Malcolm Wiener Center for Social Policy

A National Review of Management of the Federally Funded Independent Living Program

by

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John F. Kennedy School of Government
Harvard University

WORKING PAPER SERIES

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This paper was prepared for Mike Ambrose of the Children's Bureau, Administration of Children and Families, U.S. Department of Health and Human Services.

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I. EXECUTIVE SUMMARY

The Administration of Children and Families (ACF) is currently reassessing the role it plays in the management and implementation of the Independent Living Program. The Independent Living Program is designed to assist foster care youth to make the transition to independent adulthood. This Policy Analysis Exercise evaluates the implementation of the program at the state level, the factors that are associated with good programs, and the role that the federal government plays in its management.

FINDINGS:

We interviewed the Independent Living Coordinators in eleven states, the ten federal regional office contacts for Independent Living, and experts in the field. We also undertook a review of existing studies and of youth development literature. These sources of data yielded the following findings:

- Good programs must address skill development in multiple subject areas through multiple agents. They should build partnerships with existing community agencies and teach youth how to access community resources. They should also offer: after care services, foster-parent and substitute care-giver training; staff that specialize in adolescent issues; a formal skills curriculum; services that are offered according to developmental readiness; mentoring services; and a youth empowerment component. Finally, programs should have an evaluation and oversight component.

- The role of the state Coordinator is the factor that is most significantly associated with program quality. Predictors of program quality are factors such as whether the Coordinator is part-time or full-time and whether the Coordinator delivers technical assistance to direct service providers.

- Implementation structure does not appear to be associated with program quality. We included states with different implementation structures in our sample and conclude that implementation structure in itself does not predict program quality.

- The degree to which programs are connected or isolated is a predictor of program quality. Strong programs have rich networks that they can access for technical assistance, whereas the weaker programs are relatively isolated.

- The regional ACF offices appear to have little impact on the quality of state programs.

- A fiscal threshold effect limits the ability of states with small absolute allocations to implement quality programs.

- The level of outcomes reporting is, in general, poor.

RECOMMENDATIONS:

The relatively open federal guidelines are a boon to states with the resources, knowledge, and wherewithal to implement model programs. On the other hand, the relative lack of guidance does not serve states at the weak end of the spectrum of program quality well. Based on these findings, we recommend that the federal government:

- Maintain the same degree of control over this program and maintain the flexibility of the current program guidelines.
- Focus its activities upon technical assistance rather than upon monitoring.
- Facilitate information sharing amongst states. Regional offices should report what states in their region are doing and exchange this information with other regions. Regional offices should also make curricula developed with federal funds available to states that do not have their own.
- Explore the possibility of contracting with an outside provider to deliver centralized services to states.
- Consider a minimum level allocation for each state so that all states can afford to have a full-time program Coordinator.
- Change reporting requirements to require states to set and track their own outcome goals.

II. INTRODUCTION

This *Policy Analysis Exercise* was undertaken on behalf of the Child Welfare Division of the Children's Bureau within the Administration of Children and Families. Our client asked us to review the federal **Independent Living Program**.

The federal Independent Living Program is designed to assist foster youth to make the transition to independent adulthood. The Independent Living Program is a highly decentralized program. The Administration for Children and Families (ACF) does not itself provide Independent Living services to clients. The money is instead allocated to the child welfare department in each of the states (the District of Columbia also receives a grant) and these departments then independently determine how services will be delivered in their respective states.

The chart below outlines the current minimal guidelines that are attached to the federal Independent Living funds.[1]

Federal Independent Living Program Guidelines			
Eligible Population	Services	Application and Reports	Fiscal
1) Current or former foster care youth a) All 16 and 17 year olds b) 18 - 21 year olds are optional	1) Must have a transitional plan on file after the age of 16 2) Semi-annual case reviews are required 3) Cannot provide "maintenance" services, such as room or board, with these funds	1) Annual application for funds due Jan. 31 of relevant fiscal year 2) Annual reports required by Jan. 1 after fiscal year ends & must include: a) demographics b) outcomes 90-days after services terminated 3) Three fiscal reports in each 2 year funding cycle	1) Funds cannot supplant state funds already being used to provide independent living services

The Administration for Children and Families has already received two external reviews of the Independent Living Program since its inception in 1987. In 1988 ACF contracted with a consulting firm, Westat, Inc., to conduct a formal evaluation of the program's effectiveness.[2] The primary finding of the final Westat report was that the program can be effective: "Services authorized by the

[1] Appendix A provides a brief history of the program.

[2] The study was completed in two phases over several years beginning in 1988 and ending in 1991.

Independent Living Initiatives have the potential to improve outcomes for youth."[3]

In 1994, ACF requested that the Office of Inspector General (OIG) within the Department of Health and Human Services also review the Independent Living Program and "provide information and ideas on improved long-term management and program reporting strategies."[4] The final OIG report, completed in November of 1994, had two broad recommendations: 1) the ACF should restructure its Independent Living Program application and program reporting procedures, and 2) the ACF should focus its management and program reporting efforts on information sharing.[5]

The introduction to the OIG report noted that ACF "wishes to determine how it might, within anticipated resource constraints, better manage federal Independent Living resources and guide and oversee state programs. [Present questions are] How extensive a role does the agency wish to play in independent living? How directive does it want to be? [ACF] would like to determine, in particular, how best to prevent inappropriate or ineffective uses of independent living funds, while at the same time allowing flexibility and promoting innovation among states."[6] It was with these questions still in mind that our client asked us to provide them with a report on how states currently manage the program in order to determine the role the federal ACF office should play. In order to answer these questions we have focused our study on four secondary research questions:

- *What are the elements of a model program addressing the independent living needs of foster care youths?*
- *What factors influence program design at the state level?*
- *Which models of service delivery are more likely to result in exemplary programs?*
- *How can the federal government assist states in implementing quality programs?*

The following report analyzes how states currently manage their Independent Living funds as well as the interactions between the federal regional offices and the state Independent Living Coordinators.

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[3] "A National Evaluation of Title IV-E Foster Care Independent Living Programs for Youth," Westat, Inc., p. ix

[4] "Independent Living Programs for Foster Care Youths: Strategies for Improved ACF Management and Program Reporting," Office of Inspector General, Department of Health and Human Services, November 1994, p. 3

[5] OIG, pp. 6 and 18

[6] OIG, p. 4

Our report is organized as follows:

- **Methodology:** This section details the steps taken in carrying out our study.

- **Findings:** This section lays out the findings in four parts.

  ○ *Needs of the Population:* The foster care youth population and their specific needs are outlined in this section.

  ○ *Elements of a Good Program:* This section presents the framework we used in evaluating state programs.

  ○ *Existing Service Delivery Systems:* This section describes how the states we interviewed are implementing their programs.

  ○ *Factors Associated with Good State Programs:* This section analyzes the factors that are correlated with good state programs and those factors that do not have an impact on program quality.

- **Conclusions:** This section summarizes our findings and lays out the general direction that ACF should take in relation to this program.

- **Recommendations:** This section lists six specific ways in which ACF can assist states in managing their programs.

III. METHODOLOGY

This report was developed using a multistage research process encompassing the following steps:

Literature Review and Interviews with Experts

We consulted existing literature on the subject and experts in the field to determine the needs of the Independent Living target population and the elements of a model program.[7]

Formal Telephone Interviews

Before developing our interview guides, we spoke with numerous individuals associated with the program, including staff in the central ACF office and staff of advocacy and research and training

[7] Appendix B lists our interviewees.

organizations. We also examined existing program reviews conducted by the regional offices[8] and reports from the Department of Health and Human Service's Office of Inspector General[9] to identify areas of concern with the program. We reviewed state annual reports from fiscal year 1993 and state annual applications from fiscal year 1994. Our literature review and interviews with experts enabled us to pinpoint salient issues surrounding management of the Independent Living Program.

We conducted telephone interviews with the designated "Independent Living contact" in each of the ten ACF regional offices using a standard interview guide.[10] Our interviews with the regional staffers allowed us to obtain their perspective regarding the role of the regional offices in the management of the Independent Living Program.

We also interviewed eleven Coordinators of state Independent Living Programs.[11] We interviewed one state Coordinator in person and the other ten by telephone. Our eleven interviewees were selected according to the following criteria:

1) the eleven states that had been interviewed the previous year by the OIG research team were excluded,
2) at least one state from each federal ACF region was selected,
3) a mix of states with different implementation structures (i.e. state versus county, etc.) were selected,
4) a mix of states with populations varying from primarily rural to partially urban were selected, and
5) states with different predominant political ideologies were selected.

IV. FINDINGS

A. NEEDS OF THE POPULATION

All adolescents must navigate difficult waters on their way to adulthood. According to

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[8] To date, the regional federal offices have conducted program reviews of six state Independent Living programs: Washington (1991,) New York (1992,) Oregon (1992,) Rhode Island (1992,) Connecticut (1993,) and Georgia (1993 - not completed.)

[9] The Department of Health and Human Service's OIG completed two pertinent reports in 1994: "Independent Living Program for Foster Care Youths: Strategies for Improved ACF Management and Program Reporting," and "Oversight of State Child Welfare Programs."

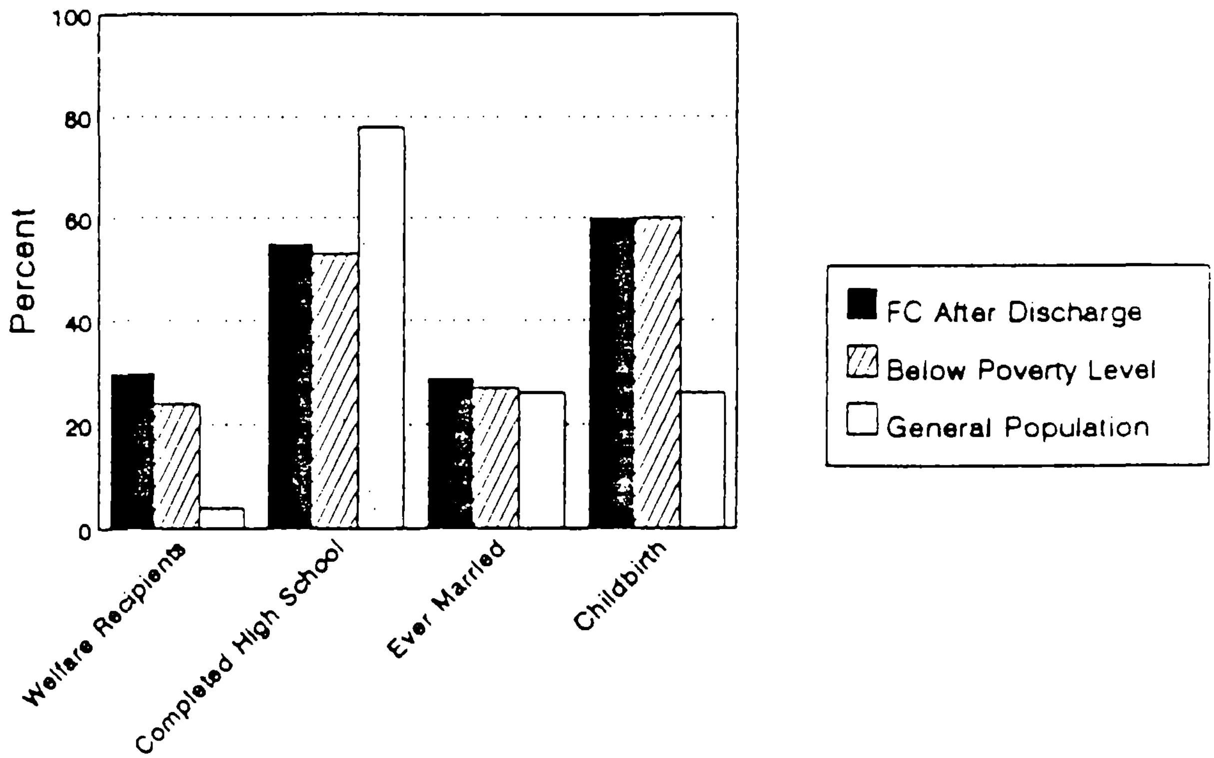
[10] Appendix C contains our "Regional Contact Interview Guide."

[11] Appendix D contains our "State Coordinator Interview Guide."

developmental psychology, the primary developmental "task" for youth at this age is to move towards autonomy. This move is not a continuous process and adolescents frequently encounter setbacks. Most adolescents and young adults can count on the support of their families during the transition to independence and may use their support as a safety net. Often, the need for family support does not end with adolescence. For instance, young adults are increasingly moving back into their parents' homes after a setback such as a divorce or unemployment.

For adolescents in out-of-home care, the transition to adulthood is infinitely more difficult. As the following chart illustrates, the Westat study indicated that outcomes for youths after discharge are worse than those for the general population.[12]

Selected outcomes for 18-24 year olds in the general population, living below poverty level, and foster care youth 2.5-4 years after discharge.*



* Includes both children receiving and not receiving skills training

[12] Westat, p. xv

The Child Welfare League of America (CWLA) notes that foster care youths "often do not receive the help required to prepare them for adulthood that is expected and received by most other young people."[13] CWLA further elaborates that this group's adjustment to adulthood is hampered by the fact that they "entered care because of maltreatment, abuse, family conflict, emotional problems, or other reasons that continue to distress them and interfere with their ability to look toward the future in a positive way and to prepare themselves to live on their own."[14] In serving the adolescent foster care population, child welfare programs must not only address the needs that all adolescents have, but must also take into account this population's *special needs.*

B. Elements of a Good Program

"Independent living" is more than a housing issue. The "Standards for Independent Living Services" published by CWLA in 1989 recommend that Independent Living service delivery systems address the following components: social work services, educational services, employment services, health services, housing services, legal services, socialization, cultural and recreational services, and aftercare services.[15] We have built upon these standards and identified the following eleven criteria as characteristics of a model program that addresses the developmental needs of this foster care youth:

1) Foster-Parent/Other Substitute Care-Giver Training:

Model programs should train foster parents and other substitute care-givers (i.e. those in group homes or residential care facilities) in adolescent development issues and should offer them incentives to engage in life skills activities with the youth in their care. "Life skills" can include such competencies as home management, money management, and interpersonal skills.

This program strategy is essential for three reasons. First, most adolescents typically acquire the competence to live independently from their families; training offered by substitute care-givers most closely approximates this natural milieu. Second, because "child care workers and foster parents have

[13] "Standards for Independent Living Services," Child Welfare League of America, 1989, p. 2

[14] CWLA, p. 2

[15] CWLA, p. 12

a unique knowledge of the strengths, needs, hopes, and fears of the youth in their care"[16] and because substitute care-givers have daily contact with youth, they are likely to be effective in delivering services, if properly trained. Finally, all states already utilize substitute care-givers to service foster care youth, so this method of service delivery leverages already existing resources.

2) <u>Trained Service Providers Who Specialize in Adolescent Issues</u>:

All staff that work with this population should be familiar with adolescent development needs. Frequently, case workers and foster parents care for children in different age groups and, thus, may not be particularly "in tune" with the specific needs of youth on the cusp of adulthood.

3) <u>Community Resources and Relationships</u>:

Social and community connections are essential to promoting youths' resilience and to attaining good outcomes after discharge. The CWLA standards note that:

> Few adults actually live 'independently.' Most adults. . . live 'interdependently,' using a network of support of family, friends, job, and community resources. . . . Independent-living programs should address these concerns in helping young persons develop and maintain relationships with family and friends, as well as with community resources."[17]

Programs must thus not only build connections with other community resources and organizations, but must also teach youth the "soft skills" necessary for making their *own* connections with community resources and for building lasting relationships.

4) <u>After Care Services</u>:

Child welfare agencies are legally responsible for children in their care until they reach the age of emancipation (18 years of age in most states.) The issue of emancipation status and whether youth who are emancipated can continue to receive services is an important one for the Independent Living program. Practitioners recognize that the transition to adult independent living generally takes an extended period of time and that,

> ...becoming self-sufficient is a life-long process. Often young people age out of the system not yet prepared to be as independent as

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[16] CWLA, p. 9

[17] CWLA, p. 8

> necessary. . . As parent surrogates for these children, child welfare agencies have a responsibility to maintain contact with and an open door to their graduates through the formal provision of aftercare services. [These services should include] financial assistance, employment counseling and support, crisis counseling, emergency shelter, housing assistance, information and referral, community service opportunities, peer support programs, advocacy.[18]

Some of our interviewees expressed concern that youth are over-eager to sign themselves out of care at the age of 18 and attain adult status, not realizing quite how difficult it will be to live on their own. Many states therefore elect to serve youth up to the age of 21 if they are engaged in activities leading to independent living. However, some states limit services to certain ages and do not serve youth who want to remain in or return to the system after they have been emancipated.

The Westat report found that "Discharged youth need services to help improve after-discharge outcomes. In general, the status of older foster care youth 2.5 to 4 years post discharge is only adequate at best."[19] Although some youth will not need continuous support services through the age of 21, many however, may need occasional support services through the years of 18-21. Therefore, a model state program will make services available to former foster care youth on an "as-needed" basis through the age of 21.

5) <u>Services Provided According to Developmental Readiness</u>:

The Child Welfare League standards state that "a continuum of services should be provided in accordance with developmental readiness, not chronological age."[20] A number of Independent Living advocates felt that youth as young as 13 or 14 should be served, since they are developmentally ready to start assimilating the lessons of Independent Living. Indeed, some have noted that reaching "streetwise" youth early is important because they may be less receptive to adult interventions at older ages. This theme was echoed by another source who suggested that the ages of 16-18 are the *worst* ages to try to serve adolescents precisely because this is the stage at which youth are most focused upon their own autonomy.[21] Thus, adolescents may be more open to learning the lessons of

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[18] CWLA, pp. 15-16

[19] Westat, p. xiv

[20] CWLA, p. 16

[21] Dr. Ron Ferguson, personal communication, February 1995

independent living before the age of 16 or after the age of 18.

States that target their service recipients via a needs assessment, rather than by their chronological age, will be more likely to meet this standard.

6) <u>Address Multiple Needs</u>:

One of the main findings of the Westat report is that "combinations of skills training led to better outcomes ."[22] This finding is supported by youth development literature which similarly finds that

> Agents that address multiple needs have a larger potential impact on youth development than do those that address a single need; agents that address multiple competencies have a larger potential impact on youth development than those that address a single competency.[23]

Thus, one of the criteria we utilize in assessing whether programs are adequate is whether they offer training that focuses on tangible skills, such as home management, housing, employment, and money management, as well as on intangible skills such as decision-making, self-esteem, communication, and socialization.[24]

7) <u>Multiple Agents</u>:

Service delivery via multiple agents is more likely to result in a model program. First, the availability of multiple agents provides youth with greater options. If a youth cannot have his or her needs met in one program, he or she can try another program that might better serve those needs. Different providers are likely to tackle issues and competencies with youth in different ways, but if several youth development agents (e.g. a foster parent and another training provider) are all working on the same issue with a youth, they can reinforce each other's message. Second, in a system in which multiple providers or agents co-exist, each provider is likely to develop expertise in a particular area. A system with multiple service providers can provide greater depth of service to youth. Furthermore, the existence of multiple providers also creates a climate of competition and, thus, fosters quality and innovation.

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[22] Westat, p. xii

[23] "A Rationale for Enhancing the Role of the Non-School Voluntary Sector in Youth Development," Karen Pittman with Marlene Wright, 1991, unpublished paper prepared for the Carnegie Council on Adolescent Development, p. iii

[24] Connecticut Independent Living Monitoring Review, ACF Region I Office, 1993, p. 7

8) <u>Evaluation/Oversight</u>:

Program oversight tools are important because they ensure that the intended services are actually delivered. Effective programs have evaluation components to determine whether they are achieving the desired outcomes.[25]

9) <u>Youth Empowerment</u>:

Youth development is a "process in which all youth are engaged, *and* all youth are invested."[26] Programs that include youth in decision-making are more likely to engage them in a development process that they perceive as relevant to their needs. Programs that include youth in case-planning as well as in programmatic decisions are likely to result in a higher degree of engagement on the part of participants and in better programmatic quality.

10) <u>Universal Accessibility of Services</u>:

Uniform accessibility of services is one of the factors that we weighed more heavily in deciding whether states have adequate programs. We operationalized this criterion by looking at whether all segments of the population have equal opportunities to access services.

11) <u>Formal Skills Curriculum</u>:

Programs that have a formal skills curriculum are more likely to have quality programs for two reasons. First, a formal skills curriculum can be self-administered, or administered one-on-one, which allows programs to serve rural populations more effectively. Second, a standard written curriculum is likely to promote uniform quality in training despite the use of multiple service providers.

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[25] CWLA, p. 19

[26] Pittman, p. 7

C. EXISTING SERVICE DELIVERY MODELS

The chart below illustrates how the eleven states we interviewed fared according to the criteria we outlined above:

Service Delivery Components

Criteria	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Foster-parent training	✓	✓	✓	✓		✓				✓	
Staff specializing on adolescence		✓	✓	✓		✓	✓	✓			
Community Networks	✓	✓	✓	✓	✓		✓		✓		
Aftercare	✓	✓	✓	✓	✓	✓	✓	✓			
Needs Assessment	✓	✓	✓	✓	✓				✓	✓	
Multiple Services	✓	✓	✓	✓	✓		✓	✓		✓	
Multiple Agents	✓	✓	✓	✓	✓	✓				✓	
Oversight	✓	✓	✓	✓	✓						
Youth Empowerment	✓	✓	✓	✓	✓		✓				
Curriculum		✓		✓		✓					
Accessibility of services	✓	✓	✓	✓	✓		✓		✓		

The states we interviewed seem to fall into three broad groups. We categorized the state programs as "weak" if they met four or fewer of our eleven criteria, as "satisfactory" if they met between five and eight of our criteria, and as "exemplary" if they met nine or more of our criteria. According to our categorization: four of the states we interviewed have "weak" programs; three of the states have "satisfactory" programs; and the last four states have "exemplary" programs.

1) <u>Needs Assessment</u>:

We found that Independent Living needs assessment practices vary along three dimensions: whether assessment is mandatory; whether one standardized assessment tool is used; and whether the state conducts only pre-assessments or also conducts subsequent re-assessments. The chart below summarizes our findings.

Needs Assessment Practices

States' Needs Assessment Practices	**Exemplary**				**Satisfactory**			**Weak**			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Mandatory Needs Assessment	✓			✓	✓				✓	✓	n/a
Needs Assessment of Most Youth		✓	✓			✓	✓	✓			n/a
Standard Tool Throughout State		✓	✓		✓	✓		✓	✓	✓	n/a
Choice of Needs Assessment Tool	✓			✓			✓				n/a
Pre-Test Only	✓				✓	✓	✓	✓	✓	✓	n/a
Periodic Re-assessments		✓	✓	✓							n/a
No Needs Assessment											✓

Population

We found that, of the eleven states we interviewed, only one does not require that foster youth be evaluated for independent living readiness. Five other states conduct Independent Living needs assessment for only a portion of their eligible population. One state's reason for not performing universal assessments is that services are not uniformly available in all regions. Other states do not assess youth who are not likely to participate in the program (e.g. youth with profound developmental disabilities).

Tools

Five states rely upon the *Daniel Memorial Independent Living Assessment for Life Skills* tool. Three states, however, have developed their own assessment tools which are being used throughout the state. Two states, which have decentralized delivery systems, have mandated that an assessment be completed, but have allowed providers to use the assessment tool of their choice. In general, the states we interviewed conduct only a "pre-test" of independent living readiness, and do not conduct re- or post-assessments. A few states, though, require periodic re-assessments.

2) <u>Multiple Services</u>:

There is not a nationally accepted definition of what constitutes "service" under the Independent Living Program. At the very least, as required by federal legislation, each state should be providing two services for each youth over the age of 16: a case service plan that addresses transitional living needs, and a semi-annual evaluation of their case. Some of the states consider the required case service plan addressing transitional living needs to be an "Independent Living" service. Some Coordinators were surprised when we asked what percentage of their total eligible youth they serve; they responded by saying "Well, all of them of course. We are required to." Other states, however, define "Independent Living" service not in terms of administrative service, but rather in terms of *direct* service to youth. One state Coordinator said that, in his state, the rule of thumb is that youth are not considered "served" until they have become *actively engaged* in some kind of "Independent Living" activity; any work the youth's caseworkers may have done on his/her behalf leading to that point is *not* counted as an "Independent Living" activity.

The chart below summarizes the services states provide to their eligible youth. This data must not be interpreted as meaning that all eligible youth in that state can receive a service if the state provides it, since in many instances services are not uniformly available throughout the state. Instead, the data indicates only that the state provides the service as one of the major components of its Independent Living Program.

Subject Areas

Subject Areas	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Education, training, employment	✓	✓	✓	✓	✓		✓	✓		✓	✓
Life skills	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Social Skills	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Stipends		✓	✓			✓	✓		✓	✓	
Housing	✓		✓	✓			✓			✓	✓

Clearly, the first three service areas (education/training/employment, life skills, and social skills) comprise the core of most states' Independent Living programs. We considered the state to be "providing multiple services" if the state offered services in each of these three core categories. In addition, some states opt to provide stipends with Independent Living funds; this is an allowable activity if the stipends are not used for room or board services.

While states are <u>not</u> allowed to provide transitional housing services with federal Independent Living funds, some states choose to fund transitional apartments with their own money. These transitional housing settings provide youth with the opportunity to practice independent living skills while having support available. We included data regarding the availability of housing services in our chart above because we believe these services are indicative of fully developed state Independent Living programs.

3) <u>Multiple Agents</u>:

We considered a state program to have met our "use multiple agents for service delivery" criterion if they used four or more of the seven possible agent types listed in the chart below. States demonstrate wide variation in meeting this criterion, unlike the previous one ("provide multiple services"). Stronger state Independent Living programs clearly tend to make use of a greater number of service delivery methods.

Multiple Agents

Delivery Methods	Exemplary				Satisfactory			Week			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Foster Parents	✓	✓	✓	✓		✓					
Other care-givers	✓	✓	✓	✓	✓	✓				✓	
Outreach workers	✓	✓	✓	✓	✓	✓	✓	✓			
Case workers	✓	✓	✓				✓	✓		✓	✓
Mentors	✓	✓		✓	✓						
Curriculum	✓			✓		✓				✓	
Workshop/ Conference	✓	✓	✓	✓		✓			✓		

Foster Parents and Other Substitute Care-Givers

The chart above indicates whether foster parents and/or other substitute care-givers actually deliver Independent Living services. Less than one half of the states we interviewed used care-givers to provide services; one state noted that its inability to provide foster parents with a stipend or incentive constitutes an impediment in getting them to engage in life skills activities with youth.

Outreach Workers

Some states utilize outreach workers in conjunction with other service providers. These states noted that this model is well-suited to the needs of rural populations. One ACF regional Independent Living contact pointed out that providing training at specific central locations could hinder a state's ability to serve a rural population. She stated that it may be more effective for outreach workers to travel to isolated areas to deliver services in a teen's home, rather than expecting the teen to commute to participate in peer group activities in a far-away city.

We noted, however, that the outreach model may result in some disadvantages where it interacts with a weak Coordinator, or with a competing chain of command. We will elaborate upon this point in the Role of the Coordinator section of this report.

Caseworkers

We found that it is common practice in states to use case workers in some manner for Independent Living service delivery. In most of these states, the case workers work in conjunction with other service delivery agents. However, in weaker state programs, case workers are either expected to provide services or to contract them out themselves. A reliance upon case workers as the sole method of service delivery presents a problem when they are not trained in adolescent issues.

Mentors

Most of the exemplary states and one of the satisfactory states used voluntary mentors as an agent of service delivery. We identified this as a desirable service delivery method for two reasons. Firstly, it provides youth with positive role models. One state, for example, used members of a black college fraternity to deliver a message regarding sexual responsibility to black male foster youth. This type of program is particularly effective at producing desired outcomes because youth are more likely to emulate people they perceive as their peers. Social learning theory notes that, "during adolescence it is the peer group ... who become increasingly important as models, especially if communication between parents and adolescent breaks down."[27] Secondly, the use of mentors allows states to leverage community resources and to assist youth in building connections to their communities.

Curricula

Most of the states we interviewed do not have a formal skills curriculum which can be self-administered by the youth. Curricula will be further discussed on page 20 of this report.

Workshops/Conferences

All of the exemplary programs used workshops or conferences as a means of delivery services to youth. This method of service delivery can be more cost-effective than providing services one-on-one.

3) Oversight:

We have categorized oversight practices into two general categories: those intended to *monitor the progress of individual clients* and those intended to *monitor overall program administration.* The mechanisms we feel are necessary to effectively monitor the progress of individual clients are: 1) needs assessments, 2) individual case plans,[28] 3) on-going monitoring, and 4) client follow-up after services have ended. The mechanisms that are effective in monitoring overall program administration are: 1) specific Independent Living policies, 2) database systems for tracking outcomes, 3) quality assurance checks, 4) mechanisms to monitor subcontractors, and 5) community advisory panels. The chart below summarizes our findings regarding oversight practices in the states we interviewed. The exemplary programs use a greater number of oversight mechanisms than do weaker programs.

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[27] Muuss, Rolf, E., Theories of Adolescence, McGraw-Hill, 1988, p. 283

[28] Individual case plans for youth are required by federal legislation so we did not query states about their practice in this area.

Oversight Mechanisms[29]

Oversight	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Mandatory Needs Assessment	✓	✓	✓	✓	✓				✓	✓	
Case documentation	✓	✓	✓	✓		✓					
Follow-up	✓	✓	✓	✓	✓	✓	✓	✓		✓	
Policies or guidelines		✓	✓	✓	✓	✓			✓	✓	
Database system	✓		✓		✓				✓	✓	
Quality Assurance Audits	✓	✓	✓								
Contract monitoring		✓	✓				✓				
Advisory Panels	✓	✓		✓	✓		✓		✓		
Reported Outcomes in Fiscal Year 1993	✓			✓	✓		✓			✓	✓

Case Monitoring

Federal legislation requires that each foster care case be reviewed every six months. It became apparent in our interviews, however, that there is considerable variation in the amount of case monitoring that is carried out beyond six month reviews. One state Coordinator told us that "we don't have a good sense of actual services received versus what is recommended in the case plan." Two other Coordinators described very active case monitoring systems, stating "we document everything" and "we track details like a hawk." In general, the stronger Independent Living programs are more likely to perform extensive case documentation.

[29] Appendix E contains tables detailing the data from which we derived this chart.

Client Follow-Up[30]

One of the few federal requirements of the Independent Living program is that states are to report on outcomes for foster care youth (such as housing, employment, and education status) ninety days following termination of Independent Living services. Despite this federal requirement, two states we spoke to reported that they don't really know youth status ninety days after discharge and are able to report only on the status at the time of discharge. Our chart indicates that the inability to conduct client follow-up is correlated with "weak" state Independent Living programs. Additionally, all of the nine states attempting follow-up contact stated that they achieve a poor rate of response from their former clients. Clearly, states find implementation of the follow-up requirement problematic. The poor response rate states experience also suggests that follow-up cannot be used as a very effective client oversight tool. However, client follow-up is necessary for states to be able to report on program outcomes or effectiveness.

Specific Independent Living Policies[31]

Policy and procedure guidelines may be useful in establishing minimum program standards and consistency of service throughout a state. The use of policies or guidelines, however, does not seem to be correlated with program quality. We found in our interviews that state Independent Living Coordinators vary in their perceptions of the value of implementing policy standards. In fact, we heard two arguments *against* implementing Independent Living policies: one Coordinator argued that standardized policy would run counter to her state's philosophy of community based program design; another Coordinator argued that the recent lawsuit in Kansas stemming from a failure of the state to implement one of their "policies" had the consequent effect of encouraging other states to shift to "very thin policies and lots of supplemental guidelines."

Database Systems

We asked Coordinators whether their state's child welfare database system has the capacity to track and monitor Independent Living services. We found great variation in computer capacity across states. For example, one Coordinator stated that she does not even have enough computer capacity to utilize spreadsheet software, let alone maintain a separate Independent Living client database. At the other

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[30] Table 2 in Appendix E details our findings regarding state practice in the area of follow-up.

[31] Table 3 in Appendix E details our findings regarding states' policies and/or guidelines.

end of the spectrum, another state has a separate Independent Living system which is used to extensively track clients' receipt of services. A lack of computer capacity is undesirable because it will hinder a state's ability to track client outcomes and program effectiveness.

Quality Assurance Checks

Federal IV-E legislation requires that each foster care case be reviewed every six months. Three of the states we interviewed perform additional *Independent Living* quality assurance checks. It is noteworthy that each of these three states has an Independent Living program classified as "exemplary." However, there seems also to be a growing emphasis upon performing periodic random sample case audits; at least two states informed us of their intentions to implement such a system in the near future.

Subcontract Monitoring[32]

Of the eleven states we interviewed, all reported having used subcontractors at one point or another to perform service delivery, and eight currently have at least partially privatized implementation systems. In fact, some of the state Independent Living Coordinators we spoke to describe their role as *primarily* that of a contract administrator. Thus, we expected state Independent Living programs would have a number of mechanisms (e.g. contractor guidelines, requirements to submit regular programmatic and fiscal reports, quarterly statewide grantee meetings, and regular on-site monitoring visits) for monitoring their subcontractors.

In general, however, most of the states we interviewed seem to have rather minimal oversight requirements for monitoring their subcontractors. We identified only three states that have thorough subcontractor monitoring procedures, and of these three, only one is currently using a performance-based contract model.[33] This finding echoes a theme that emerged in the ACF Independent Living program reviews completed for Rhode Island, Oregon and Washington. The review teams for these reports all highlighted their concern that subcontractors were *reimbursed for costs regardless of outcomes*. Each audit report recommended a shift toward fee-for-service, or performance-based, contracts.

[32] Table 4 in Appendix E details our findings regarding states' subcontractor monitoring practices.

[33] In this model, grantees are expected to achieve 80% of established goals to receive payment.

Advisory Panels

Community or youth advisory panels can serve as external guides to an Independent Living program. Of the eleven states we interviewed, three do not appear to have either youth or community advisory panels; three states have community advisory panels; and five states have a youth advisory board of some sort.

Outcomes[34]

We had initially expected to find that states that have a greater number of oversight mechanisms in place would be more likely to report on youth outcomes ninety days following the termination of Independent Living services. We did not, however, find such a correlation; we think this can partially be explained by the fact that we were comparing our interviewees current oversight mechanisms to the outcomes they reported in their fiscal year 1993 reports. We are aware that a number of states, including E2 and E3, that were unable to report outcome results in fiscal year 1993 have since improved their program oversight tools.

4) Universally Accessible Services:

We noted in the states' year end reports from fiscal year 1993 that although some states appear to be serving all of their eligible population, other states do not claim to serve all eligible foster care youth. The percentage of the eligible population that states claim to serve ranges from 33% to 100%.

Many states do not have service delivery systems that are spread evenly throughout the state. In these cases, youth located near services tend to receive more services than those who do not live near accessible community resources. Both the level of funding available to the program, and the degree to which the state can be described as rural, seem to impact how accessible services are to all eligible youth.

5) Curriculum:

Several states focused on the development and delivery of an Independent Living Skills Curriculum. One Independent Living Coordinator stated that a curriculum constitutes the most efficient means of reaching the whole population with a relatively small amount of money. This

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[34] Table 5 in Appendix E details our findings regarding states' ability to report on outcomes in fiscal year 1993.

opinion was echoed by a regional Independent Living contact who indicated that he likes to see skills curricula since these programs can reach up to 90% of the population.

Another state Coordinator suggested an additional advantage of a curriculum model is that it allows youth to complete the training in their own home and at their own pace. Because this service delivery option enables youth to take charge of their own learning experience, it may be considered empowering, and, thus, may be more developmentally appropriate than other service delivery approaches.

For both of the reasons noted above (cost-effectiveness and youth-empowerment), this model is particularly well-suited for serving rural populations. Even though they recognize its utility in addressing the developmental needs of adolescents and in serving rural populations, some states with largely rural populations do not yet have a formal curriculum in place. Thus, it appears as though factors other than geographic and demographic characteristics of states influence the decision whether or not to use this service model. We speculate that the small absolute size of some states' federal Independent Living grants may act as a barrier in developing curricula because such services require large up-front investments of funds.

D. Factors Associated With Good Programs

1) Pre-Existing Programs:

Finding: Program quality did not appear to be predicted by the existence of a program prior to the availability of the federal Independent Living funds.

Out of the fifty states, twenty-two had programs addressing Independent Living prior to the passage of the federal Independent Living enabling legislation.[35] As the following table illustrates, four of the states we interviewed had some kind of program in place before the federal monies became available.

Pre-Existing Programs

	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Had program before 1987			✓	✓			✓			✓	

[35] The 1991 Green Book, Committee on Ways and Means, U.S. House of Representatives, p. 808

From this sample we concluded that whether a state had a pre-existing program or not does not appear to be correlated with present program quality. Half of the "exemplary" states had a program in place prior to 1987, but so did one of the "weak" state programs. We *can* say however, that states without pre-existing Independent Living programs were able to develop both "satisfactory" and "exemplary" programs as a result of the federal Independent Living initiative.

In the case of the one "weak" state that had an Independent Living program prior to 1987, the original Independent Living program seemed to shape the new initiative in a negative way. The state's original service was a transitional apartment program for youth ready to move out of substitute care, but not quite ready to live on their own. The newly available Independent Living funds seem to have been channeled mostly to support this existing program and, as a result, the participants in the transitional living apartments are more likely to receive services than are other segments of the eligible population. Thus, in this case, the existence of a prior program resulted in an Independent Living program that is not as well-planned as some of the other state programs.

2) Implementation Structure:

Finding: Implementation structure was not a predictor of program quality.

States vary in the manner in which they administer and implement the Independent Living program. We found four primary methods of implementation: state implementation, county implementation, privatized systems, and hybrids of the aforementioned three. We found that the implementation structure for the Independent Living Program tends to mirror the primary method for child welfare social service delivery for each state.

We had originally expected to find variation in quality across implementation models and, therefore, we made a special point of sampling from states with different types of implementation structures. However, based on our chart below we cannot conclude that any one type of implementation structure is more closely associated with program quality.

Implementation Structures

Implementation structure	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
State Implemented						✓					
County Implemented	✓				✓			✓			
Privatized		✓	✓				✓			✓	✓
Hybrid				✓					✓		

State Implemented Models

We had originally hypothesized that a state implemented system would be of higher quality than a county implemented system because central planning would result in uniform and coherent service delivery throughout the state. Although we only have a sample of one state implemented model from which to draw conclusions, our sample does seem to negate our original hypothesis. This state's state implemented Independent Living program does not have a uniformly available service across all regions of the state. The Coordinator from this state explained that, due to lack of money, her state has decided to focus on providing services well in a few regions, rather than poorly in all.

County Implemented Models

Not surprisingly, county implemented systems tend to have less central planning than does the state implemented system described above, but lack of central planning does not appear to be associated with reduced program quality. Some states assign counties the responsibility for service planning, delivery, and contract monitoring, while other states retain responsibility at the state level for all program functions except for actual service delivery.

Privatized Implementation Models

We had not anticipated finding that so many states would be utilizing privatized systems. A privatized model of Independent Living service delivery appears to be the dominant mode within states. We define a "privatized implementation system" as one in which services are not provided by state or county social workers, but instead by contract service providers within other state departments or within private non-profit organizations. Program quality varies considerably within this broad category. Although all of the "weak" state programs have at least a partially privatized system, so do three-quarters of the "exemplary" state programs.

A potential hazard of relying upon available private sector expertise is that agencies may focus upon their own missions as opposed to the Independent Living mission. For example, in one state we interviewed, the main contractor focuses its efforts mostly upon data collection for research purposes, to the detriment of actual service delivery to youth. Given that many states rely upon contractors and that many states also have poor oversight mechanisms, this issue may represent a serious problem in the management of the Independent Living program.

Hybrid Implementation Models

Some states use "hybrid" models of implementation. We classified state W1 as a "hybrid" model because it utilizes a privatized implementation structure in regions of the state where contractors are available and a state implementation structure in other regions. Another hybrid model, such as State W2's, retains a portion of the federal grant to provide services out of its state central office, but grants the remaining funds to subcontracting agencies.

3) <u>Role of the Coordinator</u>:

Findings:
✱ Program quality is most strongly correlated with the Coordinator's provision of technical assistance to service providers.
✱ Program quality is also strongly correlated with the amount of time the state's Coordinator is able to devote specifically to the Independent Living program.

We analyzed the role Coordinators play in the implementation of programs, and concluded that this factor impacts the quality of programs. We analyzed the effects of the Coordinators' full-time status, of their role as a provider of technical assistance, and of their status within the child welfare hierarchy. The following chart illustrates our findings:

Role of the Coordinator

Role of the Coordinator	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Full-Time Coordinator	✓	✓		✓	✓	✓	✓				
Provide Technical Assistance	✓	✓	✓	✓	✓	✓				✓	
Manager Status	✓									✓	✓

Part-Time vs. Full-time Coordinators

In one of our early interviews, Becky Copeland from the University of Oklahoma's National Resource Center for Youth Services suggested that we might find the amount of time a state Coordinator is able to devote to the Independent Living program is a major determinant of the quality of the program. She also suggested that the allocation of only a part-time Coordinator to the program may indicate the state does not consider Independent Living a high priority. Our findings, summarized in the previous chart, corroborate Ms. Copeland's hypothesis; whereas three out of the four exemplary states and all of the satisfactory states have full-time Coordinators, none of the weak state programs do.

The effect of having a part-time Coordinator may be compounded by a devolved implementation system because both factors may result in diminished program accountability.

Technical Assistance

The Coordinator's role as a provider of technical assistance seems to be most strongly correlated with program quality. All exemplary states, and most of the satisfactory states, have Coordinators who provide technical assistance to service providers. Indeed, technical assistance appears to be the glue that holds programs together. One Coordinator for an exemplary state whose program is county implemented with minimal guidelines noted that she ensures counties meet the spirit and goals of Independent Living by providing technical assistance to them. Another Coordinator in an exemplary state noted that her program was not in good shape when she took over and one of the main tools she used for revamping her program was training and technical assistance.

Both of the aforementioned Coordinators have direct authority over the providers and counties implementing the program. Therefore, if these programs or services fail to meet program standards, these Coordinators can choose to replace personnel or to not re-allocate money elsewhere in the future. Thus, in these cases, it is difficult to isolate the benefits of technical assistance versus the benefits of performance standards.

It is possible to pinpoint the effects of technical assistance for state E4, however. E4 has one of the programs we classified as exemplary. In this state, the Coordinator lacks direct authority over the program's outreach workers. The Coordinator there pointed out that despite the fact that the outreach workers report to county child welfare hierarchies, the outreach workers owe their loyalty to her and strongly identify with the Independent Living program mission. She attributes their understanding of the Independent Living mission to the fact that she conducts technical assistance and holds statewide meetings. Thus, these appear to be the primary mechanisms for ensuring program quality.

Coordinator's Status

Location in Child Welfare Agency Hierarchy

A Coordinator's relative standing in the state's social service delivery hierarchy, or the relative standing of adolescent issues in the state's child welfare service continuum, can impact the relative effectiveness of the Independent Living program. For instance, in one state the Department Commissioner is particularly invested in adolescent issues, and the state continues to have a dynamic and stable program even in the face of state budgetary pressures.

Two Coordinators we interviewed are housed in planning units and tend to focus their efforts on the annual plans required by the federal government and on contract monitoring; these states do not, at this time, have programs that we classify as "exemplary." In contrast, Coordinators who are housed in social service department are, on average, more involved in programmatic issues and more interested in developing or maintaining innovative programs, such as skills curricula.

Authority Over Line Workers

Another factor that can affect whether the Independent Living Program achieves its intended goals is the degree to which the Independent Living Coordinator has direct control over those implementing the program.

States with small absolute allocations tend to have Coordinators with less direct control over Independent Living line staff. Also, Coordinators in states with small absolute allocations tend to have program responsibilities in addition to Independent Living, and, thus, tend to devolve Independent Living program responsibility to counties or to contractors.

In instances where the Independent Living program is implemented by contractors, lack of direct control may not present a problem because Coordinators can rescind contracts if providers do not meet expectations. It is when the implementation of the Independent Living Program is reliant upon the existing child welfare department chain of command, and when the Coordinator does not have direct control over the line staff, that problems may arise in ensuring program quality. For example, one state employs six Adolescent Specialists to address the independent living needs of youths throughout the state. These workers are housed at county social service offices and must answer to the county office's hierarchy. This type of set-up results in problems when county administrators are tempted to use the workers for activities that are not related to Independent Living (e.g. conducting Child

Protective Services intakes). We conclude that housing Independent Living workers in child protective service offices may be counter-productive as Independent Living will always appear a secondary need in comparison to the urgent needs of the intake units.

4) Culture:

Findings:
- **The availability of technical assistance is correlated with program quality.**
- **Statewide meetings are correlated with program quality.**
- **The existence of state policies or guidelines is somewhat correlated with program quality.**
- **The existence of a formal mission statement is not correlated with program quality.**

We tried to ascertain whether states that have a strong management culture around Independent Living also have programs of higher quality. We operationalized the concept of "culture" by looking at whether states have written mission statements, whether they have policies beyond those outlined by the federal government, and whether the Coordinator delivers technical assistance and holds statewide meetings. The following chart summarizes our findings:

Independent Living Culture

	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Formal Mission Statement		✓					✓	✓			
Policies or Guidelines		✓	✓	✓	✓				✓		
Coordinator Delivers Technical Assistance	✓	✓	✓	✓	✓	✓				✓	
Statewide Meetings	✓	✓	✓	✓	✓						

Our first finding is that the existence of a formal mission statement is not correlated with program quality. Only three of the states have formal mission statements; the quality of their programs range from "exemplary" to "weak" and, therefore, it seems as though a formal mission statement is not necessarily a harbinger of a good program.

It is important to note however that, out of the five "satisfactory" and "exemplary" states that do not have a mission statement, all have Coordinators that provide technical assistance, and four of the five have statewide service provider meetings. This buttresses our previous finding regarding the positive impact of the Coordinator role. The states in which Coordinators deliver technical assistance and hold meetings may not need mission statements since the Coordinators play an active role in ensuring that everyone is "on the same page." It is apparent that technical assistance and, to a lesser extent, statewide meetings, bring about a coherent and dynamic Independent Living culture in which good programs can flourish.

Several Coordinators pointed out that they do not issue policies, since having such policies can create the potential for lawsuits or for program rigidity, but that they issue handbooks or provide technical assistance to ensure that those implementing the program understand the philosophy behind Independent Living. For example, one Coordinator pointed out that she does not issue guidelines because they hamper the flexibility of counties to come up with innovative programs at the local level.

Similar to mission statements, policies and guidelines do not alone seem to predict program quality, but they are correlated with program quality when they occur in conjunction with technical assistance and statewide meetings. Again, this supports the finding that it is these two latter characteristics that determine whether state programs are satisfactory or exemplary.

5) Networks:

Finding: The degree to which states are connected to other programs, experts, or to national organizations is correlated with program quality.

One of the sections of our telephone questionnaire of state Independent Living Coordinators dealt with professional Independent Living networks within and among states. We classified states into three network categories: "connected", "marginally connected", and "isolated".[36] States that we consider "connected" have Coordinators who talk and share information with other state Coordinators and who are actively involved in the National Association for Independent Living (NILA). In general, states that are marginally connected are not as actively involved in national organizations and have less contact with other Coordinators and consultants than do Coordinators from "connected" states. States that we consider "isolated" have minimal or no contact with all of the aforementioned resources. The following chart summarizes the degree of "connectedness" for each of the states we interviewed:

[36] See Table 6 in Appendix E for the data from which we derived these classifications.

Networks

	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Connected	✓	✓		✓		✓	✓				
Marginally Connected			✓		✓			✓			
Isolated									✓	✓	✓

Significantly, all of the states that are "isolated" have weak programs. Similarly, all states that are "connected" have either exemplary or satisfactory programs. Thus, we can conclude that the richness of existing networks is correlated with program quality.

6) <u>Role of ACF in Managing the Independent Living Program</u>:

Finding: The regional ACF offices currently appear to have little impact (good or bad) upon the quality of state Independent Living programs.

After Independent Living was permanently reauthorized in fiscal year 1994, ACF's central office devolved the program's management responsibilities to the ten regional offices. The regional offices are now responsible for approving the annual applications, for reviewing the fiscal and year-end reports, and for providing technical assistance to states. The chart below summarizes our findings regarding the regional offices' interactions with state programs:

Role of the Regional Offices

	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Contact is a Programmatic Specialist in Independent Living		✓	✓			✓	✓	✓	✓	✓	✓
Contact is a Programmatic Specialist for all Youth Programs							✓	✓	✓		✓
Pro-Active Application and Report Review		*				✓	✓	✓			
Regional Provides Technical Assistance				✓		✓	*				
State Perceives Regional as Providing Technical Assistance				✓	✓	✓			✓		

* indicates a partial fulfillment of this function

Staffing

Most of the regions utilize a variation of a "matrix" staffing arrangement. Under a matrix staffing pattern, child welfare specialists have dual assignments: a state assignment and a program specialty assignment. Thus each state has a regional contact with knowledge of all of their programs, and each regional office has one staffer who is particularly knowledgeable about each program. We found however, that whether or not someone in the regional office was assigned Independent Living as "program specialty" area has little apparent impact upon state program quality.

All ten of the regions group Independent Living with other child welfare programs, but only four of the regions group Independent Living in an office with other youth programs such as the new Crime Bill or the Transitional Living Program. We had expected to find that contacts who have purview over many youth programs would develop into "youth specialists" and would take an active role in shaping and supporting strong state Independent Living programs. We found, however, that a specialization in youth programs in the regional office is not associated with either proactive plan and report reviews or with state program quality.

Application and Report Reviews

States have great discretion and flexibility in determining program design and how they will expend their funds. ACF's role in managing this program is limited by the non-restrictive nature of the program's authorizing legislation: "As Congress intended, the Department has implemented the program with minimum requirements and specifications."[37] Legislation does not require that state programs be monitored or evaluated and therefore ACF has not emphasized program audits as a management tool.

ACF has also not required that states use either a standard application form or a standard year-end report form. The regional staff use a checklist in reviewing the states' annual reports. The checklists are completed by extracting information from the reports submitted by the states. We found that at least four of the regional offices limit their report reviewing activities to completing this checklist. Two regions also check whether states were able to complete the activities they had proposed for themselves in their applications. Only three of the regional offices described their role in reviewing applications and reports in more active terms. These regions seem to be proactive in making

[37] "Program Instruction," Administration for Children and Families, Log Number ACYF-PI-93-16, 12/10/93, p. 2

suggestions for program improvement to the states in their regions. We did not find, however, a correlation between the relative thoroughness of ACF's review of reports and the quality of state Independent Living programs.[38]

Technical Assistance

The regional office staff that we spoke to agreed for the most part that their primary role in managing this program should be the provision of technical assistance to states. Our perception, however, is that the regional offices provide only minimal assistance to states. In general, the regional role has been limited to providing interpretation of the regulations and to interpretation of application and report requirements. As indicated in our chart above, only three regional offices seem to provide states with technical assistance beyond policy interpretations. The state Coordinators we interviewed echoed this noting that they have little interaction with the regional offices. Coordinators mostly communicate with their regional office between December and February when the annual applications and reports are due.

The regional offices' capacity to provide technical assistance is limited by both time and travel restrictions. Staffing levels in the regional offices did not increase when responsibility for managing this program shifted to the regions in 1993. In fact, all of the regional offices are facing staffing reductions as part of the Clinton Administration's efforts to reduce the size of the federal government. A consequence is that ACF regional staff now have multiple job duties and limited time to spend on the Independent Living program. In addition, travel dollars for regional staff are extremely restricted. With the exceptions of Region I and II, where states are within easy driving distance of one another, the regional Independent Living contacts emphasized that it is impossible for them to travel to states to perform on-site technical assistance.

The regional Independent Living contacts limit their technical assistance activities to one-on-one assistance to states via the telephone. However, state Independent Living staff do not appear dissatisfied with this present delivery mode of technical assistance. When queried as to what role ideally they would like the regional offices to play in assisting them to manage the program, states suggested activities such as facilitating information sharing amongst states and writing policy interpretations. State Coordinators also expressed an interest in seeing regional staff "empowered" to

[38] Table 7 in Appendix E contains a chart of our data regarding regional ACF office practices regarding report reviews.

make programmatic decisions and to effectively relay states' concerns back to central office. These are activities that can be implemented via long-distance delivery modes.

7) <u>Fiscal Issues</u>:

Findings:

✱ A fiscal threshold effect hinders the ability of states which receive small absolute allocations to implement quality programs.

✱ An inability to fully expend allocated funds appears to be correlated with "weak" programs.

There are number of fiscal issues which appear to affect relative quality of states' Independent Living programs. We have grouped these issues into two categories: threshold of influence and ability to fully expend funds.

Threshold of Influence

Our findings suggest that there is a minimal level of funding, or a fiscal "threshold of influence," that enables a program to adequately get off the ground. Although states with smaller populations obviously have smaller numbers of foster care youth to serve with their allocation, it is our observation that these states do not just have proportionally smaller programs, but rather that they have less well-developed programs.

A full-time Independent Living Coordinator and a formal Independent Living skills curriculum are two service components we identified earlier in this report as often associated with good quality programs. We noted that, although we would expect states with rural populations to be employing a service model that can be distance-delivered, such as a skills curriculum, these states frequently have limited if any services in their rural areas. For example, state W4, which has a very rural population, does not have either a needs assessment tool or a service-model which can be distance-delivered. The chart below demonstrates that three of the four states with small absolute allocations (we have highlighted amounts under $250,000) do not have either a full-time Coordinator or a formal skills curricula. It is also noteworthy that each of these three "small" programs are ones we have classified as "weak." We conclude that small absolute Independent Living allocations hinder the ability of states to afford a full-time Coordinator or a large up-front investment in program design, and thus negatively impact program quality.

Funding Threshold Effect

	Allocation Amount (FY 94)	Full-Time Coordinator	Has a Skills Curriculum
Exemplary			
E1	$1,142,066	✓	✓
E2	$ 435,562	✓	
E3	$2,297,848		
E4	$ 207,149	✓	✓
Satisfactory			
S1	$1,098,852	✓	
S2	$ 635,852	✓	✓
S3	$ 930,799	✓	
Weak			
W1	$ 17,834		
W2	$ 193,430		
W3	$ 521,302		✓
W4	$ 44,585		

Ability to Fully Expend Funds

We noted that many states in the early years of this program were turning back funds unexpended and/or were not requesting available supplemental funds. The chart below summarizes how fully each of the eleven states we interviewed were able to spend their allocations.

State Utilization of Funds

Full Utilization of Funds	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Didn't Request FY94 Supplemental Funds										✓	
Didn't Request FY93 Supplemental Funds										✓	
Didn't Request FY92 Supplemental Funds										✓	
Returned Some FY93 Funds Unexpended									✓	✓	
Returned Some FY92 Funds Unexpended				✓					✓	✓	✓
Returned Some FY91 Funds Unexpended				✓	✓			✓	✓	✓	✓
Returned Some FY90 Funds Unexpended				✓						✓	✓

We had initially speculated that perhaps states were hesitant to develop large Independent Living programs while the future of continued federal funding was unclear and therefore they did not use all of their allocations. However, we found during our interviews that the uncertain status of the program was not really the primary cause of states' under-utilization of funds. We observed that states' ability to expend has improved the longer the program has been in place.

We also found that two other factors, internal to the states, had influence on the states' spending patterns. The first factor which affected the states' utilization of funds is each state's budget process. Many of the states' Coordinators we interviewed suggested that their state legislatures are loath to appropriate state general funds to provide the fifty percent match required for the supplemental allocation. These Coordinators stated that their respective legislatures are not opposed to the Independent Living program *per se*, but simply that the program just loses out to competing budget priorities. The Coordinators' ability to request federal funds is, thus, limited by legislative politics. In fact, three state Coordinators informed us that the future of the Independent Living program in their state may be impacted by state financial pressures. This finding suggests that the rate of state utilization of the federal supplemental funds will be contingent upon budgetary politics at the state level.

In at least three of the states we interviewed, internal miscommunication between the state's fiscal people and the state's program people seems to be the factor that most affects their ability to expend funds. Indeed, the one exemplary state that returned funds did so as a result of miscommunication amongst state fiscal staffers.

8) Status of Independent Living Within Child Welfare Continuum:

Finding: State Coordinators think that if child welfare funds were block granted, the Independent Living program would be reduced.

Although we did not ask this question of all states, we asked five Coordinators what they thought would happen if all child welfare programs were rolled into a block grant. Four out of the five Coordinators speculated that their budgets would probably be reduced. Because their legislatures do not view this program as a high priority, these Coordinators pointed to the need to track outcomes in order to ensure the survival of the program under a block grant scenario.

Two Coordinators pointed to the fact that the Independent Living is not well integrated into the child welfare service continuum, since child welfare agencies typically do not focus on adolescents and since Independent Living is a very small program. One speculated that if the program were rolled into a block grant and money were tight, resources would be "front-loaded" into protective services. In our view, this scenario is very likely, since we noted this dynamic occurring in one of the states we interviewed; in this state, where outreach workers answered to the child welfare service delivery hierarchy, the Coordinator had to fight to keep her workers from being assigned child protective service intake tasks. Effectively, under budgetary constraints, departments are likely to "put out fires" first as opposed to spending resources on a program whose benefits may not be evident until *after* the children are off their caseloads.

Finally, it is important to note that the one Coordinator who felt that her budget would not be reduced said it was because her supervisor is highly supportive of the program. Thus, the relative standing of the Coordinator within the child welfare hierarchy may interact with other factors in determining the future of Independent Living under a block grant scenario. Since we observe that most weak programs have Coordinators who are part-time and/or isolated and, therefore, without status, we speculate that block granting could present a serious problem for fledgling programs.

V. CONCLUSIONS

The federal government played an important role in getting the Independent Living Program launched nationwide. Indeed, if it had not seeded this program, it is questionable whether half of the states would have a program at all.

While a good number of states have implemented exemplary programs, an equal number have fledgling programs that suffer from lack of attention and from inadequate resources. States with small allocations tend to have part-time Coordinators. The size of the allocation, coupled with the relative lack of attention the program receives, results in programs that are inferior in quality and/or do not reach the entire eligible population. Ironically, the states with the least staff and monetary resources also receive the least technical assistance from the regional offices. Furthermore, the weak programs are also the most isolated programs. These states are not currently able to reap the benefits of what more fully-developed programs have learned. We therefore conclude that ACF could play a larger role to assist weaker state programs to more fully develop.

VI. RECOMMENDATIONS

As noted above, we conclude that, at a minimum, ACF should continue its present role in relation to this program. Ideally, however, ACF's role would be augmented to address six central issues currently impinging upon the present quality of state Independent Living programs. These six issues are as follows:

1) Extent of Federal versus State Control:

The extent of federal control of this program should remain unchanged; ACF should utilize other approaches to improve program quality in states which are having difficulties.

Perhaps the biggest issue in determining the future role of ACF is how to continue to allow strong state programs to flourish, while assisting weak programs to become more effective. We noted a variety of different approaches that ACF might consider in thinking of its role in relation to this program. These approaches can be arranged in a continuum ranging from "requiring many restrictions upon states" (such as imposing a program design) to "requiring no restrictions upon states" (such as rolling the program into a "child welfare block grant"). A very restrictive approach to the program would have the likely effect of squelching state innovation, while guaranteeing minimum program quality across the states. Alternatively, a very non-restrictive approach does nothing to ensure that weak state programs will improve and that federal funds will be well spent, but does allow states great flexibility.

Most state Coordinators feel that the open guidelines have allowed them to develop programs that are innovative and responsive to the needs of their population. Moreover, Coordinators feel that if the program is rolled into a block grant, it will be, at the very least, reduced, since adolescents are not typically the first priority in child welfare programs. Thus, changing the guidelines would fundamentally alter one of the best aspects of this program. **We recommend that ACF maintain the present flexible program guidelines.**

2) Technical Assistance versus Monitoring:

ACF staff should focus their activities not on monitoring, but on providing technical assistance to states.

At the present time ACF's activities in relation to this program can be categorized as falling into one of two categories: 1) technical assistance, and 2) monitoring. As we noted in our findings above, both ACF's technical assistance activities and ACF's monitoring activities are limited in scope. Although ACF's limited influence can in part be traced to its limited staff capacity, we also believe that it can also be attributed to the somewhat contradictory nature of these two activities. Indeed, ACF cannot credibly offer states assistance with one hand, while simultaneously holding the threat of compliance sanctions with the other hand. ACF's relative impact upon the Independent Living program would likely be greater if it focused its role on just one of the activities mentioned above.

There is little data available to indicate whether increased federal monitoring of this program would improve program quality. We did find evidence in our research, however, that states' access to information is correlated with strong programs. Additionally, one of the ACF regional staffers we spoke with mentioned that the Department of Health and Human Services' Office of Inspector General has authority to perform program audits at any time, and we conclude therefore that ACF staff do not need to perform the same function. **We recommend that ACF staff focus their activities upon providing technical assistance to states.** Our interviews suggest that states can particularly use technical assistance in developing oversight mechanisms to monitor their contractors.

3) Information Sharing:

ACF should facilitate information sharing among states.

In light of the relative paucity of networks in some states, the regional offices should take an active role in promoting information sharing. To facilitate this process, each of the ten regional offices should exchange information with each of the other regional offices and then should report back to the states within their region what other states are doing. ACF could also make curricula developed with federal funds available to states that do not have their own. **We recommend that ACF's role in managing this program include greater emphasis upon information sharing. This practice would allow Coordinators in relatively isolated states, which also tend to be the states with weaker programs, to learn about model program practices.**

4) Federal Government Downsizing:

ACF should explore the possibility of contracting with an outside provider to provide centralized services to the states.

There is arguably a need for centralized services, such as an Independent Living-ACF computer network, a central depository of information, and/or an annual federal report summarizing states activities, to assist states in managing their programs. On the other hand, the Clinton Administration's efforts to reduce the size of federal government limits the capacity of ACF to take on new staff functions. Thus, if ACF opts to provide greater services to state Independent Living programs, these services must be activities that can be realistically provided with the current federal staffing constraints. For example, dissemination of information is an activity that can be undertaken with the current staffing levels. **Alternatively, ACF could use a portion of the total Independent Living budget to contract with an external agency to provide centralized services to states. This approach would allow ACF to maintain existing staff levels and responsibilities, while providing greater services to state programs.**

5) "Floor" Funding Levels:

ACF should set aside funds to pay for a full-time Coordinator for each state.

The Independent Living Program's funding allocation formula is specified by the program's authorizing legislation. We noted two difficulties states experience with the present formula. First, the formula is based upon the number of IV-E certified children in each state had in care in *1984*. Second, as indicated by our findings above, a "threshold effect" seems to adversely impact the quality of programs in states with small absolute allocations. Although we recognize that changes to the formula require legislation and are therefore beyond ACF's immediate control, **we suggest that ACF consider recommending a minimum level allocation for each of the fifty states and to the District of Columbia, such that each state program can afford to both employ a full-time Coordinator *and* provide services.**

6) Outcomes:

ACF should require that states specify their own goals and track their progress towards them.

Clearly, one of this program's weakest areas is the lack of information regarding outcomes for youth. Although the Westat report indicated that the program has the *potential* of being effective, none of the programs we interviewed, with the possible exception of state E1, were able to report that their Independent Living program was making a difference for those youth that received services. This is not to say that the other programs are not also effective, but rather that they are unable to offer convincing evidence of their effectiveness.

All states should be required to demonstrate that they are using the funds in the manner and to the effect intended by Congress. Outcome measurement is essential to assess whether federal funds are being spent effectively and to assess whether the program warrants continued funding amidst competing budget priorities. We therefore recommend that ACF take steps to improve outcome measurement and assessment. In light of the fact that each of the states has developed different programs, it may not be appropriate to require each to report on the same indicators or outcomes. Instead, **we recommend that ACF require each state to individually specify its Independent Living program goals, outline how the successful completion of these goals will be measured, outline the service components that will allow their goals to be achieved, and to detail in their annual reports how effective their programs actually were in achieving those goals.**

APPENDIX A

Program History

A significant piece of legislation, the "Adoption Assistance and Child Welfare Act" of 1980 (PL 96-272), launched a new era in child welfare practice; an era in which out-of-home placement of children was discouraged and family reunification efforts were supported. PL 96-272 has been considered very successful in reducing the number of children living in foster care for very long periods of time. However, the children who have benefitted are generally the younger children in foster care.

"In 1984, approximately 40 percent of the more than 275,000 children in foster care in the United States were between 13 and 20 years of age. Fewer than one in four of these adolescents was likely to return to his or her own home."[1] Permanency planning for teenage youth in foster care therefore frequently consists of short-term placement in substitute care as preparation for the youths' transition to living on their own once they reach the age of emancipation.

A strand of child welfare programming developed in a relatively ad hoc manner in various states to provide independent living or emancipation services to youth. Twenty-two states had policies addressing foster care youth independent living issues prior to 1987.[2]

In 1986 the US Congress approved funding for a two-year federal programmatic initiative to address the independent living needs of foster youth who would be "aging out" of the foster care system. Title IV-E of the Social Security Act was amended by PL 99-272 (Consolidated Omnibus Budget Reconciliation Act of 1985) on April 7, 1986 to include Section 477, also known as the Independent Living Initiative. Section 477 authorized funding of independent living services for youth aged 16 to 18 receiving Title IV-E foster care maintenance payments. The legislation entitled states to a share of $45 million in federal monies in both 1987 and 1988 to implement independent living programs.

The Independent Living Initiative got off to a rocky start. The Reagan administration was loath to launch yet another "categorical services program", and indeed tried to divert the funds to other existing programs. The administration was slow to implement the new initiative and did not issue a Program Instruction or release funds to the states until mid-1987.

Congress reauthorized and expanded the program in 1988. In that year PL 100-647 was passed which allowed states to use the monies in fiscal years 1989 and 1990 to serve all foster youth aged 16-18 (not just Title IV-E eligible youth) and allowed states to serve youth up to six months after emancipation from state care.

By 1990, all States had developed an independent living program plan.[3] In 1990 Congress also passed PL 101-508 which increased the funding for the program to $50 million in fiscal year 1990, $60 million in fiscal year 1991, and $70 million in fiscal year 1992. The states were required to provide a fifty percent match beginning in fiscal year 1991 for federal funding that exceeds their original allocation at the $45 million funding level. PL 101-508 also allowed the states to expand their programs to serve eligible individuals up to the age of 21.

In 1993, as part of the Omnibus Budget Reconciliation Act of that year, (PL 103-66) Congress permanently reauthorized the Independent Living Program at the $70 million level, effective fiscal year 1993. States remain

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[1] "Independent Living Services for Youths in Foster Care," Social Work, November-December 1988, p. 539

[2] The 1991 Green Book, Committee on Ways and Means, U.S. House of Representatives, p. 808

[3] The 1991 Green Book, p. 808

entitled to their share of the base $45 million allocation, but must provide a 50 percent match for their allocation from the additional $25 million supplemental funds.[4]

[4] "Program Instruction," Administration for Children and Families, Log Number ACYF-PI-93-16, 12/10/93, p. 3

APPENDIX B

A.C.F. Central Office Staff

Irene Hammond, Children's Bureau, 11/30/94
Cynthia Walker, Children's Bureau, 11/30/94
Lucille McCluney, Children's Bureau, 12/1/94
Mike Ambrose, Children's Bureau, 11/30/94, 12/2/94
Joanne Moore, Office of Financial Management, 12/1/94

Federal Regional Office Contacts

Ron Ledoux, Region I, 1/17/95
Bob Mead, Region VII, 1/31/95
Alfred Brown, Region IX, 2/1/95
John McKinstry, Region II, 2/2/95
Cathy Panek et al., Region V, 2/2/95
Vicki Wright, VIII, 2/2/95
Steve Ice, Region X, 2/2/95
Charles Yates et al., Region VI, 2/3/95
Bessie Barnett, Region IV, 2/6/95
Dolores Smith, Region III, 2/6/95

Outside Experts

David Veroff, formerly with the Department of Health and Human Services' Office of Inspector General, 11/23/94, 1/20/95
Robin Nixon, Child Welfare League of America, 12/1/94
Claudia Lewis, M.S.W., Prince George's County, Maryland, 12/2/94
Becky Copeland, National Resource Center for Youth Services, University of Oklahoma, 12/9/94
Ronna Cook, Westat Inc., 12/16/94
Ron Ferguson, Assistant Professor of Public Policy, John F. Kennedy School of Government, 4/5/95

APPENDIX C

QUESTIONS FOR FEDERAL REGIONAL ILP "CONTACT PERSONS"

Region: ______________________________

Interview conducted with: ______________________________

Interview conducted by: ______________________________

Date: ______________________________

1) What programs fall under the purview of your Regional Office?

2) Are staff assigned specifically to review the ILP program? If so, on what basis are they assigned?

3) What other functions do these staff people carry out? (perhaps also involved in Title IV-B, Fam. Pres., or TLP?)

4) What is the turnover for these positions?

5) This is a hypothetical question. If all of the child welfare programs were rolled into a "block grant" federal pass through program, what role would you anticipate the regional offices playing in managing those funds?

6) How are oversight and other responsibilities split between your Regional office and the Central Office? Does the present division of responsibilities work well?

7) Who do you work with most closely in Central office? How often do you communicate?

8) Does the central office play a role in reviewing state plans and reports or do the regional offices have sole discretion in this area?

9) Do you have a regular procedure or timetable for "touching base" with states - perhaps via regular phone calls, an annual visit, or a more formal review? How frequently does contact occur?

10) What tools do you utilize to review programs? Are these standardized tools?

11) Do regional staff have contact with state ILP coordinator only or do they work with other state staff as well?

12) If ILP funds are dispersed to a subcontractor within a state, does the regional office monitor the subcontractor or ensure that the state monitors the subcontractor?

13) Do the Regional office staff play a role in technical assistance? If so, please describe.

14) Is there a mechanism in your region for information sharing amongst states?

15) Who does the financial monitoring of programs?

16) What do you check for in the annual applications?

17) What do you check for in the annual reports?

18) What do you think of the program's open-ended guidelines? What effect do these guidelines have on program monitoring activities?

19) Provide examples of exemplary, typical, and bad programs. What type of assistance do they need?

20) In general, in comparison to other programs you are familiar with, does the ILP program run well?

APPENDIX D

QUESTIONNAIRE FOR STATE INDEPENDENT LIVING COORDINATORS

State: ______________________________
Interview conducted with: ______________________________
Interview conducted by: ______________________________
Date: ______________________________

I. Organization/Structure

We'd like to know a little about the organization of your state's program.

1) Where in your state's overall child welfare structure do the Independent Living Program and the Independent Living Coordinator fit in?

2) At what level is the program supervised and administered (i.e. state, county, region, etc.)

3) What are the basic responsibilities at each level in your state (i.e. policy development, monitoring, contract administration, direct services, etc.)

4) The federal government has asked states to designate a "state coordinator" to serve as a contact for this program.

a. In your state, is the Coordinator a state employee?

b. Is the Coordinator a full-time or a part-time position?

c. What portion of the Coordinator's time is devoted to the Independent Living Program?

d. How long has this person been in this position? How many people have held this position since 1987?

e. What responsibility does the Coordinator have for planning the program?

f. What responsibility does the Coordinator have for oversight of the program?

5) Are there central office Independent Living staff in addition to the Coordinator?

6) Now that Independent Living has been permanently reauthorized, do you anticipate changes in the staffing levels or patterns?

II. Population Served

1) How many kids are there in your eligible population?
   a. What percentage of these are 16-18?, 18-21?

2) Roughly what percentage of the eligible population are you currently serving?

3) Has your state prioritized populations to be served? If so, according to what criteria?

4) What screening mechanisms do you use to determine your target population?
   a. Do you conduct a needs assessment?

   b. What assessment tool do you use?

   c. Do you do pre- and post-assessments?

   d. What level of need allows someone to be served?

5) Would your state like to serve more kids? If so, what do you think it would take to allow you to do so?

III. State Planning Process

1) Did your state have a program addressing independent living issues in place before the Federal funds became available in 1987? If yes, please tell us about it.

2) When federal funds became available, who was involved in the planning of how to utilize and leverage the money?

3) How are Independent Living funds incorporated:

a. Into the overall Child Welfare service continuum?

b. Into other programs serving youth?

4) In rough terms, what percentage of the overall child welfare budget does the Independent Living program constitute?

5) Is your state's Independent Living planning process separate from the planning for other child welfare programs? If your state has joint planning currently, in what way does the Independent Living Coordinator participate in that planning?

6) Do program participants (foster care youths) participate in any formalized way in state program planning?

7) Does your state have an Independent Living Program mission? If so, please describe.

8) Do you issue statewide program guidelines or regulations?

9) In what ways were the open-ended federal program guidelines beneficial or confusing in designing and operating a state program?

10) Does your state use all of its federal Independent Living allocation? If not, why not?

11) Does the state fund Independent Living above and beyond the federal match requirements?

12) This program has now been permanently reauthorized. Will this permanent authorization change:
 a. your state's planning process?

 b. the amount of money your state requests/matches?

IV. Service Mix

We'd like to know a little bit about the content of your state's program.

1) How does your state define "service" in the context of this program?

2) Why did you choose the current service mix?

3) (Roughly) What portion of the available funds are used for each component of your service mix?

4) Please give us a rough ranking of the importance of each element of your service mix.

5) (Roughly) What is the cost of service per child? (Is the "cost/child" figure just for "service" as defined above in question 1 or does it include overhead costs?)

V. Oversight

1) What data does the state collect about the eligible kids and the kids who actually receive services?

2) In how much detail does your state track the direct services kids receive?

3) Does your state have a formal mechanism in place for the ongoing or periodic review of individual case files to determine if independent living needs have been addressed?

4) What outcomes do you track for service recipients?

5) Does your state conduct follow-up evaluations of service recipients beyond the 90-day requirement?

6) Legislation has required judges to check that independent living issues are being addressed in each youth's case plan. Is this check up and running in your state?

7) If services are not centrally provided, how does the state monitor counties or private contract service providers?

8) How do you use the information that you collect about your program?

9) What other data does the state collect on this program? Does the state have reporting requirements other than the federal requirements, and if so what are they?

10) Does your Independent Living program have a computer information system? If so, how do you use it?

VI. External environment

1) Who are the stakeholders for the Independent Living Program in your state?
   a. Are there private advocacy organizations? If so, whom do they represent? (kids, agencies, etc.)

2) How would you characterize relations with your state legislature? Is the legislature in your state supportive of your Dept. (HHS?) or of child welfare programs in general?

VII. Networks

1) Within your state, are there Independent Living networking groups or associations?

2) How involved is your state in national organizations?

3) Do you exchange information about Independent Living with other states?

4) If your state had questions about "best practise" or alternative service delivery models, who would you talk to?

VIII. Role of the Federal Regional Offices

1) Does your region have a mechanism in place to facilitate information exchange between the states in your region?

2) The central ACF office has devolved responsibility to the regional ACF offices for review and guidance of the Independent Living program. Do you feel this devolution of responsibility has had any implications for your state's program?

3) Ideally, what role would you like to see regional and central ACF offices playing to assist you in managing your Independent Living Program?

IX. Miscellaneous

1) Are there any other issues you would like to address in this discussion?

APPENDIX E

Additional Data

Table 1: State Oversight Practices - Needs Assessments

States' Needs Assessment Practices	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Mandatory Needs Assessment	✓			✓	✓				✓	✓	n/a
Needs Assessment of Most Youth		✓	✓			✓	✓	✓			n/a
Standard Tool Throughout State		✓	✓		✓	✓		✓	✓	✓	n/a
Choice of Needs Assessment Tool	✓			✓			✓				n/a
Pre-Test Only	✓				✓	✓	✓	✓	✓	✓	n/a
Periodic Re-assessments		✓	✓	✓							n/a
No Needs Assessment											✓

Table 2: State Oversight Practices - Client Follow-up

States' Follow-up Practices	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
No Follow-up									✓		✓
90-day Follow-up			✓		✓		✓	✓		✓	
90-day and 180-day Follow-up				✓		✓					
90-day, 180-day, 1 year, and 2 year Follow-up	✓	✓									

Table 3: State Oversight Practices - Policies and Guidelines

States' Practice Regarding Policies or Guidelines	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
No Policies or Guidelines	✓						✓				
Guidelines		✓	✓			✓					
Policies Which are Mostly a Reiteration of the Federal Guidelines								✓			✓
Additional Policies				✓	✓				✓	✓	

Table 4: State Oversight Practices - Subcontractor Monitoring

States' Practice Regarding Subcontractor Monitoring	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
Issues Contractor Guidelines			✓								
Includes Contractors in Child Welfare Staffings			✓								
Statewide Contractor Meetings		✓	✓				✓				
Requires Regular Reports		✓					✓	✓	✓		
Issues Performance Based Contracts											
Performs On-Site Monitoring		✓	✓	✓							
Requires Outcome Reports		✓	✓					✓			

Table 5: State Oversight Practices - Outcome Reporting

States' Ability to Report Outcomes in FY93 Year-End Reports	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1*	W2	W3	W4
Report % of Total Eligible Youth Served	✓				✓		✓	n/a			
Report Specific Numbers of Youth Receiving Each Service	✓				✓	partially		n/a	✓		
Report on Outcomes for Those Youth Served After 90 Days	✓			partially	✓		partially	n/a		partially	✓

* The FY93 report for state W1 was not available to us.

Table 6: Networks

	Exemplary				Satisfactory			Weak			
	E1	E2	E3	E4	S1	S2	S3	W1	W2	W3	W4
NILA Member	✓	✓		✓		✓	✓	✓	✓		
Active in NILA	✓	✓									
Talks to Other State Coordinators	✓	✓		✓	✓	✓		✓	✓		✓
Talks Frequently with ACF Regional Contact				✓	✓	✓	✓				
Works with Consulants		✓	✓			✓	✓	✓		✓	
State has IL Associations	*		✓	✓	✓		✓				
Regional Meetings						✓					

* Denotes partial fulfillment of this category

Table 7: ACF Offices' Report Review Practices

	Region I	Region II	Region III	Region IV	Region V	Region VI	Region VII	Region VIII	Region IX	Region X
Completes "checklist" only			✓		✓	✓	✓	✓		
Also Checks Report Against Application		✓		✓						
Active Report Review - Makes Suggestions	✓								✓	✓