THE CHILDREN'S TRUST PROGRAM METRICS TOOL

Version with values & weights – April 2021

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	Program Manager Accountant	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	Program Manager	X			X	X
	Staff training and supervision are supported within the agency	Program 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	Program Manager	X			X	X
	Program collects and uses participant feedback	Program Manager	X				
	Screenings and timely referrals	Research Analyst		X	X		X
Program Data Quality	Quality of participant demographic data entered in the Trust electronic reporting system	Program Manager	X	X		X	X
	Quality of participant attendance data entered in the Trust electronic reporting system	Program Manager	X	X		X	X
	Test Administration : Outcome measurement tools are administered as contracted	Research Analyst			X	X	X
	Quality of participant outcome data entered in the Trust electronic reporting system	Program Manager	X	X			
Population Focus	Expected inclusion of children and youth with disabilities	Research Analyst		X	X	X	X
Program Participation	Service utilization/Recruitment: Services offered are being utilized by participants/families	Research Analyst		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
Participant Outcomes	Outcome achievement: Contracted proportion of participants served realize program benefits	Research Analyst			X	X	X

*X Item to be reviewed <u>if issues were identified</u> during the previous review
*Items highlighted in yellow- Updates

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 during the **one to four-month review** with continued follow-up if needed. • Program Manager (PM) confirms that the policy is in line with the Trust's policy (refer to core contract) and provides technical assistance if needed. • PM inquiries 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 during **the one to four-month review**. Policy should include information on how data and confidentiality are handled by the organization and acknowledged by staff. • PM confirms that the policy is in line with the core contract and provides technical assistance if needed. • PM 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 PM completes observations during every site visit provider demonstrates use of data security policy and procedures (e.g., locked file cabinets or doors, password protected computers, restricted access to files, staff are deactivated in Trust Central).	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	
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 (refer to the core contract).** **For Youth Development K-5 programs**: 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). **For all other initiatives**: While reviewing personnel files during site visit, PM 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	
		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.** • PM reviews documentation/personnel driver file(s) regarding transportation of participants during site visit(s). Files must include the following:	All transportation requirements are in place	4	N/A

	○ 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 :(https://dot.dadeschools.net/#!/fullWidth/3335) , no further check is needed. • For hired vehicles, PM reviews current contractual agreement and inspection and must comply with the Children's Trust contract.	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 per site at all times, verified through staff assignment.** • PM reviews personnel files to identify which staff are CPR certified: ○ CPR certification must be in the personnel file	Each site has at least one (1) CPR-certified staff member	4	N/A
		Not all sites have at least one (1) CPR-certified staff member	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.** PM checks the following during all site visits: • There must be at least one (1) first aid kit accessible and visible from the site • Indoor and outdoor areas are free of debris and/or clutter (e.g main walkways, exits, high traffic areas) • All entrances must be supervised for security during program hours (for Youth Development programs)	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	
Marketing and Publicity	**Organization prominently displays most current Children's Trust program sign decal** • Decal must be placed on the main entry door , front window of its Trust-funded site locations or where services are provided.	Organization prominently displays most current Children's Trust program sign decal on main entry door, front window or where services are provided	4	N/A
		Organization prominently does not display most current Children's Trust program sign decal on main entry door, front window, or where services are provided	0	
	Organization displays current Children's Trust Logo on their website or web page • Program Manager (PM) confirms that logo is current, and placement is in line with the Trust's Marketing and Publicity policy (refer to core contract). • PM reviews website or webpage	Organization displays current Children's Trust Logo on their website	4	
		Organization does not display current Children's Trust Logo on their website	1	
		N/A- Organization does not have a website	0	
Program Roles and Contact Information	**Organization must have the following program roles assigned with most up-to-date contact information in Trust Central.** PM checks the following program roles are assigned and include phone number and email: • Agency CEO Contact • Official Correspondence Contact • Program Primary Contact • Parent Contact, if applicable. • Program Secondary Contact, if applicable. • Finance Contact	All program roles are assigned and contain required contact information.	4	N/A
		One or more program roles are not assigned or does not contain required contact information.	1	

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	4	N/A
		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 the CRM station in Trust Central 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. For programs offering services during the **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. • PM reviews the Position Management module in Trust Central against the Staffing Table in the contract.	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 **one to four-month** review. All program staff identified during review, are retained throughout the contract year. *This item will not be applicable during the first year of a funding cycle for providers that are new to the initiative. Not- applicable to **summer** portion of Youth Development Calculation: $\frac{\text{Total \# of same program staff still employed}}{\text{Total \# program staff identified at start of previous contract year}}$	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	
		N/A- Provider is new to the initiative; this item is not applicable during the first year of a funding cycle.	0	
	Vacancies Support and Hiring Strategy Timing: Item will be reviewed during **one to four-month** review. 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. PM 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 Timing: Item will be reviewed during **one to four-month** review Staff's requirements should be aligned with the Staffing Table and EPB table, if applicable in the contract. While reviewing personnel files during site visit, PM reviews proof of: • Certifications/licensures for all staff with requirement including direct service staff and clinical supervisors (also includes teacher certifications) • 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).	Of files reviewed-All staff meet the qualifications required for the position	4	3
		Of files reviewed-One or more staff don't meet the qualifications; however, all key staff are qualified	3	
		Of files reviewed- Less than 15% of staff don't meet the qualifications, including key staff	2	
		Of files reviewed 15% or more staff don't meet the qualifications, including key staff	1	
Staff Professional	**Attendance to Professional Development offerings** Timing: Item will be reviewed during **four to eight-month** review	Of files reviewed-All staff attended all required professional development opportunities as required	4	3

	Development and supervision are supported within the organization	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). Providers must ensure staff and subcontractors meet expectations around continuous professional development by attending required professional development opportunities sponsored by The Trust or other entities. The Trust provides a list of available PD offerings where expectations for specific staff are identified. Find list of trainings per initiative here	Of files reviewed- 80-99% of staff attended all required /professional development opportunities as required	3	
			Of files reviewed -80-99% of staff attended at least half of required professional development opportunities as required	2	
			Of files reviewed -60-79% of staff attended all required /professional development opportunities as required	2	
			Of files reviewed - Less than 60% of staff attended all required professional development opportunities as required	1	
		Staff Supervision Timing: Item will be reviewed during **one to four-month** review 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. • PM reviews the organization's policy or plan. • PM reviews documentation of regular individual or group supervision. Documentation may 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	

Service Delivery

The following guidelines are to be used by the Program 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 one and four**. PM should visit different sites during subsequent review periods (if applicable).

PM is expected to observe **one** activity for its full duration for **all programs.** For **K-5 programs**, two of the following activities should be observed: Fitness, Literacy, and Homework.

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** YOUTH DEVELOPMENT 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) • Parenting and Family Strengthening services: Refer to EBP table in the scope • 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.
	• PM 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	
		N/A – Does not apply to Family Strengthening Programs	0	

	Staff/Facilitator Knowledge and Preparation
	Considers whether the observed staff/facilitator has the content knowledge necessary to deliver the material effectively and is able to facilitate the session as well as the participants' understanding of the content covered.
	• PM should consider the following during the activity observation:
	  ○ Did the facilitator/staff seem knowledgeable on the subject matter?
	  ○ Did the facilitator/staff clearly relate activity to session content?
		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	
		N/A – Does not apply to Family Strengthening Programs	0	

	• Did the facilitator ensure participant understanding and find alternative/creative ways to explain concepts to facilitate participants understanding?			
	Materials Considers whether there are developmentally appropriate and culturally sensitive materials available to all participants. • PM 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)	Materials used during the observed activity were adequate (amount, characteristics, quality)	4	1
		Materials used during the observed activity were inadequate (amount, characteristics, quality)	1	
		N/A - Materials are not required	0	
	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, PM 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? ○ Did the facilitator make accommodations for participants with disabilities that allowed them to fully participate in activities? ○ Was there a good balance between facilitator-led activities and participant-led activities? (For YD6-12 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)	The interactions between the staff leading the observed activity and the participants were positive and all participants were fully engaged during the session	4	3
		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	2	
		The interactions between the staff leading the observed activity and the participants were not always positive and participants appeared disengaged during the session.	1	
		N/A – Does not apply to Family Strengthening Programs	0	
	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 • PM 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?	The environment was comfortable (i.e., noise level, lighting and temperature) and conducive to learning	4	1
		The environment was comfortable; however, there were environmental elements that affected the quality of the activity	2	
		The environment was uncomfortable and hindered the quality of the activity	1	
		N/A – Services are provided at participant's home.	0	
		N/A – Does not apply to Family Strengthening Programs	0	
CAT Observations	**Content Area Team Observation(s) results:** Content Area Teams (CATs) are formed by a mix of Program Managers, Research & Evaluation Analysts and External Observers who have been trained as reliable external assessors on initiative specific observation tools. CAT members complete activity observations during months four and eight 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.	CAT Observation(s) average score is 4.5 or higher	4	30
		CAT Observation(s) average score is between 3.5 and 4.4	3	
		CAT Observation(s) average score is between 2.5 and 3.4	2	
		CAT Observation(s) average score is below 2.5	1	

		N/A – Program does not have an initiative specific activity observation tool at this time	0	
Program Collects and Uses Participant Feedback for Continuous Learning and Program Development	**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.** • PM 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	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.	4	3
		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.	3	
		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.	2	
		There are no established methods for collecting input from program participants, and the organization does not use participant feedback for program development or improvement.	1	
Screenings and Timely Referrals	**Completion of participants' screenings is in line with the Scope of Services** Applicable to: School health and Parenting programs as applicable. Calculated using the screenings and referral information available in Health Master for BMI and Vision reports. $\frac{\text{Actual number of participants screened}}{\text{Number of participants expected to be screened}}$	100% of participants expected to be screened were screened	4	6
		85-99% of participants expected to be screened were screened	3	
		70-84% of participants expected to be screened were screened	2	
		Less than 70% of participants expected to be screened were screened	1	
		N/A: Program is not required to screen participants	0	
	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 $\frac{\text{Number of participants with complete referrals}}{\text{Number of participants referred}}$	100% of participants needing to be referred were referred on a timely manner	4	3
		85-99% of participants needing to be referred were referred on a timely manner	3	
		70-84% of participants needing to be referred were referred on a timely manner	2	
		Less than 70% of participants needing to be referred were referred on a timely manner	1	
		N/A: Program not required to screen participants – Unable to measure item at this time	0	
		N/A: Not a Youth Development program	0	

Program Data Quality

The following items are applicable to all programs and reviewed throughout the contract year, unless specified otherwise.

<table>
<tr><th>Item</th><th>Item Breakdown and Instructions</th><th>Answer Options</th><th>Value</th><th>Weight</th></tr>
<tr><td rowspan="6">Quality of participant demographic data entered in the Trust electronic reporting system</td><td rowspan="6">Electronic participants’ demographic data entered in Trust Central <u>matches</u> the data available in the participants’ registration form in the participants’ physical/electronic 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 one and four of the contract year. <u>If issues are identified (13% or more data errors)</u>, review is completed again between months four and eight.
For the summer portion of school year and summer, and summer only programs, this review takes place between the months of June and July.
PM checks the demographic fields in the participant’s registration form/electronic file against the demographic fields in Trust Central.
Calculation: $\frac{\text{Total \# of demographic fields entered correctly}}{\text{Total number of possible demographic fields}}$

For Benefit enrollment Programs:
PM selects 20 cases with mixed applicants’ type and disposition status
Calculation: $\frac{\text{Families who have at least one child in household}}{\text{Total number of families being served}}$</td><td>96-100% of participant demographics match data entered in the system</td><td>4</td><td rowspan="6">2</td></tr>
<tr><td>88-95% of participant demographics match data entered in the system</td><td>3</td></tr>
<tr><td>81-87% of participant demographics match data entered in the system</td><td>2</td></tr>
<tr><td>80% or less of participant demographics match data entered in the system</td><td>1</td></tr>
<tr><td>N/A – Provider does not enter demographics at the participant level</td><td>0</td></tr>
<tr><td>N/A – Provider is not expected to enter demographics at this time</td><td>0</td></tr>
<tr><td rowspan="4">Quality of program participant data entered in the Trust electronic reporting system</td><td rowspan="4">Electronic program participants’ data entered in the electronic reporting system <u>matches</u> the data available in the participants’ physical/electronic 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 one and four of the contract year. <u>If issues are identified (13% or more data errors)</u>, review is completed again between months four and eight.
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:
PM checks the attendance records in the participant’s file (or any other attendance records kept by the provider) against Units of Service in Trust Central while at the site visit.
For programs entering group attendance:
PM checks the attendance records in file (or any other attendance records kept by the provider) against the numbers registered in Trust Central.</td><td>96-100% participants’ attendance data match attendance entered in the system</td><td>4</td><td rowspan="4">2</td></tr>
<tr><td>88-95% of participants’ attendance data match attendance entered in the system</td><td>3</td></tr>
<tr><td>81-87% of participants’ attendance data match attendance entered in the system</td><td>2</td></tr>
<tr><td>80% or less of participant attendance data match data entered in the system</td><td>1</td></tr>
</table>

	Calculation: Total # of attendance fields entered correctly / Total number of possible attendance fields	N/A – Provider does not enter participant attendance	0	
		N/A – Provider is not expected to enter participants' attendance 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/electronic 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 four and eight. • 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:** • PM checks the outcome records in the participant's file against the Participant Input screen in Trust Central. **For programs entering group outcome data (GroupPM):** • PM checks the outcome data on file against the numbers in the Participant Input screen in Trust Central. **For Benefits Enrollment programs:** PM 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: Total # of outcome/insurance fields entered correctly / 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	
Test Administration	**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. *21-22 Note: Calculations for this item will become available at the outcome level. (Exploratory phase: Not included in rating) Calculation: Number of participants tested / Total participants expected to be tested	100% or more of the expected participants have been tested	4	3
		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	

Population Focus

Items will be reviewed twice: One time during months four and eight of the contract year and a second time during months eight and twelve, 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: Youth Development, Parenting, Family Strengthening and Family and Neighborhood Supports programs. Calculation: • Youth Development programs: $\frac{\text{Actual \% of CWD recruited}}{\text{Contracted \% of CWD to be served}}$ • Family and Neighborhood Supports, Parenting and Family Strengthening programs: $\frac{\text{Actual \% of families with CWD recruited}}{\text{Contracted \% of families with CWD to be served}}$ 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- 99% of the percentage of families/children/youth with disabilities contracted to be served	3	
		Provider recruited 70- 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: Youth Development Programs Calculation: $\frac{\text{Average of days/sessions attended by CWD}}{\text{Average of contracted days/sessions CWD were expected to attend}}$	Engagement of CWD is 100% or higher	4	0
		Engagement of CWD is from 90- 99%	3	
		Engagement of CWD is from 80- 89%	2	
		Engagement of CWD is lower than 80%	1	
		N/A: Not a Youth Development program	0	
	Outcome achievement of CWD served by the program (Exploratory phase: Not included in rating) Applicable to: Youth Development programs Calculation: $\frac{\text{\% of CWD meeting the outcomes}}{\text{\% of CWD expected to meet the outcomes}}$	Outcome achievement for CWD is 100% or more of the outcome target	4	0
		Outcome achievement for CWD is 90-99% of the outcome target	3	
		Outcome achievement for CWD is 80-89% of the outcome target	2	
		Outcome achievement for CWD is less than 80% of the outcome target	1	
		N/A: Not a Youth Development program	0	

Program Participation

Item	Item Description and Instructions	Answer Options	Value	Weight
Service Utilization OR Recruitment	Applicable to: All programs implementing attendance-based activities. **Service Utilization: Services offered are being utilized by participants** • For K-5 school-year and summer programs: $\frac{\text{Average number of slots filled by day}}{\text{Total number of contracted slots}}$ • For 6-12 programs: $\frac{\text{Total number of hours utilized by all participants}}{\text{Total number of contracted hours for all participants}}$ **Recruitment: Number of participants/families recruited is in line with number of participants/families contracted** • For Family and neighborhood Supports, Parenting, Family Strengthening : $\frac{\text{Number of participants/families recruited}}{\text{Number of participants/families expected to be recruited}}$	Service utilization/Recruitment is 100% or higher	4	4
		Service utilization/Recruitment is from 90- 99%	3	
		Service utilization/Recruitment is from 80- 89%	2	
		Service utilization/Recruitment 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: $\frac{\text{Average of days/sessions/hours attended by all participants}}{\text{Average of contracted days/sessions/hours participants were expected to attend}}$	Engagement is 100% or higher	4	4
		Engagement is from 90- 99% of engagement	3	
		Engagement is from 80- 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 K-5 school-year 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: $\frac{\text{Total participants/families meeting the expected number of sessions/hours}}{\text{Total participants/families contracted to be served}}$	Retention is 100% or higher	4	4
		Retention is 85- 99%	3	
		Retention is 70- 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	

Participant Outcomes

Item	Item Description and Instructions	Answer Options	Value	Weight
Outcome Achievement	**Contracted proportion of participants served 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 Benefits Enrollment programs this item will also be reviewed during month six. *21-22 Note: Calculations for this item will become available at the outcome level. (Exploratory phase: Not included in rating) 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	