



## **TITLE VII - FAMILY FIRST PREVENTION SERVICES ACT (FFPSA)**

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### **FIDELITY, MONITORING AND EVALUATION**

This is a concept paper in a series of FFPSA papers. This paper focuses on additional requirements for monitoring and evaluating practice fidelity, service effectiveness and outcomes.



**OPEEKA**

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# FAMILY FIRST PREVENTION SERVICES ACT AND OPEEKA'S PERSON-CENTERED INTELLIGENCE SOFTWARE



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At Opeeka, our mission is to promote well-being for all. If well-being is a ladder, then our goal is to help empower every person to take upward steps.

Opeeka's Person-Centered Intelligence Solution (P-CIS) is a revolutionary new cloud-based assessment software that tracks progress toward well-being over time.

The Family First Prevention Services Act (FFPSA) is a landmark federally supported opportunity to provide more supports and services to maintain children and youth in home-like settings with their natural caregivers and families. Certain requirements of the Act necessitate program monitoring and evaluation of services provided. This concept paper describes how Opeeka's Person-Centered Intelligence Solution (P-CIS /pieces/) supports agencies to meet these requirements.

P-CIS is an assessment and outcomes management solution designed to help organizations, agencies, and their staff members to plan and guide person-centered care while measuring progress along personal trajectories of safety, permanency and success.

P-CIS provides:

- The ability to capture family circumstances in meaningful ways resulting in reliable, valid, and consistently administered outcome measures for all persons receiving services
- Real-time monitoring features to ensure that care results in positive outcomes relative to practices, services, programs, populations, and agencies
- Insights features to help to monitor level of care algorithms, placement decisions, program fidelity indicators, population needs, population outcomes, costs and more

P-CIS can quantify reductions in need for foster care and improvements in child well-being related to each service component so that agencies can put more resources toward service components that work, while dialing back efforts towards those with little impact. This results in a more efficient system of care providing increased quality of care with improved outcomes.

## From the Act:

With respect to the services and programs specified in subparagraphs (A) and (B) of paragraph (1), information on the specific promising, supported, or well-supported practices the State plans to use to provide the services or programs, including a description of—

- how the State plans to implement the services or programs, including how implementation of the services or programs will be continuously monitored to ensure fidelity to the practice model and to determine outcomes achieved and how information learned from the monitoring will be used to refine and improve practices;
- the target population for the services or programs; and
- how each service or program provided will be evaluated through a well-designed and rigorous process, which may consist of an ongoing, cross-site evaluation approved by the Secretary.

To monitor program fidelity to the practice model, a state can implement fidelity assessments for staff and persons in care. One of the most reliable ways to monitor fidelity is to ask the people about their experience in care. Fidelity assessments ask children/youth in care or their caregivers, for example, if they received a written prevention plan, if they met with a care team member at least weekly and if they felt that their voice was heard. Simply by asking members of a care circle (i.e., children/youth, caregivers and care staff) these types of questions, it ensures that practice principles are *top of mind* during care.

P-CIS facilitates collection of fidelity assessments through its “Invite to Complete” feature which emails questionnaires to anyone in the care circle. Recipients can securely complete the questionnaire on their desktop or phone. (Note: Recipients do not need to be registered users of the system.) Once completed, the results of the assessment appear immediately in P-CIS. In addition, the information is automatically organized and fed into P-CIS Insights – in real time – which can result in evaluation of fidelity across practices, agencies, populations, and potentially the entire state. The steps to real-time monitoring of practice fidelity are outlined below.

- Step 1: Email fidelity assessments to people for completion
- Step 2: Recipient securely completes assessment on their devices
- Step 3: Assessment results appear in P-CIS
- Step 4: Insights populate from new responses for real-time monitoring

## Step 1: Email the Fidelity Assessment to a Care Circle Member for Completion

**Person Centered Intelligence Solution**

Dashboard > People > Charlie Brown

**Charlie Brown**  
DOB: May 6, 2004

**Invite to Complete Questionnaire**

**Date**: 9/5/2020

**Reason**: Scheduled

**Note**: Hi Chuck, would you please fill this out before our next meeting?

**Send Invite**

**CANS**  
Version: CANS

**Item Types**

- Hand icon
- Arrow icon
- Stethoscope icon
- Speech bubble icon
- Shield icon

Time Period	Enroll	3 month	6 month	9 month	12 month	6 month	9 month	12 month
Date	7/12/2018	10/12/2018	1/12/2019	4/12/2019	7/12/2019	1/12/2019	4/12/2019	7/12/2019
Consumer Score	75	66	61	55	41	61	55	41
Caregiver Score	64	60	58	52	44	58	52	44

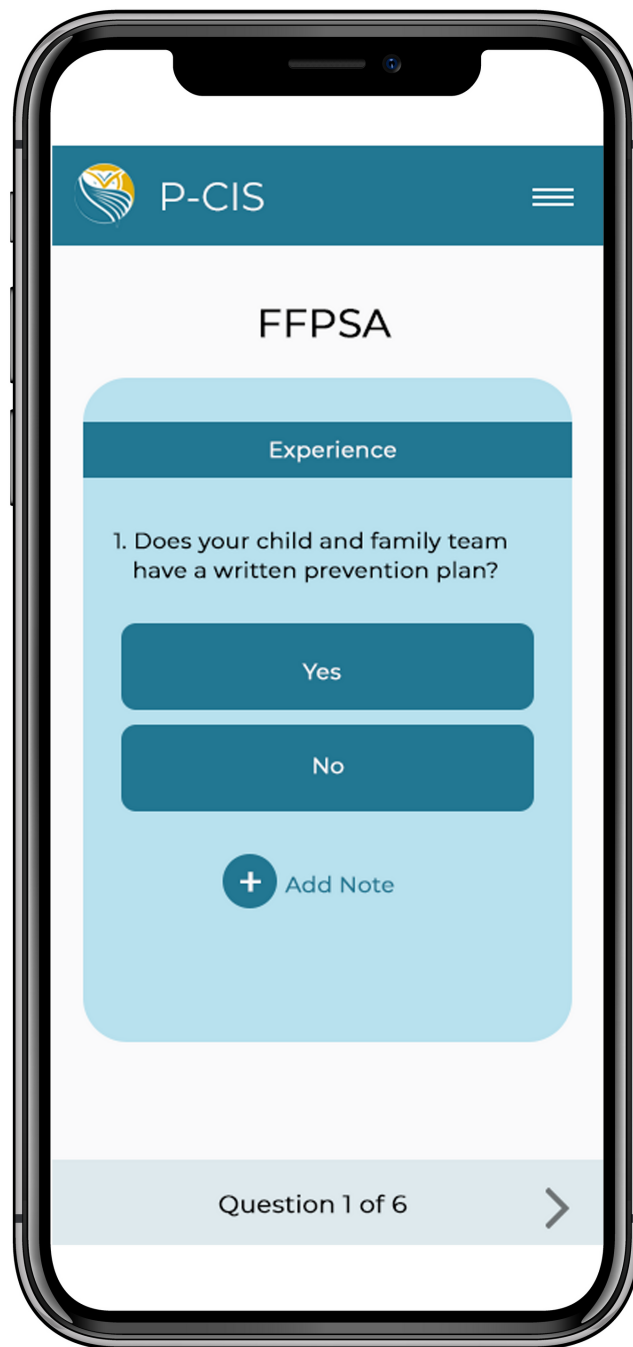
**Domain**

- + T1. Exposure
- + T2. Past Behavior
- + T3. Need
- + T4. Strength

**Caregiver Needs: Ben Fulton**

- + Item 1

Step 2: The Recipient Securely Completes the Assessment on Their Device



### Step 3: The Results of the Assessment Appear in P-CIS

**P-CIS** | agency1 | charlie

Dashboard > People > Charlie Brown

#### Charlie Brown

DOB: Dec 25, 2006

Profile | Questionnaires | Notifications | Reports

+ Add Questionnaire

ID	Instrument	Questionnaire Name	Reminder Schedule	Alert Schedule	Status
76	CANS	30 Days CANS CA Core & Trauma	Monthly	Level of Care Algorithm	
300	FGA	FAMILY GROWTH ASSESSMENT			
302	FID	Fidelity Index			

1 selected / 3 total

#### FID

Questionnaire: FID

Select filters: **Lifetime** | Voice Type

##### Time 1

Item Types

- Need for Focus
- Need in Background
- Strength to Build
- Strength Present
- Underlying Items

Communitic  
 Person  
 Helper  
 Support

##### Time 1

ADD

Status	In Progress
Voice Type	Charlie ..
Days in Care	222
Time Period	Month 8
Date	02/21/2021
Person Score	13

Collapse all items |  Focused View

#### Experience

3

Written Plan: Yes

Item Description: Written Plan  
Does your child and family team have a written prevention plan?

Item Rating:

- [-] = No answer [-]  
 No [N] = No [0]  
 Yes [Y] = Yes [1]

Confidential:

Yes  
 No

Notes:

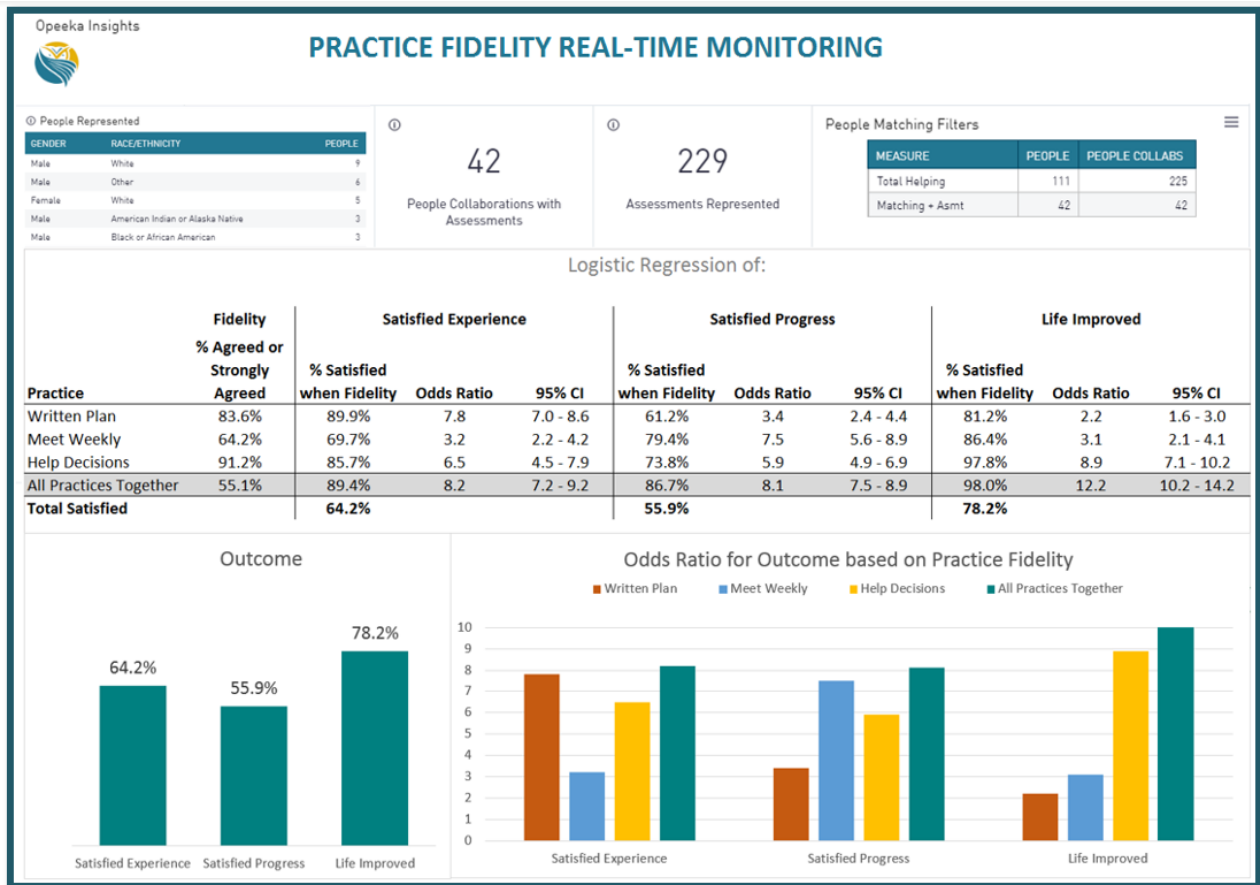
Meet Weekly: Yes  
 Help Decisions: Yes

#### Satisfaction

10

Satisfied Experience	Agr
Satisfied Progress	Agr
Life Improved	SA

## Step 4: Assessments are Monitored and Evaluated in Real-time with P-CIS Insights



All types of questionnaire responses can be merged in P-CIS Insights to track outcomes related to practice and practice fidelity. The Insights help to identify which practices are impacting outcomes and at what level of fidelity. Filters drill into insights for specific populations.

As seen in Step 4, rigorous analysis (e.g., controlled logistic regression) continuously updates as data comes in, identifying what practices are impacting which outcomes. From this insight, efforts can be designed to improve practice and fidelity where they will make the most impact.

What the example analysis above portrays is that all practices are important, but they impact outcomes differently.

### In this example:

- Written plans including persons helping in decisions are associated with satisfaction with experience
- Meeting weekly with inclusive decisions demonstrates the impact on satisfaction with progress
- Among these three practices, including persons in helping to make decision for their care is the primary practice associated with how a person feels about improvements in their life

From these results, an agency can identify care teams that may not be emphasizing these practices and can communicate to them about the evidenced importance of these practices while providing additional training and coaching.

## From the Act

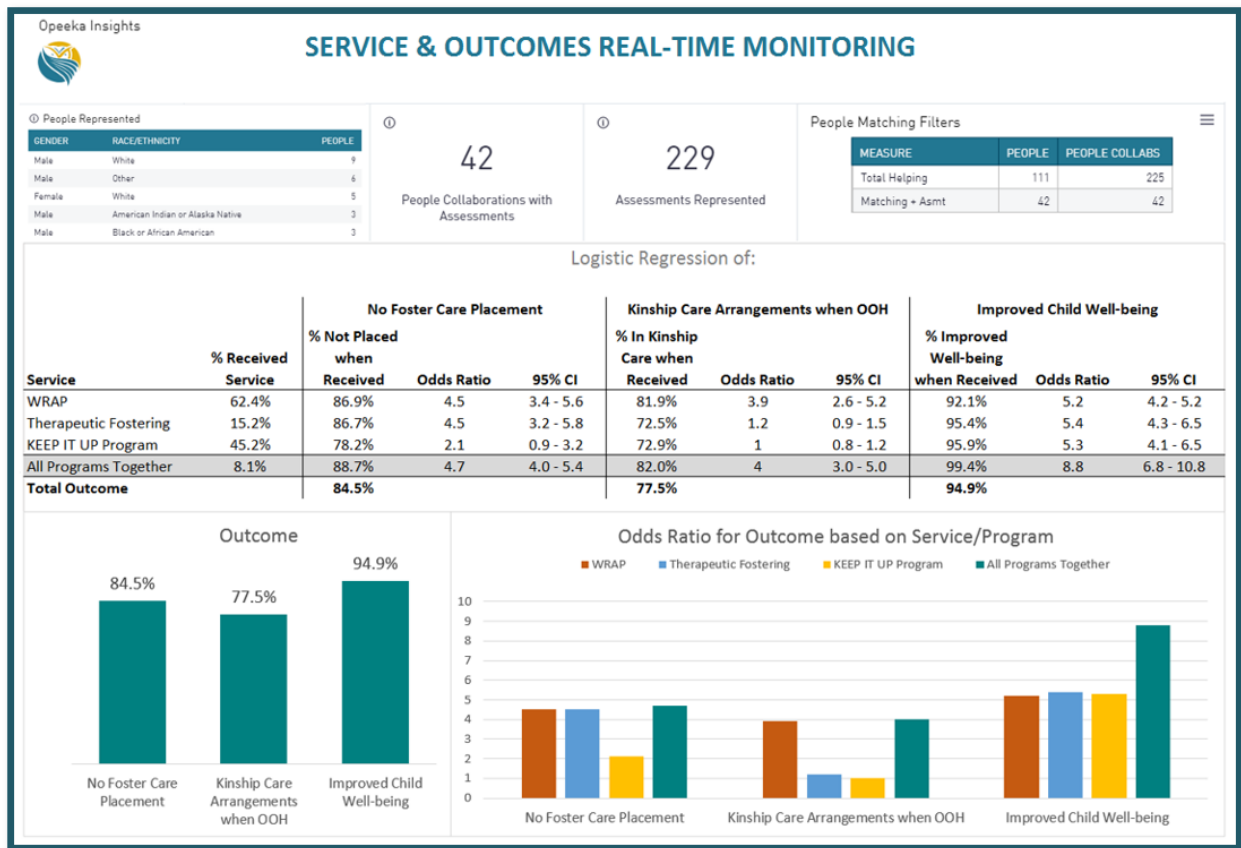
The Secretary, directly or through grants, contracts, or interagency agreements, may collect data and conduct evaluations with respect to the provision of services and programs described in section 471(e) (1) for purposes of assessing the extent to which the provision of the services and programs— (A) reduces the likelihood of foster care placement; (B) increases use of kinship care arrangements; or (C) improves child well-being.

P-CIS can meet all the evaluation requirements of the Act. P-CIS Insights are powerful and customizable. Not only do they automate analyses from questionnaires and assessments, but they also connect to data sources to pull information from other electronic records into the analyses. P-CIS embeds advanced analytics powered by Python and R to uncover significant findings through higher level statistical approaches, such as regression, classification, hierarchical analysis, longitudinal analysis, and other approaches as desired. With P-CIS as the hub for evaluation, no file export is needed. Analytic staff can log into a P-CIS Analytics Space to perform most types of outcome analysis on live and historic data. The Analytic Space supports unlimited research and evaluation notebooks for analytic staff or evaluation consultants.

Because of the standardized and highly structured format of data exchange, P-CIS organizes, merges, and transforms data minutes after it is collected or exchanged. Data is then fed to analytical engines for evaluations that can be driven by selections from drop-down filters or research notebooks, alike. An agency's analytical staff, Opeeka's analytical staff, or a third-party consultant, such as an academic institution, can customize P-CIS Insights dashboards to automate evaluations which test specific hypotheses.



Custom P-CIS Insights dashboards can be published and democratized to users throughout the system. End users who log into P-CIS can have access to the custom P-CIS Insights, but only for the people for whom they can see. This means that everyone can analyze their own outcomes from the same dashboard framework – in real time. No further development is needed because P-CIS's HIPAA compliant data access and security automatically applies democratization. At any level, the dashboards will only display information about the people that the end user can see. System administrators who roll out one dashboard will actuate insights into sub-populations within minutes after launch. Everyone across a system can speak a uniform language about outcomes for shared populations.



For example, the Act calls for evaluations of foster care placement, use of kinship care and improved child well-being. P-CIS can automate this evaluation so that these indicators can be evaluated in real time as youth reach milestones (e.g., yearly anniversaries, final dispositions), as seen in the example. As population outcomes change, the dashboard will track the change, and drop-down filters allow end users to re-run the analysis for specific populations - for High-Throughput Evaluation (HTE).

**In this example:**

- The WRAP is the service which is most often associated with increases in kinship care when children/youth are placed out of home (OOH)

Once calibrated, schedules can automate emails of the dashboards which include the latest up-to-the minute outcomes. Program evaluation does not have to require an arduous process of file data exchange to third parties, months or years after children/youth leave the system. Evaluation can happen in real-time so that nimble adjustments can be made to service offerings. The more an agency explores P-CIS Insights, the closer they get to understanding what works for whom.

## From the Act

**PERCENTAGE OF CANDIDATES FOR FOSTER CARE WHO DO NOT ENTER FOSTER CARE.**—The percentage of candidates for foster care for whom, or on whose behalf, the services or programs are provided who do not enter foster care, including those placed with a kin caregiver outside of foster care, during the 12-month period in which the services or programs are provided and through the end of the succeeding 12-month period.

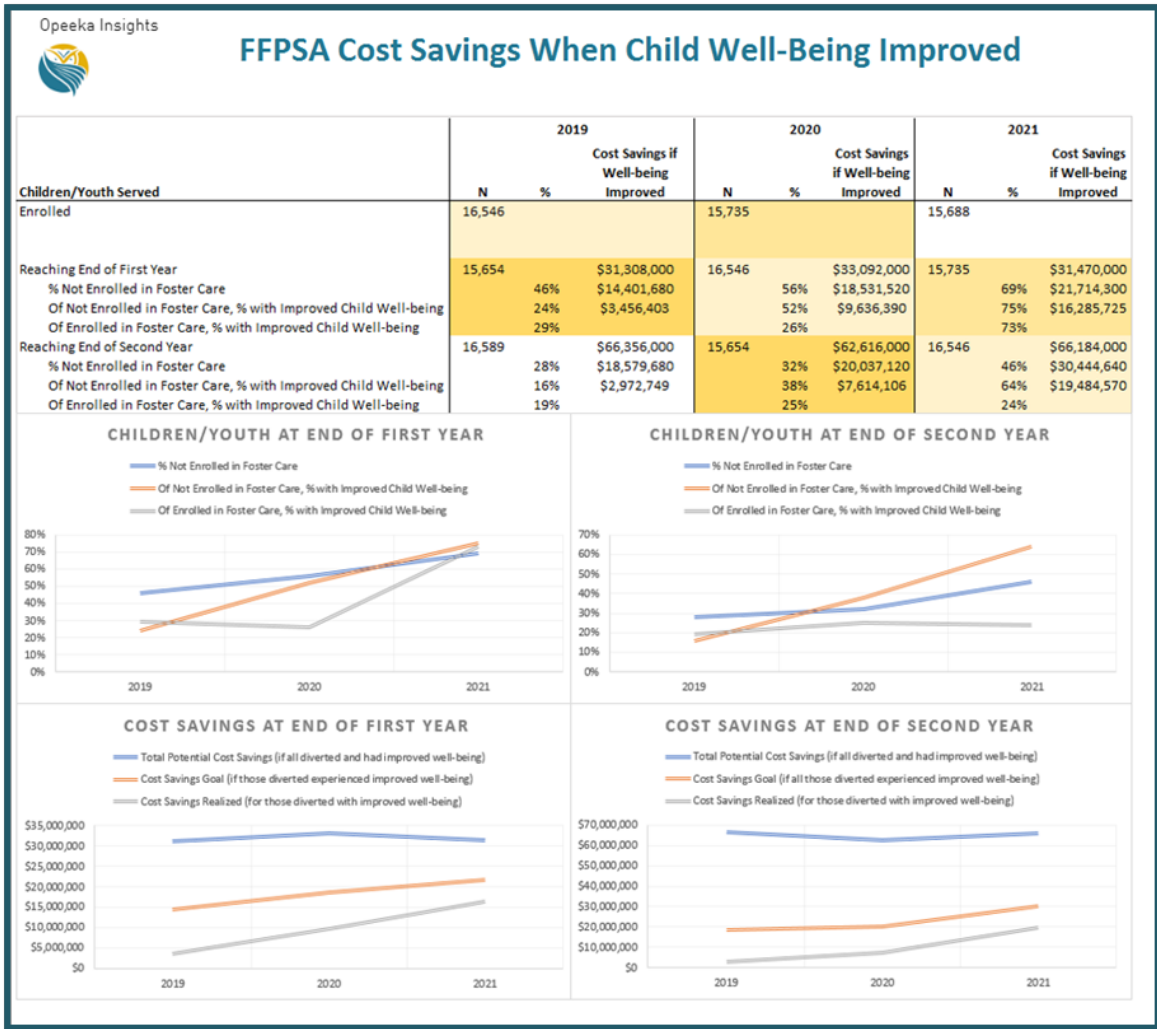
**PER-CHILD SPENDING.**—The total amount of expenditures made for mental health and substance abuse prevention and treatment services or in-home parent skill-based programs, respectively, for, or on behalf of, each child described in paragraph (2).

P-CIS supports real-time cost disposition and cost analysis through linkages to electronic records. P-CIS Insight dashboards can be calibrated to display analytical insights on assessment and program data from P-CIS linked to any other type of data, such as services, billing, cost, staff profile, staff training, etc.

## The Technicalities



Information can be securely maintained in real-time via a backend integration process with an electronic health record via Opeeka's application programming interface (API) engine. P-CIS production data is encrypted using Transparent data encryption (TDE) to protect against the threat of malicious offline activity by encrypting data at rest. P-CIS performs real-time I/O encryption and decryption of the data at the page level. Each page is decrypted when it's read into memory and then encrypted before written to disk. In support of a universal record across a system of care, a person in care can have as many identifiers as needed, supporting unlimited linkage between records in other data sources. The Insights Analytic Space supports direct secure connection to other data repositories stored in MySQL, PostGres, Redshift, Vertica, SQL Server, Oracle, MemSQL, Sybase, Exasol, BigQuery, Snowflake, Presto, Qubole and Athena.



As seen in the example, P-CIS can monitor candidates for foster care who enter or do not enter foster care by their one-year anniversary in real-time. Folding in data from a multitude of other electronic systems, P-CIS can coordinate information to track the exact cost as well as cost savings. When calibrated with these external data sources, P-CIS success-focused artificial intelligence (SF-AI) models learn what services and supports improve outcomes at reduced cost. As seen in this example, we must only recognize cost savings when the diversion from foster care resulted in positive outcomes. Cost savings for poorer care is not the aim of the Act, and P-CIS can help ensure that across the nation, we are uniformly assessing cost savings only as they relate to positive outcomes.

### Conclusion

The FFPSA calls for evaluation and monitoring to better serve children/youth and families at risk of foster care. P-CIS provides the ability to collect fidelity and outcome measures which funnel into real-time monitoring and evaluation dashboards. P-CIS can link and merge data from other electronic records. Through P-CIS, agencies can unify data across a system of care and learn what works for whom. By doing this in real-time, systems can be nimble and care plans can be adjusted when insights indicate better options would have more probability of success for a family's unique circumstances. Systems can learn exactly in what circumstances each type of care results in improved child/youth well-being, improving cost savings while simultaneously improving outcomes.

Opeeka's mission is to support person-centered care, and our goal is to help systems identify what works for children/youth and families in becoming successful.

### **FFPSA Concepts Covered by P-CIS:**

#### **FFPSA Part I: Trauma-Informed Prevention Plans**

Using P-CIS to convert assessment data into trauma-informed prevention plans with consistent outcomes measures.

#### **FFPSA Part I: Fidelity, Monitoring and Evaluation (this paper)**

How P-CIS supports data reporting and program monitoring.

#### **FFPSA Part II**

P-CIS facilitates working with partners to serve children in out-of-home placements.

#### **FFPSA Part III**

How P-CIS facilitates risk assessment as part of a statewide plan to prevent child abuse and neglect fatalities.

#### **FFPSA Part IV**

Ways in which P-CIS helps assess and document the need for placement in a qualified residential treatment program (QRTP).

#### **FFPSA Part V**

Ways in which P-CIS supports the efforts to retain foster families.

#### **FFPSA Part VI-VII**

How P-CIS' Inquisitive Data Exchange process simplifies data exchange standards for improved interoperability.