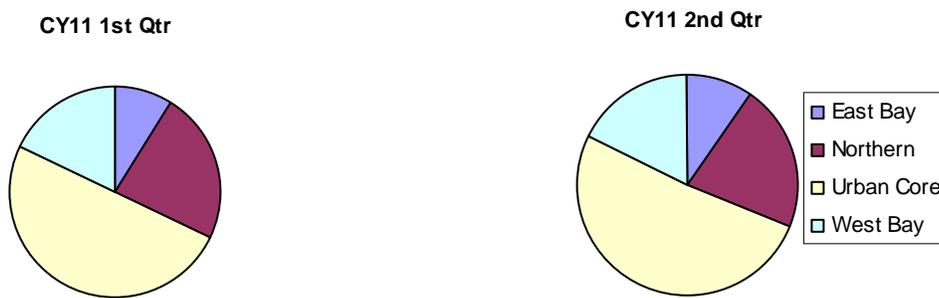


**Rhode Island Family Care Community Partnerships
CY10 4th Quarter, CY11 1st and 2nd Quarters Data**

I. Characteristics of Active Families

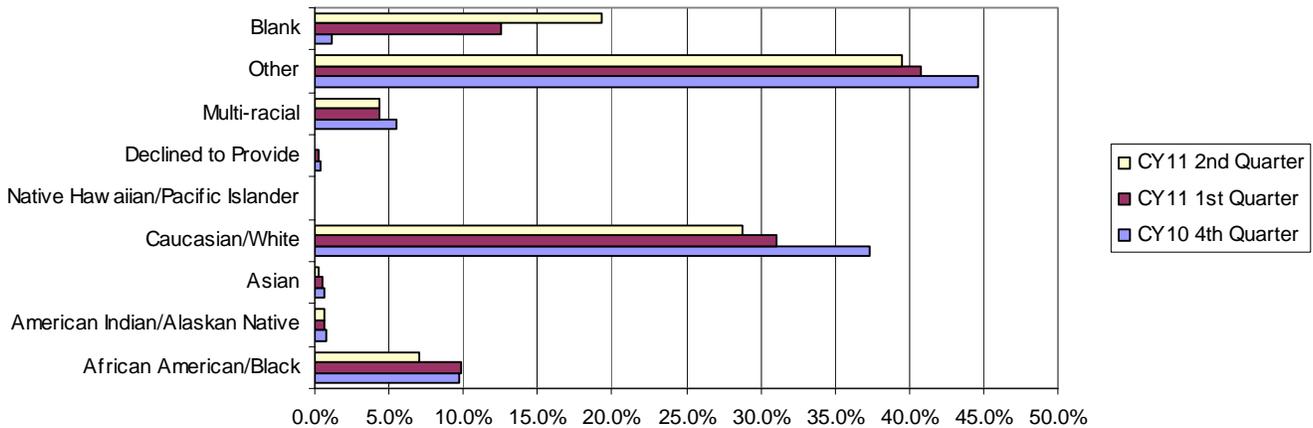
The Family Care Community Partnerships (FCCPs) had 1282 families active during the CY11 2nd quarter (active defined as opened at least 1 day or greater during the quarter). This is a slight decrease from the CY11 1st quarter which had 1315 active families. Figure 1 shows that the proportion of families in the respective FCCPs has changed very little over the six month period. During this same time period, urban core comprised the largest proportion of families in the FCCP.

Figure 1: Percentage of Families Active by FCCP, CY11 1st Quarter & CY11 2nd Quarter



Data Source: RI Family Information System (RIFIS)

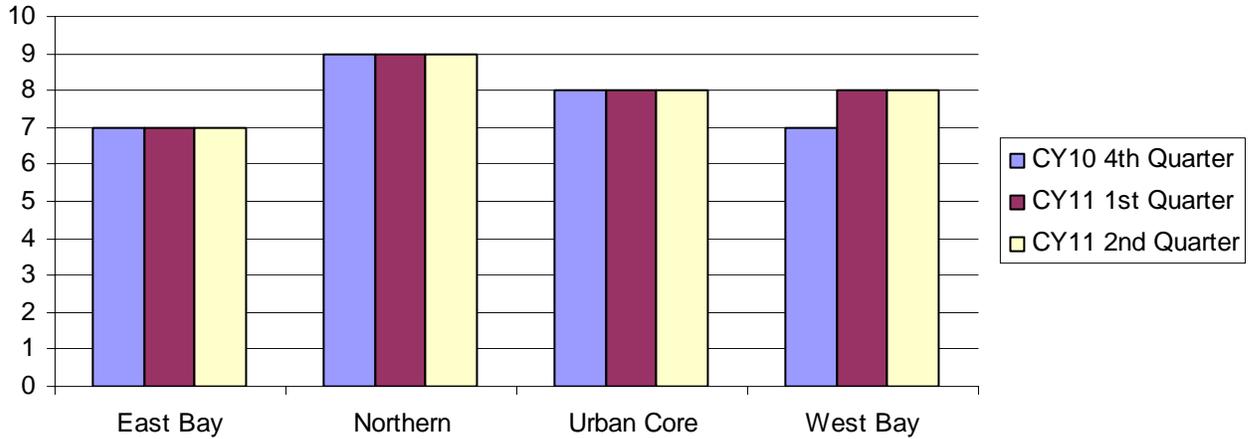
Figure 2: Race of Target Child in FCCP, CY10 4th Quarter and CY11 1st & 2nd Quarters



Data Source: RIFIS. Note: Technical error occurred in ethnicity, data in “other” is predominantly Latino ethnicity

Figure 3 shows the median age of the child. The median age of the child remains consistent, age 8.

Figure 3: Median Age of Target Child in FCCP by Quarter, CY10 4th Quarter and CY11 1st & 2nd Quarters

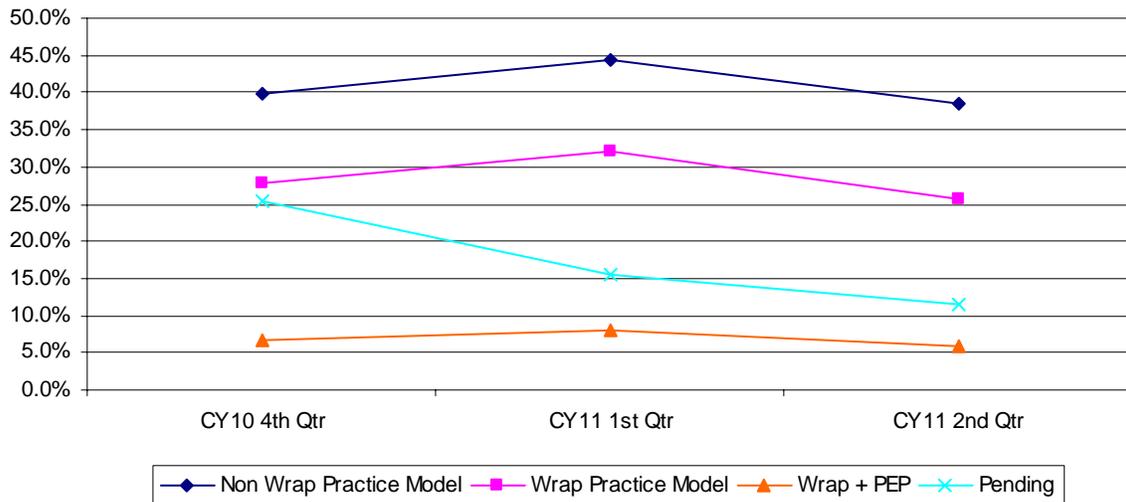


Data Source: RIFIS

II. Wrap versus Non Wrap Practice Model: Percentage of Families in FCCP in Wrap, by Quarter

Figure 4 reveals a slightly higher proportion of families in Non Wrap compared to Wrap across the three quarters.

Figure 4: Percent of Families in FCCP by Practice Model, CY10 4th Quarter and CY11 1st & 2nd Quarters

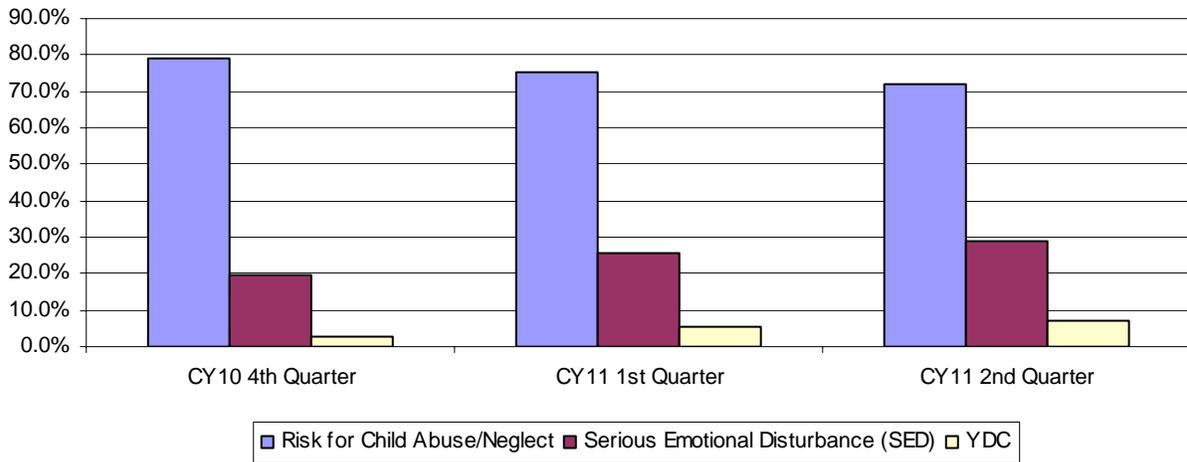


Data Source: RIFIS

¹ PEP: Positive Educational Partnership

III. Eligibility Criteria

Figure 5: Percent of FCCP Families by Eligibility Criteria, CY10 4th Quarter and CY11 1st & 2nd Quarters

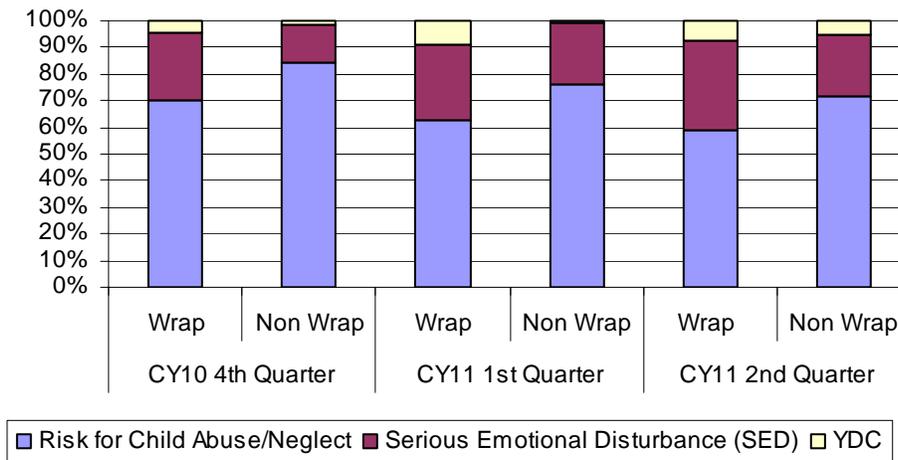


Data Source: RIFIS

FCCP Intake 1A was completed during April 1 to June 30, 2011. The numbers are not mutually exclusive because the end user can check all that apply.

Figure 6 shows percentage of eligibility criteria by practice model. The largest percentage of children entering the FCCP is within the category “at risk for child abuse and neglect”. However, FY11 2nd Qtr reveals an increase in the proportion of children/youth who are eligible based on SED and increase in the proportion of youth exiting the RITS. For those eligible based on Risk for Child Abuse/Neglect, the difference between those who are in Wrap vs. Non Wrap decreased over the 3 quarters.

Figure 6: Percent of FCCP Families by Eligibility Criteria by Practice Model, CY10 4th Quarter and CY11 1st & 2nd Quarters



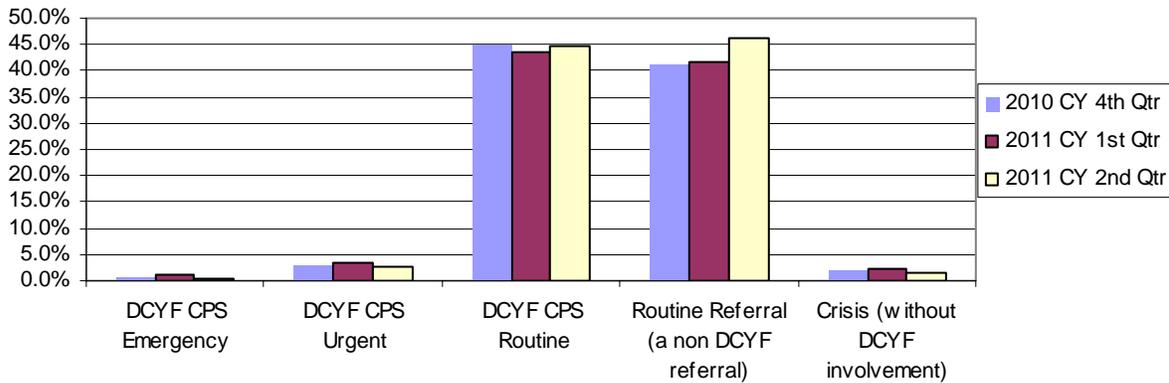
Data Source: RIFIS

FCCP Intake 1A was completed during April 1 to June 30, 2011. The numbers are not mutually exclusive because the end user can check all that apply.

IV. Response Priority: Response severity among families and face-to-face contact time by Quarter

Figure 7 shows the percentage of families broken down by their respective response priority/category at the time of intake. The greatest proportion of active families was classified as “routine” rather than emergency or urgent within response priority (response severity). This trend has been consistent across quarters since the FCCP inception.

Figure 7: Percent of FCCP Families by Response Priority, CY10 4th Quarter and CY11 1st & 2nd Quarters

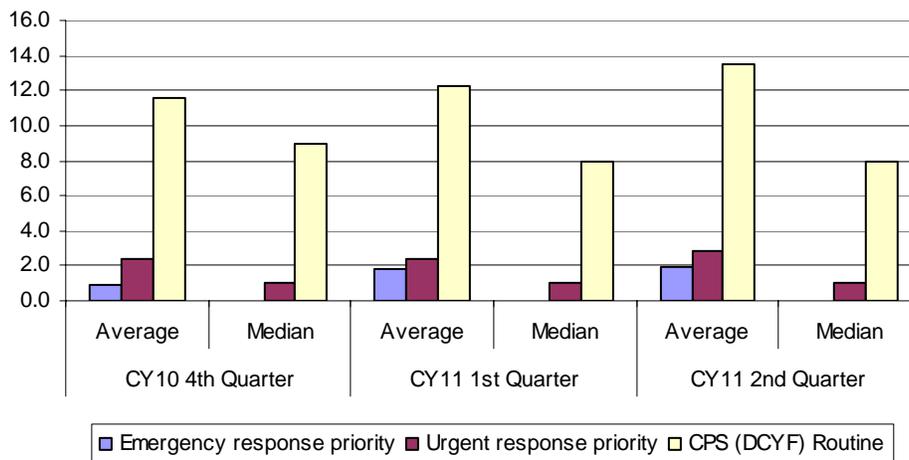


Data Source: RIFIS

Figure 8 displays data on the adherence to the FCCP standards for FCCP response time to make face-to-face with the family given their respective response priority is outlined below.

Each of the 3 DCYF severity-level response categories (Emergency, Urgent, and Routine) has a corresponding first face-to-face contact response time as defined in the FCCP Practice Standards. The largest proportion of CPS referrals is classified as routine. The median length of time to make a face-to-face visit with a family identified as routine slightly decreased in FY11 2nd Qtr to 8 days from 9 days in the previous two quarters.

Figure 8: Average & median length of time (days) to first face to face contact with family, CY10 4th Quarter and CY11 1st and 2nd Quarters



Data Source: RIFIS

V. Median and Average Length of Time in FCCP

Table 1 displays data on the median and average length of time families who transitioned from the FCCP during over the three quarters. The median length of time remained relatively consistent, slightly over 4 months. The data is based on date opened to the FCCP to FCCP close/transition.

Table 1: Median and Average Length of Time in the FCCP CY11 2nd Quarter

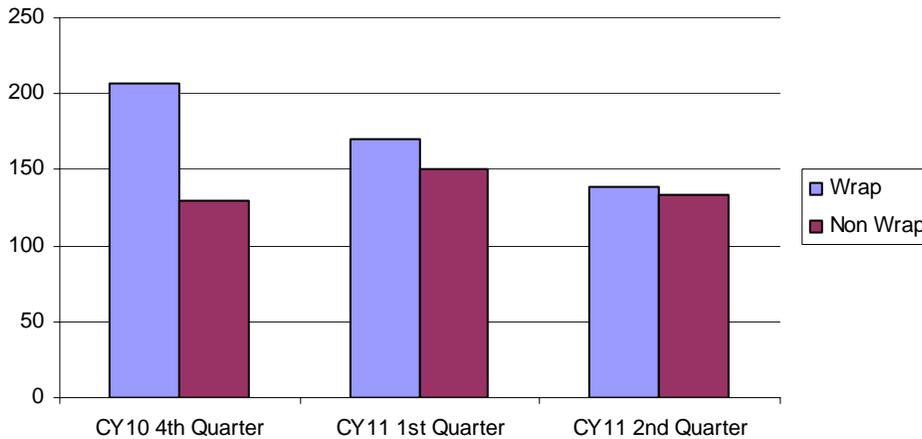
	CY10 4th Qtr (N=375)	CY11 1st Qtr (N=581)	CY11 2nd Qtr (N=784)
Median:	123.0	127.0	126.0
Average:	153.3	158.8	152.1

Data Source: RIFIS. Data based on number of closed cases during CY11 2nd Quarter. The median length of time in this table is lower than the median length of time in figure 8 because children whose practice model was set to “pending” are included. One hundred forty six cases had “pending” as their practice model and their median length of time in the FCCP was equal to 63 days.

VI. Length of Time in Practice Model by Quarter

The data compares the length of time a family is in their respective Practice Model (among closed families). The median length of time decreased among Wrap families across the three quarter from approximately 200 days in CY10 4th Quarter to 120 days in CY11 2nd Quarter. Among Non Wrap families, the time fluctuated increasing between CY10 4th Quarter and CY11 1st Quarter and then decreasing in CY11 1st Quarter to CY11 2nd Quarter. Also noteworthy is the decrease in the difference between median length of time between Wrap and Non Wrap families over the quarters.

Figure 9: Practice Model by Median Length of Time in Practice Model, CY10 4th Quarter and CY11 1st and 2nd Quarters



Data Source: RIFIS

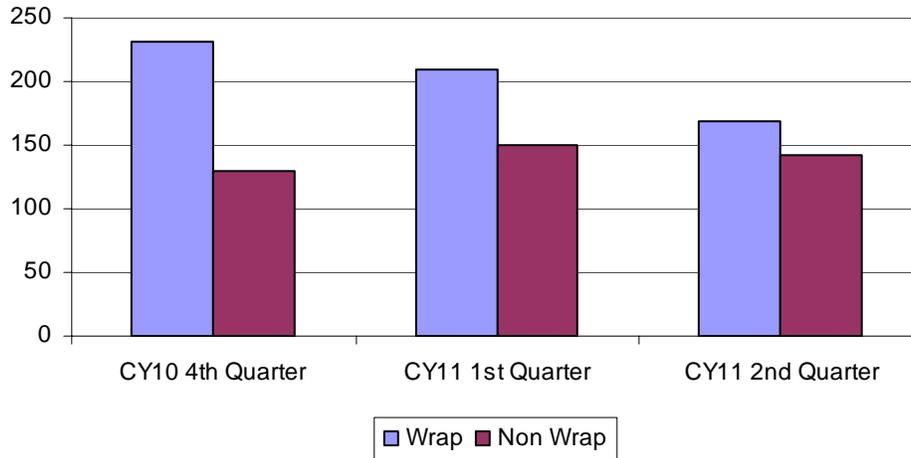
Based on number of closed cases during CY10 4th Quarter to CY11 2nd Quarter and does not include children whose practice model was set to “pending.”

Figure 10 shows the median length of time in practice model excluding cases that were opened for less than 45 days and had the following close reasons: unable to contact family, family left with notice, and/or family left without notice. When these cases are excluded, as compared to Figure 9, the median length of time increased for families in Wrap across the three quarters, on average 30 days. In contrast, the median

length of time for families in Non Wrap remained unchanged for CY10 4th Quarter and CY11 1st Quarter and only increased by approximately 10 days in CY11 2nd Quarter, as compared to Figure 9.

Consistent with Figure 9, the length of time for Wrap families with the exclusionary criteria decreased. The median length of time for these families in CY10 4th was 231 compared to 168 days in CY 11 2nd Quarter. For Non Wrap families, the median length of time fluctuated with a recent decrease between CY11 1st and 2nd Quarters (150 to 142 days).

Figure 10: Practice Model by Median Length of Time in Practice Model, CY10 4th Quarter and CY11 1st and 2nd Quarters



VII. FCCP Referral Source and Wrap Vs Non Wrap Practice Model by Quarter

Table 2 and 3 informs whether families referred by DCYF to the FCCP experience different practice model approaches compared to those families not directly referred by DCYF. In general, the distribution of Wrap and Non Wrap across the 5 referral sources remained relatively consistent.

Table 3 reveals the gap remained consistently larger between Wrap and Non Wrap for those referred through DCYF Indicated Investigations compared to the Wrap and Non Wrap gaps amongst the other referral sources (12.5 (37.4-24.9) absolute difference in CY11 1st quarter and 15 (59.2-44.2) in CY 11 2nd quarter). However, the difference between Wrap and Non Wrap for those referred by DCYF CPI Request for Services grew in CY11 2nd quarter compared to CY11 1st quarter.

Table 2: Percent of DCYF Referral Sources, CY10 4th Quarter and CY11 1st and 2nd Quarters

	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr
DCYF: Indicated Investigation	29.1%	30.3%	31.9%
DCYF: CPI Request for Services	15.3%	14.7%	14.8%
DCYF: Intake ISR	8.8%	6.8%	5.0%

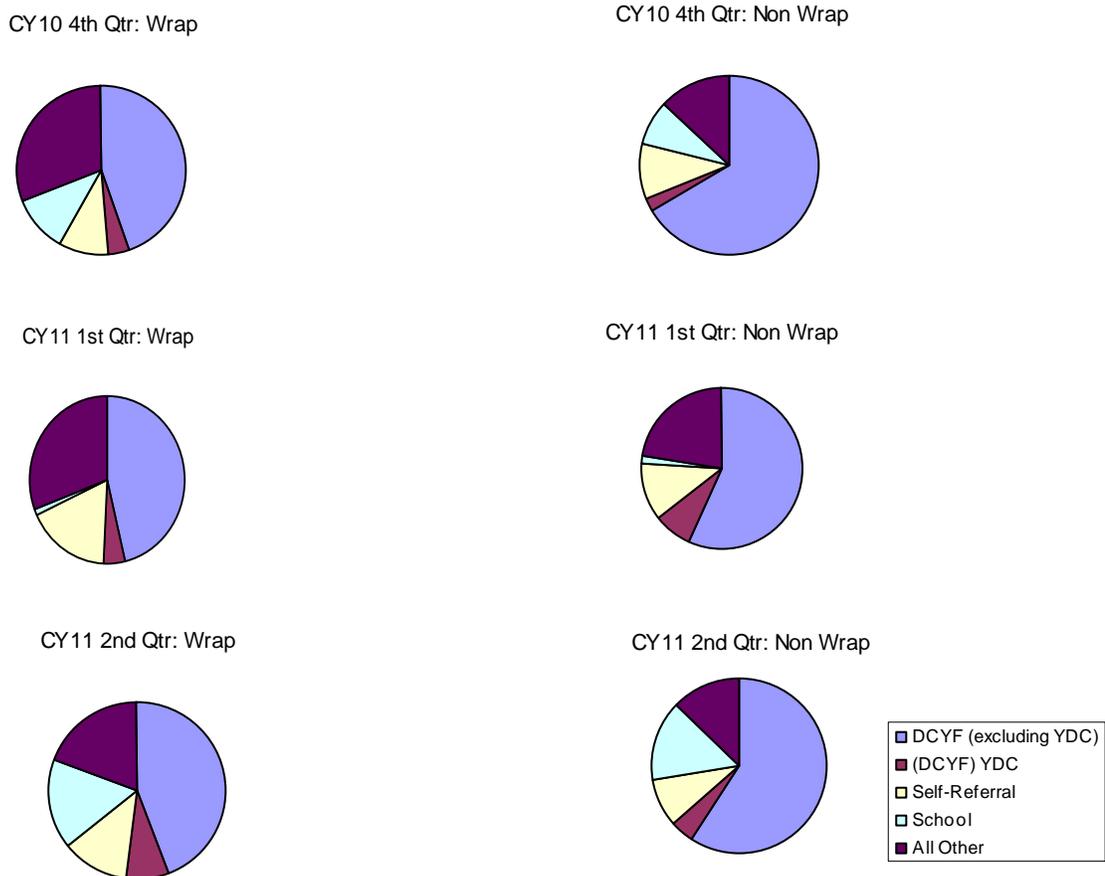
Table 3 reveals the difference between Wrap and Non Wrap remained consistently larger for those referred through DCYF Indicated Investigations compared to difference amongst the other referral sources (12.5 (37.4-24.9) absolute difference in CY11 1st quarter and 15 (59.2-44.2) in CY 11 2nd quarter). However, the difference between Wrap and Non Wrap for those referred by DCYF CPI Request for Services grew in CY11 2nd quarter compared to CY11 1st quarter.

Table 3: Percent of Top 5 FCCP Referral Sources by Practice Model, CY10 4th Quarter and CY11 1st and 2nd Quarters

	CY10 4 th Qtr		CY11 1 st Qtr		CY11 2 nd Qtr	
	Wrap	Non Wrap	Wrap	Non Wrap	Wrap	Non Wrap
DCYF: Indicated Investigation	22.3%	38.0%	24.9%	37.4%	44.2%	59.2%
DCYF: CPI Request for Services	12.6%	15.6%	11.0%	16.9%	14.2%	4.3%
DCYF: Intake ISR	7.2%	8.8%	4.3%	7.4%	4.2%	8.9%
School	15.8%	7.6%	17.4%	11.8%	16.3%	14.8%
Self Referral	14.6%	12.2%	13.1%	10.9%	19.5%	12.8%

Data Source: RIFIS

Figure 11: Percent of FCCP Referral Source by Practice Model, CY10 4th Quarter and CY11 1st & 2nd Quarters



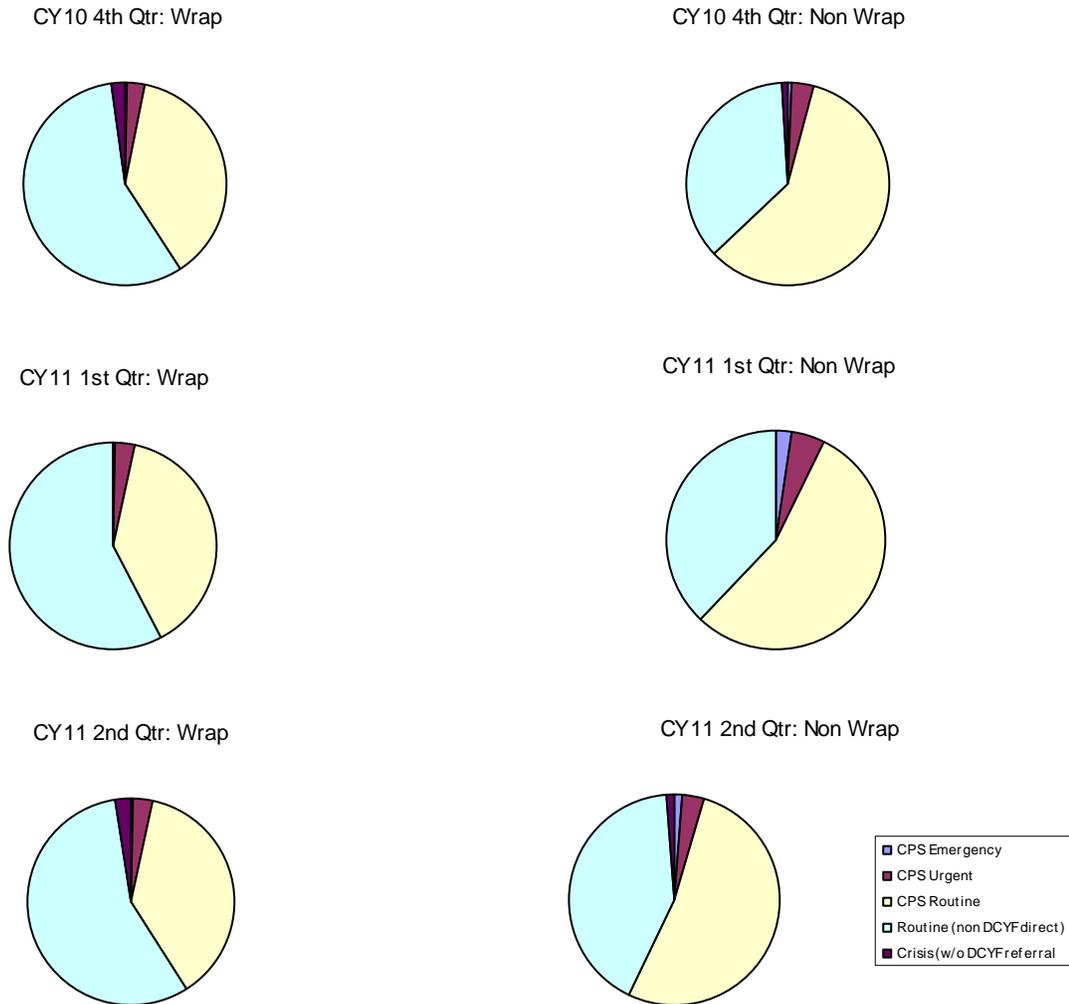
Data Source; RIFIS

³ All other: the remaining 19 referral sources combined as each of these 19 sources have very low percentages. These categories are collected separately and combined for this table only.

VIII. Families in Wrap vs. Non Wrap and their corresponding response priority by Quarter

Figure 10 provides data to help inform whether families with different response priorities receive different Practice Models (Wrap Practice vs. Non Wrap). The data below illustrate a higher proportion of families who are “routine” and not directly referred by DCYF are in Wrap compared to “routine CPS (DCYF)”.

Figure 12: Percent of Response Priority by Practice Model, CY10 4th Quarter and CY11 1st & 2nd Quarters



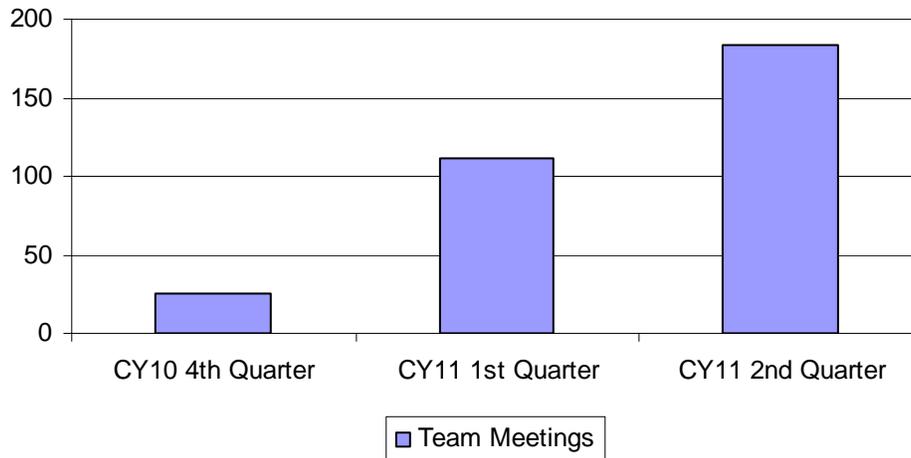
Data Source: RIFIS

*Total will not equal 100% (excluded “pending” “blank”)

IX. Number of team meeting occurrences by Quarter

Figure 13 presents the number of team meeting occurrences and the increase in team meetings over the three quarters.

Figure 13: Number of FCCP Team Meetings, CY10 4th Quarter and CY11 1st & 2nd Quarters



Data Source: RIFIS

X. Outcomes

FCCP Close Reason – Differences by the Close Reason

Table 4 presents data on the FCCP close/transition reasons. The percent of families who closed/transitioned reason was Practice Model completed and goals achieved (Wrap and Non Wrap) increased in CY11 2nd Quarter compared to CY10 4th Quarter. Closed/transition reasons of “Family withdrew without notice”, “Family declined service”, “Family withdrew with notice” and “Target child opened to DCYF removed from home” declined over the three quarters.

Table 4: Top 10 FCCP close reasons, CY10 4th Quarter and CY11 1st & 2nd Quarters

FCCP Close Reason	CY10 4th Qtr (N=375)	CY11 1st Qtr (N=581)	CY11 2nd Qtr (N =784)
FCCP Non Wrap completed	18.7%	24.4%	22.4%
Team agrees Wrap completed	16.5%	14.6%	18.0%
Family withdrew without notice	17.3%	16.4%	14.0%
Unable to contact family		7.1%	13.4%
Family declined service	12.8%	8.8%	6.6%
Family moved out of area	4.3%	3.8%	2.8%
Family withdrew with notice	6.7%	3.3%	2.8%
Other	9.3%	5.5%	2.7%
Target child opened to DCYF and remained in home	1.3%		2.6%
Target child opened to DCYF and removed from home	3.2%	3.3%	2.0%
Transfer Target Child to another FCCP	4.5%	2.2%	

Data Source: RIFIS. Based on the number of closed cases during CY10 4th Quarter, CY11 1st Quarter, CY11 2nd Quarter

Table 5 presents data on the top close reasons by referral source categories by Quarter. Amongst families referred by DCYF, excluding the Youth Development Center (YDC), the percent of families in the FCCP

where the team agrees the Wrap or Non Wrap was completed comprise the largest proportion of close reasons in CY11 1st and 2nd quarters with the most recent, CY11 2nd quarter, 15.5% and 27.1% respectively. Similarly, among families with “self referral” the largest proportion of close reasons in CY11 2nd quarter are Wrap and Non Wrap completed, 25.0% and 22.1% respectively. This contrasts with referrals from “School” and “YDC”.

Table 5: Percent of FCCP Top 5 close reasons by 4 referral source categories, CY 10 4th Quarter and CY 11 1st & 2nd Quarters

FCCP Close Reason	Referral Source														
	DCYF			YDC (DCYF)			Self-Referral			School			Other		
	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr
Family declined service	4.0%	2.9%	7.0%	5.2%	5.6%	2.5%	2.9%	8.3%	5.9%	6.7%	0.0%	3.7%	4.2%	4.2%	10.9%
Family withdrew w/o notice	5.7%	7.9%	10.7%	8.6%	6.7%	22.5%	5.7%	11.3%	13.2%	5.2%	6.3%	21.6%	4.6%	5.6%	15.5%
FCCP Non Wrap completed	7.9%	13.8%	27.1%	0.0%	10.1%	2.5%	6.4%	7.7%	22.1%	3.0%	6.3%	18.7%	4.2%	8.3%	16.4%
Team agrees Wrap completed	5.1%	5.4%	15.5%	6.9%	6.7%	12.5%	5.0%	6.0%	25.0%	0.7%	0.0%	20.1%	8.0%	9.7%	27.2%
Unable to reach family	NA	3.2%	10.9%	NA	3.4%	25.0%	NA	3.6%	10.3%	NA	0.0%	18.7%	NA	3.1%	14.5%

Data Source: RIFIS. Based on the number of closed cases during CY10 4th Quarter, CY11 1st Quarter, CY11 2nd Quarter

Table 6 presents data on FCCP top close reasons by CPS Referral Source, specific to Indicated Investigation, CPI Request for Services and DCYF Intake ISR by quarter. For all three CPS Referral Sources, the largest proportion of “close reasons” was the combination of “FCCP Non Wrap completed” and “Team agrees Wrap Completed”. In CY11 2nd quarter, DCYF Intake ISR had the highest proportion of “close reasons Family withdrew without notice” among the three CPS Referral Sources while CPI Request for Services had the highest “close reasons Unable to reach family”.

Table 6: Percent of FCCP Top 5 close reasons by CPS Referral Sources, CY10 4th Quarter and CY11 1st and 2nd Quarters

	DCYF: Indicated Investigation			DCYF: CPI Request for Services			DCYF: Intake ISR		
	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr
Family declined service	2.7%	2.8%	3.4%	7.9%	4.1%	6.3%	2.0%	5.6%	7.8%
Family withdrew w/o notice	4.4%	7.0%	6.8%	8.4%	9.3%	6.3%	4.9%	6.7%	9.4%
FCCP Non Wrap completed	11.2%	17.3%	18.3%	3.9%	10.4%	15.8%	3.9%	10.1%	18.8%
Team agrees Wrap completed	6.5%	7.3%	10.0%	4.0%	2.7%	10.5%	3.0%	6.7%	7.9%
Unable to reach family	NA	3.0%	6.6%	NA	4.1%	9.5%	NA	3.4%	1.6%

Table 7 presents data on cases with a close reason reportedly as “opened to DCYF”. The percent slightly decreased in CY11 2nd Qtr from CY11 1st Qtr.

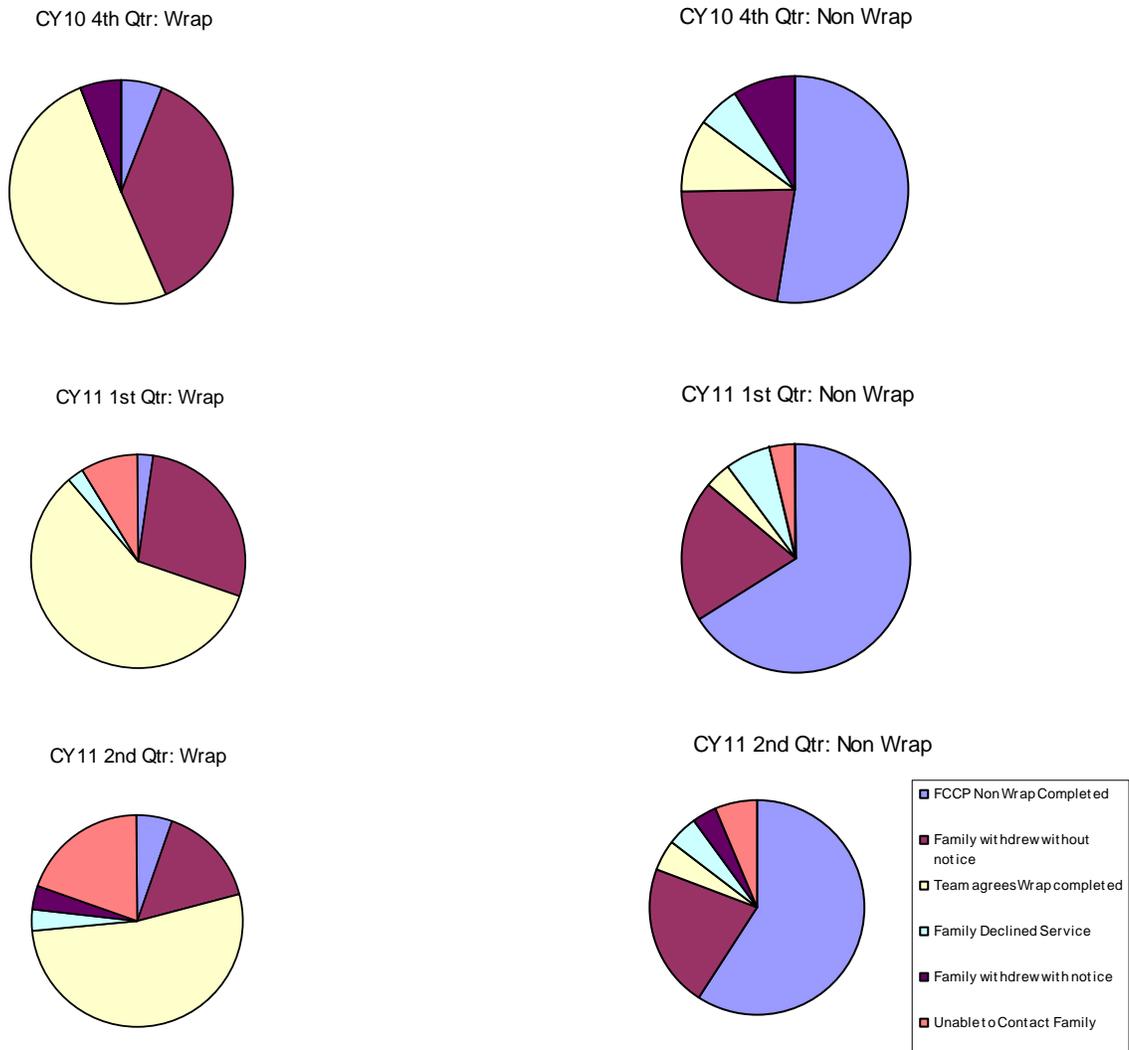
Table 7: Percent of FCCP families with Close Reason reported as “Opened to DCYF”

	DCYF Referred to FCCP		
	CY10 4 th Qtr	CY11 1 st Qtr	CY11 2 nd Qtr
Child opened to DCYF	5.9%	7.6%	5.1%

Data Source: RIFIS. Based on the number of closed cases during CY11 1st Quarter and CY11 2nd Quarter

Figure 14 looks at the close reasons by Wrap Practice Model vs. Non Wrap Practice Model. In CY11 2nd Quarter, the top close reason for families in Wrap was “Wrap completed” and the top reason for families in Non Wrap was “Non Wrap completed”. While “Family withdrew without notice in CY11 2nd Quarter decreased from CY11 1st Quarter, the percent of “Family unable to contact” and “Family withdrew with notice” increased during those same two quarters.

Figure 14: Percent of FCCP Top 5 close reasons by practice model, CY10 4th Quarter and CY11 1st & 2nd Quarters



Data Source: RIFIS. “Unable to Contact Family” was added as a response choice in CY11 1st quarter.

XI. Functional Assessments

In addition to reasons for the family transition or closing as an outcome measure, functional assessments such as the North Carolina Family Assessment, among others, inform as to whether the family has made family functional improvement as it relates to the practice model approach.

The completion of the NCFAS is low and is consistent with the trends observed since the inception of the FCCP's. Thirty six percent of the 700 children who closed/transitioned in CY11 2nd quarter and were open for greater than 30 days had a baseline and transition NCFAS.

Table 8 provides data on the average number of days to complete the NCFAS from family opening to the FCCP. The FCCP standards for completing a baseline NCFAS is 30 days.

Table 8: Average Number of days for NCFAS completion by Region, CY11 2nd Quarter

	CY11 2nd Quarter
Average number of days to complete NCFAS baseline	29.3

Data Source: RIFIS

NCFAS Outcomes, Fiscal Year 2010

A 6 point scale is used to rate families ranging from “serious problem (-3)” to “clear strength (+3)”. Table 9 compares the ratings from intake and transition and shows any changes that may have occurred over time. Families appear to be improving in each of the domain areas.

Table 9: Percent of ratings in each NCFAS domain at intake and discharge (N=853)

	Serious Problem (-3)	Moderate Problem (-2)	Mild Problem (-1)	Baseline/Adequate (0)	Mild Strength (+1)	Clear Strength (+2)
Environment						
<i>Intake</i>	3.6	11.3	18.6	36.1	19.9	10.4
<i>Transition</i>	2.0	5.9	11.0	40.8	28.7	11.6
Parental Capabilities						
<i>Intake</i>	2.0	10.7	26.1	35.7	19.7	5.8
<i>Transition</i>	1.4	5.0	17.9	37.9	29.7	8.1
Family Interactions						
<i>Intake</i>	3.5	13.4	25.6	35.3	18.0	4.1
<i>Transition</i>	2.6	6.8	16.3	42.0	26.4	5.9
Family Safety						
<i>Intake</i>	4.6	12.4	22.8	37.2	15.8	7.1
<i>Transition</i>	2.2	4.5	13.6	43.6	26.7	9.4
Child Well-Being						
<i>Intake</i>	5.6	18.2	22.8	35.2	13.4	4.8
<i>Transition</i>	3.1	7.5	18.8	42.3	22.7	5.6
Social/Community Life						
<i>Intake</i>	1.3	6.4	20.0	51.7	17.4	3.2
<i>Transition</i>	0.5	4.0	14.3	51.7	25.2	4.3
Self-Sufficiency						
<i>Intake</i>	5.3	16.8	20.9	28.6	21.2	7.2
<i>Transition</i>	2.2	10.2	18.3	35.0	25.8	8.5
Family Health						
<i>Intake</i>	3.2	12.1	25.6	36.4	16.0	6.1
<i>Transition</i>	1.8	8.4	18.0	42.3	22.0	7.6

Data Source: RIFIS