



# Risk Management Plan 2016-2017

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## **Section I: Non-Profit Risk Management**

### ***Risk Management Program***

#### Risk Management Philosophy

Big Bend Community Based Care has embraced a collaborative, strategic approach to risk management, which includes identifying and addressing the threats and opportunities the organization faces while aspiring to protect the health, safety and security of its clients, staff and volunteers. The views and participation of personnel at all levels of the organization, including volunteers, will be sought as Big Bend Community Based Care identifies risk management priorities and implements strategies for preventing and mitigating risk. Simply stated, manage risk for the child, adult or family and thus manage risk for yourself.

#### Risk Management Goals

Big Bend Community Based Care seeks to involve appropriate personnel at all levels of the organization in the identification of risks and creation of practical strategies in order to make certain that the organization's approach to risk management considers diverse perspectives and staff understand their roles and responsibilities in protecting the mission and assets of the organization.

#### General Safety Principles

- Big Bend Community Based Care strives at all times to operate in compliance with local, state, and federal laws and regulations
- Big Bend Community Based Care adheres to policies and standards of excellence in matters related to the health, safety, and well-being of clients
- Big Bend Community Based Care is responsible for the contracted provision of child welfare and behavioral health services. This is a primary responsibility of the Board of Directors, CEO, staff and volunteers
- Safety and risk management activities are multi-faceted and include:
  - Thoughtful screening, selection and training of volunteers and staff
  - Creation and enforcement of policies, standards, guidelines, and procedures as guides for planning
  - Maintaining safe and secure facilities
  - Establishing procedures to be followed in the event of an emergency
  - Maintaining clear communications channels

- Big Bend Community Based Care purchases insurance coverage as a financing mechanism for certain risks but recognizes that insurance is not a substitute for vigilance in planning and implementing programs

## ***Responsibility for Risk Management***

### Board of Directors

- Sets risk management goals, adopts annual operating objectives and budget, with risk management included
- Accepts fiduciary responsibility
- Addresses risk management items at all formal Board meetings
- Adopts annual capital budget with risk management in mind
- Reviews operational reports to determine compliance and future priorities
- Ensures compliance with policies and standards imposed by the Council on Accreditation (COA)
- Adopts and establishes policies and standards

### Finance/Audit Committee

- Appointed by the Board of Directors
- Reviews the monthly financial statements and submits bi-monthly for board approval
- Reviews audit firms and recommends firm for board approval
- Reviews the organization's insurance program annually
- Reviews the organization's risk management plan annually

### Chief Executive Officer

- Executes contracts for the organization
- Keeps the board apprised of emerging threats and opportunities facing the organization
- Assigns staff to design and carry out safety and risk management activities
- Assigns staff to perform monthly reviews of the safety and risk management activities

### Chief Operations Officer

- Ensures compliance with operating procedures, Florida Statutes and Florida Administrative Codes
- Monitors, evaluates agency and operational functions and their associated risk management activities

### Chief Financial Officer

- Ensures fiscal compliance with governing authorities (e.g., Florida Statutes, Sarbanes-Oxley, etc.)
- Ensures compliance with policy and procedure for procurement and contract management
- Ensures insurance coverage is obtained to minimize loss exposure
- Ensures contractual compliance with achieving performance measures and outcomes
- Ensures compliance of information systems and data integrity

### Legal Counsel for the Organization

- Serves as advisor to the board of directors in legal matters, making referrals to specialists on an as needed basis
- Advises senior staff on contracts, agreements, and forms and reviews contracts as needed
- Represents staff in any contempt proceedings

## ***Governance Structure***

### Articles of Incorporation

Big Bend Community Based Care was incorporated in the State of Florida on March 26, 2002. We have maintained our corporate status by filing with the state as required by law. The Board and legal counsel review the articles of incorporation to maintain its currency and legality.

The original Articles of incorporation are stored at Big Bend Community Based Care administrative office at 525 N. Martin Luther King, Jr. Boulevard, Tallahassee, FL.

## Bylaws

The original bylaws were filed and approved by the Board. The Board reviews the bylaws annually and amends as needed. Every member of the Board receives a current copy of the bylaws when they join the Board and whenever the bylaws are amended.

The original bylaws as approved by the state and all subsequent amendments are stored at the Big Bend Community Based Care administrative office at 525 N. Martin Luther King Jr. Boulevard, Tallahassee, FL.

The indemnification provision of the agency's bylaws is funded by a Directors' & Officers' liability insurance policy underwritten by a licensed insurer.

## Conflict of Interest Policy

Big Bend Community Based Care developed a Board Orientation Manual containing the key policies and expectations of the Board. Every year each board member updates and signs a disclosure statement declaring any known conflicts and agreeing to comply with the Board Policy Manual.

## ***Board Operations***

### Board Manual

Big Bend Community Based Care provides new board members a Board of Directors Orientation portfolio containing key policies and requirements of the directors.

### Board Orientation

To ensure that the members of the Board of Big Bend Community Based Care are properly trained and prepared for their service, the organization provides a power point for Board orientation training for new Board members and on-going Board information and training sessions throughout the duration of their terms. The experienced Board members will share their insights and coach the new members in fulfilling their Board duties.

### Board Development

The Board of Big Bend Community Based Care is dedicated to improving the skill and knowledge of its members by continually educating the members on the legal, financial, and operational aspects of governing a nonprofit organization. The Board will allocate time during the year to increase its governance knowledge.

### Board Recruitment and Nomination

Big Bend Community Based Care strives to have a diverse, qualified, and self-perpetuating Board with people who bring the skills, qualities, and expertise needed to lead and govern the organization in accomplishing its mission.

### Board Minutes

The Board is committed to having the minutes accurately reflect the actions of the board. The minutes are stored with other corporate documents to protect them from harm or loss and posted on the corporate website upon being ratified.

### Risk Financing Strategy

Big Bend Community Based Care is committed to protecting its financial and human assets and seeks to eliminate or reduce the conditions, activities, and practices that cause insurable losses. The agency purchases insurance to provide indemnity for catastrophic losses and decides, based on an analysis of the best interests of the organization, to either insure or retain those risks not considered of major importance to mission-critical operations and financial well-being.

## ***Policies and Procedures***

### Development

Big Bend Community Based Care has developed a comprehensive set of policies and procedures based on Florida Statute, Florida Administrative Code (FAC) and department operating procedures. Policies and procedures are developed to ensure compliance with all regulatory authorities that may impact the System of Care.

### Approval and Implementation

The policies and procedures are approved by the agency's Board of Directors. Policies and procedures are also provided to funding entities. Policies and procedures are disseminated via the agency's website so that all employees and subcontracted providers have access to the approved policies and procedures.

### Revised/Updates

Policies and procedures are revised/updated when governing authorities, such as statute or administrative code, are revised and/or updated or when changes to the System of Care are made. BBCBC's risk management strategies for policy change can be found in the CBC Risk Management Strategy section.

## ***Human Resources***

### Written Employment Policies

Big Bend Community Based Care believes that written employment policies are an essential risk management tool. The agency has summarized its key employment policies in the BBCBC Employee Handbook and the policies in their entirety are available on the website. Examples include: Procedures for Hiring, Equal Employment Opportunities, Sexual Harassment, Conflict of Interest, Dual Employment, and Termination.

### Communications Regarding Employment Policies

Big Bend Community Based Care reviews and updates its Operating Policies and Employee Handbook in order to ensure that policies remain suitable for the organization and in compliance with state and federal employment laws. New policies are communicated verbally and in writing to employees.

### Use of Job Descriptions

Big Bend Community Based Care has job descriptions for all paid positions in the organization. Position descriptions are used for all roles and define the scope of work, expectations, and supervisory authority. Position descriptions are reviewed annually and updated as appropriate.

### Staff Supervision

Directors are charged with communicating expectations of staff clearly and consistently, and to hold employees accountable for adhering to the agency's operating policies.

### Appropriate Conduct Statement

The conduct statement is included in the employee handbook and includes identification of incidents leading to disciplinary action.

### Employee Orientation

New employees receive basic information on employee benefits, the employee handbook, and complete security awareness training, as appropriate. In addition, new hires complete Network Orientation and other trainings on the organization's website.

### Performance Appraisal Process

Big Bend Community Based Care requires annual reviews for all employees. Supervisors are responsible for scheduling review meetings and completing the Performance Review form, including goal-setting for the upcoming period.

## Complaints & Grievance Process

Employees may seek resolution of job related concerns, question or problems by following the procedure outlined in the Employee Handbook.

## ***Financial Management***

### Financial Responsibilities and Objectives

It is the responsibility of the Board of Directors to formulate financial policies and review the operations and activities of Big Bend Community Based Care on a periodic basis. The Board delegates this oversight responsibility to the Finance/Audit Committee, of which the Treasurer is the Chair. The CFO of the organization acts as the primary fiscal agent, with responsibility for implementing all financial management policies and procedures on a day-to-day basis.

The financial management objectives of Big Bend Community Based Care are to:

- preserve and protect financial assets needed for mission-critical activities
- ensure the integrity of financial reporting while providing timely cost and utilization data
- exercise appropriate care in the handling of incoming funds and disbursement of outgoing funds
- strive for transparency and accountability in fiscal operations while promoting sound stewardship

### Cash Flow and Cash Reserves

The approved operating budget shall be based on a funding formula that will allow the agency to achieve a sufficient cash reserve position. For the child welfare contracted budget, a 2% reserve which represents less than 7 days of operating capital and is well within the statutory limit of 8%. For behavioral health no cash reserve is needed beyond the State's advance given the fact that the contract is not "financially at-risk" to serve all clients in need. Cash reserves are required for any unanticipated changes in the utilization of services, the mix of services or the level of services needed to fulfill the requirements of the contract. The Board of Directors may allocate, from this reserve, special unfunded and/or underfunded initiatives each year.

### Budgeting Process

An annual budget is prepared by the Chief Financial Officer in collaboration with the Chief Executive Officer, Chief Operations Officer and others as designated. The proposed budget is submitted to the Finance Committee for recommendations to the Board of Directors for review and approval.

The budget shall contain detailed projections for revenues and expenditures.

### Financial Statements

The agency's financial statements are prepared on an accrual basis in accordance with Generally Accepted Accounting Principles (GAAP). Monthly Financial Statements are reviewed by the Finance Committee and presented bi-monthly to the Board of Directors for approval.

### Internal Controls

Big Bend Community Based Care has adopted a number of internal control measures as part of an overall effort to safeguard financial assets. These controls include:

- A policy requiring that all incoming checks are immediately stamped with a restrictive endorsement indicating "for deposit only"
- A detailed log of all incoming checks and cash is maintained and reconciled with deposit slips and monthly bank statements
- All cash is locked in a secure location daily and deposited on a monthly basis
- All checks are deposited through remote data capture with the financial institution

In addition, and to the extent possible, the organization strives to segregate the following duties so that a single staff member isn't required to perform two or more of the following incompatible functions:

- Authorizing the purchase of goods and services
- Preparing a purchase order to purchase goods
- Receiving goods or validating the performance of services
- Approving the payment of accounts payable for goods and services received
- Recording the liability for accounts payable
- Preparing and signing checks to pay the respective accounts payable
- Forwarding payments to the payee

### Audit

Big Bend Community Based Care engages the services of a reputable, independent CPA firm to conduct an annual financial and compliance audit of the organization's financial statements and

cooperates with Department of Children and Families' various contract and fiscal monitoring activities.

### Record Retention and Destruction

It is the policy of Big Bend Community Based Care to maintain finance and accounting records for a period of seven (7) years. After the retention period ends and there is no further audit requirements for the records, the records and documents will be purged in accordance with industry standards. If an official investigation is underway or suspected, all document purging will cease until the completion of the investigation.

## ***Fundraising***

### Policy Concerning Fundraising Campaigns and Activities

Big Bend Community Based Care is committed to fostering a non-competitive partnership with local agencies within our system of care that provide direct services to children and families. In this effort we participate in fundraising committees, provide technical assistance and support for local fund raising initiatives, purchase sponsorships for events, and circulate fundraising opportunities throughout each circuit.

### Gift Acceptance Policy

It is the policy of Big Bend Community Based Care to record contributions of services, materials, and equipment after assessing fair market value and issuing appropriate receipts accordingly.

## ***Communications and Public Relations***

### Communications Philosophy

Big Bend Community Based Care is committed to taking a positive, transparent approach to communications and public relations.

### Incidents with Public Relations Implications

In the event there is an incident with public relations implications, the agency uses a preemptive approach to address the situation. The agency recognizes that disclosure of pertinent information is the preferred strategy for addressing incidents with public relations implications whenever possible. Only the CEO is authorized to speak on behalf of the agency. The CEO is responsible for developing appropriating communication plans in such circumstances in collaboration with the President of the Board of Directors, please refer to page 28, Media and Public Relations, which speaks to our proactive approach to our interface with the media and community events.

## ***Facilities Management***

### Facility Utilization

Big Bend Community Based Care seeks to utilize its resources and assets fully in achieving its mission. BBCBC allocates allowable costs directly to contracts for space associated with direct contract staff. BBCBC also owns facilities and collects rental income from various non-profit and for-profit entities. The use of these resources allows BBCBC to enhance the working environment. A central component of the agency's mission is partnership and collaboration with community organizations involved with children and families. Consistent with this component, Big Bend Community Based Care strives for co-location with the Department of Children and Families and other service providers. The prudent use of facilities and resources is required to protect the safety and well-being of all personnel – including staff, volunteers and service recipients – while safeguarding the organization's financial assets. The agency complies with Life and Safety rules.

### Facility Design

Big Bend Community Based Care is committed to providing a safe and accessible environment for its clients and staff through the appropriate use of its premises whether owned, leased or borrowed. To ensure the safety of our operations, Big Bend Community Based Care inspects its facilities on a regular basis to ensure compliance with regulations, accreditation standards, and our own principles. Facilities owned by BBCBC are inspected monthly by sub-contracted facility maintenance, including a review of ADA, Fire Safety, and work flow standards. Safety issues are noted and repaired immediately and/or within 24 hours. All locations form a safety committee to review and make recommendations to the building owner concerning safety and work flow. Big Bend Community Based Care works with the service providers prior to moving in to ensure the facility meets all required standards. Prior to moving in, BBCBC will determine responsibilities of each party when agencies are co-located.

### Preventive Maintenance

To protect its property, personnel and clients from harm, Big Bend Community Based Care assures that the organization complies with manufacturer's recommended guidelines for maintenance and repair of equipment and premises, building codes and safety regulations of all jurisdictions applicable to agency facilities. BBCBC routinely inspects and performs routing maintenance on systems within the buildings including HVAC, fire and sprinkler systems, fire extinguishers, and emergency exit signs.

### Physical Security for Technological Assets

The organization takes all reasonable steps to protect and safeguard systems and equipment from damage due to power fluctuations, water damage, dust, extreme temperature change and other environmental factors. All servers, routers and network switches are monitored with UPS battery

backups. Monitoring includes power fluctuations, outages, and temperature. In addition, where possible, access to server rooms controlled by the facility security system.

The Emergency Management Plan, available at: <http://www.bigbendcbc.org> addresses how staff should prepare their IT equipment and offices in the event of an anticipated disaster.

### Job Safety & Building Security Rules & Procedures

Big Bend Community Based Care includes its Job Safety Rules in its Employee Handbook. These rules define expectations and instructions for addressing safety risks or incidents.

## ***Technology and Information Management***

### Philosophy

Big Bend Community Based Care recognizes that managing the risks associated with technology and information collection, sharing and storage has become increasingly complex as technology has advanced. Big Bend Community Based Care has adopted practices, technology and specific policies to protect vital information, software, computer hardware and other equipment from both accidental and intentional harm:

- Dedicated IT staff who are responsible for:
  - IT Network
  - Equipment inventory
  - Security – both physical and virtual
  - Hardware and software configuration and update management
- BBCBC utilizes DCF approved encryption software on all servers, laptops, and handheld devices. The actual software and encryption algorithm are not publically posted for security reasons.
- BBCBC utilizes an industry recognized backup software to back-up information systems and provide restoration and disposal capabilities. Again due to security concerns, the name of the software is withheld from this document. Encrypted backup media is rotated offsite and stored securely in fireproof safes. Backups are tested quarterly as well as when a configuration change warrants testing.
- For disposing of obsolete data storage, BBCBC utilizes DBAN (Darik's Boot and Nuke). This software is approved by DCF: <http://eww.dcf.state.fl.us/asg/doc/050-7.doc> in CFOP

050-7. In addition, DBAN meets HIPAA requirements specified in: <http://www.hhs.gov/ocr/privacy/hipaa/administrative/securityrule/nist80088.pdf>.

- Media that is not capable of being “dbanned” such as failed hard drives and magnetic tape media are degaussed using DCF’s degausser. Optical media such as CD’s and DVD’s are physically destroyed.
- BBCBC adheres to DCF’s Active Directory password policy. Users are required to change their passwords every 90 days. Once again, details of the policy are withheld due to security concerns.
- All BBCBC-owned desktop, laptop and hand-held device are required to be password protected.
- BBCBC’s Security Officer sends the required forms to the DCF Security Officer to establish new accounts. This is done after the staff member has completed Security Awareness and FSFN training. The Security Officer determines the staff’s level of access based on position.
- Once the Security Officer has been notified that the staff should no longer have access, the staff’s FSFN account is locked and the DCF Security Officer is notified. The DCF Security Office then terminates the user’s accounts to Aventail, Tivoli, and any other DCF systems the user had access to.
- BBCBC’s Security Officer annually reconciles the Security Awareness Training certificates completed by all staff with the list of active employees in FSFN. If a staff member has not completed the most recent training, their account is disabled. The Security Officer also works with DCF’s Security Officer to ensure any inactive accounts are addressed.
- BBCBC also has Operating policies that address:
  - Information systems data back-up, restoration and disposal
  - Appropriate use all electronic devices (including desktop, laptop, and external data drive use, SACWIS system access, internet access, email protocols)
  - Confidentiality and Release of Information
  - Security training requirements for all new employees and annual update requirements for all staff
  - Procedures for safeguarding confidential information transmission

## ***Emergency Response Management***

### Emergency Planning Philosophy

Big Bend Community Based Care is committed to promoting good health, well-being and occupational safety for its employees, volunteers and service recipients and recognizes that emergency situations require the participation of all staff.

### Continuity of Operations Emergency Management Plan

Big Bend Community Based Care annually reviews and updates this plan to provide direction to employees, volunteers and service partners in the wake of an emergency, disaster, or health crisis (such as the pandemic flu) that may threaten the agency mission and/or the safety of its personnel and clients. The plan details the required actions that each contracted case management organization will need to take in an emergency (before, during, and after). The plan prioritizes the safety and well-being of children in the BBCBC system (Foster Homes, Shelters, Group Care Facilities and any other contracted providers responsible for the care and custody of children) with an emphasis on identifying, locating and continuing services for those displaced or adversely affected by a disaster.

The plan also provides a Disaster Preparedness Checklist and an emergency test report form along with a calling tree which is updated annually.

### General Evacuation Policy

Big Bend Community Based Care protects the health and safety of its employees and clientele by designing a facility evacuation plan, by educating staff as to their roles and responsibilities in the event of an evacuation, and by running evacuation drills at regular intervals.

## ***Volunteer Risks***

### Addressing Risks Through Recruitment, Screening and Selection

Big Bend Community Based Care integrates risk management into its volunteer recruitment, screening and selection process by:

- Communicating to prospective volunteers the organization's requirements and expectations
- Employing a screening process consisting of an application, interview, and criminal history check

### Supervision of Volunteers

Volunteers assigned duties at Big Bend Community Based Care have specific duties or tasks identified which includes the position to whom the volunteer reports. Volunteers report on a regular basis to their supervisor.

### ***Insurance Program***

Big Bend Community Based Care currently has comprehensive insurance coverage including property & casualty, professional & general liability, employee practices and directors & officers' liability.

### ***Code of Ethics and Boundaries***

Big Bend Community Based Care is committed to professional and ethical practices as reflected in the Board Policy Manual, Employee Handbook, Council on Accreditation narratives, and various other operating policies.

## **Section II: Programmatic Risk Management Strategies**

### ***Licensed Out-of-Home Care***

#### Description

Many of our clients require placement in licensed out-of-home (OOH) care whether in a traditional foster home, a residential group home or a therapeutic residential treatment center. These different levels of care (LOC) require a coordinated approach to estimating the number of children requiring each LOC and allocating costs across multiple funding streams. Some of these children will have their cost of care provided for by another entity such as Medicaid or the Agency for Persons with Disabilities (APD), but most often will be covered by funding from the lead agency contract. Partnerships with APD, Department of Juvenile Justice (DJJ), and Children's Medical Services (CMS) are necessary to maximize funding opportunities for jointly served youth.

Managing licensed OOH care is considered the most important activity in managing the financial risks for a lead agency. Slight deviations in projected lengths of stay or costs of care can pose extreme financial risk. The most extreme risk related to managing licensed out of home care costs is associated with the number of children in need of lead agency funded high cost placements.

## Strategies

1. Centralized placement responsibilities
2. Comprehensive Utilization Management Activities including the tracking and analysis of removal rates, average length of stay and the number of clients served by cost and level of care:
  - a. Weekly removal report
  - b. Monthly Utilization Report
    - i. Length of Stay
    - ii. Number of children in Out of Home Care by Placement Type
  - c. Daily licensed care utilization report (number of children by placement type and cost)
  - d. Daily average licensed care cost per day report
  - e. Ongoing Group Home Staffings: These staffings include the Foster Home Management Providers and are intended to identify youth ready to step down to a lower level of care
  - f. Monthly Specialized High End survey, tracking, staffing: This process is designed to pro-actively identify youth at risk of placement in the highest levels of care so that plans may be developed for stabilization and prevention of such placements. In addition, the team meets monthly to discuss already in high cost placements with the goal of developing step down plans. Consideration is always given to accessing alternate funding streams.
  - g. Quarterly Fiscal Indicator Report (provided by DCF and reviewed for trends and variances)
  - h. Bi-monthly Finance Committee review
3. Minimize the need for lead agency funded high cost placements (through above UM activities)
4. Encourage the use of relative placement due to the emotional benefit to children and in accordance with The Adoption Assistance and Child Welfare Act of 1980 requiring that children be placed in the least restrictive and most family-like setting (more than half of the children in out-of-home care are placed with relatives and non-relatives). Children in relative placement have better outcomes with a lower length of stay and a decreased number of placements during their removal episode compared to children in licensed care.

5. Supplemental information system for enhanced data capacity – CoBRIS
6. Projected costs based on historical data and current trend information
7. Lead Agency APD Liaison
8. Monthly Challenge group staffings for jointly served youth with DJJ, CMS, School, APD
9. Working agreements with CMS, DJJ, and APD
10. Foster Home Management contracts contain an expectation for targeted recruitment

## ***Incident and Accident Reporting***

### Description

Big Bend Community Based Care has a policy (number 805) providing oversight for incident reporting requirements located on its website. The types of incidents requiring reporting and associated timeframes are clearly outlined. The agency has established email groups for easy notification to appropriate parties.

### Strategies

1. All incident reports are reviewed by the Chief Operations Officer for accuracy, timeliness, and trend identification.
2. All incidents are logged into a centralized spreadsheet for tracking and identifying trends such as, but not limited to, reoccurring incidents in group home settings, repeat runaway incidents with particular child, etc.
3. Input of “critical” incidents into the state IRAS.

## ***Investigations/Decision-Making***

### Description

Big Bend Community Based Care is committed to providing a comprehensive array of quality services to enable families to stay safely together or reunify as quickly as possible. As described in the above section on Licensed Out of Home Care, an effective Utilization Management system includes tracking the number of removals and cases referred for services. Big Bend Community Based Care is committed to partnering with the Department of Children and Families in analyzing related data.

## Strategies

1. Manage a comprehensive provider network which includes a Provider Enhancement Committee whose goal is to identify needed resources, review existing providers, recruit and add new providers, review applications and is comprised by representatives from BBCBC, sub-contracted providers, CLS, and DCF Child Protective Investigations
2. Weekly review of removal data, including the count and reason for removal, by the COO and Operation Managers for trends and service needs of the community served
3. Monthly Diversion/Intervention utilization report
4. Monthly Utilization Report including data on case type
5. Compilation of a monthly Reducing Out of Home Care report
6. Review of statewide removal data in the monthly Child Welfare Services Trend Report
7. Annual Community Stakeholder survey
8. Maintain a close working relationship and open communication with Department staff in order to identify data sources, review information related to community resources (and gaps) and communicate strategies related to resource development
  - a. Partnership during Engagement and Case Transfer
  - b. Bi-Monthly Joint Performance Meetings
  - c. Joint problem-solving teams, such as Greenbelt
  - d. Bi-Monthly DCF/BBCBC Partnership Meetings

## ***Policy Change***

### Description

Policy changes may be made at any point based upon changes to legislation, DCF policy, service delivery, and identified need. BBCBC operating policy 1000-1007 provides extensive details governing changes to agency operating policies:

- The situations that precipitate changes to operating policies
- The agency staff responsible for managing and maintaining approved policies and procedures
- The process for proposing changes to operating policies

- The review and approval process for proposed changes
- The required documentation for CEO approval necessary prior to submission for Board approval
- The dissemination plan for approved changes to operating policies to agency staff, network partners and community stakeholders

### Strategies

1. Continuous review of existing policies to identify needed changes
2. Executive, Board of Directors and Department review of changes in policy
3. Weekly management meetings where policy change implications are discussed and evaluated from an operational and financial perspective
4. Updated policies addressed during Quarterly Performance Review meetings with sub-contracted agencies
5. Policies that require immediate actions are shared with staff via in-person training, direct email communication or during a monthly staff consultation facilitated by the BBCBC Training Team
6. Prior to each pre-service class, the BBCBC Training Team meets to identify any policy changes that need to be incorporated into current curriculum. During pre-service training, one day is targeted to accommodate changes in practice or policy.

## ***Runaways and Missing Children***

### Description

Runaway and missing children are at great safety risk and efforts need to be made to reduce and resolve these episodes to every extent possible. Collaboration with DCF and law enforcement will occur as needed to ensure that the child is located and returned to a safe environment as quickly as possible.

### Strategies

1. Case managers and Protective Investigators will contact local law enforcement to report the child as missing and provide all the necessary information and documentation required by law enforcement.
2. Case managers will complete an Incident Report and Missing Child Tracking Sheet and submit to the missing child incident reporting email group.

3. Lead agency staff will assure timely entry of the incident into the missing child data base in FSFN.
4. Posting of the agency's Prevention, Reporting, and Services to Missing Children incident report on the website. The policy includes direction on:
  - a. Defining runaway and missing children
  - b. Prevention of missing children
  - c. Response of caregivers when a child is suspected to be missing
  - d. Efforts to locate missing children
  - e. Response when child is recovered
5. Monitoring of compliance with the requirements for Runaways and Missing Children by Big Bend Community Based Care QA staff and DCF.
6. Dailey reporting of missing children to management.
7. Review of state reports on any circuit issues pertaining to the Missing Children Tracking System.
8. Runaway and Missing Children is a standing agenda item on the Monthly BBCBC Risk Management Committee meeting. The available data is reviewed and analyzed to determine changing patterns or emerging issues that might be related to performance issues.

### ***Relationship Management, Community Supports and Community Engagement***

#### Description

An inherent component of the community based care model is the development of a sense of local ownership via ongoing community engagement and direct local investment in child welfare services. Building strong, positive relationships with community stakeholders, partner agencies, the judiciary and Department of Children and Families' staff is a critical success factor. Open communication, sharing of information, and joint meetings are vital factors in maintaining effective relationships and performance excellence.

## Strategies

1. Quarterly Joint Performance Review Meetings with Network Management Team
2. Joint trainings and shared initiatives such as Family Centered Practice, Family Preservation, Quality Parenting Initiative and Trauma Informed Care
3. Shared projects such as the Foster Parent Appreciation events and Social Services Bazaar
4. Bi-monthly partnership meetings with Department and lead agency leadership
5. Philosophy of shared decision making and open negotiating with subcontract providers
6. Bi-monthly newsletter to Department staff, Subcontracted providers, and community stakeholders
7. Lead agency presence in community organizations and meetings
8. Annual stakeholder survey
9. Big Bend Community Based Care Board of Directors' members are involved with and represent their communities
10. Ongoing community networking activities by Lead Agency and Partners
11. Challenge Group Staffings
12. Partnership with the Department of Children and Families in strengthening Community Alliances
13. Partnership with the Ounce of Prevention for community prevention initiatives
14. Promote the history of our local partners' fund raising initiatives by supporting and/or partnering on their events and not competing for limited local contributions
15. Big Bend Community Based Care regularly participates in events to educate and engage the community
16. Big Bend Community Based Care will partner with local businesses to create seasonal awareness campaigns

## ***Special Populations***

### Description

All clients within the child welfare system have special needs due to their histories of abuse and neglect and therefore pose risk to the agency. Some of the children served have extraordinary needs requiring a more intense level of intervention and attention. Big Bend Community Based Care's ability to serve these children is dependent upon identifying the children with special needs and having the appropriate resources in the community. Child welfare systems of care are dependent upon multiple partners and diverse funding streams (Medicaid, Agency for Persons with Disabilities, Substance Abuse and Mental Health). The fabric woven with diverse funding sources is fragile and dependent upon annual appropriations from the Florida Legislature as well as Federal dollars.

As stated above in the Licensed Out of Home Care Costs section, the most extreme risk related to managing licensed out of home care costs is associated with the number of children in need of lead agency funded high cost placements due to developmental needs or serious mental, behavioral, or physical health needs. These different levels of care (LOC) require a coordinated approach to estimating the number of children requiring each LOC and allocating costs across multiple funding streams. Some of these children will have their cost of care provided for by another entity such as Medicaid or APD, but most often will be covered by funding from the lead agency contract.

In many areas of Florida, service delivery to undocumented immigrant children presents a significant risk. In Big Bend Community Based Care's history of delivering services, we have only had the opportunity to serve three of these children. The three children were effectively served within our existing resources and did not stretch capacity in any way. Therefore, this is not currently identified as a special risk population. If circumstances change in the future, we will revise this section of the risk management plan to address risk issues.

### Strategies

1. Centralized Intake and Placement functions
2. Lead agency coordinated multi-disciplinary and permanency staffings
3. Bi-monthly group home staffings
4. Specialized High End tracking spreadsheet
5. Monthly Specialized High End staffings
6. Lead agency APD Liaison
7. CBC Partnership (Magellan) Point of Contact
8. Daily Cost of Care utilization report

9. Ongoing coordination with partner agencies such as APD, CMS, DJJ, and substance abuse and mental health organizations

## ***Quality Improvement***

### Description

Big Bend Community Based Care believes that improving services is a continuous process focused on strategies that encourage best practice, compliance and accountability for the children and families we serve. Providing cost-effective, quality services and promoting positive outcomes for children and their families are the responsibilities of all staff, service providers and licensed caregivers. Big Bend Community Based Care's Quality Management Plan defines the agency's plan to assure the quality of services, mitigate risk and promote the continuous improvement of services for children and their families. The Plan utilizes an analytic and systemic approach to planning and performance management based upon W. Edwards Deming, Ph.D.'s *Quality Control Cycle* (Plan-Do-Check-Act).

### Strategies

1. Quality monitoring and improvement processes for Lead Agency and sub-contractor performance, sub-contract administrative compliance, service delivery and client safety, permanency and well-being outcomes.
2. Quality control/improvement processes (quality improvement plans, corrective actions plans, and requirements for sub-contractual invoicing, reporting and staffing levels.)
3. Monitoring service provision, client outcomes and quality of service data for trends to guide improvement activities. (Data: children served in-home and out-of-home, placement setting, client outcomes, timeliness of case work and judicial services, client satisfaction).
4. Update Quality Management Plan annually to reflect changes in child welfare practice, legislation and department directives.
5. Short-term strategic plan is updated to reflect changes in legislation and available funding.
6. Update System of Care in partnership with DCF as needed due to funding or budget constraints.

## ***Physical and Behavioral Health***

### Description

The physical and behavioral health services provided to dependent children and their parents are necessary services that must be coordinated between multiple payers, insurance companies, or community resources. The vast majority of children within the dependency system are eligible for Medicaid, but even Medicaid has a multitude of HMOs and pre-paid plans for both physical and dental services. The majority of parents are not eligible for Medicaid and often do not have private insurance, therefore require more sophisticated case management as publicly funded physical and behavioral health services are limited for the adult population. Children in the dependency system are enrolled in the Child Welfare Pre-Paid Mental Health Plan for behavioral health services which is managed by the Community Based Care Partnership. If these various and complex systems are not managed properly, the cost of care for these services could pose significant financial risk to the lead agency. Reduced Federal or State funding for physical or behavioral health services, particularly for adults, would limit the agency's capacity to effectively coordinate needed services designed to stabilize and reunify families.

### Strategies

1. Coordinate enrollment and eligibility determination for Medicaid services for children in Out of Home Care with an understanding of Medicaid services and the various mechanisms for Medicaid funding.
2. Coordinate enrollment and service provision under the Medicaid Child Welfare Pre-Paid Mental Health Plan on an ongoing basis.
3. Utilization Management approach designed to identify and maximize external resources, to include various funding streams.
4. Placement Stabilization staffings to identify any service needs and prevent disruption at the request of the placement unit, case management, foster home management, or the licensed caregiver.
5. Quarterly Quality Management reviews to include CFSR well-being items – outcomes are shared with management and subcontracted providers and QA workshops held on a regular basis.
6. Review of Quarterly Performance Measure reports by management and subcontracted providers.
7. Lead Agency coordination of Multi-disciplinary Team staffings and Suitability Assessments in accordance with the Medicaid Handbook and the CBC Partnership agreement.

8. Management of POS funds by accredited subcontracted providers (such as the Case Management Organizations).
9. Partnership with DCF in the provision of State funds for behavioral health services, including annual updates to behavioral health plans with DCF contracted agencies, recognizing that Florida Statutes 394.457 and 397.321 establish primary accountability within DCF to plan, evaluate and implement comprehensive behavioral health programs
10. Maintain an effective relationship with the Substance Abuse and Mental Health office (SAMH) in order to facilitate the coordination of specialized therapeutic services for children in out-of-home care, particularly those in need of placement with SIPP funding, as needed.
11. Regular collaboration with SAMH such as:
  - a. Management level staff are members of the National Center on Substance Abuse and Child Welfare Circuit 14 Advisory Group. This group has an established work plan including activities in Underlying Values and Principles, Screening and Assessment, Engagement and Retention, Services for Children, Training and System Tools, Budget and Sustainability, and Outcomes and System Reforms
  - b. Support of a DCF initiative to pursue a SAMSHA grant to refine our local Behavioral Health System of Care, including use of funds in our budget for required match
12. Explore mechanisms to centralize coordination of health assessments and services

## ***Relationships with the Legal System***

### Description

Positive relationships with Children's Legal Services (CLS), parents' attorneys, the State Attorney's office, the Public Defender's office, Guardian Ad Litem, Magistrates, and Judges facilitate successful child safety and permanency outcomes.

### Strategies

1. Open, timely and transparent communication demonstrating respect and understanding for the role and function each player brings to the process
2. BBCBC and CLS have instituted a quarterly Legal and Policy training that all case management staff is required to attend
3. Active and consistent participation in case related staffings

4. Bi-monthly management meetings with DCF/CLS
5. Participation in Judge's brown bag meetings where they occur
6. Working agreement with CLS and GAL
7. Partnership with Public Defender's office regarding coordination of services for "cross over" youth
8. Court Facilitation Circuit 2 & 14

### ***Media and Public Relations***

#### Description

There is no better disinfectant than sunshine. An educated community is more likely to be an involved community with a sense of ownership.

#### Strategies

1. Notification to DCF on media related issues
2. CEO as primary point of contact for all media inquiries
3. Be proactive in informing the community on child abuse and neglect issues
4. Educate and engage the community on child abuse and neglect related issues
5. Establish a positive media relationship in advance of crisis
6. Publish monthly report card on performance indicators on website
7. Produce an annual report which is disseminated to the community
8. Website
9. Social media
10. Bi-monthly newsletter
11. Initiate Press releases on community events
12. Participation in community groups and activities
13. Community Liaison positions for Circuit's 2 & 14

## ***Funding Risks for Independent Living and Adoptions***

### Description

Big Bend Community Based Care receives a combination of state and federal funding specifically for Independent Living Services and Maintenance of Adoption Subsidies (MAS). The financial risk for Independent Living services is subject, by Statute, to legislative appropriation. The financial risk of MAS is limited specifically to the contractual allocation of these funds. The agency's practice has been to prioritize these populations and work closely with the Department to this end. Forecasting costs is an essential component of cost allocation plan development.

### Strategies

1. Develop an annual spending plan for Independent Living
2. Utilize the Department's MAS projection tool annually and monitor monthly
3. Monthly financial statements reviewed by the Finance Committee and reported bi-monthly to the Board of Directors
4. Board reserves unrestricted funds to cover Independent Living shortages

## ***Risks Associated with Subcontracting***

### Description

Big Bend Community Based Care is a Network Management organization. The agency subcontracts for services in Circuits 1,2,3 and 14 from a large network of local providers. While this diversity of providers tends to mitigate and spread risk among many, it also leads to risk if non-performance becomes an issue. The agency directly contracts with Five Points Technology to formally "credential" all behavioral health providers in the sub-contracted network.

### Strategies

1. All subcontracts are written documents specifying terms and conditions
2. The agency has a standard monitoring process for all subcontracted services to ensure programmatic, administrative and financial requirements are met by subcontracted providers
3. The agency coordinates training and training standards for subcontracted providers
4. Subcontracted providers are licensed and/or accredited as required

5. Procurement policy established

## ***Provider Network Capacity***

### Description

A well-designed system of care allows for individualized service planning and delivery. Big Bend Community Based Care understands the diverse needs of clients and is therefore committed to creating a comprehensive provider network allowing flexibility and choice.

### Strategies

1. Establish partnerships along a continuum from large agencies to individual providers
2. Develop capacity within the provider network to have more than one provider offering a particular service or alternative to the service
3. Emphasize natural supports
4. Quarterly Provider Enhancement Committee meetings
5. Standardized service agreements and rate structure
6. Electronic Purchase of Service system for ease of access for subcontract providers
7. Standardized minimum requirements for all network providers

## ***Staff Retention/Turnover***

### Description

Quality of service and successful outcomes for children comes from hiring, supporting and retaining quality staff. Whether employed directly or subcontracted with a provider, the dependency case managers are the pivotal link in achieving good outcomes for children. In order to achieve caseload averages that meet national standards and support a work environment that promotes respect, collaboration, and professional development, retention initiatives and turnover reduction strategies must be utilized to retain staff.

BBCBC has a very low staff turnover rate of 2.20. Exit interviews are conducted with staff terminating employment with the agency. BBCBC's model for supervision is a reflection of our agency's culture and the geographic territory we are responsible for managing. With the exception of our fiscal team, BBCBC supervisors are responsible for serving staff that work in different offices within 18 counties. This creates barriers for the use of a traditional supervision model. To

this end, each supervisor maintains frequent, individual contact with staff. BBCBC employees attend a full day company-wide ALL Staff Day Training and Planning Meeting. This bi-annual opportunity builds teamwork throughout the organization and fosters effective internal communications. All sessions are organized by a group of staff members who plan the agenda and activities. BBCBC recognizes employees for demonstrating excellence in job performance and service delivery. BBCBC nominates staff regularly for statewide conference and national recognition awards.

For subcontracted agencies, we have established standards to ensure adequate and appropriate supervision occurs. We also require all supervisors to attend Supervisor for Excellence training. Case management agencies within our system of care conduct additional staff recognition activities including staff appreciation week, themed monthly meetings, team building luncheons, holiday events and other activities that promote team building and appreciation. When issues arise regarding staff turnover, a Green Belt team can be assembled to complete a root cause analysis and to provide recommendations.

### Strategies

1. Vacancies as an agenda item at all management team meetings
2. Pay disincentives to contracted agencies for extended vacancies
3. Monitor turnover rate
4. Monitor a sample of exit interviews
5. Annual employee satisfaction surveys
6. Maintain a professional work environment
7. Provide training on secondary trauma and stress management
8. Lead agency staff presence at subcontracted agency staff events
9. Develop Professional Goals at each annual review
10. Retain Key Officers

### ***Caseload***

#### Description

The lead agency contracts are considered “at risk” contracts because there is no limitation to number of clients served during a particular time period. The number of clients assigned to a case manager determines the caseload size for the worker.

Caseload size drives the quality of work performed with clients. National entities, such as the Council on Accreditation of Child and Family Services (COA) and the Child Welfare League of America (CWLA) recommend caseload ratios of less than 20 children per worker.

### Strategies

1. Contract for case management services
2. Fund the number of positions needed to maintain a 1:17 caseload ratio
3. Monitor caseload size
  - a. Weekly caseload ratio report by sub-contracted Case Management Organization, by unit and by case manager
  - b. Weekly children active by sub-contracted agency
  - c. Weekly investigation removal data by county
  - d. Review case open/closure reports.
  - e. Quarterly case type analysis report
  - f. Determine DCF directives/initiative/assignments workload impact to frontline staff.
  - g. Number of children placed outside of their county/circuit
4. Provide contract disincentives for extended case manager vacancies
5. Strive for salary parity for case managers relative to equivalent State positions.

## ***Financial Reserves***

### Description

Lead agency contracts are, by design, at-risk contracts. Community Based Care agencies face a number of financial risks, including reduction in contract funds, changes in the allowable use of funds, etc. In order to mitigate this risk, the agency must establish diverse funding strategies.

### Strategies

1. Establish goals for diversification through a strategic planning process
2. The Board established a 3% reserve of unrestricted dollars for child welfare contract.
3. Acquisition of facilities

4. Acquisition of grants
5. Monthly forecasting and reporting by Chief Financial Officer
6. Monthly financial statements reviewed by Finance Committee and Bi-monthly by Board of Directors
7. Modify policy, sub-contracts, cost allocation plan, and/or system of care as necessary

## ***Levels of Care***

### Description

A primary goal of a child welfare system of care is to keep children in the least restrictive, most family-like setting while working towards a permanent goal. Managing levels of care for children also results in managing the cost of care for children. As previously stated, licensed out-of-home care is considered the most important activity in managing the financial risks for a lead agency. Slight deviations in projected lengths of stay or costs of care can pose extreme financial risk. Cost of care is typically proportional to the level of care meaning the higher the level of care, the higher the cost of care. Strategies to manage the levels of care for children must be developed and monitored closely.

### Strategies

1. Monitor the system's capacity of foster homes, group homes, shelter beds, and therapeutic placements
  - a. Group Home and Shelter Facility contracts
  - b. Monthly reporting of capacity by Foster Home Management providers
  - c. Partnership with the CBC Partnership in assuring available therapeutic resources
2. Comprehensive Utilization Management Activities
  - a. Daily licensed care utilization report
  - b. Daily average licensed care cost per day report
  - c. Bi-monthly Group Home Staffings
  - d. Monthly Specialized High End survey, tracking, staffing
3. Address contract issues as needed

## ***Executive and Legislative Changes***

### Description

Lead Agency contracts are financially risk bearing. As such, any changes to funding and policy have significant risk implications. Routine changes include contract amendments, changes in federal and state laws, rules, regulations, and policies, and annual Legislative appropriations.

### Strategies

1. Facilitate and support local community understanding and ownership of the need for sufficient legislative appropriations and the need for local community investment to ensure quality interventions and supports
2. Support continuing and broad dialogue regarding developing and maintaining a System of Care that balances provision of essential and priority services within available resources
3. Maintain strong relationships with Executive and Legislative branches
4. Maintain a cash reserve
5. Incorporate a *Strengths, Weaknesses, Opportunities and Threats* (SWOT) analysis in the agency's strategic planning process

## ***Legal Liability and Accountability***

### Description

Since Big Bend Community Based Care is not an agent of the State of Florida, the agency is not covered by rules of sovereign immunity. The agency must insure itself against potential lawsuits or litigation that could result in civil judgments, fines or penalties and must perform a comprehensive review of all notices of legal action. The number of insurance companies willing to offer Community Based Care agencies coverage is decreasing while cost is increasing.

### Strategies

1. General and professional liability insurance coverage, including directors and officers coverage
2. Access to legal counsel for review and defense
3. Work closely with Executive and Legislative branches to improve policy, advocating for both the consumer and agency
4. An expectation that all agency staff are responsible for managing risk

5. Commitment to continuous quality improvement efforts
6. BBCBC has a Monthly BBCBC Risk Management meeting. Risk is reviewed and analyzed to determine how the risk can be mitigated.
7. Risk Management is a standing agenda item during BBCBC Board of Director meetings.