2019, WMPC expects to spend two million less on residential in FY2019 than in FY2018.
- WMPC implemented a robust, continuous quality improvement framework to quickly and effectively identify areas for improvement across its provider network. This is a cyclical and ongoing process in which WMPC continuously identifies areas to analyze, monitor, and effect change. Performance measures are clearly defined by WMPC, MDHHS, and the U.S. Department of Health & Human Services/Administration for Children & Families.
- WMPC's performance and quality improvement team continually analyzes performance data and engages with its network providers formally on a monthly basis to discuss key performance measures, data quality, outcome measures, and quality improvement plans. WMPC also meets with providers on a quarterly basis to assess performance against the contract as a condensed review of contract

compliance and achievement of outcomes. (Refer to attachment *Fiscal Year 2019 Quarter One Performance Report*)

- WMPC's Performance and Quality Improvement team uses MindShare, Michigan's Statewide Automated Child Welfare Information Systems (MiSACWIS) database, and local records to analyze data related to performance. WMPC also developed an additional five performance measures for fiscal year 2019 to help advance progress in improving outcomes for children and families (Refer to attachment, *Performance Measures – Fiscal Year 2019*).
- MDHHS, WMPC, and MindShare executed a second data-sharing agreement which will increase data WMPC will be provided to include:
 - Foster home data.
 - Court information.
 - Financial data.
 - Child well-being data.
 - Historical data file to allow for benchmarking pre and post implementation of the WMPC.

This data will allow for improved decision-making, utilization management, and monitoring of performance measures. It will also allow MindShare to begin developing algorithms to inform predictive analytics models.

- Network180 (Kent County's Community Mental Health Services) has developed a subcontract with WMPC to provide clinical liaison services in each of the partner agencies, as well as Kent County MDHHS, which will begin in March 2019. WMPC has hired a clinical liaison who will assess youth to ensure eligible children receive clinical services that they need. This position will assist in better integration of the system of care, bringing together mental health with child welfare with the goal of increasing access to mental health services. The mental health perspective will assist in addressing root causes of behavior leading to improved stabilization of youth.
- WMPC is developing a "Progress Toward Permanency" utilization management model to ensure appropriate usage and dosage of services and leadership involvement in permanency planning.
- WMPC revised its bylaws to add an additional seven community members to its Board of Directors. In addition to a representative from each of the five consortium member agencies, WMPC is planning on adding an additional seven community members, considering the following criteria:
 - Diversity in race, ethnicity, gender, socioeconomic status.
 - Client beneficiaries.
 - Disciplines: education, health, law enforcement, judicial, housing/community development, business, and faith.
- WMPC submitted a survey to community stakeholders in January to seek feedback on potential candidates and additional criteria to consider. WMPC is in the process of recruiting, which includes members nominated by the community.

Attachments

- Fiscal Year 2019 Quarter One Performance Report
- Performance Measures Fiscal Year 2019



West Michigan Partnership for Children

Performance Measures - Fiscal Year 2019



Achieve either of the following goals:

The percentage of children placed in community-based foster care in the most familylike setting increases by 3% from the previous year.



At least 94% of the agency's children are placed in community-based settings each year.



Least-Restrictive Placements

Achieve the following goal:



50% of children transition from institutional placement within 9 months to a community-based, family-like placement and do not reenter residential care within 12 months of being placed in the community-based placement.

"Anna was placed in an institution on January 3, 2017. Within 9 months, on August 17, she moved in with a licensed foster parent. She remained there until September 27, 2018 when she began living independently."

Relative Placements

Achieve either of the following goals:

The percentage of children placed in relative care increases by 6% from the previous year.

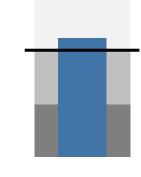


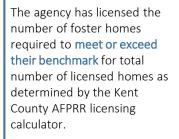
At least 35% of all children served by the agency are in relative care each year.



Licensed Foster Homes

Achieve the following goal:

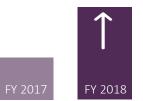






Achieve either of the following goals:

Case workers' timely, monthly face-to-face contacts with parents of children who have a permanency goal of reunification increase by **12%** from the previous year.



At least **85%** of the possible monthly face-to-face contacts occur within the time frame.



| | Total # of children placed in most family-like setting between 10/1/17 and 9/30/2018 | | | otal # of children placed in most family-like setting between 10/1/18 and 9/30/2019 | | | |
|--|---|---------|--|---|---|-------------------------|---------------------------------|
| Total # of children between 10/1/17 and 9/30/2018 | | - Q - | Total # of children between 10/1/18 and 9/30/2019 | | = | Community Placements | |
| as of 9/30/1 | A dren in the community .7 who moved from a an 12 months earlier | + | B Total # of children between 10/1/17 and 9/30/18 who moved into the community and didn't return to CCI within 12 months | + | C Total # of children in the community on 9/30/19 who are not included in A and B | | 2 |
| Total # | D f of children in CCI on 9/30/17 | + | E Total # of children in the community on 9/30/17 who have not been in that placement for 12 months or more | + | F Total # of children in the community or CCI any time between 10/1/17 and 9/30/18 excluding those in D and E | = | Least-Restrictive Placements |
| | Total # of children In relative care between 10/1/17 and 9/30/2018 Total # of children between 10/1/17 and 9/30/2018 | | | Total # of children In relative care between 10/1/18 and 9/30/2019 Total # of children between 10/1/18 and 9/30/2019 | | | 3 |
| | | | - & | | | _ | Relative Placements |
| | | Total n | umber of homes licensed as determined b | by the Non-I | elated Foster Home Dashboard | = | 4 Licensed Foster Homes |
| 1 | | | | | | | |

&

Total # of timely, monthly, face-to-face contacts between worker and parent between 10/1/17 and 9/30/2018

Total # of children with goal of reunification between 10/1/17 and 9/30/2018 Total # of timely, monthly, face-to-face contacts between worker and parent between 10/1/18 and 9/30/2019

Total # of children with goal of reunification between 10/1/18 and 9/30/2019



=

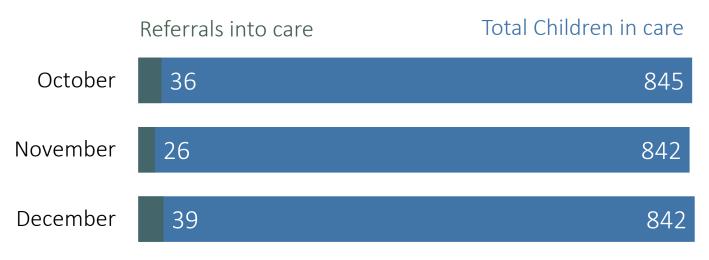


Fiscal Year 2019 (FY19) Quarter 1 Performance Report

October 2018 - December 2018

Children in Foster Care

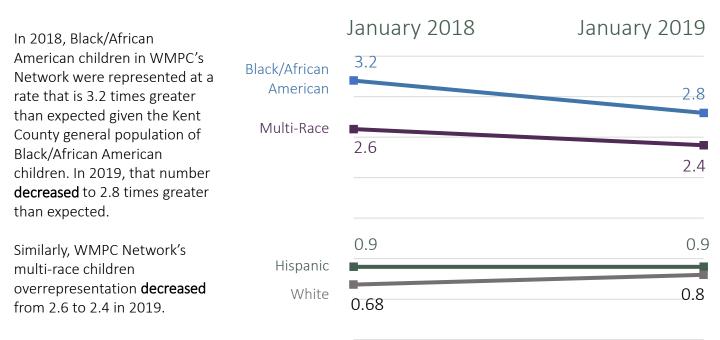
The number children in foster care each month remained consistent in Fiscal Year 2019 Quarter 1.



Source: Mindshare, Active Child List, retrieved January 18, 2019.

Racial Disproportionality Index

A disproportionality index of 1 indicates that the proportion of a racial/ethnic group in foster care reflects the same proportion of that racial/ethnic group in the general population. A number above 1 indicates the group is overrepresented. A number below 1 indicates the group is underrepresented.



Source: Mindshare, Active Child Dashboard, date range 10/1/17-12/7/18, retrieved 12/8/17; date range 10/1/17-9/30/18, retrieved 1/29/2019.

Source: U.S. Census Bureau, 2016 1-Year Estimates; 2013-2017 American Community Survey 5-Year Estimates.

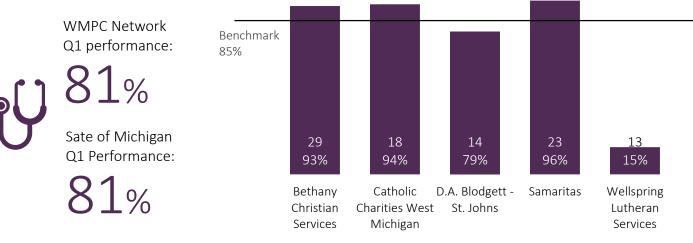
Initial Medical Exams

West Michigan Partnership for Children

wmpc

At least 85% of children will have an initial medical examination within 30 days of removal.

Three agencies exceeded the benchmark for initial medical exams in Quarter 1.



Strengths



Having administrative staff specifically responsible for scheduling and following up with appointments, entering appointments, and uploading documentation.

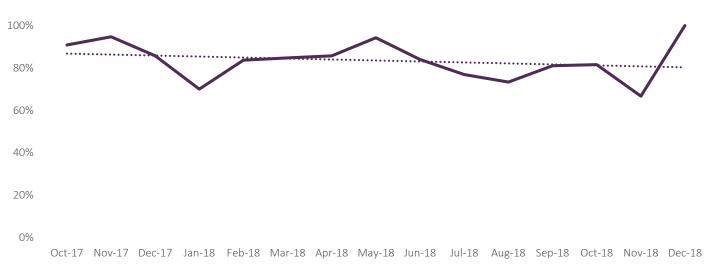
Barriers



Staff experience difficulty receiving verification documentation back from providers which limits timely entry of information into MiSACWIS.

Agencies are not consistently using Care Connect 360.

WMPC's monthly trend from October 2017 to December 2018:



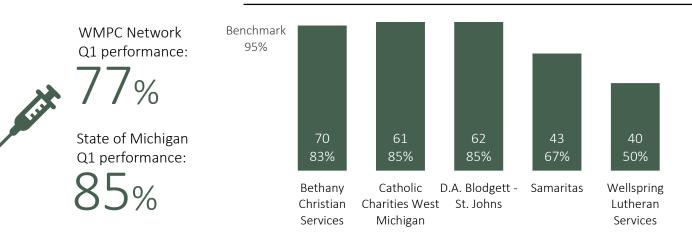
Source: MiSACWIS Initial Medical Exam Timeliness Info View Report, retrieved 1/30/19.

Yearly/Periodic Medical Exams



Following an initial medical examination, at least 95% of children shall receive periodic medical examinations and screenings according to the guidelines set forth by the American Academy of Pediatrics.

None of the agencies met the benchmark for periodic medical exams in Quarter 1.



Strengths



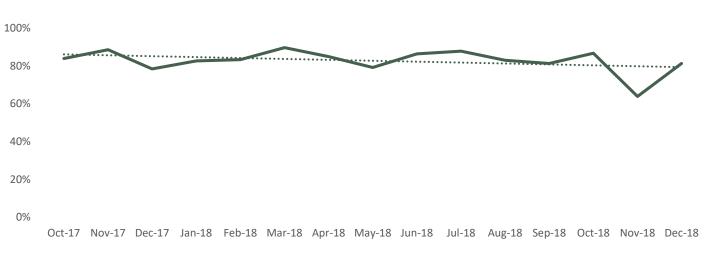
Having administrative staff specifically responsible for scheduling and following up with appointments, entering appointments, and uploading documentation.

Barriers



Well Child documentation is difficult to obtain because sometimes providers will not see a child because the provider's timeframe of necessary appointments is different than what Well Child policy requires.

WMPC's monthly trend from October 2017 to December 2018:



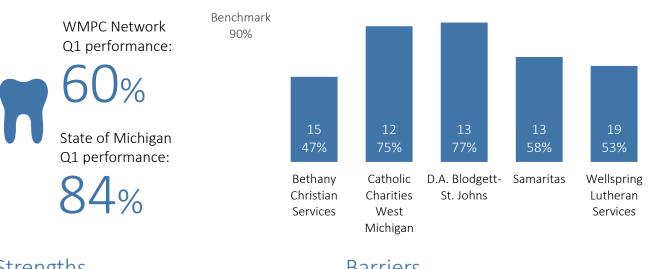
Source: MiSACWIS Medical Exam Timeliness Info View Report, retrieved 1/30/19.

Initial Dental Exams



At least 90% of children shall have an initial dental examination within 90 days of removal unless the child has had an exam within six months prior to placement or the child is less than four years of age.

None of the agencies met the benchmark for initial dental exams in Quarter 1.



Strengths

Having administrative staff specifically responsible for scheduling and following up with appointments, entering appointments, and uploading documentation.

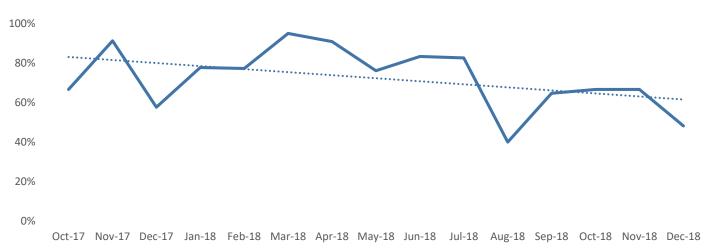
Barriers



Agencies are unaware of all the dental provides accepting Medicaid in Kent County.

Agencies are inconsistently using the Book of Business and struggle to consistently track the initial dental appointments.

WMPC's monthly trend from October 2017 to December 2018:



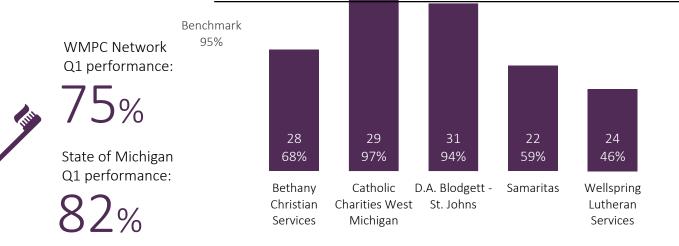
Source: MiSACWIS Dental Exam Timeliness Info View Report, retrieved 1/30/19.



Yearly Dental Exams

At least 95% of applicable children shall have a dental examination at least every 12 months.

Catholic Charities was the only agency to meet the benchmark for the first quarter.



Strengths

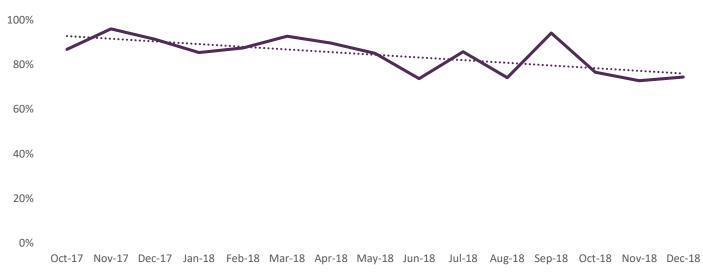
Having administrative staff specifically responsible for scheduling and following up with appointments, entering appointments, and uploading documentation.

Barriers



Agencies are unaware of all the dental provides accepting Medicaid in Kent County.

WMPC's monthly trend from October 2017 to December 2018:



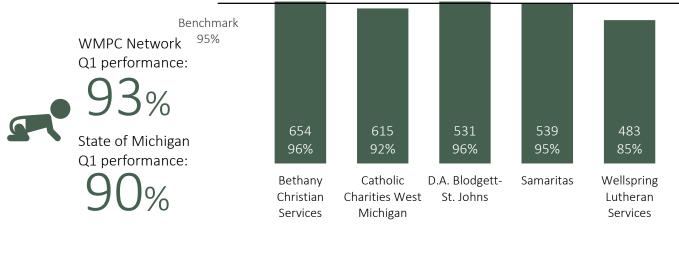
Source: MiSACWIS Dental Exam Timeliness Info View Report, retrieved 1/30/19.



Worker - Child Visits

At least 95% of children will be visited by their assigned worker.

Three of the agencies met the benchmark for the first quarter.



Strengths



Assign a mentor to attend the "quiet hours" to assist workers who need help entering social work contacts in MiSACWIS.

Some supervisors require their new workers to draft and email their home visit information for review, to ensure that it will be accurately recorded in MiSACWIS.

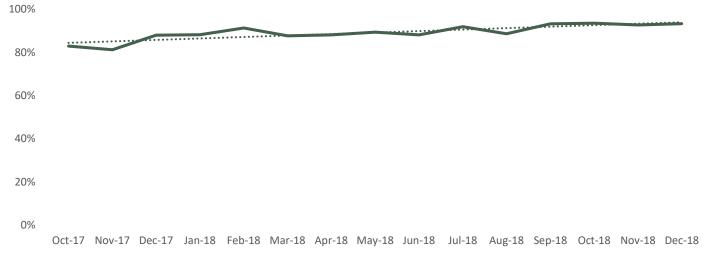
Barriers



When agencies do not close cases in a timely manner, visits are still assigned to the worker and may skew that data.

Data entry errors occur when workers forget to mark visit as "private."

WMPC's monthly trend from October 2017 to December 2018:



Source: MiSACWIS Social Work Contacts Timeliness Info View Report, retrieved 1/30/19.

Worker - Parent Visits

West Michigan Partnership for Children

At least 85% of parents whose children have a permanency goal of reunification shall have face to face contact by the assigned caseworker in accordance with the guidelines in FOM.

None of the agencies met the benchmark for the first quarter average.

WMPC Network Q1 performance: Benchmark

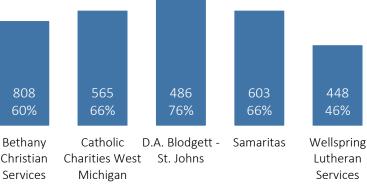
85%

53%



Q1 performance:

60%



Strengths

Workers try to involve other people who the parent trusts such as preventative services, their attorney, or a relative in the process because this often increases the likelihood of the parent's participation.

Workers schedule visits before or after parenting time and/or meet with parent(s) at a location of their choice.

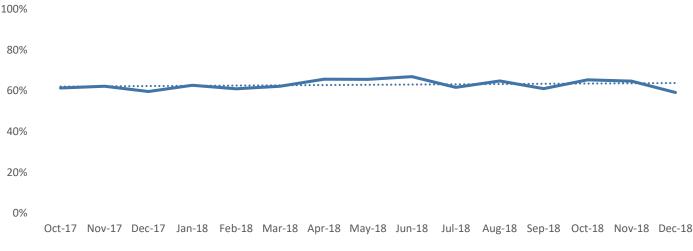
Workers utilize a variety of communication strategies to engage with parents.

Barriers



Out-of-state parents still count against compliance in the data even if contact exists. There is an exception for this in parent-child visits but not worker-parent visits. In some cases, the permanency goal remains reunification for a long period of time despite a lack of parent engagement.

WMPC's monthly trend from October 2017 to December 2018:



Source: MiSACWIS Social Work Contacts Timeliness Info View Report, retrieved 1/30/19.

Parent - Child Visits



No fewer than 85% of children with a goal of reunification shall have visitation with their parent(s) at least weekly for youth six years old or older and at least twice per week for youth 0-5 years old.

None of the agencies met the benchmark for the first quarter average.



with the parent(s) prior to court to discuss what the worker is going to report. Workers confirm visits with parents via phone

on the day of the visit. Improve communication with case aides so

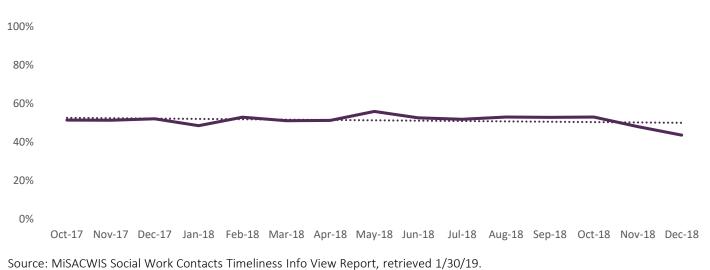
that offering parents the option of one longer visit/week is not interpreted as equal to the required two visits/week.



Many parents visit with their child once/week rather than twice/week. Even if the one visit is longer in duration to make up for the second visit, it does not count.

A significant amount of information must be entered for each parent-child visit. In many non-compliant cases, an element is missed.

WMPC's monthly trend from October 2017 to December 2018:

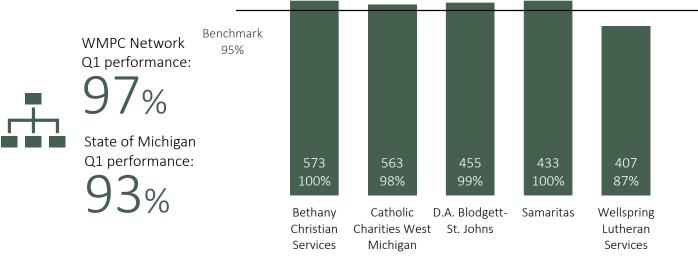




Worker - Supervisor Visits

At least 95% of children shall meet at least monthly with each assigned case worker to review the status and progress of each case on the worker's caseload.

Four of the five agencies met the benchmark for the first quarter.



Strengths



Workers often meet with their supervisor more frequently than the benchmark requires.

At some agencies, supervisors enter the worker-supervisor meetings into MiSACWIS.

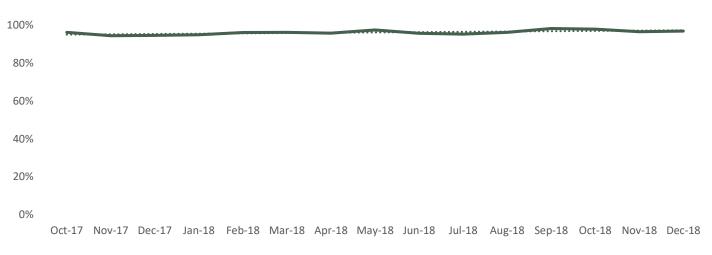
Barriers



Pending case closures count against this benchmark.

When agencies do not close cases in a timely manner, visits are still assigned to the worker and may skew that data.

WMPC's monthly trend from October 2017 to December 2018:



Source: MiSACWIS Social Work Contacts Timeliness Info View Report, retrieved 1/30/19.

Initial Service Plans

West Michigan Partnership for Children



At least 95% of children shall have an initial service plan completed within 30 days of entry into foster care and quarterly thereafter in accordance with the guidelines in FOM.

None of the agencies met the benchmark for the first quarter average.

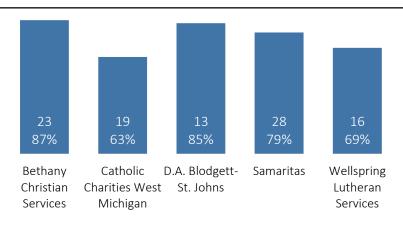


< Benchmark e: ^{95%}



State of Michigan Q1 performance:

79%



Strengths



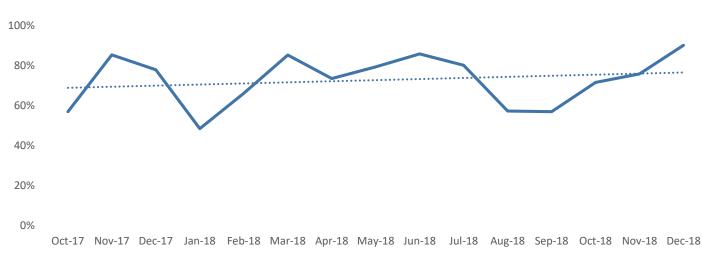
Supervisors utilize various strategies to maintain deadlines including tracking spreadsheets, placing dues dates on worker's Outlook calendars with buffers built in, and reviewing the BOB during supervision.

Barriers



Sibling groups impact compliance significantly. For example, if a sibling group of five enters care, one report needs to be written but it applies to each of the five youth. If that report is not completed on time, five youth will count as missing a plan.

WMPC's monthly trend from October 2017 to December 2018:



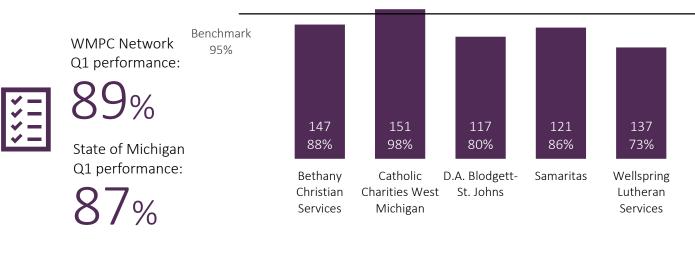
Source: MiSACWIS Caseworker Service Plan Timeliness Info View Report, retrieved 1/30/19.

Updated Service Plans

West Michigan Partnership for Children

At least 95% of children shall have a service plan updated quarterly.

Catholic Charities West Michigan was the only agency to meet the benchmark for Quarter 1 average.



Strengths



During supervision, workers and supervisors list the required reports for that week or month and prioritize the list based on court dates and policy due dates.

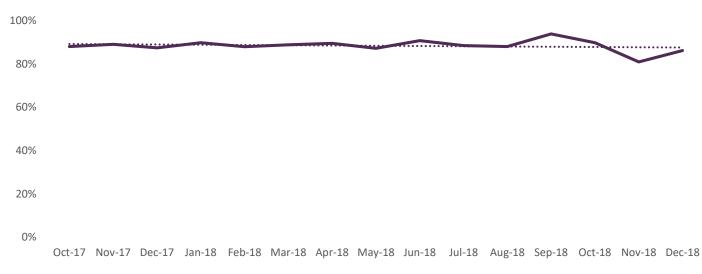
Barriers



Worker turnover impacts the completion of timely USPs because the case needs to be transferred, which may create a delay in completing a report.

Agencies do not have a consistent protocol in place to ensure completion of all tasks before a case transfers.

WMPC's monthly trend from October 2017 to December 2018:



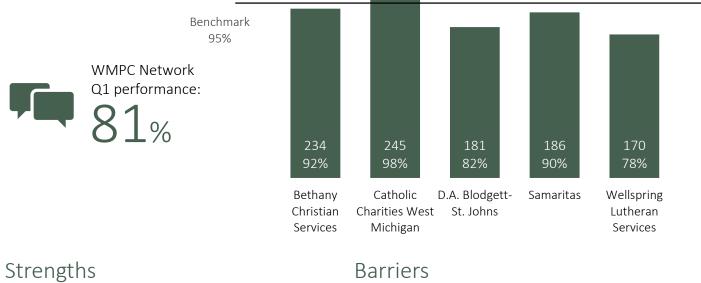
Source: MiSACWIS Caseworker Service Plan Timeliness Info View Report, retrieved 1/30/19.

West Michigan Partnership for Children

Plan Approvals

At least 95% of children shall have a case service plan approved within 14 days of case worker submission to the supervisor for review per FOM 722-09 policy.

Catholic Charities West Michigan was the only agency to meet the benchmark for Quarter 1 average.





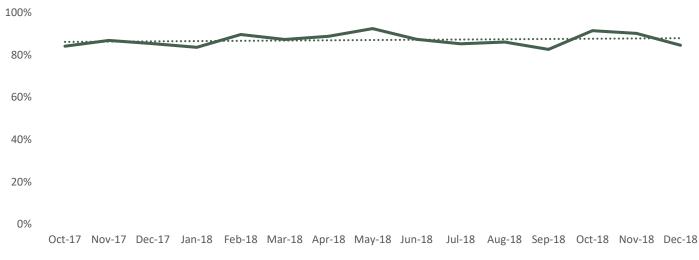


Supervisors use a structured timeline, such as six days for reviews, four days for edits, and three days for final review.



MiSACWIS is a cumbersome system for edits because there are many documents with various links that must be navigated through. This is especially difficult for new workers. Additionally, when a report is returned for edits, it is no longer pending in the worker's queue which makes it easy to forget about.

WMPC's monthly trend from October 2017 to December 2018:

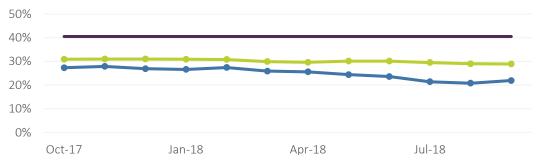


Source: MiSACWIS Supervisor Service Plan Timeliness Info View Report, retrieved 1/30/19.

Permanency in 12 months for children entering foster care

Of all children who enter foster care in a 12 month period, what percentage are discharged to permanency within 12 months of entering foster care?

Kent County did not meet the benchmark during Fiscal Year 2017, and was also 5.2 percent below the Michigan annual average.



Benchmark: **40.5%**

(Higher is better)

MI annual average:

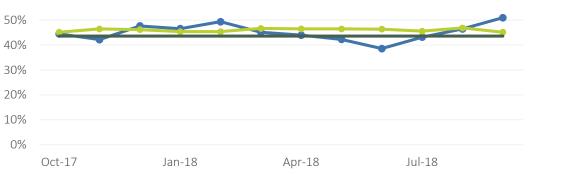
30.2%

Kent annual average: **25.0%**

Permanency in 12 months for children in care 12 months to 23 months

Of all children in care on the first day of a 12-month period who had been in care (in that episode) between 12 and 23 months, what percentage are discharged to permanency within 12 months of the first day?
Benchmark:

Kent County exceeded the benchmark during Fiscal Year 2017, and was just 0.9 percent below the Michigan annual average.



(Higher is better) MI annual average: 46%

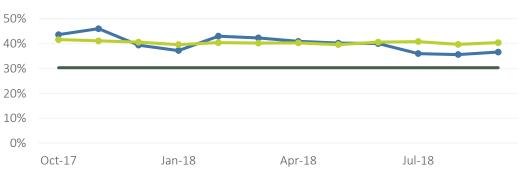
43.6%

Kent annual average: **45.1%**

Permanency in 12 months for children in care 24+ months

Of all children in foster care on the first day of a 12-month period who had been in foster care (in that episode) for 24 months or more, what percentage are discharged to permanency within 12 months of the first day?
Benchmark:

Kent County exceeded the benchmark during Fiscal Year 2017, and was just 0.3 percent below the Michigan annual average.



Source: University of Michigan Data Lab, CFSRs in Michigan dashboard, retrieved 12/27/18.

30.3% (Higher is better) MI annual average:

40.4%

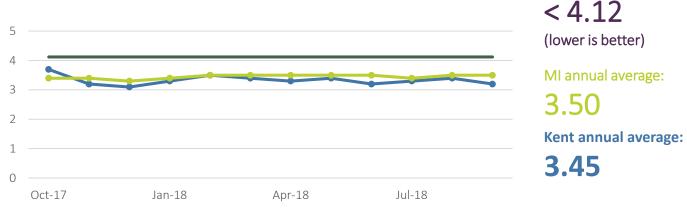
Kent annual average: **40.1%**

Placement Stability

Of all children who enter foster care in a 12 month period, what is the rate of placement moves per day of foster care?

Benchmark:

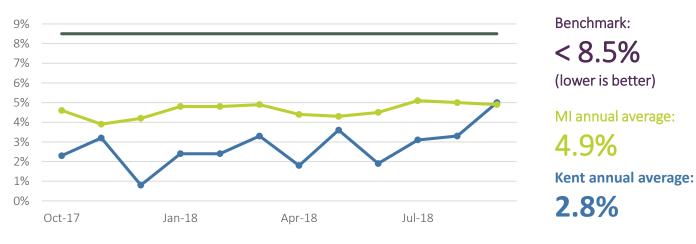
Kent County exceeded the benchmark during Fiscal Year 2017, and was also below the Michigan annual average.



Re-entry to Foster Care

Of all children who enter foster care in a 12-month period who were discharged within 12 months of reunification, living with a relative, or guardianship, what percentage re-entered foster care within 12 months of their discharge?

Kent County exceeded the benchmark during Fiscal Year 2017, and was also 2.1 percent below the Michigan annual average.



Source: University of Michigan Data Lab, CFSRs in Michigan dashboard, retrieved 12/27/18.

