This Technical Bulletin (TB) rescinds TB#8A and establishes a new plan for use of statewide data indicators and national standards as context data for the third round of the Child and Family Services Reviews (CFSRs). This TB reissues and revises applicable guidance formerly from TB#8A on program improvement plan measurement methods to reflect the change in the use of the statewide data indicators.

Section I. General Guidance for States Due to Changes in Use of Statewide Data Indicators

As the Children’s Bureau (CB) was underway in implementing round 3 at the time of our decision to use statewide data indicators as context data, there are some specific steps that CB and states will take that are different than our initial guidance, as indicated in the following:

For states that were reviewed in FY 2015 and received a letter from CB on substantial conformity

- CB will reissue the CFSR final report retroactively to remove statewide data indicators from the determinations of substantial conformity and clarify the use of statewide data indicators as context information. However, all other information that relates to substantial conformity determinations will stand.
- States must continue to develop and negotiate a program improvement plan (PIP) with CB per 45 CFR 1355(a) and submit the PIP when due. CB will engage states further on the specific implications for their PIPs and measurement plans. However, measures of improvement on statewide data indicators will not be required in program improvement plans.
- New data profiles are planned to be available by the end of 2016. Until that time, states should use any previously generated data profiles as context information along with any other data published by ACYF related to AFCARS and NCANDS such as the Child Welfare Outcomes Report or state available data to inform their understanding of their performance.
- CB will use state data profiles that are available to offer states support and technical assistance to help shape the state’s overall strategic plans for child welfare to address areas of improvement and in negotiating PIPs. State data profiles, existing or revised, will not be used for determinations of conformity or as the basis for financial penalties.

For states that have a CFSR in FY 2016 or subsequent years (if applicable):

- Revised data profiles are planned to be available by the end of 2016 for states with CFSRs in FY 2016 and 2017. States with CFSRs in FY 2018 will receive data profiles in 2017. When these revised profiles are available, they should be used for CFSR purposes as articulated in section II.
- Until that time, states should use any previously generated data profiles as context
information along with any other data published by CB or ACYF related to AFCARS and NCANDS such as the Child Welfare Outcomes report or state available data to inform their understanding of state performance.

- States must continue to participate in the CFSR as scheduled, including submitting statewide assessments timely and participating in traditional onsite reviews or state conducted case reviews.
- CB will issue final reports with determinations of conformity that do not factor in the state’s performance on the statewide data indicators (former or revised) into substantial conformity decisions. Measures of improvement on statewide data indicators will not be required in program improvement plans.
- CB will use state data profiles that are available to offer states support and technical assistance to help shape the state’s overall strategic plans for child welfare to address areas of improvement and in negotiating PIPs. State data profiles, existing or revised, will not be used for determinations of conformity or as the basis for financial penalties.

Additionally, there are a number of existing guidance documents that CB will revise to clarify the decision to use statewide data indicators as context data on state performance. Until such time as we can clarify those documents, please note the following:

**Annual Progress and Services Reports**

Per ACYF-CB-PI-16-03, states are to provide a 2017 APSR that includes an annual update on the progress made toward accomplishing the goals and objectives in the CFSP. In doing so, in part, the state was instructed to use the most recent information about the state’s performance on statewide data indicators to complete the “Update on Assessment of Performance.” A state was required to submit the 2017 APSR to CB on June 30, 2016, but CB may approve it for funding at a later date.

Given the timing of the change in the statewide data indicators, no changes will be needed to a state’s 2017 APSR.

For future APSRs, states should use any former or revised statewide data indicator information available to update their assessment of performance. The overall requirement for the state to update the state’s assessment of performance in the APSR based on all available and relevant data and information remains regardless of the status of the statewide data indicators.

**CFSR Statewide Assessment Instrument**

Section II of the CFSR statewide assessment instrument issued on April 2014 contained instructions for inclusion of statewide data indicators, and section III requires that the state provide an analysis and explanation of the state’s performance in meeting the national standards on the statewide data indicators. If a state is required to complete a statewide assessment prior to us providing a data profile to the state, the state should use any available information to assess its performance on the seven outcome areas. However, CB intends to issue data profiles for context purposes prior to the transmission of any upcoming statewide assessment instruments. If a data profile is provided with context information on the statewide data indicators, states should provide an analysis that includes that information. The state must submit the statewide
assessment to CB no later than 2 months prior to its onsite review or beginning of the CFSR review period regardless of the availability of a data profile on statewide data indicators.

Data Quality

The original plan for the statewide data indicators included data quality items that were used to ensure reliable state data was used in the development of the national standards and in calculating individual state performance on the statewide data indicators. If we were unable to determine a state’s performance on an indicator due to data quality issues, the state was required to include that indicator in its PIP. However, with the change in the use of the statewide data indicators, we are no longer requiring that a state with such data quality issues include improvement in the PIP or steps to address data quality in the PIP.

Despite this change we want to reinforce the importance of states ensuring that they have high-quality, consistent, and complete data to understanding state performance and functioning. We remain committed to working with states that have been previously identified as not meeting the data quality items associated with the former statewide data indicators and those who are newly identified when revised indicators are published. Beyond the CFSR and state’s own continuous quality improvement efforts, the Children’s Bureau assesses or relies on state quality data in AFCARS, NCANDS, outcomes reports and in the allocation of title IV-B and IV-E funds. Given this central importance, we will continue to monitor data quality and enforce compliance with data standards via all appropriate oversight methods.

CFSR Procedures Manual and other Guidance and Training Documents

There are numerous references in the CFSR procedures manual and other CB issued or supported training documents regarding:

- how the state’s performance on the statewide data indicators are factored into CB’s determinations of substantial conformity;
- the timing of the provision of data profiles to states; and,
- required improvement on statewide data indicators in the PIP as a result of a determination that the state is not operating in substantial conformity.

We ask states to read these earlier issued guidance and training documents in concert with the instructions in this TB until such time as we can update them to be consistent with the decision to use statewide data indicators for context purposes.

Section II. Guidelines for Determining and Approving PIP Item Measurement Methods and Degrees of Improvement

45 CFR 1355.35(a)(1) requires that a state’s PIP describe methods that will be used to evaluate progress. If CB and the state cannot reach consensus on the content of a PIP or the degree of program improvement to be achieved, CB retains the final authority to assign the contents of the plan and/or the degree of improvement required for successful completion of the plan (45 CFR 1355.35(a)(2)).
This section provides guidance on which items a state must make quantifiable improvement during a PIP and therefore must be measured when the state is not in substantial conformity for an outcome. We also provide here our preapproved methodological approaches that a state can use to measure such improvement. States may request that we consider alternative measurement methods prior to PIP approval as we recognize that states have different capacities for measuring program improvement. Any state-specific proposals will be considered individually and we will advise states whether they are approved.

A. General Guidelines

When a Safety Outcome is not in substantial conformity, the state must include quantifiable measurement in the PIP for all items that are areas needing improvement. This is consistent with guidance we have provided in prior rounds to comport with regulatory requirements for states to prioritize areas of nonconformity impacting child safety.

We will require states to include quantifiable measurement for Well Being Outcome 1 items when that outcome is not in substantial conformity. We will negotiate with the state the specific Well Being Outcome 1 items that the state will measure based on the state’s CFSR findings and the state’s proposed strategies to address the outcome.

We will also require states to specify particular measures for Permanency Outcome 1 items when that outcome is not in substantial conformity. Given that there are no permanency statewide data indicators that are required for inclusion and improvement in the PIP, item measures will be required. We will negotiate with the state the specific Permanency 1 items that the state will measure based on the state’s CFSR findings and the state’s proposed strategies to address the outcome.

To the extent that a state does not believe that its CFSR case review performance is indicative of its statewide performance, the state may request that CB consider state-provided aggregate data that demonstrates this. For example, if a state has statewide data for a comparable time period which is of good quality, that indicates that the state’s child protective services investigations are timely at a rate of 95%, CB will not require the state to include the related item 1 in its PIP.

The state must develop a measurement plan for outcome items that are identified as areas needing improvement which do not require quantifiable measurement in the PIP as outlined above. This means that at a minimum, the state will include a key activity in their PIP to develop a method of measurement by the conclusion of the PIP for ongoing measurement of identified areas needing improvement within Permanency Outcome 2, Well-Being Outcome 2 and Well-Being Outcome 3. The resultant measurement plan and implementation steps must be included in the state’s subsequent title IV-B Annual Progress and Services Report and/or Child and Family Services Plan (APSR/CFSP). CB will monitor future APSRs and CFSPs for the state’s reported implementation progress, adjustments to the measurement plan and/or results.

States must provide indicators of improvement on systemic factors, which may include data measures as appropriate. States are encouraged to address the most challenging items identified within a systemic factor versus all areas designated as areas needing improvement within a systemic factor.
B. Development of Baselines and Review Periods for Onsite Review Instrument Item Measures

CB will negotiate baselines from the state’s most reliable data source for onsite review instrument item measures other than statewide data indicators. We want to build on state efforts to institutionalize capacity consistent with CB’s Information Memorandum on Continuous Quality Improvement (CQI) as described ACYF-CB-IM-07, CFSR TB #7 and the requirements of the CFSP.

We will measure improvement based on the information that a state can provide and replicate through its PIP implementation period. Sampling approaches must include all children served in foster care and receiving in home services on the same basis as provided in CFSR TB #7. The state may be able to use CFSR onsite review findings as baselines for a PIP if the state conducted its own reviews and such reviews are aligned with its ongoing statewide CQI monitoring plan. CB will make this determination on a case by case basis. Similar to round 2, states in round 3 that have traditional onsite reviews will not be able to use the CFSR onsite review findings as a baseline because of the inherent differences between it and the state’s ongoing CQI process.

For CB to make a determination of an appropriate baseline for PIP measurement purposes, the state must identify the sources of their baseline data and its alignment with their ongoing CQI approach. This includes the review instruments the state will use, the sample frame of cases included in the baselines, and the number of applicable cases by item.

C. Preapproved PIP Item Measurement Approaches

CB encourages states to use its state-generated data from its CQI system or management information systems for PIP monitoring and measurement. States should provide to CB documentation of their proposed PIP measurement plan, with a description of their specific case review criteria or aggregate data methods employed. Such documentation must include the state’s baseline sample source and sample frame, sample size, the review period and locations, instruments, reports and a description of goal measurement. After we have approved the state’s PIP measurement plan, the state must notify CB if it intends to change its review instruments, reports, or sampling methods or approach as we must confirm that it remains approvable.

We are providing below the specific measurement methodology we have preapproved for states to establish and measure improvement toward achieving PIP item-specific measurement goals. The first method, the retrospective data method, addresses situations where a state’s baseline data is available prior to CB approving the state’s PIP and the state outlines a process for determining the baseline and target goals from existing data. The second method, the prospective data method, addresses situations where the state’s baseline data will be collected during the PIP implementation period and the state has a process for developing a minimum case sample prior to setting the goal of improvement. A third method provides information on the methodology for using a state case management data or other aggregate data to measure a universe larger than a sample review approach.
For the retrospective and prospective methods, we recommend an 80 percent confidence level. CB believes this will allow states more flexibility in demonstrating improvement with somewhat smaller and less labor-intensive case samples than a 90 or 95 percent confidence level. In these methods we recommend that the state samples be equal to or greater than the number of applicable cases for the item from the state’s CFSR onsite review. At a minimum, states should include their largest metropolitan area and a representative cross section of counties or jurisdictions in their sample, including tribal or other significant populations.

The baseline and measurement samples should include case types similar to the distribution and ratio used for the CFSR onsite review. Once a baseline sample size is established the ongoing monitoring measurement sample size and ratio must be comparable to the baseline. The number of applicable cases used for a baseline would be the minimum required for ongoing monitoring measurement for CB to determine that goals are met. We will apply a 2% tolerance when comparing the applicable cases to the baseline applicable cases and a 5% tolerance on the distribution of case types and metropolitan area proportion between the baseline and subsequent reviews.

**Method 1 – State retrospective data with minimum improvement determined by sampling error**

This method utilizes the available state review percentage findings and tests whether the state’s quarterly performance exceeds the original baseline proportion plus the sampling error. States use 12 months of practice findings beginning no earlier than the first quarter of the AFCARS submission used for the CFSR onsite review sample to establish a baseline. The minimum sample for a given item should be equal to or greater than the applicable cases for the item from the state’s CFSR onsite review findings. The actual percentage satisfying the given item is computed from the state’s 12 month of practice review sample, and that sample size would be used to compute the actual sampling error using an 80 percent confidence level. The actual applicable case sample should be greater than or equal to the minimum number of applicable cases reviewed during the CFSR onsite review. The state’s baseline would be the computed percentage.

We would establish the goal for improvement by adding the sampling error to the baseline percentage. Larger samples would result in lower improvement goals because of the smaller sampling error. Once a baseline is established the sample size must remain comparable through the monitoring and measurement period. The state would use percentages computed from 12 months of practice data/findings to determine whether the state satisfied its improvement goal. In situations in which a state has consistently measured a particular item from the baseline and demonstrated the minimal improvement outlined above prior to PIP approval, the item will not require further measurement goals during PIP implementation. States must still address the agreed upon activities in their PIPs for each item that contributed to a determination of nonconformity for each outcome or systemic factor.

Table 5 provides an example of how this method may be applied to a state’s retrospective data. If the state’s 12 month practice sample results do not reach the minimum applicable cases, the state could increase its sample size in the next quarter to achieve the threshold. CB can assist states to compute the sampling error and improvement goal using the process outlined in the examples below.
Table 5. Example Applying Retrospective Data Method

<table>
<thead>
<tr>
<th>CFSR OSRI Item #</th>
<th>Applicable Cases From Onsite Review (Minimum Sample Size)</th>
<th>Actual Number Of Applicable Item Cases Over Baseline Year</th>
<th>State Baseline Year Proportion</th>
<th>Baseline Year Actual Sampling Error</th>
<th>12-Month Goal % (Baseline + Sampling Error)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>65</td>
<td>74</td>
<td>0.60</td>
<td>0.0728</td>
<td>67.3%</td>
</tr>
<tr>
<td>1</td>
<td>28</td>
<td>26</td>
<td>0.72</td>
<td>0.0909</td>
<td>Sample not sufficient as greater than the 2% tolerance</td>
</tr>
</tbody>
</table>

Method 2 – State prospective data with baseline and goal established during PIP implementation

This method establishes a baseline from a minimum sample using the state’s 12 months of practice findings beginning after PIP implementation. The minimum sample size as determined by the applicable cases for the item from the state’s CFSR onsite review would be required for the 12 month baseline. As the baseline would be established during the period of PIP implementation, the improvement target would be reduced by up to half of the sampling error to allow for baseline overlap with improvement strategies and reduced time to measure improvement. We will calculate the sampling error reduction rounding to the number of overlapping months using \(0.041167\) per month or \(0.125\) per quarter for a maximum of 12 months. States would then use rolling quarters or months of findings encompassing 12 months to determine whether they have met their improvement goals.

Table 6 provides an example of how method 2 may be applied to a state’s prospective data.

Table 6. Example Applying Prospective Data Method

<table>
<thead>
<tr>
<th>CFSR OSRI Item #</th>
<th>State Baseline Year Proportion (BYP)</th>
<th>Number Of Item Applicable Cases During Baseline</th>
<th>Baseline Year Sampling Error (BYSE)</th>
<th>Number Of Months Of PIP Implementation Overlap With Baseline</th>
<th>12-Month Goal % (BYP + 0.X/8= BYSE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>0.60</td>
<td>74</td>
<td>0.0729</td>
<td>12</td>
<td>0.60 + 0.5 x BYASE = 63.7%</td>
</tr>
<tr>
<td>1</td>
<td>0.72</td>
<td>50</td>
<td>0.0813</td>
<td>5</td>
<td>0.72 + 0.2083 x BYASE = 78.1%</td>
</tr>
</tbody>
</table>

Method 3 – Use of state data collected from the Statewide Automated Child Welfare Information System (SACWIS) or other case management data

Consistent with our approach in the second round of CFSRs, we recommend that a minimal amount of improvement for item measures derived from a state’s SACWIS or case management information system reporting be based on the sampling error, at a 95 percent confidence interval. This interval is recommended because statewide universe data are used and a lower confidence level would yield very minimal improvement goals. The minimum improvement amount will be computed by adding the sampling error to the 12 months of data or a weighted proportion for a
12-month period using quarterly data reports. Reports proposed by the state under this method should include design syntax and/or extraction methodology that must be approved prior to inclusion of the measurement in the PIP.

D. High performance plateau adjustment

In situations where the state’s PIP item goals are above 90% we will apply consideration of a plateau effect in determining whether a state has met its goal. If the state has an improvement goal above 90% and is able to sustain performance above the baseline for three quarters, we will consider the goal met even if the state does not meet its actual goal.