

Level of Care Matrix Phase II Pilot

**Submitted to
The California Department of Social Services**

**By
The Resource Center for Family-Focused Practice
Center for Human Services**

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Level of Care Matrix Phase II Pilot

This report summarizes findings for the *Level of Care (LOC) Matrix Acceptability and Practicality Pilot Study* conducted by the Resource Center for Family Focused Practice (RCFFP), a part of the Center for Human Services at UC Davis Extension. RCFFP conducted the study at the request of the California Department of Social Services (CDSS). Study participants were drawn from Child Welfare Social Workers (Social Workers) and Juvenile Probation Placement Officers (Probation Officers). This pilot was one of several activities CDSS has undertaken to solicit feedback and gather information on the LOC tool.

Key Findings:

- The percentage of cases that fell within each of the LOC Rate categories was in the general range of the existing foster care payments.
- There was confusion among participants on how to apply the “level-up” rules related to high scores in the Health and Behavioral Domains.
 - RCFFP recommends the directions on the score sheet be revised to improve clarity.
 - Additionally, the trainings held on the tool should go into these instructions in depth to ensure greater understanding by the workers who will use the tool.
- The LOC tool was piloted on a varied range of cases, involving children/youth of a wide range of ages, and with a variety of placement types and needs.
- In general, participants found that the assessment tools or information sources they used were helpful in completing the LOC tool.
 - One exception was the Resource Parent Report, which the majority of participants found “unuseful” or “very unuseful.”
- No participant completed the *Child and Adolescent Needs and Strengths (CANS)* or *Treatment Outcome Package (TOP)* assessment tools prior to the LOC Matrix.
- A significant percentage of participants responded as being dissatisfied with the LOC tool’s ability to determine the necessary supervision needs by a resource family to support the needs of a child/youth.
 - Responses to this question may have been negatively affected by a lack of understanding of the “level-up” rules by participants.
- The majority of participants felt the LOC Matrix was helpful in determining a level of care rate.
- There was a correlation between position type of the participant and their perception of the tool; Social Workers were slightly more satisfied with the tool than Probation Officers.
- In general, participants perceived an increase in their ability to identify the care needs of children and youth after using the LOC tool.
- Prior to using the LOC tool, Social Workers felt they had more ability to identify the care needs of children and youth compared to Probation Officers.
- Both Probation Officers and Social Workers felt their ability to identify the care needs of children and youth improved after using the tool.

About the Level of Care Protocol

CDSS and the counties developed the Level of Care Protocol for the purpose of standardizing a rate determination protocol for the level of care rates structure. It is based on the care and supervision needs of children and youth in out of home care and sets expectations for the resource parent. Using this protocol represents a key shift in practice for the child welfare and juvenile probation workforce in California.

Purpose of the Pilot

The purpose of this pilot was to test the *acceptability and practicality* of using the LOC tool. The LOC tool has been designed to determine levels of care rates to be paid to resource providers caring for children in out of home placement through child welfare services or probation. The intent of this pilot was to obtain preliminary information for how well the LOC tool differentiates the care and supervision needs of children/youth. In addition, it was hoped that the pilot would help to learn if Social Workers and Probation Officers who used the tool would find it to be easy to complete and helpful in understanding the level of care needed for children/youth.

This pilot evaluation is not a rigorous evaluation in terms of determining the psychometric properties of the LOC tool.

Methodology

The study design for the pilot was approved by the Internal Review Board (IRB) at the University of California, Davis. CDSS recruited seven child welfare departments (Los Angeles, Riverside, San Diego, Fresno, Glenn, Mariposa and Humboldt) and three probation departments (Riverside, Santa Clara, Solano) to participant in the study. Individual departments were responsible for recruiting Child welfare Social Workers and Juvenile Probation Placement Officers to participant in the study. Study participants were asked to pilot the LOC tool with two children/youth on their caseload. Data collection was conducted via anonymous online survey. The survey requested the overall LOC rating assigned to each child or youth, as well as the individual domain scores. The survey also included questions about characteristics of the case and what assessments/information sources were used to complete it. Additionally, questions about how the participant perceived the LOC tool, training they received as a part of the pilot, and basic demographic information were asked on the survey. Finally, participants were asked to provide specific feedback on the individual domains and the LOC as a whole.

In preparation for launching the LOC tool, CDSS reviewed the reimbursement rates currently paid for children and youth in out of home placement. The intent of this review was to determine the appropriate percentage of cases that should be expected to fall within the five LOC rate levels.

Study participants were asked to provide the scores they assigned for each of the five individual domain areas as well as the overall LOC Level they assigned the case. All five scores were utilized in the analysis to assess the usability of the tool¹. A match between the overall LOC sores entered by participants and

¹ The LOC Score sheet instructed for that the overall LOC score for children/youth who had a rating of 5 or higher in the Behavioral/Emotional or Health domains to be increased by one level.

the overall LOC scores would indicate that participants were able to successfully follow the instructions on the scoring sheet. If the overall scores did not match it would indicate that participants were not able to successfully follow the instructions on the scoring sheet.

Survey Results

This section summarizes response data for the survey. A systematic analysis of the feedback questions was not included in the analysis. However, relevant themes gathered from the feedback questions have been included throughout this section. All comment data, has been compiled and categorized by participant job type and provided to CDSS in a separate document for internal use.

Participant Information

A total of 80 individuals participated in the study statewide. Fifty-three participants identified themselves as Social Workers, working in Child Welfare Service Departments. Nineteen participants identified themselves as Probation Officers, working in Probation Departments. The remaining eight participants did not provide a response to their job title or to the department they work.

Most participants (47) hold a Bachelor’s Degree. While an additional 24 participants indicated they hold a graduate degree. One participant indicated they have less than a high school degree, and the remaining eight participants did not provide a response.

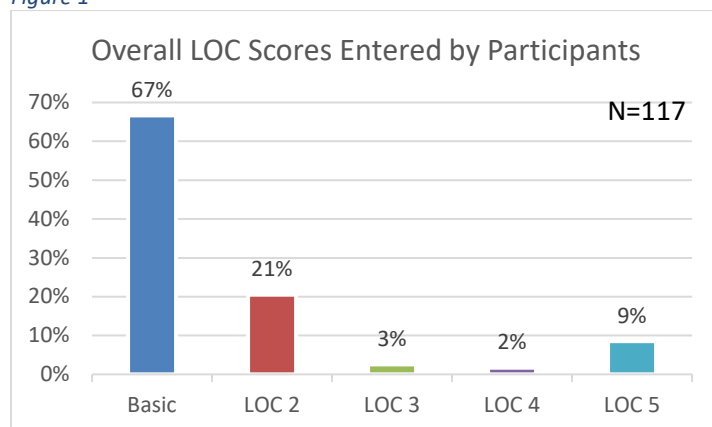
Most participants, 53, identified as female. Of the remaining participants, 18 identified as male, one as “other,” and eight individuals did not provide a response to the question about gender.

Overall LOC Ratings

A total of 119 LOC rating tools were collected during data collection. Ratings for two LOC tools were excluded from the final analysis because the placement type of the youth in which the tool was completed was juvenile hall; a placement type which is outside the scope of this pilot. After exclusion, 117 LOC ratings were used to conduct the final analysis.

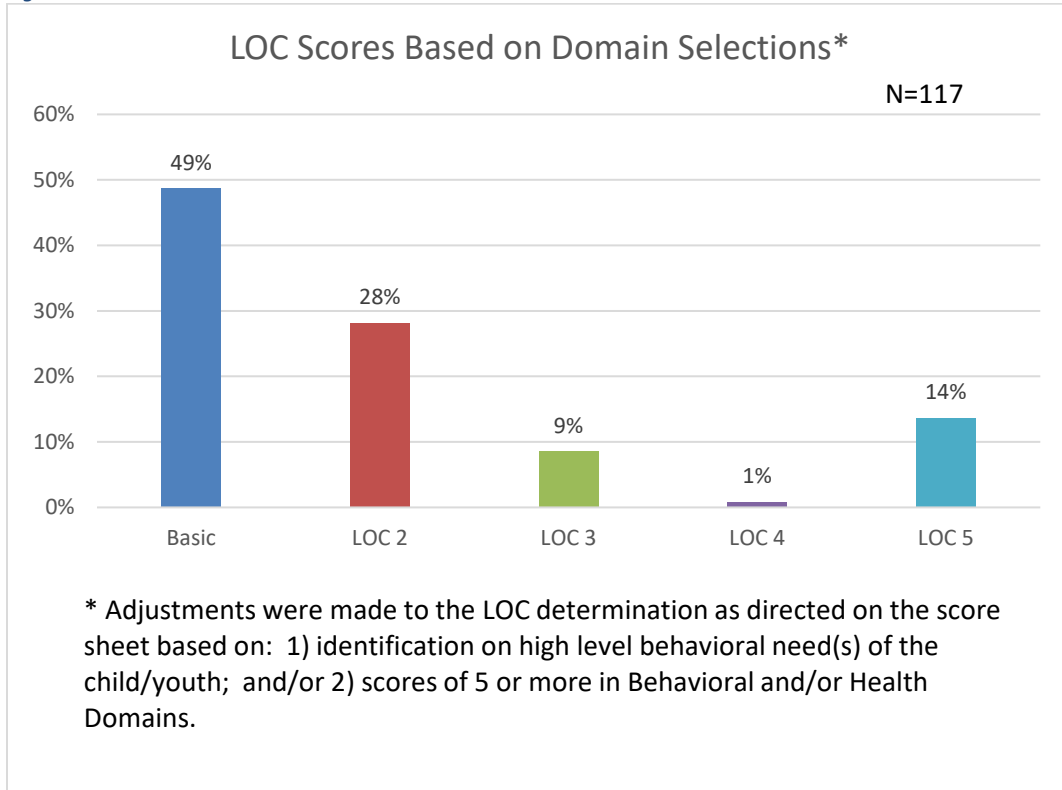
The majority of overall LOC scores entered by participants fell into the Basic (67%), with the remaining 43% of scores falling within the remaining four categories. Only one score fell into the LOC 4 category. Figure 1 provides a breakdown of all the scores by LOC level as entered by participants.

Figure 1



There was a difference in the distribution of cases that fell in each of the LOC levels when the overall LOC scores were calculated using the individual domain ratings provided by participants and applying the level-up instructions given on the scoring sheet. Figure 2 provides a breakdown by LOC level as calculated using the domain scores.

Figure 2



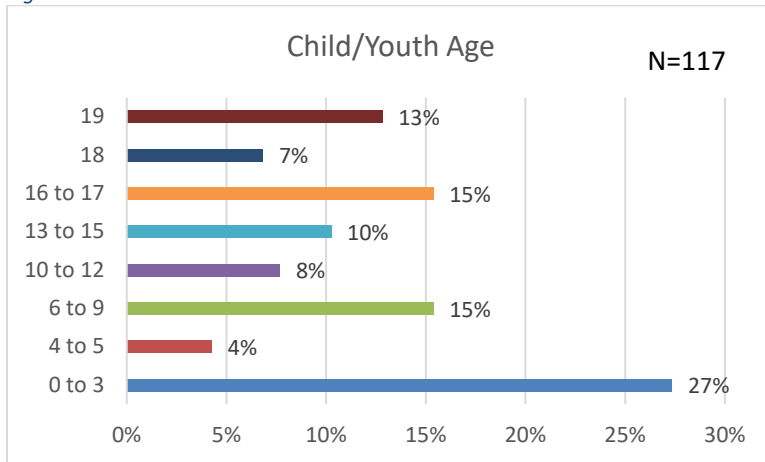
The inconsistency between the overall LOC scores entered by participants and those calculated as part of the analysis indicate participants did not understand the level-up instructions given on the score sheet. It is recommended that CDSS consider clarifying the instructions for adjusting the overall LOC scores on the scoring sheet. Additionally, the procedure for increasing scores should be covered in depth during the planned training sessions.

Case Characteristics of LOC Ratings

The LOC tool was piloted on a wide range of cases, involving children/youth of a wide range of ages, and with a variety of placement types and needs.

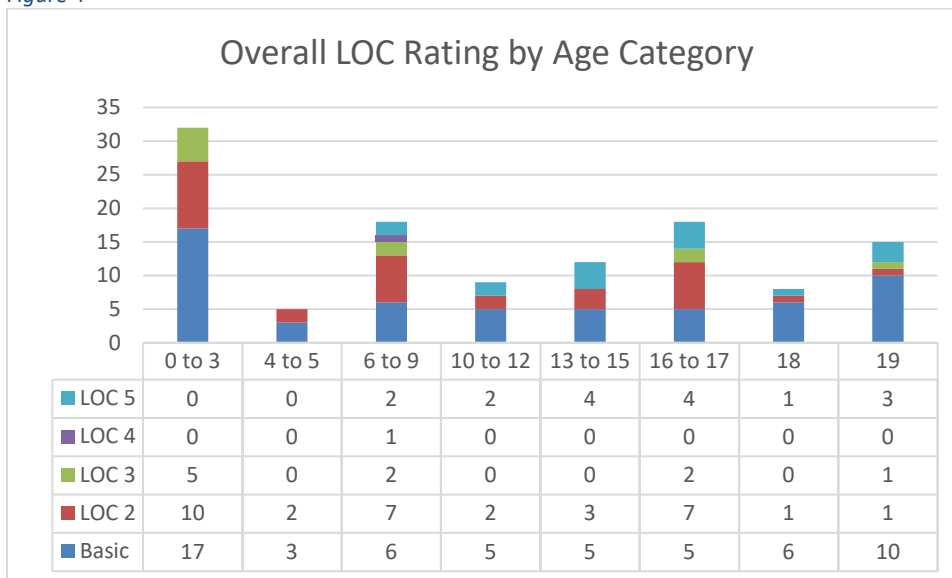
The pilot included representation from all age groups served by the CDSS, figure 3.

Figure 3



The distribution of Overall LOC ratings by age was predictable. Meaning in all age categories the largest number of cases fell into the Basic LOC category, figure 4.

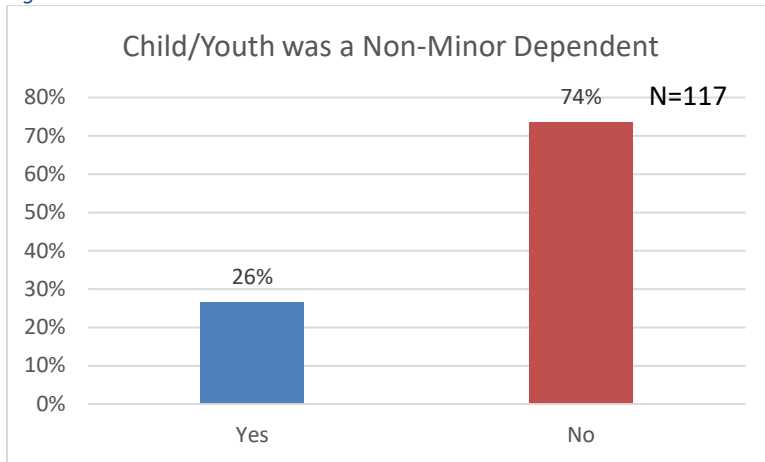
Figure 4²



² Figure 4 utilizes the overall LOC scores calculated as a part of the data analysis, not the scores entered by participants.

The sample was comprised 26% of non-minor dependents and 74% of minor dependents, figure 5.

Figure 5



The sample included representation among all the most common placement types. The highest percentage of cases (32%) had the placement type of Foster Family Agency (FFA). figure 6.

Figure 6

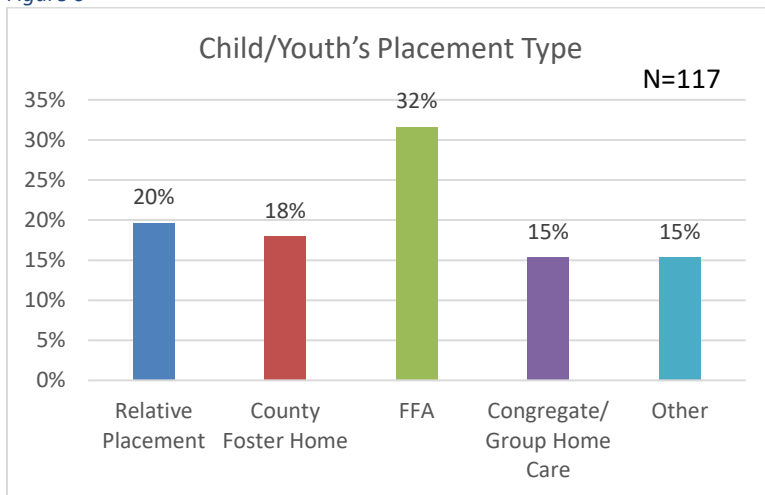


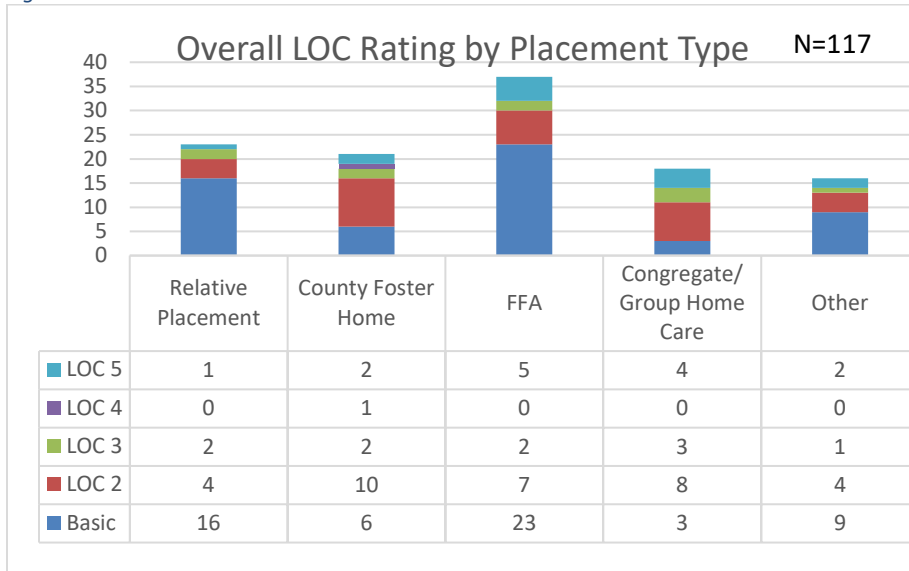
Table 1 summarizes the placement types for the 18 cases in which "Other" was selected.

Table 1

| "Other" Placement Type Specified | # of Cases |
|---------------------------------------|------------|
| Transitional Housing Plus Foster Care | 6 |
| NREFM Placement | 4 |
| Treatment Facility | 3 |
| SILP/Mentor | 2 |
| County Medically Fragile Placement | 1 |
| Adoptive Home | 1 |
| Institutional Placement | 1 |

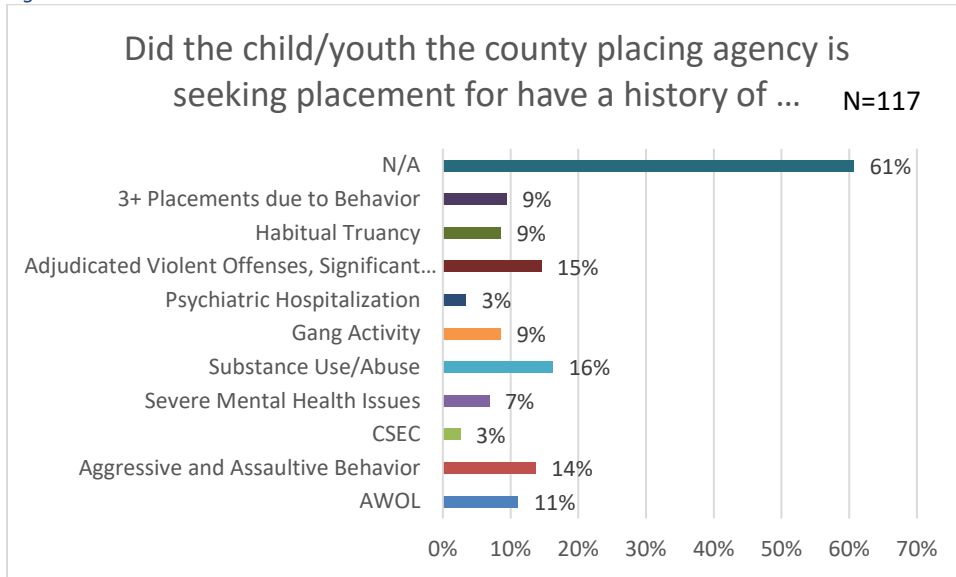
Among those cases sampled, all the placement types are serving children/youth across the range of LOC levels, figure 7. Give the very small number of cases reviewed, caution should be utilized in interpreting these findings.

Figure 7



Most of cases reviewed (61%) did not include a history of high level behavioral need. Among the cases that did have a history of high level behavioral needs the most common issues faced were: Substance Abuse (16%), Adjudicated Violent Offences (15%), and Aggressive and Assaultive Behavior (14%), figure 8.

Figure 8³



Information Sources Used

Participants indicated utilizing a variety of information sources to complete the LOC Tool. In general, participants found that the assessment tool or information sources they used were helpful in completing the LOC tool. One exception was the Resource Parent Report, which most participants found “unuseful” or “very unuseful.” The dissatisfaction with the Resource Parent Report was mirrored in the responses given into the feedback questions. Many comments and concerns were raised about the Resource Family Report and the ability to translate information collected in it to use with the LOC tool, among all position types.

The Resource Parent Report was the most commonly reported information source used to complete the LOC Matrix (50%) and no participants reported using the *Child and Adolescent Needs and Strengths* (CANS) or *Treatment Outcome Package* (TOP) assessment tools, figure 9. It is not possible to determine what effect not completing an assessment tool had in the overall LOC rating or the perception the study participant had about the tool.

³ The option “Fire Setting” was not selected and therefore is not included on the graph.

Figure 9

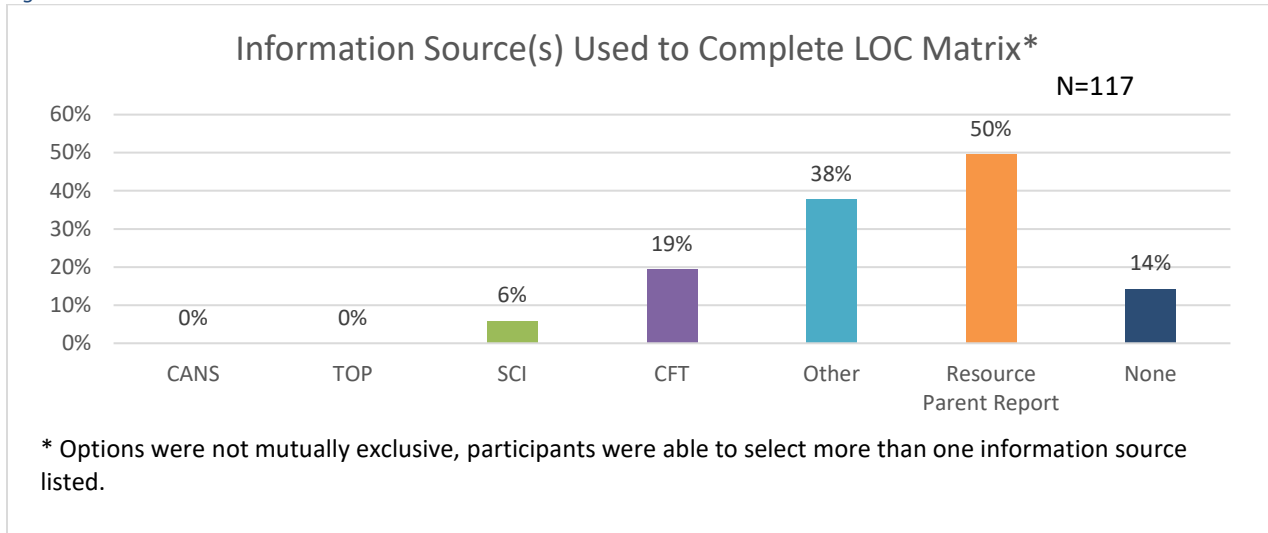


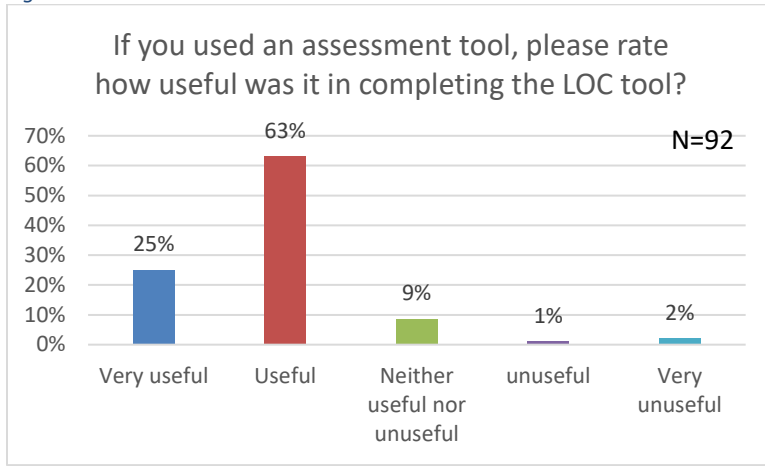
Table 2 summarizes the “other” resources utilized by study participants in completing the LOC Matrix. Some participants indicated utilizing multiple other resources.

Table 2

| “Other” Resource Identified | # of Cases with Resource Listed |
|--|---------------------------------|
| Court Report | 12 |
| Direct Services/Time with Child/Visitation | 7 |
| Medical Records | 6 |
| Desired Sensation Level (DSL) | 4 |
| Case Information/Report | 3 |
| CWS Observations | 3 |
| Group home manager | 3 |
| Education Records | 2 |
| HEP | 2 |
| Mental Health Records | 2 |
| My knowledge of the NMD | 2 |
| Probation File | 2 |
| Regional Center Reports | 2 |
| Telephone call | 2 |
| MO and FF info | 1 |
| Multi-Disciplinary Assessment Team (MAT) | 1 |
| Psychiatric Records | 1 |
| Records | 1 |
| RF Feedback | 1 |
| Therapist | 1 |

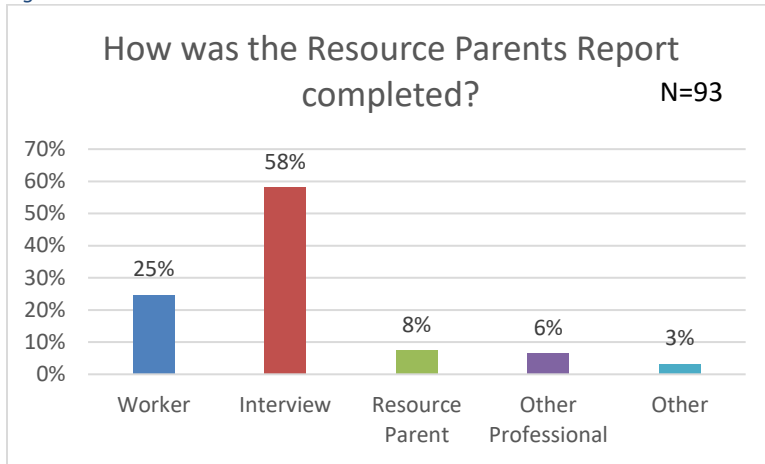
Among participants who used an assessment tool the majority found it “Useful” (63%) or “Very Useful” (25%), figure 10.

Figure 10



Among the participants who identified using the Resource Parent Report over half (58%) completed the tool by interview, figure 11.

Figure 11

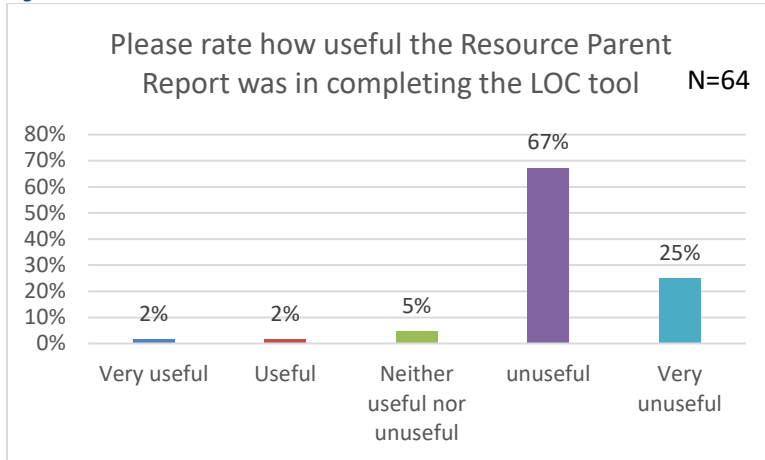


There were four cases in which “Other Professional” was selected as the person who completed the Resource Parent Report. In one case the Group Home Managers was listed as the person who had completed the report. In three cases, the job title of the person who completed the report was not listed. There were three cases in which “Other” was selected as the person completed the Resource Parent Report. The following responses were provided to describe how the Resource Parent Report was completed:

- “Interviewed case worker, NMD lives in his own apartment”
- “Probation Officer and group home manager”
- “Monthly contact with caregiver”

The majority of participants found “unuseful” (67%) or “very unuseful” (25%), figure 12.

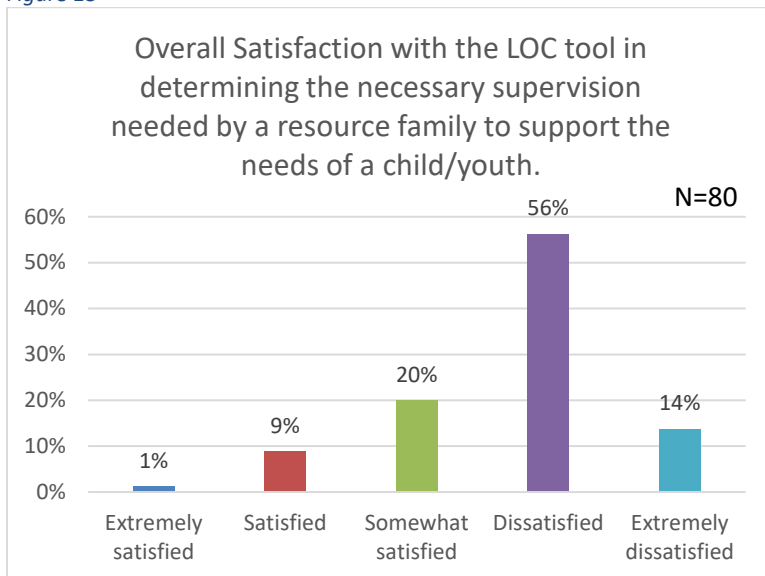
Figure 12



Perception of Tool Overall

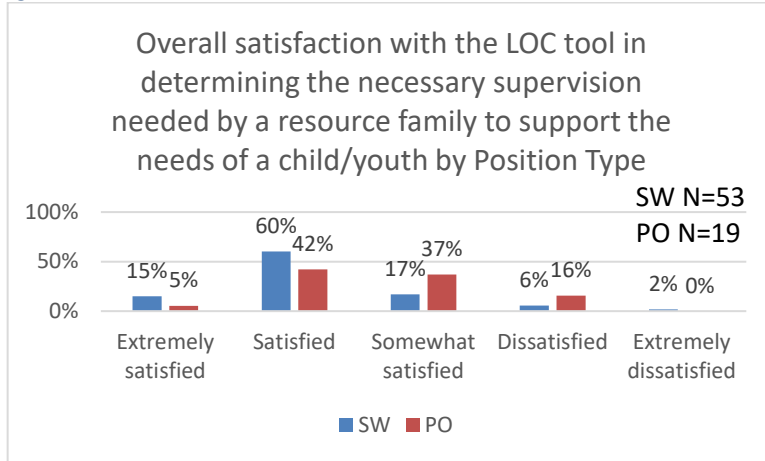
A significant percentage of participants responded as being dissatisfied with the LOC tool’s ability to determine the necessary supervision needs by a resource family to support the needs of a child/youth, figure 13. It is important to consider that a substantial percentage of cases were placed at an incorrect and lower overall LOC level, due to incorrect or non-application of the leveling-up instructions on the score sheet. Given the study design, we are not able to determine how the perceptions of the tool by participants were impacted by the incorrect scoring.

Figure 13



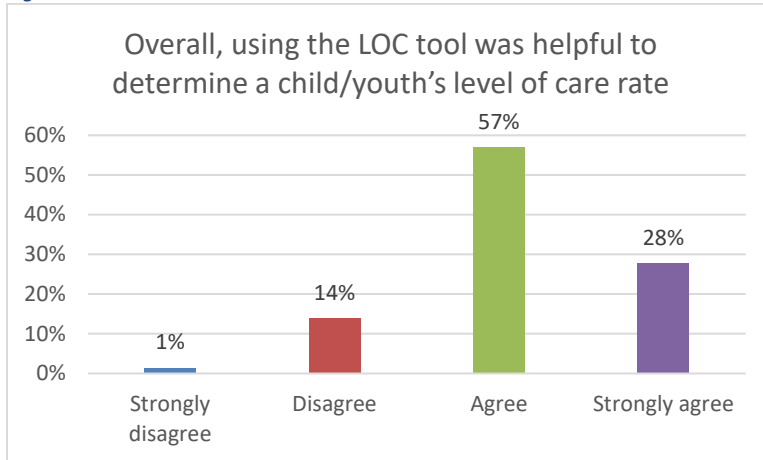
There was a difference in the level of satisfaction with the tool expressed by Social Workers and Probation Officers. Overall, Social Workers were slightly more satisfied with the tool compared to Probation Officers, figure 14.

Figure 14⁴



Despite the low level of satisfaction with the tool expressed by participants, a majority “Agreed” or “Strongly Agreed” that the tool was helpful in determining a child/youth’s level of care rate, figure 15.

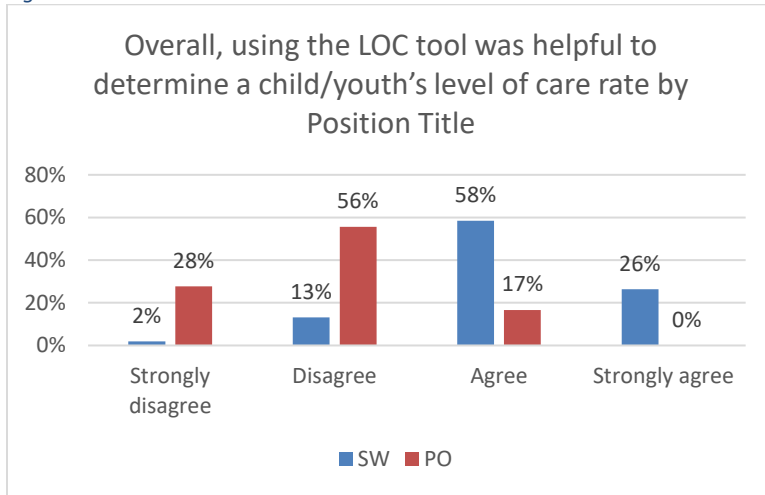
Figure 15



Social workers were significantly more likely to agree that the LOC tool is helpful in determining the LOC rate than Probation officers, figure 16.

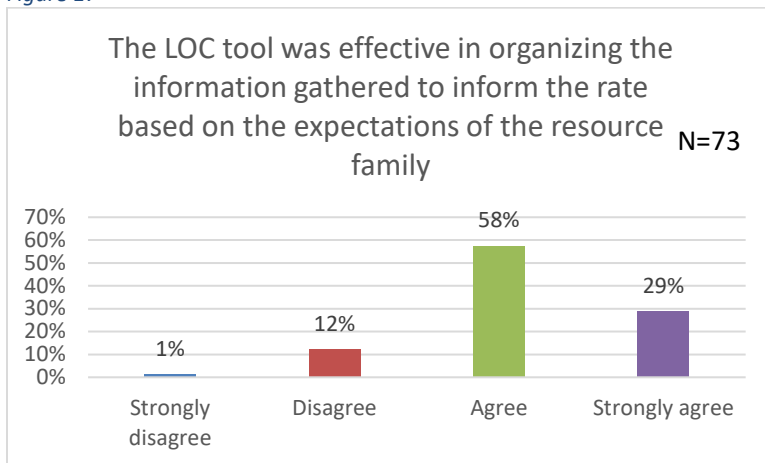
⁴ Eight respondents did not provide their position type.

Figure 16



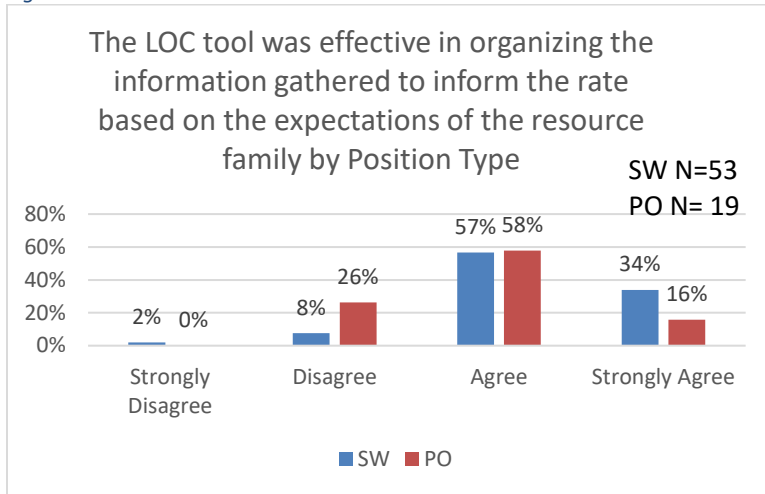
Fifty-eight percent of participants agreed that the LOC tool was effective in organizing the information gathered to inform the rate based on the expectations of the resource family, figure 17.

Figure 17



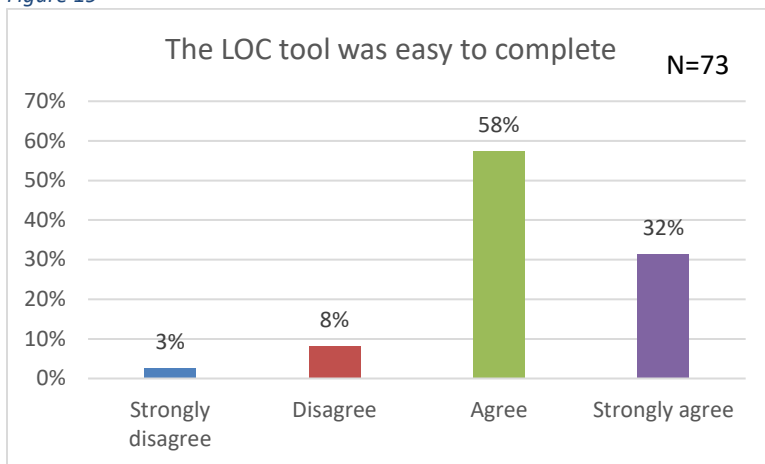
Social Workers more frequently agreed or strongly agreed that the LOC tool was effective in organizing the information gathered to inform the rate based on expectation of the resource family than Probation Officers, figure 18.

Figure 18



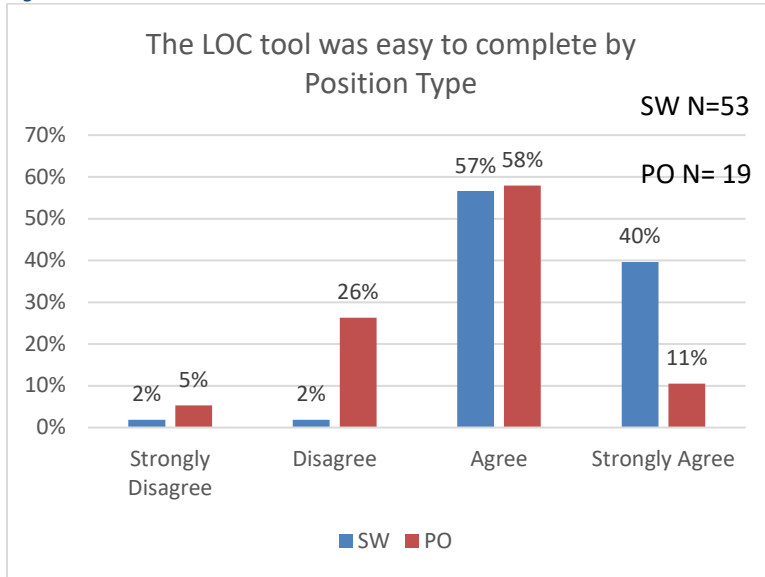
Most participants “agreed” (58%) or “strongly agreed” (32%) that the LOC tool was easy to complete, figure 19.

Figure 19



However, there was a difference in the perception of ease of use by Social Workers and Probation Officers. Over 30% of Probation Officers disagreed or strongly disagreed that the tool was easy to use, figure 20. This suggests that Probation Officers may benefit from additional support/training to complete the tool compared to Social Workers.

Figure 20

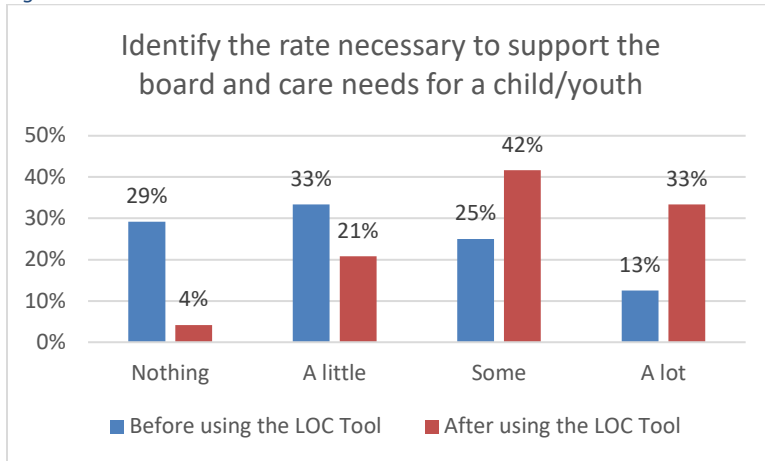


Before and After Perception

The following set of graphs illustrate the change in perception participants had in their ability to identify the activities, needs, behaviors and rate needed to support the child/youth. Overall, participants perceived an increase in their ability to identify the needs in these areas after using the LOC tool. Again, there was a difference in perceptions expressed by people of different position types. In general, Social Workers felt they had more ability to identify the care needs of Children/Youth prior to using the LOC tool as compared to Probation Officers. On average, both groups felt their ability to identify the care needs of children/youth improved after using the tool.

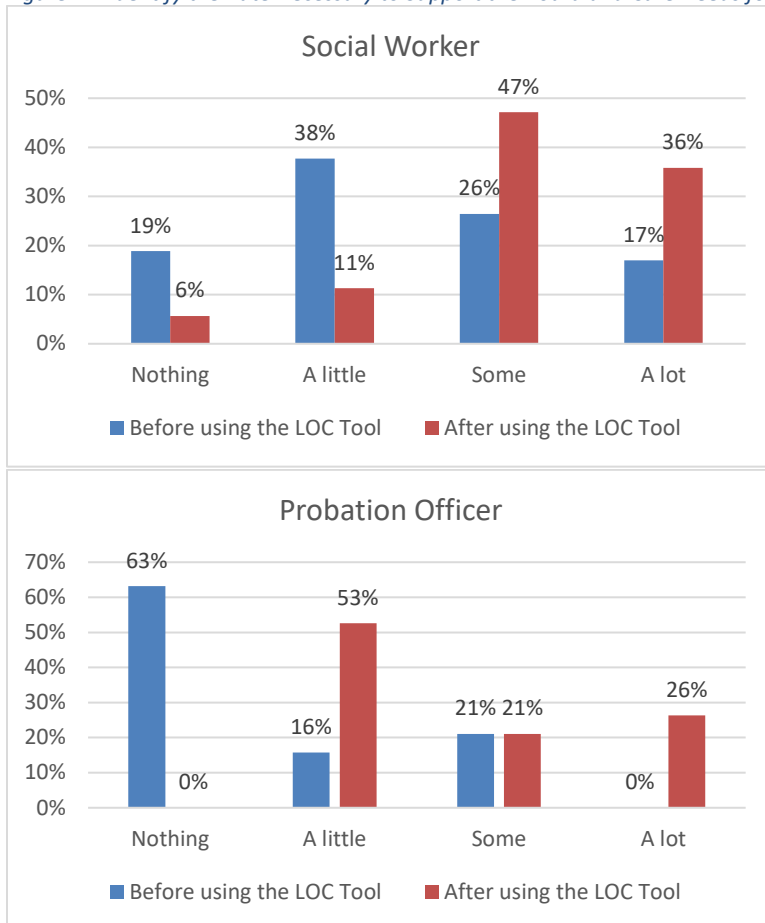
Participants felt their ability to identify the rate necessary to support the board and care needs for a child/youth improved after having used the tool, figure 21.

Figure 21



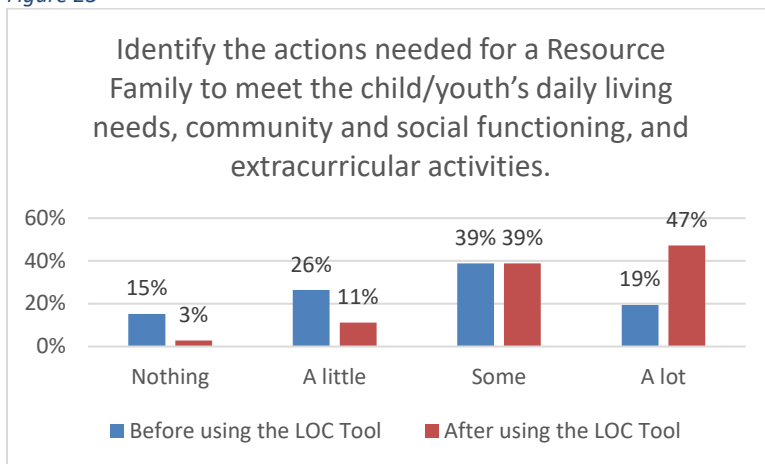
Social Workers had a higher perception of their ability identify the rate necessary to support the board and care needs for a child/youth *before* having used the tool, compared to Probation Officers. Both Social Workers and Probation Officers felt their ability grew after having used the LOC tool, figure 22.

Figure 22: Identify the Rate Necessary to Support the Board and Care Needs for a Child/Youth by Position Type



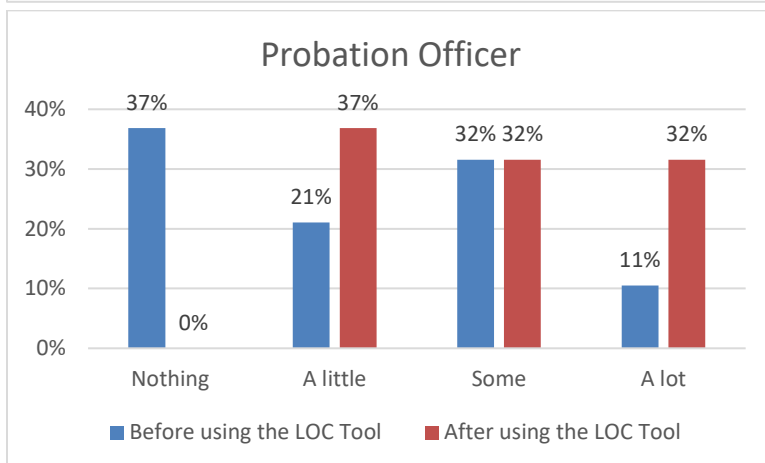
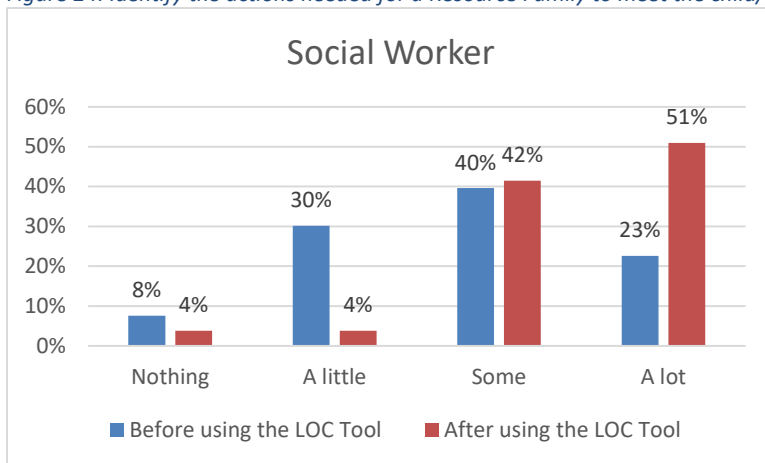
Participants' perception of their ability to identify the actions needed for a resource family to meet the child/youth's daily living needs increased after using the LOC tool, figure 23.

Figure 23



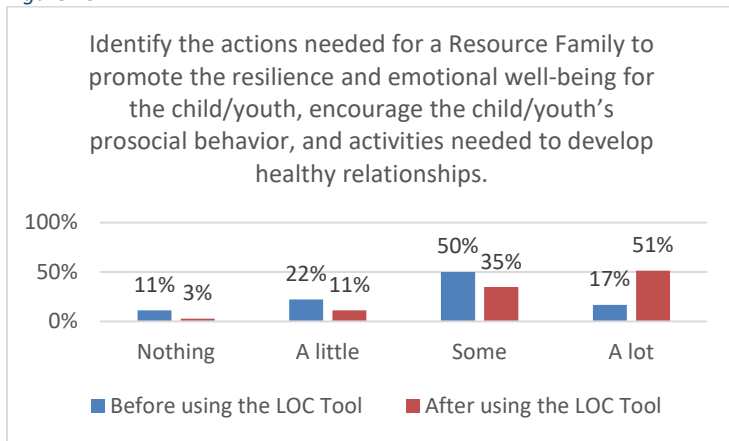
Social Workers had a higher perception of their ability to identify the actions needed for a resource family to meet the child/youth's daily living needs before using the tool than Probation Officers. Both Social Workers and Probation Officers felt their ability grew after having used the LOC tool, figure 24.

Figure 24: Identify the actions needed for a Resource Family to meet the child/youth's daily living needs...



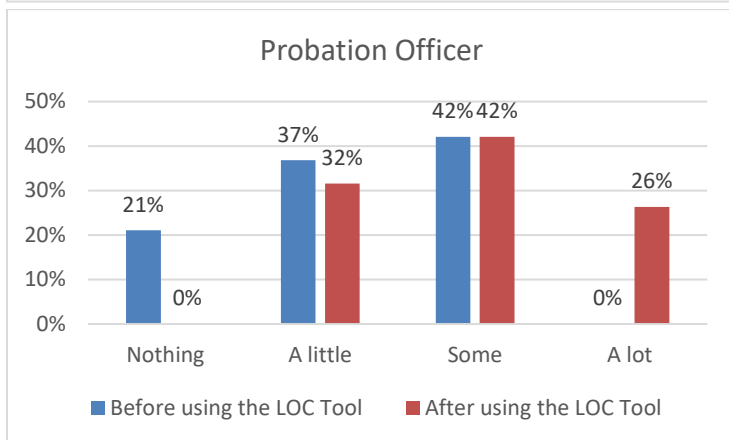
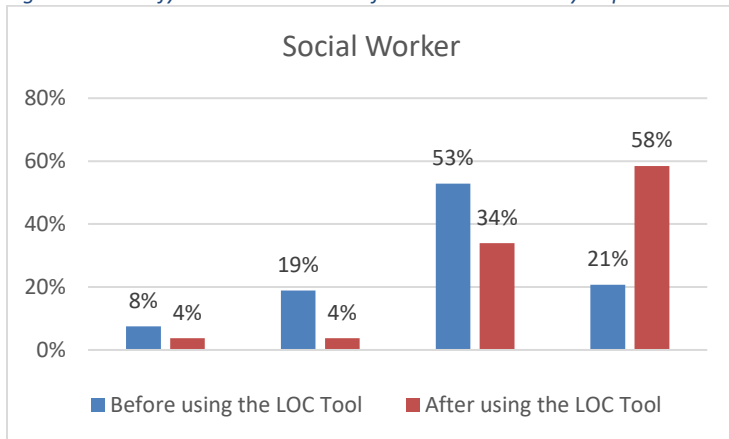
Participants' perception of their ability to identify the actions needed for a resource family to promote the resilience and emotional well-being for the child/youth increased after using the LOC tool, figure 25.

Figure 25



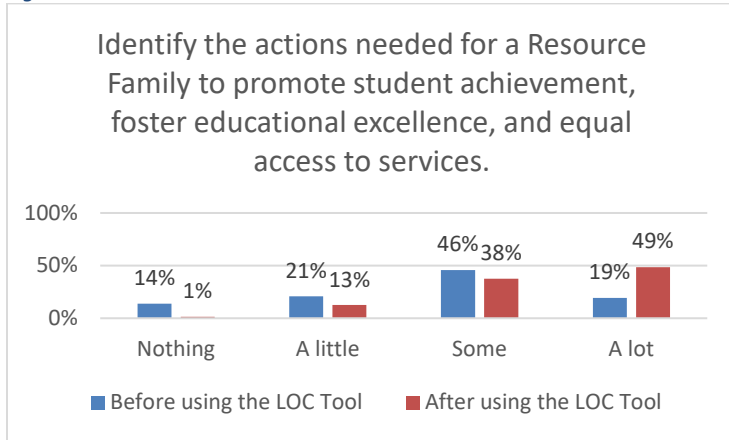
Social Workers had a higher perception of their ability to identify the actions needed for a resource family to promote the resilience and emotional well-being for the child/youth before using the tool than Probation Officers. Both Social Workers and Probation Officers felt their ability grew after using the LOC tool, figure 26.

Figure 26: Identify the actions needed for a Resource Family to promote the resilience and emotional well-being...



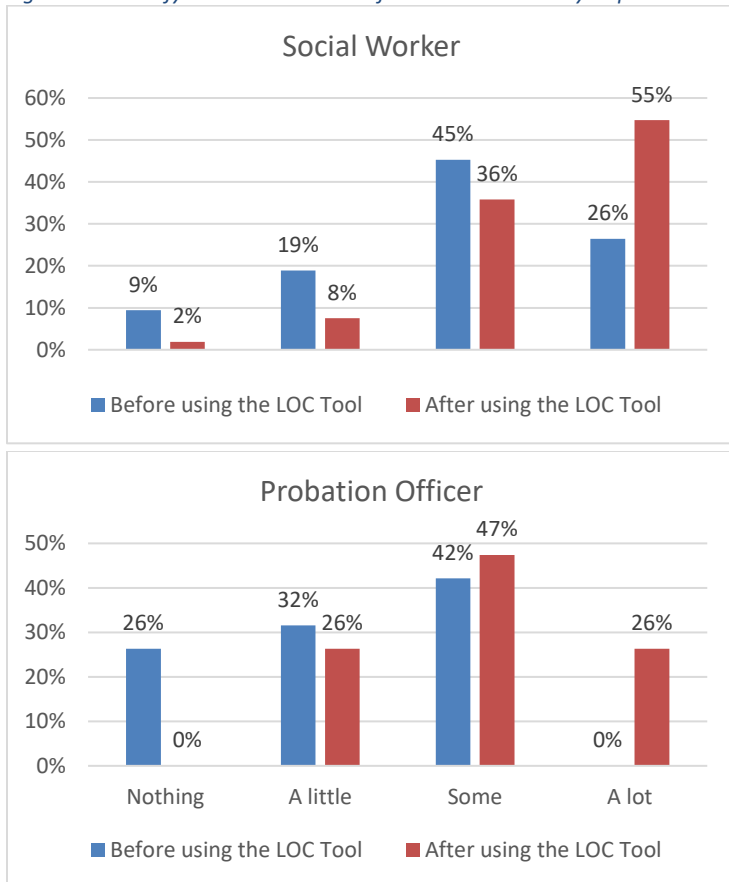
Participants' perception of their ability to identify the actions needed for a resource family to promote student achievement, foster educational excellence, and equal access to services increased after using the LOC tool, figure 27.

Figure 27



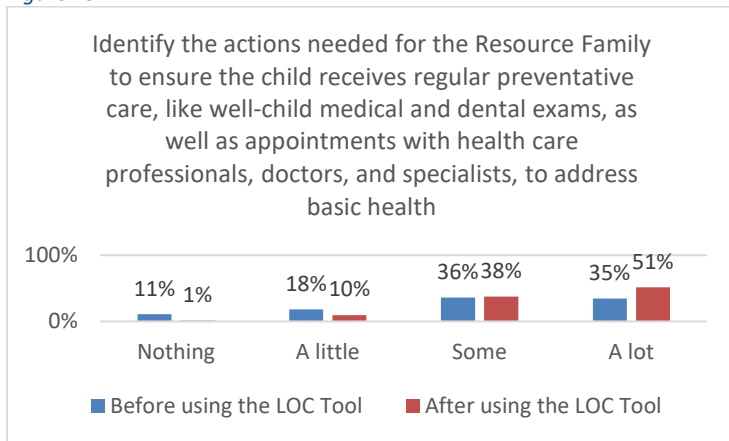
Social Workers had a higher perception of their ability to identify the actions needed for a resource family to promote the student achievement, foster educational excellence, and equal access to services before using the tool than Probation Officers. Both Social Workers and Probation Officers felt their ability grew after having used the LOC tool, figure 28.

Figure 28: Identify the actions needed for a Resource Family to promote student achievement...



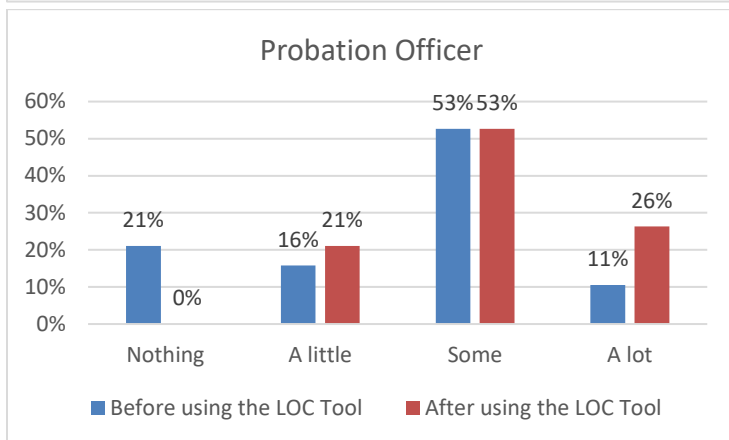
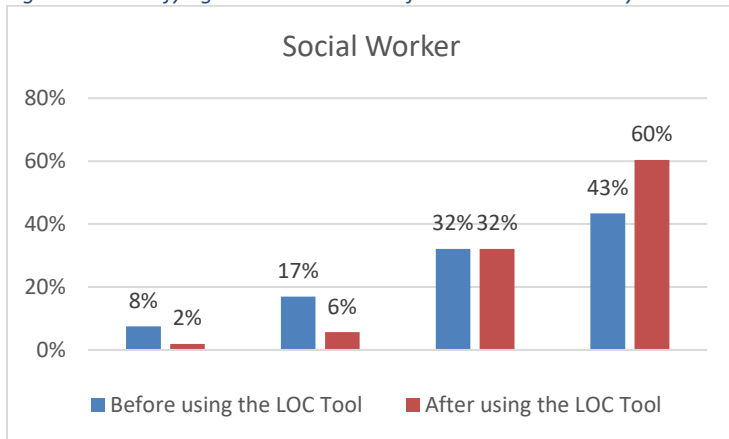
Participants' perception of their ability to identify the actions needed for a resource family to ensure the child receives regular health care increased after using the LOC tool, figure 29.

Figure 29



Social Workers had a higher perception of their ability to identify the actions needed for a resource family to ensure the child receives regular health care before using the tool than Probation Officers. Both Social Workers and Probation Officers felt their ability grew after having used the LOC tool, figure 30.

Figure 30: Identifying the actions needed for the Resource Family to ensure the child receives regular preventative care...

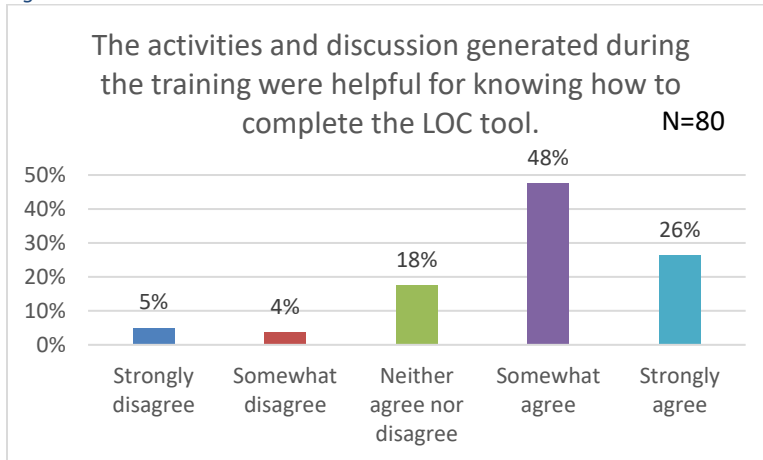


Perception of Training

The following set of graphs illustrate that participants generally felt neutral to positive about the training they received prior to completing the LOC tool, this was true regardless of position type.

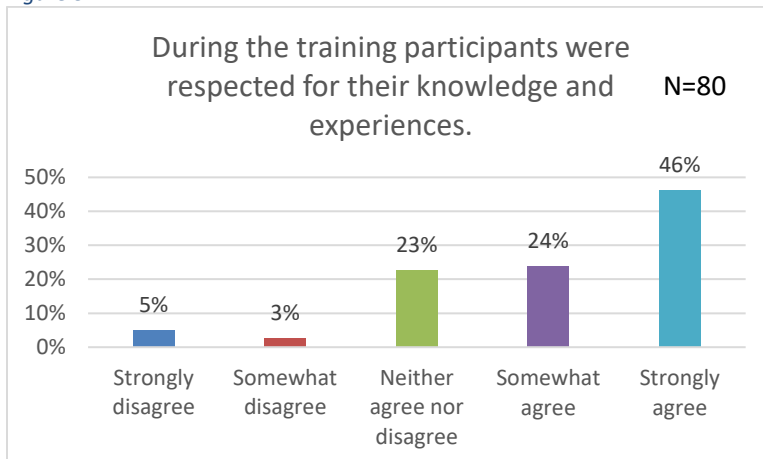
Seventy-four percent of participants agreed or somewhat agreed that the activities and discussion generated during the training were helpful for knowing how to complete the LOC tool, figure 31.

Figure 31



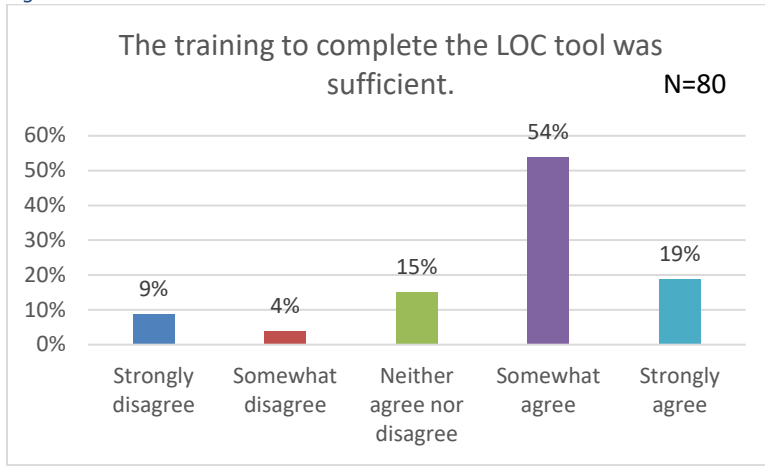
Seventy percent of participants agreed or somewhat agreed that they were respected for their knowledge and experiences during the training, figure 32.

Figure 32



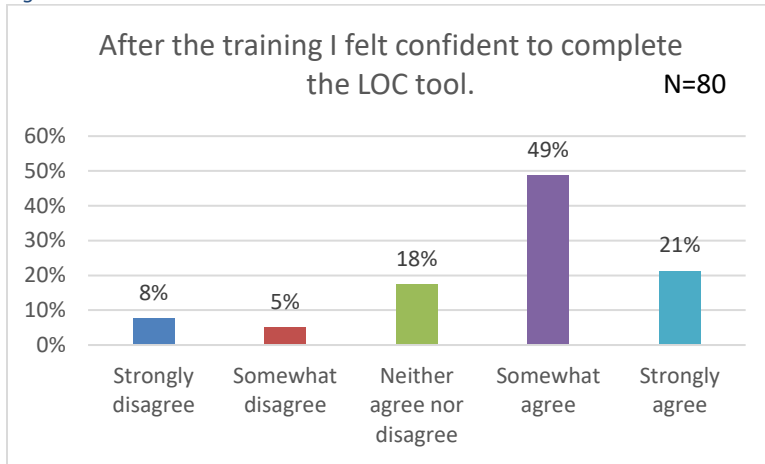
Seventy-three percent of participants agreed or somewhat agreed that the training was sufficient to complete the LOC tool, figure 33.

Figure 33



Seventy percent of participants agreed or somewhat agreed that they felt confident to complete the LOC tool, figure 34.

Figure 34



In Summary

The cases rated during the pilot using the LOC Matrix fell across the full range of LOC Rate Levels. Most cases were rated as LOC Basic and the smallest percentage of cases were rated as LOC Level 4.

In general, participants found that the assessment tools or information sources they used helpful in completing the LOC tool, except for the Resource Parent Report, which most participants found “unuseful” or “very unuseful.” However, no participants completed the CANS or TOP assessment tools prior to the LOC Matrix. A significant percentage of participants responded as being dissatisfied with the LOC tool’s ability to determine the necessary supervision required of a resource family to support the child or youth. Participants were also confused on how to apply the “level-up” rules related to high scores in the Health and Behavioral Domains. The confusion may have contributed to the higher level of dissatisfaction. Social Workers were slightly more satisfied with the tool than Probation Officers. Despite the low level of satisfaction with the tool expressed by participants, a majority “Agreed” or “Strongly Agreed” that the tool was helpful in determining a child/youth’s level of care rate. Participants perceived an increase in their ability to identify the needs of children and youth after using the LOC tool. Prior to using the LOC tool, Social Workers felt they had more ability to identify the care needs of Children or Youth compared to Probation Officers. However, both Probation Officers and Social Workers felt their ability to identify the care needs of children/youth improved after using the tool.

To facilitate statewide use of the LOC Matrix and ensure a smooth transition, the following recommendations are made:

1. Provide training on how to complete the LOC Matrix in general and specifically on how to score the tool to ensure proper completion. The training should include detailed information on domain descriptions, the role information sources and assessment tools play in completing the tool, and thorough instructions on when to “level up” a rate based on medical or behavioral needs.
2. Modifications of the Resource Parent Report are needed to improve the ease of use and compatibility with the LOC Matrix.