CHILDREN'S TRUST PROGRAM METRICS TOOL

Version with values & weights – August, 2017

COMPONENTS OVERVIEW – STAFF WHO COMPLETES THE REVIEW AND REVIEW TIMING

Component	Item	TCT Staff	School-Year and Year Round Programs				Summer Only Programs
			Month 1-4	Month 4-8	Month 8-12	Summer Act.	
Safety, Administrative & Fiscal Compliance	Set of contractual requirements that include environmental safety, administrative (policies and staffing) and fiscal compliance. Items out of compliance should be addressed immediately	Contract Manager Accountant	X	X		X	X
Fiscal Health	Fiscal viability: current ratio, Net Asset ratio and Debt ratio	CFO		X	X		X
	Financial statement findings and concerns	CFO		X	X		X
	Program-specific audit findings and concerns	CFO		X	X		X
Staffing	All positions identified in the Scope of Services are filled with qualified staff	Contract Manager	X		X	X	X
	Staff training and supervision are supported within the agency	Contract Manager		X		X	X
Population Focus	Expected inclusion of children and youth with disabilities	Research Analyst	X	X	X	X	X
	Quality of participant demographic data entered in the Trust electronic reporting system	Contract Manager		X	X	X	X
Service Delivery	Content Area Team (CAT) program observation using Initiative Specific Observation tools	Content Area Team	X			X	X
	Contract management activity observations	Contract Manager		X	X	X	X
	Program collects and uses participant feedback	Contract Manager			X		
	Screenings and timely referrals	Research Analyst		X	X		X
	Delivery of contracted program days	Research Analyst		X	X		X
Program Participation	Service utilization: Services offered are being utilized by participants	Research Analyst	X	X	X	X	X
	Engagement: Average participant attendance is in line with expected attendance	Research Analyst		X	X	X	X
	Retention: Contracted number of participants are receiving contracted number of sessions	Research Analyst			X	X	X
	Quality of participant attendance data entered in the Trust electronic reporting system	Contract Manager		X	X	X	X
Participant Outcomes	Participant testing: Outcome measurement tools are administered as contracted	Research Analyst		X	X	X	X
	Outcome achievement: Contracted proportion of participants realize program benefits	Research Analyst			X	X	X
	Quality of participant outcome data entered in the Trust electronic reporting system	Contract Manager		X	X	X	X

X Item to be reviewed <u>if issues were identified</u> during the previous review

Safety, Administrative & Fiscal Compliance

The following items are applicable to all programs and reviewed throughout the contract year, unless specified otherwise.
Note: Items under this component are measured as in or out of compliance. Items don't have weights as they do not produce a rating (Mastery, Advancing, Emerging, and Struggling).

Item	Item Breakdown and Instructions	Answer Options	Value	Weight
Incident Reporting	**Organization must have a policy on incident reporting that is in line with The Trust's Incident Reporting Policy and Procedure.** Incident report policy must be provided <u>during the one to four month review</u> with continued follow-up if needed. • Contract Manager (CM) confirms that the policy is in line with the Trust's policy and provides technical assistance if needed. • CM inquires about any policy updates or changes once per contract year.	The organization has an incident report policy that is in line with the contract with The Children's Trust	4	N/A
		The organization does not have an incident report policy that is in line with the contract with The Children's Trust	1	
Data Security	**Data Security Policy: Organization must have a policy on data security that is in line with the expectations laid out in the contract with The Trust.** Data security policy must be provided <u>during the one to four month review.</u> Policy should include information on how data and confidentiality are handled by the organization and acknowledged by staff. • CM confirms that the policy is in line with the core contract and provides technical assistance if needed. • CM inquires about any policy updates or changes once per contract year.	The organization has a data security policy that is in line with the contract with The Children's Trust	4	N/A
		The organization does not have a data security policy that is in line with the contract with The Children's Trust	1	
	Data Security Evidence: Evidence that policies and procedures are being implemented is observed on a consistent basis CM completes observations during every site visit (e.g., locked file cabinets or doors, password protected computers, restricted access to files).	During the most recent site visit, there was evidence of data security policies and procedures being implemented	4	
		During the most recent site visit, there was evidence of the data security policies and procedures not being implemented	1	
Subcontractor Executed Contracts	**Organization must have executed subcontractor agreement(s) that align with the scope of services.** • CM requests all subcontractor contract agreements or drafts during the contract coordination phase. • A copy of all executed subcontracts must be provided within ninety (90) days of contract execution date with The Trust. • Subcontract(s) must be reviewed to ensure reasonable and accurate description of services and payment methods. • CM reviews executed subcontract agreement(s) once per contract year	All subcontractor agreements were executed within 90 days of contract execution with The Trust	4	N/A
		All subcontractor agreements have been executed, but not within 90 days of contract execution	2	
		One or more subcontractor agreements have not been executed	1	
		N/A – Program has no subcontractors	0	
Background Checks	**All employees, volunteers and subcontracted personnel in direct contact with children must complete a background screening and be cleared prior to starting employment. Staff working without a background check must be removed from the site immediately and must be background checked within five (5) days and prior to returning to work.** <u>For After-school and summer programs</u>: As of July 1, 2016 Afterschool programs may only utilize the DCF Clearinghouse and Live Scan for background screening, and must follow the process outlined by the Office of Child Care Regulation. (No other clearances are acceptable. For example: Letters/ID badges from MDCPS are no longer valid for after school and these employees must be screened using the Clearinghouse). <u>For all other initiatives</u>: While reviewing personnel files during site visit, CM confirms that each file contains one of the following: • Volunteer and Employee Criminal History System Attachment E-1: Affidavit for Level 2 Background Screening from the Florida Department of Law Enforcement • Miami-Dade County Public Schools ID Badge • Department of Children and Families (DCF) or Department of Juvenile Justice (DJJ) clearance letter	All employees that require background checks have background checks	4	N/A
		One or more employees did not have background checks, but the background check was completed within five (5) days of the finding	2	
		One or more employees did not have background checks, and the finding has not been resolved	1	

DCF License	**Sites that serve children from birth to fifth (5th) grade while parents are not present are required to have a DCF license or an exemption.**
	• CM requests DCF license or proof of exemption letter during the contract coordination phase:
	  ○ The address on the document must match the contracted site
	  ○ The expiration dates on the certificates cannot be lapsed
	  ○ If licensed: The allowed capacity must be equal or higher than the contracted number of participants for the site
	  ○ If proof of exemption letter is provided: The DCF ID number must be checked (it will not indicate capacity of children)
	  ○ The current license or exemption must be visibly displayed at the site (it must be observed during site visits).
	• If the present license expires within the next 90 days, CM will request to see proof of renewal application submission.
	• New license or proof of exemption letter must be provided prior to expiration date and updated in the system
		All sites have a current DCF license or an exemption letter	4	N/A

		One site does not have a current DCF license or exemption letter	1	
		Two (2) or more sites do not have a current DCF license or exemption letter	1	
		N/A – Site(s) not required to have a DCF license	0	

Transportation Requirements	**Organization must have all requirements in place prior to transporting children.**
	• CM reviews documentation/personnel driver file(s) regarding transportation of participants during site visit(s). Files must include the following:
	  ○ A current inspection
	  ○ A valid Florida driver's license or Commercial Driver's License (CDL)
	  ○ A valid vehicle registration
	• If the transportation company is on the Miami-Dade County Public School Private Bus Vendor List (An updated list of approved bus companies can be found in the M-DCPS website: http://dot.dadeschools.net/PrivateBus.htm), no further check is needed.
	• For hired vehicles, CM reviews current contractual agreement and inspection and must comply with the Children's Trust contract.
		All transportation requirements are in place	4	N/A

		All transportation requirements are not in place	1	
		N/A – Program does not transport participants	0	
CPR Certification	**Organization must have at minimum one (1) CPR-certified staff member present per site at all times, verified through staff assignment during site visits.** • CM reviews personnel files to identify which staff are CPR certified: ○ CPR certification can be found in the personnel file, posted in a visible place or staff may carry it in their wallet	There was at least one (1) CPR-certified staff member on site during the site visit	4	N/A
		None of the staff on site at the latest site visit were CPR certified	1	
		N/A – Program does not serve children without parent/caregiver in attendance	0	
		N/A – Item is reviewed by the Department of Health	0	
Environment Safety	**Physical environment must meet minimum safety requirements.** CM checks the following during all site visits: • There must be at least one (1) first aid kit accessible and visible from the site • All entrances must be supervised for security during program hours (for YAS programs) • Indoor and outdoor areas are free of debris and/or clutter	During the latest site visit, the physical environment met the minimal safety requirements	4	N/A
		During the latest site visit, the physical environment did not meet the minimal safety requirements	1	
		N/A - Administrative Site	0	
		N/A – Home Visiting programs	0	
		N/A – Item is reviewed by the Department of Health	0	
			4	N/A

Financial Statement Audit Submission and Format	**Financial Statement Audit submission** Organization must submit their annual financial statement in accordance with the requirements included in the Children's Trust contract. The finance department updates and enters whether the financial statement audit was submitted on time.	Financial statement audit was submitted on time		
		Financial statement audit was submitted late	2	
		Financial statement audit has not been submitted.	1	
	Financial Statement Audit format Organization must submit their annual financial statement in accordance with the requirements included in the Children's Trust contract. The finance department updates and enters whether the financial statement audit is in the correct format and in accordance with *Government Auditing Standards*.	Financial statement audit was submitted using the correct format	4	N/A
		Financial statement audit was submitted using the incorrect format	2	
Program Specific Audit Submission and Format	**Organization must submit program specific audit in accordance with the requirements included in the Children's Trust contract.**			
	Program Specific Audit Submission The finance department updates and enters whether the Program specific audit was submitted on time.	Program specific audit was submitted on time	4	N/A
		Program specific audit was submitted late	2	
		Program specific audit has not been submitted	1	
	Program Specific Audit Format The finance department updates and enters whether the Program specific audit is in the correct format.	Program specific audit was submitted using the correct format	4	N/A
		Program specific audit was submitted using the incorrect format	2	
Invoicing Submission & Timeliness	**Organization must submit monthly invoices in accordance with the requirements included in the Children's Trust contract.**			
	Invoices Submission Invoice submission information is tracked through SAMIS and imported into the Program Metrics System to determine whether invoicing is up-to-date: the most recent invoice due was submitted.	Program's submission of monthly invoices is up to date	4	N/A
		Program's submission of monthly invoices is not up to date	1	
	Invoices Timeliness Invoice submission information is tracked through SAMIS and imported into the Program Metrics System to determine whether monthly invoices have been submitted in a timely manner.	Monthly invoices have been submitted in a timely manner	4	N/A
		Monthly invoices have not been submitted in a timely manner (More than 2 invoices were submitted beyond the due date)	2	
Insurance Policy	**Organization must have active insurance policies that are in accordance with the requirements included in the Children's Trust contract.** The finance department updates and enters this information into Contract Analyst on a regular basis. Information is automatically uploaded into the Program Metrics System.	All required insurance policies are current	4	N/A
		One or more required insurance policies are not current	1	
Auditor Engagement Letter	**Organization must provide agreement with independent Certified Public Accounting (CPA) firm to conduct an annual financial statement audit and a program specific audit within thirty (30) days of the organization's fiscal year end date.** The finance department updates and enters this information into the Program Metrics System. The finance department updates and enters this information into the Program Metrics System.	Engagement letter was submitted on time	4	N/A
		Engagement letter was submitted late	2	
		Engagement letter has not been submitted	1	

Fiscal Health

The following guidelines are to be used by the Finance Director when reviewing the financial statement and the program specific audits. This review will take place annually within a month of the audits' due date.

Item	Item Breakdown and Instructions	Answer Options	Value	Weight
Fiscal Viability	**Current Ratio** This is a liquidity ratio that measures a company's ability to meet short and long-term obligations. Calculation: $\frac{\text{Current Assets}}{\text{Current Liabilities}}$	Current assets are greater than or equal to 150% of current liabilities - There are significant current assets available and the organization is in position to meet all of its current obligations	4	4
		Current assets are between 120-149% of current liabilities - There are adequate current assets available and the organization should be able to meet all of its current obligations. Since the current ratio improved 10% from the previous year, a bonus point will be assessed for this measure	4	
		Current assets are between 120-149% of current liabilities - There are adequate current assets available and the organization should be able to meet all of its current obligations	3	
		Current assets are between 110-119% of current liabilities - There are adequate current assets available, however, there is some concern that the organization cannot meet all of its current obligations. Since the current ratio improved 10% from the previous year, a bonus point will be assessed for this measure	3	
		Current assets are between 110-119% of current liabilities - There are adequate current assets available, however, there is some concern that the organization cannot meet all of its current obligations	3	
		Current assets are between 100-109% of current liabilities - The current asset balance slightly exceeds current liabilities, however, there is significant concern that the organization cannot not meet all of its current obligations. Since the current ratio improved 10% from the previous year, a bonus point will be assessed for this measure	3	
		Current assets are between 100-109% of current liabilities - The current asset balance slightly exceeds current liabilities, however, there is significant concern that the organization cannot not meet all of its current obligations	2	
		Current assets are less than 100% of current liabilities - Current liabilities exceed current assets and there is severe concern that the organization cannot meet its current obligations. Since the current ratio improved 10% from the previous year, a bonus point will be assessed for this measure	2	
		Current assets are less than 100% of current liabilities - Current liabilities exceed current assets and there is severe concern that the organization cannot meet its current obligations	1	
	Net Asset Ratio This ratio measures a company's ability to use reserve or emergency funds to sustain its operational activity. Calculation: $\frac{\text{Net Assets}}{\text{Total Annual Expenditures}}$	Net assets are greater than or equal to 15% of total operating expenses - There are significant net assets available to sustain operational activity for a limited time if a significant revenue source is lost	4	4
		Net assets are between 11-14% of total operating expenses - The net assets balance will sustain operational activity for a limited duration if a significant revenue source is lost	3	
		Net assets are between 8-10% of total operating expenses - The net assets balance will sustain operational activity for a short duration if a significant revenue source is lost	3	
		Net assets are between 5-7% of total operating expenses - The net assets balance will sustain operational activity for a very short duration if a significant revenue source is lost	2	
		Net assets are less than 5% of total operating expenses - The net assets balance and will not sustain operational activity if a significant revenue source is lost	1	

	Debt Ratio This ratio measures the organization's ability to meet its current obligations. Calculation: $\frac{\text{Current Liabilities}}{\text{Total Annual Expenditures}}$	Current liabilities are between 5-9% of total operating expenses - The current liabilities balance when compared to total annual expenditures indicates that the organization is meeting its current obligations	4	4
		Current liabilities are between 10-17% of total operating expenses - The current liabilities balance when compared to total annual expenditures indicates that the organization is meeting most of its current obligations	3	
		Current liabilities are between 18-24% of total operating expenditures - The current liabilities balance indicates some concern that the organization may not be capable of meeting its current obligations	3	
		Current liabilities are between 25-35% of total operating expenditures - The current liabilities balance is significant when compared to total annual expenses. This indicates that the organization may not be capable of meeting its current obligations	2	
		Current liabilities are greater than 35% of total operating expenditures - The current liabilities balance is severe when compared to total annual expenditures. This indicates that the organization may not be capable of meeting its current obligations	1	
Financial Statement Findings and Concerns	**Financial Statement Footnote Disclosures** Organizations are expected to create and implement a program and professional Footnotes are explanatory and supplemental notes that accompany the financial statements issued by an organization. The nature and amount of footnotes will vary, depending upon the financial framework used to construct the financial statements.	There were no findings or concerning disclosures noted in the footnotes of the financial statements	4	1
		There were some findings or concerning disclosures noted in the footnotes of the financial statements. The Trust does not find this concerning due to their infrequency and immaterial nature	3	
		There were some findings or concerning disclosures noted in the footnotes of the financial statements. The Trust finds them concerning due to their frequency, however the findings are immaterial in nature	2	
		There were several findings or concerning disclosures noted in the footnotes of the financial statements. The Trust considers these disclosures to be severe due to their frequency or significantly concerning nature	1	
	AU-C 265 Letter (Communicating Internal Control Related Matters Identified in an Audit) This Letter is intended to communicate all identified significant deficiencies or material weaknesses in the organization's internal controls.	There were no findings or concerning disclosures noted in the AU-C 265 Letter	4	1
		There were some findings or concerning disclosures noted in the AU-C 265 Letter. The Trust does not find this concerning due to their infrequency and immaterial nature	3	
		There were some findings or concerning disclosures noted in the AU-C 265 Letter. The Trust finds them concerning due to their frequency however, the findings are immaterial in nature	2	
		There were several findings or concerning disclosures noted in the AU-C 265 Letter. The Trust considers these disclosures to be severe due to their frequency or significantly concerning nature	1	
	AU-C 260 Letter (Auditor's Communication With those Charged With Governance) This Letter is intended to communicate to those charged with governance (such as the Board of Directors, Auditee Committee, President, or Management) the scope of audit procedures, significant findings, disagreements with management, audit adjustments, passed journal entries and significant estimates that aren't communicated in the audited financial statements.	There were no findings or concerning disclosures noted in the AU-C 260 Letter	4	1
		There were some findings or concerning disclosures noted in the AU-C 260 Letter. The Trust does not find this concerning due to their infrequency and immaterial nature	3	
		There were some findings or concerning disclosures noted in the AU-C 260 Letter. The Trust finds them concerning due to their frequency however, the findings are immaterial in nature	2	
		There were several findings or concerning disclosures noted in the AU-C 260 Letter. The Trust considers these disclosures to be severe due to their frequency or significantly concerning nature	1	

	OMB Circular A-133 Audit (Single Audit, if applicable) The Single Audit provides assurance to federal and/or state governments as to the management and use of funds provided by those governments. It encompasses both financial and compliance components.	There were no findings and recommendations included in the OMB Circular A-133 audit report	4	1
		There were some findings or concerning disclosures noted in the OMB Circular A-133 audit report. The Trust does not find this concerning due to their infrequency and immaterial nature	3	
		There were some findings or concerning disclosures noted in the OMB Circular A-133. The Trust finds them concerning due to their frequency, however the findings are immaterial in nature	2	
		There were several findings or concerning disclosures noted in the OMB Circular A-133 audit report. The Trust considers these disclosures to be severe due to their frequency or significantly concerning nature	1	
		N/A- The organization was not required to have an OMB Circular A-133 audit report	0	
	Letter Issued to Management This is a comprehensive letter with operational recommendations. Required communications include control deficiencies, however, management letters can include additional professional advice.	There were no findings and recommendations included in the issued management letter	4	1
		There were some findings or concerning disclosures noted in the issued management letter. The Trust does not find this concerning due to their infrequency and immaterial nature	3	
		There were some findings or concerning disclosures noted in the management letter. The Trust finds them concerning due to their frequency however, the findings are immaterial in nature	2	
		There were several findings or concerning disclosures noted in the issued management letter. The Trust considers these disclosures to be severe due to their frequency or significantly concerning nature	1	
		N/A- The auditor did not issue a separate management letter	0	
Program Specific Audit Findings and Concerns	**Independent Auditor's Report on Compliance for the Children's Trust Contracts and Report on Internal Control Over Compliance** This letter reports any findings or instances of noncompliance with the requirements described in the Children's Trust contract.	There were no findings or concerning disclosures noted in the compliance report	4	1
		There were some findings or concerning disclosures noted in the compliance report. The Trust does not find this concerning due to their infrequency and immaterial nature	3	
		There were some findings or concerning disclosures noted in the compliance report. The Trust finds them concerning due to their frequency, however the findings are immaterial in nature	2	
		There were several findings or concerning disclosures noted in the compliance report. The Trust considers these disclosures to be severe due to their frequency or significantly concerning nature	1	
	Children's Trust Contract(s): Schedule of Findings and Questioned Costs This schedules reports any findings, overbillings or questioned costs discovered during program-specific audit procedures.	There were no findings, questioned costs or overbillings noted in this schedule	4	1
		There were some findings or concerning disclosures noted in the schedule. The Trust considers these disclosures to be less severe due to their infrequency and immaterial nature	3	
		There were some findings or concerning disclosures noted in the schedule. The Trust finds them concerning due to their frequency however, the findings are immaterial in nature	2	
		There were several findings or concerning disclosures noted in the schedule. The Trust considers these disclosures to be severe due to their frequency or significantly concerning nature	1	
Critical Findings	**Item indicates whether critical findings were identified in the audit evaluation** Specific findings will be notes in the comments section following the item.	There are critical finding(s) identified in the audit evaluation	1	100
		N/A – No critical findings identified in the audit evaluation	0	

Staffing

Review of ten (10) personnel files (including volunteers and subcontractors) during site visit (If program has a lower number of staff, then all files are reviewed).

- **School year** and **year-round** programs: review takes place during months one and four of the contract year. If issues are identified, review is completed again between months five and eight, and months nine and ten, if issues persist. For the **summer** portion of **school year and summer,** and **summer only** programs, this review takes place between the months of June and July.

Item	Item Breakdown and Instructions	Answer Options	Value	Weight
All positions identified in the Scope of Services are filled with qualified staff	**Staff Hired** Timing: Item will be reviewed during one to four month review. All program staff should be hired, especially staff holding key programmatic positions needed to carry out the required components/services of the program. • CM reviews the Position Management module in SAMIS against the Staffing Table in the Scope of Services.	All positions identified in the Scope of Services are filled	4	4
		One or more positions are vacant at this time, but all key positions are filled	3	
		Less than 15% of positions are vacant at this time, including key positions	2	
		15% or more of positions are vacant at this time, including key positions	1	
	Staff Continuity (Test item- Does not have weight) Timing: Item will be reviewed during eight to twelve month review. Not- applicable to **summer** portion of YAS **school year and summer,** and **summer only programs.** All program staff identified during one to four month review, are retained throughout the contract year. Calculation: $\frac{\text{Total \# of same program staff still employed}}{\text{Total \# program staff identified at start of contract year}}$	90% or more of program staff were retained throughout the contract year	4	0
		80%- 89% of program staff were retained throughout the contract year	3	
		70%- 79% of program staff were retained throughout the contract year	2	
		Less than 70% of program staff were retained throughout the contract year	1	
	Vacancies Support and Hiring Strategy When one or more vacancies are identified, the provider should have a plan to fill them in a timely manner and support affected services in the meantime. CM has a conversation with the provider inquiring about the following: • Steps that have been taken to ensure program implementation is not compromised due to existing vacancies • Progress to fill existing vacancies	Program implementation is not compromised during vacancies and progress has been made toward filling all vacant positions	4	2
		Program implementation is not compromised during vacancies; however, process to fill vacant positions has not been initiated	3	
		Program implementation has been compromised during vacancies; however, progress has been made toward filling all vacant positions	2	
		Program implementation has been compromised during vacancies and process to fill vacant positions has not been initiated	1	
		N/A – No vacant positions at this time	0	
	Staff Qualifications Staff's requirements should be aligned with the Staffing Table in the Scope of Services. While reviewing personnel files during site visit, CM reviews proof of: • Certifications/licensures (including teacher certifications) • If implementing an Evidence Based Program (EBP), there must be proof of staff attending EBP training	All staff meet the qualifications required for the position	4	3
		One or more staff don't meet the qualifications; however, all key staff are qualified	3	
		Less than 15% of staff don't meet the qualifications, including key staff	2	
		15% or more staff don't meet the qualifications, including key staff	1	
Staff training and supervision	**Attendance to Professional Development Trainings** (Test item- Does not have weight) Providers must ensure staff and subcontractors meet expectations around continuous professional development by attending trainings sponsored by The Trust or other entities. The Trust provides a list of available trainings where expectations for specific staff are identified. Find list of trainings per initiative here • Staff attendance to trainings will be collected in the reporting system. • CM pulls the trainings attendance report during months eight (8) and twelve (12) of the contract year.	All staff attended all required trainings over the past twelve months	4	0
		80-99% of staff attended all required trainings over the past twelve months	3	
		80-99% of staff attended at least half of required trainings over the past twelve months	2	
		60-79% of staff attended all required trainings over the past twelve months	2	
		Less than 60% of staff attended all required trainings over the past twelve months	1	

	are supported within the organization	**Staff Supervision** The organization should have a written supervision policy or plan that includes staff observation and regular feedback. Evidence of the plan/policy being implemented must be provided. • CM reviews the organization's policy or plan. • CM reviews documentation of regular individual or group supervision. Documentation <u>may</u> include (but is not limited to): ○ Written goals, agendas/minutes, sign-in sheets, evidence of regular supervision and observation feedback	There is a staff supervision plan that includes staff observation and regular feedback, and there is evidence of the plan being implemented consistently	4	3
			There is no staff supervision plan, however, there is evidence of regular supervision including staff observation and feedback	3	
			There is a staff supervision plan that includes staff observation and regular feedback ; however, there no evidence of the plan being implemented consistently	2	
			There is no staff supervision plan that includes staff observation or regular feedback	1	

Population Focus

Items will be reviewed twice: One time during months one and two of the contract year and a second time during months eight and ten , with continued follow up if needed

Item	Item Breakdown and Instructions	Answer Options	Value	Weight
Expected Inclusion of Children and Youth With Disabilities	**The actual percentage of children/youth with disabilities (CWD) being served is in line with the contracted in the Scope of Service** Applicable to: After-school and summer, Youth enrichment, Parenting and Service partnerships programs. Timing: One time at month three of the contract year and a second time during the eight to twelve month review, with continued follow up during month six if needed. Calculation: • After-school and Summer and Youth Enrichment programs: Actual % of CWD recruited / Contracted % of CWD to be served • Service Partnership and Parenting programs: Actual % of families with CWD recruited / Contracted % of families with CWD to be served Note: If a program is contracted to serve 50% CWD or more, the number of CWD contracted will be used instead of actual % of CWD recruited	Provider recruited 100% or more of the contracted percentage of families/children/youth with disabilities	4	4
		Provider recruited 85% to 99% of the percentage of families/children/youth with disabilities contracted to be served	3	
		Provider recruited 70% to 84% of the percentage of families/children/youth with disabilities contracted to be served	2	
		Provider recruited less than 70% of the percentage of families/children/youth with disabilities contracted to be served	1	
		N/A: No target for % of families/children/youth with disabilities to be served	0	
	Engagement of CWD served by the program (Exploratory phase: Not included in rating) Applicable to: After-school and summer, and youth enrichment programs Calculation: Percentage engagement of CWD	**TBD**		
Quality of participant demographic data entered in the Trust electronic reporting system	**Electronic participants' demographic data entered in SAMIS <u>matches</u> the data available in the participants' registration form in the participants' physical files.** Applicable to: All programs collecting and reporting participant demographics. Item reviewed through participant file review during site visits: Review of ten participant files (15 files if program serves more than 200 participants). • **School year** and **year-round** programs: File review during site visit takes place between months four and eight of the contract year. <u>If issues are identified (13% or more data errors)</u>, review is completed again between months eight and twelve. • For the **summer** portion of **school year and summer**, and **summer only** programs, this review takes place between the months of June and July • Prior to site visit, CM runs the "Site Visit data Review" report which randomly pulls ten to fifteen participants from SAMIS and includes the demographic fields entered in SAMIS for each participant. • CM checks the demographic fields in the participant's registration form in the file against the demographics fields in this report while at the site visit. Calculation: Total # of demographic fields entered correctly Total / number of possible demographics fields	96-100% of participant demographics match data entered in the system	4	2
		88-95% of participant demographics match data entered in the system	3	
		81-87% of participant demographics match data entered in the system	2	
		80% or less of participant demographics match data entered in the system	1	

		For Insurance enrollment Programs: • Prior to the site visit, CM runs the "Insurance Enrollment Activities" report for a month period filtering applications submitted over 45 days • CM selects 20 cases with mixed applicants' type and disposition status Calculation: $\frac{\text{Families who have at least one child in household}}{\text{Total number of families being served}}$	N/A – Provider does not enter demographics at the participant level	0	

Service Delivery

The following guidelines are to be used by the Contract Manager when observing providers' implementation of activities during site visits (these are separate and complementary to the Content Area Team (CAT) observations). The items below are applicable to all programs unless specified otherwise.

- **School year** or **year-round programs** will have one observation between months four and eight. If program has four or more sites, CM should visit two sites. CM should visit different sites during subsequent review periods (if applicable).

CM are expected to observe at least one activity for its full duration

EACH OBSERVATION WILL BE ENTERED AS A SEPARATE ASSESSMENT IN THE METRICS WEB-BASED SYSTEM.

Item	Item Breakdown and Instructions	Answer Options	Value	
Contract Management Observation Guidelines	**Ratios and Group Size** AFTER-SCHOOL, SUMMER AND YOUTH ENRICHMENT PROGRAMS • Is the number of direct service staff assigned to the participants' supervision in alignment with the contracted staff/child ratios in the staffing table in the scope of services or in site table? (If children are divided into groups based on the activity, ratios can vary, but overall ratio expectation must be met.) • Smaller ratios for inclusion of children with disabilities or for specific activities may be required based on the scope of services. • Staff in direct care should be at least 18 years old. OTHER PROGRAMS Ratio/Group Size refers to the expectations included in the scope of services (staffing table) or in the specific Evidence Based Program (EBP) • Home Visiting/Individual services: Caseloads for home visitors/direct staff (this is part of a desk review instead of a direct observation) • Group: Recommended group size and number of facilitators	The staff/participant ratios or group size are in accordance with the contracted scope of services or best practices	4	2
		The staff/participant ratios or group size are not in accordance with the contracted scope of services or best practices	1	
		N/A- Unable to determine appropriate staff/participant ratio	0	
	Activities Delivered as Contracted Considers whether the schedule of activities observed aligns with the overall description (including fidelity to EBPs or curricula being implemented), frequency, and intensity proposed in the scope of services. • CM requests schedule per group prior to the site visit ○ Check schedule to ensure it aligns with the activities' frequency and intensity in the scope of services (If applicable) • Observation during the site visit: ○ Was the activity description aligned with what was observed? ○ Did the activity meet the expected intensity? Did it start and end on time? ○ Did the activity appear to be delivered with fidelity to evidence-based practices/strategies and/or curricula as found in the scope of services?	Activities observed were delivered as contracted	4	3
		As compared to the scope of services, activities observed were delivered with some inconsistencies	2	
		Activities observed were not delivered as contracted	1	
	Staff/Facilitator Knowledge and Preparation Considers whether the observed staff/facilitator appears knowledgeable, prepared, and is able to facilitate the session as well as the participants' understanding of the content covered. • CM should consider the following during the activity observation: ○ Did the facilitator/staff appear prepared to deliver the lesson or guide the activity? Did the facilitator/staff seem knowledgeable on the subject matter? ○ Did the lesson/activity flow? • Did the facilitator ensure participant understanding and find alternative/creative ways to explain concepts to facilitate participants understanding?	Staff/facilitator appeared knowledgeable and prepared	4	2
		Staff/facilitator appeared knowledgeable but was unprepared	2	
		Staff/facilitator did not appear knowledgeable and was unprepared	1	

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<tr><td rowspan="12"></td><td rowspan="2">Materials
Considers whether there are developmentally appropriate and culturally sensitive materials available to all participants.
CM should consider the following during the activity observation:
Did the staff have all materials needed for the session to begin? Examples may include audio/visual equipment, handouts, supplies, toys, etc. Were there sufficient materials for all participants?
Were the materials in good condition?
Were the materials developmentally appropriate? (If applicable) Were the materials reflective of the population being served and culturally sensitive? Were the materials available in the participants’ preferred language? (If applicable)</td><td>Materials used during the observed activity were adequate (amount, characteristics, quality)</td><td>4</td><td rowspan="2">1</td></tr>
<tr><td>Materials used during the observed activity were inadequate (amount, characteristics, quality)</td><td>1</td></tr>
<tr><td rowspan="3">Staff-Participant Interactions
Considering questions related to the staff/facilitator’s familiarity with participants, verbal communication and non-verbal cues that facilitate interaction and support participant active engagement, interaction with children with disabilities, and cultural competency.
During the observation, CM must identify the main facilitator/direct care staff person and consider the following questions:
Did the facilitator address participants by their names?
Did the facilitator make eye contact with the participants?
Did the facilitator frequently engage participants in conversation, such as by asking open-ended questions? Did participants have the opportunity to express their ideas or concerns freely without judgment or criticism?
Did the facilitator praise the participants or use other positive reinforcement?
Were accommodations made for participants with disabilities that allowed them to fully participate in activities? (If you notice a participant is not actively involved in the activities, ask the facilitator for some explanation and how they are working to include the participant.)
Was there a good balance between facilitator-led activities and participant-led activities? (For YEN and PAR programs) Was the staff encouraging and did they provide direction for youth/parents to take lead roles in activities?
Did the facilitator conduct the session in the group’s preferred language? (If applicable)</td><td>The interactions between the staff leading the observed activity and the participants were positive, allowing participants to fully engage during the session</td><td>4</td><td rowspan="3">3</td></tr>
<tr><td>The interactions between the staff leading the observed activity and the participants were positive, however participants did not appear to be fully engaged during the session</td><td>2</td></tr>
<tr><td>The interactions between the staff leading the observed activity and the participants were not always positive, and participants appeared disengaged during the session</td><td>1</td></tr>
<tr><td rowspan="4">Environment
Considers aspects of the physical environment such as noise level, lighting and temperature, as well as accessibility for children and families with physical disabilities.
APPLICABLE TO ALL PROGRAMS EXCEPT HOME VISITING
CM should consider the following during the activity observation:
Were the noise level, lighting and temperature comfortable? Was the site accessible for children and families with physical disabilities?
Were the indoor and outdoor areas clean?</td><td>The environment was comfortable (i.e., noise level, lighting and temperature) and conducive to learning</td><td>4</td><td rowspan="4">1</td></tr>
<tr><td>The environment was comfortable; however, there were environmental elements that affected the quality of the activity</td><td>2</td></tr>
<tr><td>The environment was uncomfortable and hindered the quality of the activity</td><td>1</td></tr>
<tr><td>N/A – Services are provided at participant’s home.</td><td>0</td></tr>
<tr><td rowspan="5">CAT Observations</td><td rowspan="5">Content Area Team Observation(s) results:
Content Area Teams (CATs) are formed by a mix of Contract Managers, Contract Administrators and Research & Evaluation Analysts who have been trained as reliable external assessors on Initiative Specific Observation Tools.
CAT members complete activity observations during months one and four of the contract year. The results from one or more CAT observation(s) are averaged and used to select the appropriate response for this item.</td><td>CAT Observation(s) average score is 4.5 or higher</td><td>4</td><td rowspan="5">28</td></tr>
<tr><td>CAT Observation(s) average score is between 3.5 and 4.4</td><td>3</td></tr>
<tr><td>CAT Observation(s) average score is between 2.5 and 3.4</td><td>2</td></tr>
<tr><td>CAT Observation(s) average score is below 2.5</td><td>1</td></tr>
<tr><td>N/A – Program does not have an initiative specific activity observation tool at this time</td><td>0</td></tr>
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<tr><td rowspan="4">Program Collects and Uses Participant Feedback for Continuous Learning and Program Development</td><td rowspan="4">The organization should have a systematic way of collecting input from program participants and using this feedback in a systematic way to improve programming. Evidence of this process must be provided.
CM reviews the organization’s methods for collecting participant feedback, and then, through conversation and documentation review, gathers information about how the organization uses this input to make changes and improvements to the program. Potential methods and documentation may include:
Surveys (periodic and/or at program exit/completion), suggestion boxes, participant meeting or focus groups, communication with parents, program exit interviews, community needs assessments
Reports or summaries of results of participant input, board updates on participant input, staff meeting discussions about participant input</td><td>There are well-established, routinely-administered methods for collecting input from program participants, and there is evidence that the organization regularly and formally uses participant feedback for program development or improvement.</td><td>4</td><td rowspan="4">0</td></tr>
<tr><td>There are some methods for collecting input from program participants, and there is evidence that the organization uses participant feedback for program development or improvement.</td><td>3</td></tr>
<tr><td>There are some sporadic methods for collecting input from program participants, but there is minimal or no evidence that the organization uses participant feedback for program development or improvement.</td><td>2</td></tr>
<tr><td>There are no established methods for collecting input from program participants, and the organization does not use participant feedback for program development or improvement.</td><td>1</td></tr>
<tr><td rowspan="10">Screenings and Timely Referrals</td><td rowspan="5">Completion of participants’ screenings is in line with the Scope of Services
Applicable to: School health and Parenting selective and indicated programs.
Calculated using the screenings and referral information available in CHEER for BMI and Vision reports (School Health), and the “PM by Participant with Answers” report (for Parenting).
$\frac{\text{Actual number of participants screened}}{\text{Number of participants expected to be screened}}$</td><td>100% of participants expected to be screened were screened</td><td>4</td><td rowspan="5">6</td></tr>
<tr><td>85-99% of participants expected to be screened were screened</td><td>3</td></tr>
<tr><td>70-84% of participants expected to be screened were screened</td><td>2</td></tr>
<tr><td>Less than 70% of participants expected to be screened were screened</td><td>1</td></tr>
<tr><td>N/A: Program does not required to screen participants</td><td>0</td></tr>
<tr><td rowspan="5">Programs are expected to complete referrals in line with the Scope of Services
Applicable to: School health programs
Calculated using referral information from BMI and Vision screening reports
$\frac{\text{Number of participants with complete referrals}}{\text{Number of participants referred}}$</td><td>100% of participants needing to be referred were referred on a timely manner</td><td>4</td><td rowspan="5">3</td></tr>
<tr><td>85-99% of participants needing to be referred were referred on a timely manner</td><td>3</td></tr>
<tr><td>70-84% of participants needing to be referred were referred on a timely manner</td><td>2</td></tr>
<tr><td>Less than 70% of participants needing to be referred were referred on a timely manner</td><td>1</td></tr>
<tr><td>N/A: Program not required to screen participants – Unable to measure item at this time</td><td>0</td></tr>
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<tr><td rowspan="3"></td><td rowspan="3">Delivery of Contracted Program Days/Weeks</td><td rowspan="3">Programs are expected to deliver services equal to the total number of days/weeks contracted
Applicable to After-school and summer and Youth enrichment programs.
• For After-school and summer, calculated using the number of after-school days program operated (at all sites) divided by total # of after-school days contracted (at all sites):
$$\frac{\text{Actual \# of day's program operated (by site)}}{\text{Contracted \# of days (by site)}}$$
• For Youth enrichment programs, calculated using the number of weeks the program operated:
$$\frac{\text{Actual \# of week's program operated}}{\text{Contracted \# of weeks}}$$</td><td>Number of days/weeks program operated is in line with the total number of days/weeks contracted</td><td>4</td><td rowspan="3">4</td></tr>
<tr><td>Number of days/weeks program operated is not in line with the total number of days/weeks contracted</td><td>1</td></tr>
<tr><td>N/A: Not After-school and Summer or Youth Enrichment program</td><td>0</td></tr>
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Program Participation

Item	Item Description and Instructions	Answer Options	Value	Weight
Service Utilization	**Services offered are being utilized by participants** Applicable to: All programs implementing attendance-based activities. • For After-school and summer programs: $\frac{\text{Average number of slots filled by day (by site)}}{\text{Total number of contracted slots (by site)}}$ • For Youth enrichment programs: $\frac{\text{Average number of unduplicated participants attending per week}}{\text{Total number of contracted participants}}$ • For Service partnerships, Parenting, Early childhood and Program quality supports programs: $\frac{\text{Number of participants/families recruited}}{\text{Number of participants/families expected to be recruited}}$	Service utilization is 100% or higher	4	4
		Service utilization is from 90% to 99%	3	
		Service utilization is from 80% to 89%	2	
		Service utilization is less than 80%	1	
		N/A- Item does not apply to activity type	0	
Engagement	**Average participant attendance is in line with expected attendance** Applicable to: All programs that implement attendance-based activities. Review time: Item will be reviewed throughout the contract year. Calculation: $\frac{\text{Average of days/sessions attended}}{\text{Average of contracted days/sessions participants were expected to attend}}$	Engagement is 100% or higher	4	4
		Engagement is from 90% to 99% of engagement	3	
		Engagement is from 80% to 89% of engagement	2	
		Engagement is lower than 80%	1	
		N/A: Program does not implement attendance-based activities	0	
		N/A: Item does not apply to activity type	0	
Retention	**Contracted Number of Participants are Receiving Contracted Number of Sessions** Applicable to: Programs that implement attendance-based activities (except After-school and Summer programs). Review time: For rolling enrollment programs, item will be reviewed throughout the contract year; for year-round programs, item will be reviewed during months eight and twelve. Calculation: $\frac{\text{Total participants/families meeting the expected number of sessions}}{\text{Total participants/families contracted to be served}}$	Retention is 100% or higher	4	4
		Retention is 85% to 99%	3	
		Retention is 70% to 84%	2	
		Retention is lower than 70%	1	
		N/A: Program that does not implement attendance-based activities	0	
		N/A: Item does not apply to activity type	0	
Quality of program participant data entered in the Trust electronic reporting system	**Electronic program participants' data entered in the electronic reporting system matches the data available in the participants' physical files or in other participant attendance records.** Applicable to: All programs collecting and reporting participant attendance. Item reviewed through participant file review during site visits: Review of ten participant files (15 files if program serves more than 200 participants). • **School year** and **year-round** programs: File review during site visit takes place during months four and eight of the contract year. If issues are identified (13% or more data errors), review is completed again between months nine and ten. • For the **summer** portion of **school year and summer**, and **summer only** programs, review is completed between June and July. **For programs entering attendance data by participant:** • Prior to site visit, CM runs the "Site Visit Data Review" report which randomly pulls ten or fifteen (15) participants from SAMIS and includes the attendance data entered in SAMIS for each participant.	96-100% participants' attendance data match attendance entered in the system	4	2
		88-95% of participants' attendance data match attendance entered in the system	3	
		81-87% of participants' attendance data do not match attendance entered in the system	2	

		• CM checks the attendance records in the participant's file (or any other attendance records kept by the provider) against the attendance fields in this report while at the site visit. **For programs entering group attendance:** • Prior to site visit, CM runs the "Aggregate Utilization-NonOOS" report which provides aggregate attendance numbers entered in the system for group activities. • CM checks the attendance records in file (or any other attendance records kept by the provider) against the numbers registered in the report. Calculation: $\frac{\text{Total \# of attendance fields entered correctly}}{\text{Total number of possible attendance fields}}$	80% or less of participant attendance data match data entered in the system	1	
			N/A – Provider does not enter participant attendance	0	

Participant Outcomes

Item	Item Description and Instructions	Answer Options	Value	Weight
Participant Testing	**Outcome measurement tools are administered as contracted** Applicable to: all programs testing participants Review time: Item will be reviewed twice -One time during months one and four of the contract year and a second time by month ten for school year programs, and during month 12 for year-round programs. Calculation: $\frac{\text{Number of participants tested}}{\text{Total participants expected to be tested}}$	100% or more of the expected participants have been tested	4	4
		90-99% of the expected participants have been tested	3	
		80-89% of the expected participants have been tested	2	
		Less than 80% of the expected participants have been tested	1	
		N/A: Program does not collect participant outcomes	0	
Outcome Achievement	**Contracted proportion of participants realize program benefits** Applicable to: all programs testing participants Review time: Item will be reviewed by month ten for school year programs and during month twelve (12) for year-round programs. For Insurance Enrollment programs this item will also be reviewed during month six. Calculation: $\frac{\text{\% of participants meeting the outcomes}}{\text{\% of participants expected to meet the outcomes}}$	Outcome achievement is 100% or more of the outcome target	4	4
		Outcome achievement is 90-99% of the outcome target	3	
		Outcome achievement is 80-89% of the outcome target	2	
		Outcome achievement is less than 80% of the outcome target	1	
		N/A: Program does not collect participant outcomes	0	
		N/A: Item does not apply at this time	0	
Quality of participant outcome data entered in the Trust electronic reporting system	**Electronic participants' outcome data entered in SAMIS <u>matches</u> the testing/outcome data available in the participants' physical files.** Applicable to: All programs collecting and reporting participant outcome data. Item reviewed through participant file review during site visits: • **School year** and **year-round** programs: File review during site visit takes place during months one and four of the contract year. <u>If issues are identified (13% or more data errors)</u>, review is completed again between months nine and ten. • For the **summer** portion of **school year and summer**, and **summer only** programs, this review takes place between the months of June and July. **For programs entering outcome data by participant:** • Prior to site visit, CM runs the "Site Visit Data Review" report which randomly pulls ten or fifteen (15) participants from SAMIS and includes the <u>outcome data</u> entered in SAMIS for each participant. • CM checks the outcome records in the participant's file against the participant outcome fields in this report. **For programs entering group outcome data (GroupPM):** • Prior to site visit, CM runs the "GroupPM" report which provides aggregate outcome numbers entered for group activities • CM checks the outcome data on file against the numbers registered in the report. **For Insurance enrollment programs:** CM reviews the Insurance Enrollment Activities report: There must be evidence that the application was submitted. In addition, the submission date, type of application (KidCare, Medicaid, PEPW, and SNAP), confirmed status and disposition must correspond with the data entered in SAMIS. Calculation: $\frac{\text{Total \# of outcome/insurance fields entered correctly}}{\text{Total number of possible outcome fields/fields reviewed}}$	96-100% participants' outcome data match performance measures entered in the system	4	2
		88-95% of participants' outcome data match outcome data entered in the system	3	
		81-87% of participants' outcome data match outcome data entered in the system	2	
		80% or less of participants' outcome data match outcome data entered in the system	1	
		N/A – Provider does not enter participant outcome data	0	
		N/A- Outcome data not expected to be entered at this time	0	