Here is this month's edition of the HHS Performance Update. This e-newsletter provides recent news and promising practices in performance management reforms in social services and public health programs. It provides useful information about research and innovations in key social services and public health program areas.

If your social service or public health program has recently implemented reforms in performance management or budgeting and you want to share the results, please send me an email with some of the details and I can have my research staff get in touch with you. We need to highlight and share management innovations in all areas of government!

-Carl DeMaio



Date: February 2005

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If you find this newsletter useful and informative, please forward it to your friends and colleagues!

Results-Based Management in Social Services & Public Health

The US Department of Health and Human Services Honors 17 Groups, Individuals for Adoption Excellence

U.S. Department of Health and Human Services (HHS) Secretary Tommy G. Thompson recently announced 17 Adoption Excellence Award winners that had a role in increasing the number of foster children placed in permanent homes. The awards honor States, local agencies, private organizations, courts, businesses, individuals, and families for their accomplishments and efforts to increase the adoptions of foster children. The awards grew out of the Adoption and Safe Families Act of 1997, which provided financial incentives for States to increase adoptions, made safety the paramount consideration for determining placement, and mandated swifter time frames for permanent placement decisions. In fiscal year 2003, some 50,000 children were adopted from public child welfare agencies. Of the 523,000 children in the foster care system in the United States today, more than 118,000 are available for adoption. Of these children, 64 percent are over age 5, with the average age being 8 years old. Twenty-eight percent are black and 16 percent are Hispanic. For a complete list of award recipients, see the full press release on the HHS website at www.acf.hhs.gov/news/press/2004/adoption_awards.htm.

Measuring Strengths-Based Service Delivery

A new tool for measuring strengths-based service delivery may help workers evaluate early childhood and family support programs to determine whether the programs reflect a true strengths-based perspective. Two studies were conducted with parents who had children enrolled in Early Head Start programs. The first study resulted in the development of the Strengths-Based Practices Inventory (SBPI), a 16-item inventory based on measuring four factors: Empowerment Approach, Cultural Competency, Staff Sensitivity-Knowledge, and Relationship-Supportive. The second study examined whether strengths-based practices, as measured by the SBPI, were associated with specific parent outcomes. Parents with children in Early Head Start completed the SBPI when their children were 14 and 24 months old; parents were also assessed for engagement, participation, efficacy, empowerment, and parenting competence. Results showed that certain SBPI factors were related to family engagement, frequency of services, empowerment, competency, and the home environment. Some of the correlations were stronger at 24 months than at 14 months. "The Strengths-Based Practices Inventory: A Tool for Measuring Strengths-Based Service Delivery in Early Childhood and Family Support Programs" was published in the July-September 2004 issue of Families in Society: The Journal of Contemporary Social Services. For more information, please visit: www.familiesinsociety.org/.

The 2005 Conference on Performance Measures & Performance-Based Contracting for Social Services (May 4-6, Arlington, VA)

One of the most important challenges facing social services agencies today is the need to implement performance-based service acquisition to meet mission goals. Efforts to improve government contracting now require a more results-oriented approach, which can confuse all those involved in the contract and grant process. To improve contracting for your social services program, we invite you to attend the upcoming 2005 National Conference on Performance Measurement & Performance-Based Contracting for Social Services, May 4-6 in Arlington, VA. Join leaders from state and local social services agencies from across the nation as they share best practices, lessons learned and innovative strategies for outcome-oriented management and performance-based contracting for social services. Strengthen

outcome-oriented management with the appropriate performance measures. Learn what the “right” measures are and utilize them to develop a framework for performance measurement within your social services program. With these tools, you will develop the performance indicators consistent with long-term development of your social services mission to better manage contracts and grants. For more information and registration, please visit:

Workforce Development & Self-Sufficiency Innovations

Management tools for the 21st century

The DOL has released Workforce Connections, a set of Web tools that let non-technical users create, acquire, share and control content in real time. With the tools, users can build and maintain Web sites, develop and deliver online training, operate a community of practice and develop Web-based coaching tools. Workforce Connections began with the Defense Department's Advanced Distributed Learning initiative, whose primary purpose was to develop standards to fix interoperability problems in the commercial products DOD was using for computer-based training. The program separates the content object repository from the content presentation layer in the delivery environment. It uses cascading style sheets to automatically implement an agency's specific style requirements as well as comply with SCORM and Section 508 accessibility rules. Workforce Connections has been in operation at Labor for more than three years. Other agencies, such as the Army Corps of Engineers and Federal Aviation Administration, are using the tools with excellent results and cost savings. For more information please visit: www.workforceconnections.dol.gov/sites.

Home Builders Institute Combats the Construction Industry Labor Shortfall

The annual labor shortfall of 60,000 to 80,000 workers in the construction industry is shrinking. The Home Builders Institute (HBI), the workforce development arm of the National Association of Home Builders (NAHB), just received a one-year extension from the Mississippi Department of Human Services (MDHS), for their Project CRAFT (Community Restitution Apprenticeship-Focused Training) program in Jackson, Mississippi. Project CRAFT is HBI’s congressionally recognized, award winning program that works with at-risk and adjudicated youth, teaching them valuable construction skills. The program has enjoyed enormous successes since its inception in 1994, when Project CRAFT, funded by the US Department of Labor, was established at three sites, in Sabillasville, MD, Bismark, North Dakota, and Nashville, Tennessee. The program currently operates in eight sites in five states - Florida, New Jersey, Texas, Mississippi and Tennessee. In the past ten years, Project CRAFT has graduated over 2,000 students, has an average placement rate of 89 percent, and graduates enjoy an average starting wage of $8.29 an hour. These successes have earned HBI/Project CRAFT a PEPNet award, presented by the Department of Labor and the National Youth Employment Coalition, as well as congressional recognition for its best practices. For more information about Project CRAFT, or other Home Builders Institute programs, please visit: www.hbi.org or attend the Performance Institute’s Youth Workforce Development Conference this April 20-22, in Arlington, VA; http://www.performanceweb.org/CENTERS/Social_Health/Events/S202/S202.htm.

Labor Secretary Chao Awards $3.78 Million to Place More than 1,600 Veterans in Jobs Under the Workforce Investment Act

Secretary Chao recently announced that more than 1,600 veterans in 17 communities in 15 states will be

placed in new jobs thanks to $3.78 million in Department of Labor (DOL) grants. DOL expects another 600 veterans to receive employment and training services as a result of these grants, which are awarded under the WIA. The grants, which are being awarded in California, Florida, Indiana, Louisiana, Maine, Maryland, Massachusetts, Nevada, New York, Ohio, Oregon, Pennsylvania, Tennessee, Texas and Wyoming, make possible a range of services for veterans including: assessing job skills, career counseling, current labor-market information, classroom or on-the-job training, skills upgrading or retraining, and job-placement assistance. The applicants this year have been asked to focus their training efforts on career fields where the lack of a license or a certification has become a barrier to employment. The grants are administered by public agencies and nonprofit organizations that the Secretary of Labor determines have an understanding of veterans' unemployment problems. Authorized by Section 168 of the WIA, the grants are being awarded on a competitive basis by the department's Veterans' Employment and Training Service (VETS). At the end of these six- month, first-year grants, VETS will award second-year funding to the grantees that meet or exceed the performance criteria set forth in their original award. For more information, please visit: http://www.dol.gov.

Workforce Development and Business Services
by: Celina Shands, Full Capacity Marketing, Inc.

The workforce development system is keenly focused on becoming demand driven and serving business as a primary customer. Raising awareness and usage of the System among businesses takes a strategic effort among Board members, One-Stop operators, partners and staff to build consensus and implement research-based tactics that attract businesses. This requires a clearly defined vision and an understanding of how to adapt the business principles of marketing to the System. There are workforce development examples in which teams have developed a value-added package of business services and have gone to market successfully. In fact, awareness of the System among businesses in areas that focus strategically on marketing has been reported as high as 97 percent. Those workforce areas that leave marketing to chance and do not integrate it as part of the operational structure continue to struggle with making an impact. As part of addressing the need to become demand driven, the Performance Institute is hosting Celina Shands, President/CEO, Full Capacity Marketing, Inc. to teach a one-day workshop on employer outreach. Participants will learn from successful workforce development case studies and understand how to create value-added solutions that meet market demands. For information on the upcoming course, go to; http://www.performanceweb.org/Centers/Social_Health/index.html. For information on Celina's Board retreats, keynote availability, or to sign up for her National Marketing Workgroup, go to www.fullcapacitymarketing.com or call (858) 735-2883.

The 2005 Youth Workforce Development Conference (April 20-22, 2005, Arlington, VA)

Young people are this Nation's most valuable resource. Moving at-risk youth to self-sufficiency is one of our greatest challenges. To help develop effective strategies for improving employment and vocational training, reducing dependence and at-risk behavior and recidivism, and improving the connections between youth and the labor market, you are invited to attend the 2005 Youth Workforce Development Conference, April 20-22, 2005 in Arlington, VA. We are bringing together leaders from youth workforce development programs providers and one-stop resource centers to present performance-based management strategies for youth workforce development programs, promising practices in youth services training program development and curriculum as well as measure and report youth workforce performance outcomes. For more information, please visit;
http://www.performanceweb.org/CENTERS/Social_Health/Events/S202/S202.htm.

The 2005 Demand-Driven Workforce Development Conference (May 9-10, 2005, Arlington, VA)

With the recent workforce investment system's transition to a demand-driven system and the U.S Department of Labor's work to institutionalize this shift at the federal, state and local level, the public workforce investment system is left without the tools to reach out to their new client; business. The public workforce system must now work with employers to establish partnerships and business relationships to effectively match employees to high demand jobs in high-growth industries. Learn how to effectively work with business. Solutions and promising practices in designing, managing and funding workforce development and job placement programs for high growth industries are available at the 2005 Demand-Driven Workforce Development Conference, May 9-10, 2005 in Arlington, VA. Identify and implement employer outreach strategies to meet increased demand for skilled workers. Developing outreach programs for employers requires a clearly defined strategy among Board members, staff and partners to build value in the One-Stops, support operational goals and drive business customers to try services. Identify how to create an internal outreach program that segments businesses appropriately, builds brand awareness, and creates value among the business community. For more information or to register, please visit; http://www.performanceweb.org/Centers/Social_Health/index.html.

Child and Family Services Innovations

Child Welfare Waiver in Ohio Given Five Year Extension

HHS Secretary Thompson announced a five year extension of Ohio's child welfare waiver demonstration project. The extension allows counties in Ohio to use federal foster care funds with more flexibility to strengthen services for children and families involved in the child welfare system. Ohio is one of four states that have child welfare waiver demonstration projects focused on providing counties with a capped amount of title IV-E foster care funds that may be used flexibly for a wide range of child welfare services. Title IV-E of the Social Security Act is the primary source of federal funds for state foster care and adoption assistance. Normally, funds provided under title IV-E are reimbursed as an open-ended entitlement, but may only be used to pay for room and board expenses of eligible children in foster care. Under Ohio's demonstration project, these funds can be used to enhance an array of services, in addition to foster care placement, to help facilitate reunification when appropriate and to ensure safe and permanent outcomes for children. Fourteen counties in Ohio currently receive title IV-E federal funds flexibly through the demonstration. An independent evaluation, comparing those fourteen counties with counties that did not, revealed the benefits of the flexible funding option. Under the approved extension, Ohio will continue this demonstration in 14 counties. To view this announcement, please visit: http://www.acf.hhs.gov/news/press/2005/Ohio_waiver.htm.

Children Find Permanence in Subsidized Guardianship

According to a new report from Fostering Results, Permanence could be established for many children currently in long-term foster care with grandparents or other relatives if States established subsidized guardianship programs for these children. The report uses data from the 2002 Adoption and Foster Care Analysis and Reporting System (AFCARS) to show that approximately 19,250 children currently live with relatives in long-term foster care, and a court has determined that neither adoption nor reunification are options for these children. The underutilized option of legal guardianship with their relative caregivers would seem to provide the permanence that these children need while reducing the need for the child welfare system and court to monitor the placement. Unfortunately, guardianship is not an option for children in these cases if their relatives cannot afford to raise them without foster care subsidies. According to the report, establishing subsidized guardianship programs for these children would meet

their permanence needs, as well as the needs of the caregivers for financial support. Preliminary results from these programs show that the amount of the stipend impacts permanency rates. In programs that paid legal guardians at the same rate as foster parents, there was a much higher rate of guardianship establishment than in programs that paid guardians significantly less than foster parents. For instance, Illinois, which subsidized guardians at the same rate as foster parents, saw a 42 percent decrease in children in long-term foster kinship care from 1999 to 2001. In comparison, Maryland, which reimbursed guardians at half the rate of foster parents, saw only a 24 percent decrease. In addition, the Illinois program found an overall increase in permanency achievement through adoption, guardianship, or reunification (78 percent in the experimental group compared to 72 percent in the control group); in Maryland the permanency difference was negligible. Programs that were able to use Title IV-E funds were more successful as a whole than the State-funded programs. For more information, please view this report, "Family Ties: Supporting Permanence for Children in Safe and Stable Foster Care with Relatives and Other Caregivers," www.fosteringresults.org/results/reports/pewreports_10-13-04_alreadyhome.pdf.

Work Participation Rate of Welfare Recipients Dropped in 2003

Secretary Tommy Thompson announced recently that the work participation rate for TANF families declined for the second year in a row, highlighting the importance of reauthorizing welfare reform legislation. The data released today show the work participation rate for all families fell from 33.4 percent in October 2002 to 31.3 percent in September 2003. The two-parent participation rate fell from 49.4 to 48.4 percent during the same period. The 1996 welfare reform legislation established work participation rate standards. The all-family minimum participation rate standard was established at 50 percent for 2002 and subsequent years. However, because of the caseload reduction credit, most states currently are required to have zero, or nearly zero, parents participating in work activities. Under the Bush Administration's welfare reform reauthorization plan, a meaningful family work participation rate would be reinstituted while maintaining, and in many cases increasing, flexibility in how states seek to achieve that standard. The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 has been overdue for reauthorization since September 2002. The U.S House of Representatives has passed TANF reauthorization twice, but the Senate has yet to pass legislation reauthorizing this program. The TANF program has been operating under a series of temporary extensions. For more information, please visit: http://www.acf.hhs.gov/programs/ofa/particip/indexparticip.htm#2003.

HHS Announces Head Start Advisory Panel to Review National Reporting System

Tommy Thompson announced this January the appointment of 10 members to an independent panel of experts on child development to assess the progress in developing and implementing the Head Start National Reporting System (NRS). The panel will identify ways to integrate the NRS into a broader assessment of early childhood learning found in the Family and Child Evaluation Survey, the National Impact Study, Head Start's Performance Based Outcome System as well as the on-going evaluation of the Early Head Start program. Under the existing regulations, Head Start grantees must assess the developmental and learning progress of every child in their programs. These assessments take place at the local level with no consistent set of evaluation standards or goals. The NRS was designed to implement a common set of measures, for all four- and five-year-old children at the beginning and end of the program year, to assess the ability of local Head Start programs to achieve positive outcomes. For more information, please visit the Administration on Children and Families: http://www.headstartinfo.org/.

The 2005 Child Welfare Performance Conference (March 30-April 1st, San Diego, CA)

The child welfare field is undergoing dramatic changes, with increasing demands for accountability, quality, and improved outcomes for children and families. All states must achieve conformity to the

outcomes and systemic factors outlined in The Child and Family Services Reviews (CFSR), which are mandated by the Social Security Amendments of 1994 and administered by the Department of Health and Human Services. The CFSR is a results-oriented review system designed to assist states in improving outcomes for children and families. Many states have experienced common challenges in achieving conformity to outcomes of safety, permanency, and well-being of children within the child welfare system. In this conference you will identify those challenges and how to improve the performance. States widely vary in their performance outcomes. It is important for all states to meet the criteria for substantial conformity to the national standards for the measures related to that particular outcome. Identify key lessons learned for all three phases of the Child and Family Services Reviews and to improve implementation and performance. For more information or to register for this conference, please visit: http://www.performanceweb.org/CENTERS/Social_Health/Events/S173/S173.htm.

Behavioral & Public Health Services Innovations

HHS Maintains Lead Federal Role for Emergency Public Health and Medical Response

HHS Secretary Tommy Thompson announced that under the new National Response Plan released recently by the Department of Homeland Security, HHS will continue to lead the federal government in providing public health and medical services during major disasters and emergencies. The National Response Plan divides the government's emergency operations into 15 emergency support functions. HHS is the lead agency for Emergency Support Function Eight (ESF-8) -- public health and medical services. In this role and through the HHS Secretary's Operations Center, the department coordinates all federal resources related to public health and medical services made available to assist state, local and tribal officials during a major disaster or emergency. HHS responsibilities under ESF-8 include coordination of HHS assets such as the Secretary's Emergency Response Teams, the Surgeon General's cadre of deployable health care professionals from the U.S. Public Health Service Commissioned Corps, the Centers for Disease Control and Prevention's public health experts and its Laboratory Response Network, and the Strategic National Stockpile of pharmaceuticals and medical equipment. During major disasters and emergencies, HHS will also coordinate medical resources from all other federal agencies. This includes the Department of Homeland Security's National Disaster Medical System assets such as the Disaster Medical Assistance Teams; use of the Department of Veterans' Affairs facilities and health care professionals; and the Department of Defense's medical resources. To download a complete PDF copy of the National Response Plan, please visit: http://www.dhs.gov/nationalresponseplan.

US Department of Health and Human Services Secretary Tommy Thompson Releases Report on Promoting Medical Innovation

Secretary Thompson recently announced steps HHS can take to advance medical innovations and move products more quickly from the lab bench to the bedside. The recommendations were outlined in a new report: "Moving Medical Innovations Forward -- New Initiatives from HHS." The report was the product of an HHS task force formed by Secretary Thompson to weigh new ideas and promote new solutions to encourage innovation in health care and to speed the development of effective new medical technologies. During the process of safety and efficacy review new technologies often run into unnecessary hurdles before they reach consumers. The task force examined ways to better coordinate this process across the department, to streamline the way HHS does business. By eliminating barriers, safe, effective medical technologies will be more readily available to Americans who could benefit from them. The task force examined internal procedures at agencies across the department, including the

Centers for Disease Control and Prevention (CDC), the Centers for Medicare & Medicaid Services (CMS), the Food and Drug Administration (FDA) and the National Institutes of Health (NIH). The report is available at http://www.hhs.gov/reference/medicalinnovations.shtml.

Grants, Contracts & Partnerships News

$70 Million in for Drug Free Communities Support Program Grants

The Substance Abuse and Mental Health Services Administration (SAMHSA) and the White House Office of National Drug Control Policy (ONDCP) have announced FY 2005 funds for Drug Free Communities Support Program (DFCSP) grants which are designed to improve community efforts to plan, promote and deliver effective substance abuse prevention strategies. $70 million in Drug Free Communities Support Program Coalition Grants are now available to new applicants and those competing for renewal awards. The grants will be administered by SAMHSA from money provided by ONDCP under the Drug Free Communities Support Program. For more information or to apply for this grant, please visit: http://www.samhsa.gov/grants/2005/nofa/sp05002two_dfc.aspx

HHS Reallocates $643 Million in Unspent State Children's Health Insurance Program (SCHIP) Funds

Secretary Thompson and the Centers for Medicare & Medicaid Services (CMS) recently announced the procedure for redistribution of $643 million in unspent State Children's Health Insurance Program (SCHIP) funds to help states avoid funding shortfalls in 2005. States have three years to spend each year's SCHIP allotment. In previous years, Congress has allowed a portion of funds left unspent to be redistributed to states that have exhausted their money. This year, Secretary Thompson used his own authority to redistribute unspent 2002 funds to states that demonstrated the need for additional SCHIP funds. 28 states will receive a portion of the funds, including five states that would have run out of federal funding for their SCHIP programs: Arizona, Minnesota, Mississippi, New Jersey and Rhode Island. More information about the program can be found at www.cms.hhs.gov/schip.

SAMHSA makes $20.6 Million Available for its Substance Abuse (SA), HIV, & Hepatitis Prevention for Minority Populations and Minority Reentry Populations in Communities of Color

The Center for Substance Abuse Prevention (CSAP) recently announced the availability of funds for its Substance Abuse (SA), HIV, & Hepatitis Prevention for Minority Populations and Minority Reentry Populations in Communities of Color Initiative. This initiative supports an array of activities to assist grantees in building a solid foundation for delivering and sustaining effective substance abuse prevention and related services. Specifically, the program aims to engage community-level domestic public and private non-profit entities to prevent and reduce the onset of SA, and transmission of HIV and hepatitis among minority populations and minority reentry populations in communities of color disproportionately affected by SA, HIV/AIDS, and/or hepatitis. While grantees will have substantial flexibility in designing their grant projects, all are required to base their projects on the five steps of SAMHSA's Strategic Prevention Framework (SPF) to build a service capacity specific to SA, HIV, and hepatitis prevention services. For application information for this grant, please visit: http://www.samhsa.gov/grants/2005/nofa/sp05001_HIV.aspx.

Challenge Grants for Building Projects

The Kresge Foundation offers challenge grants to support the construction or renovation of facilities, purchase of real estate, or purchase of major equipment or an integrated system. These "bricks and mortar" grants are made to tax-exempt, charitable organizations in a wide variety of fields such as human services, health care, higher education, and public affairs. Governmental agencies also are eligible to apply. Competitive proposals typically request grants ranging from one-fifth to one-third of the balance to be raised to complete the capital campaign. In dollars, this often ranges from $150,000 to $600,000. Applications are accepted year-round, with grants approved four times each year in March, June, September, and December. For more information, please visit www.kresge.org.

Program Spotlight:

President's High Growth Job Training Initiative: Council for Adult and Experiential Learning (CAEL) Nursing Career Lattice Project

Designed to address critical nursing shortages, the Health Care Career Ladder Project is working to build the pool of new health care workers through registered apprenticeship programs. CAEL simultaneously provides incumbent Licensed Practical Nurses with expedited pathways to careers as Registered Nurses through a hybrid distance learning/community college training model. The program targets older working adults who want to transition into the nursing field. The CAEL/Department of Labor Health Care Ladder Program is unique because it recognizes that licensed practical nurse (LPN) candidates can be drawn from non-healthcare professions as well as other branches of the healthcare field.

- Address turnover and skilled worker shortage
- Open the pipeline for potential healthcare workers
- Identify hybrid distance learning/community college training model
- Provide incumbent LPNs with expedited pathways to careers

Under its $1,998,200 grant from ETA, the Council for Adult and Experiential Learning (CAEL) is addressing both the current and projected health care workforce shortage through a unique holistic approach. In this model, CAEL will build the pool of new health care workers through Certified Nursing Assistant (CNA) and Licensed Practical Nurse (LPN) registered apprenticeship programs and then simultaneously provide incumbent LPNs with expedited pathways to careers as Registered Nurses through a hybrid distance learning/community college training model.

Projected Outcomes
CAEL will serve up to 3,000 new and incumbent workers during the grant period, advancing current healthcare workers and thus opening up the pipeline through which potential healthcare workers can move.

Sustainable Impact
CAEL will ensure the sustainability of this health care career pathway approach through its extensive partnerships with participating hospitals and national health care systems, the community college system, the registered apprenticeship system, and local One-Stop Career Centers, all of which have the infrastructure to adopt and support this unique approach after the federal investment has been fully expended. CAEL's commitment to addressing discrepancies and challenges in health care certification, licensing, and accreditation – all barriers that inhibit meeting the industry's pressing

workforce needs – will have significant lasting impacts on the development and acceptance of more universal, competency-based licensing and certification standards. For more information on CAEL's Health Care Career Ladder Project join us at this month's upcoming 2005 National Conference on Workforce Development and Job Placement Strategies for Health Care, February 24-25, 2005 in Miami, Fl. Identify and implement health care job training program solutions in your community to provide employment opportunities to unemployed and underemployed workers while satisfying the need for skilled health care workers. For more information, please visit: http://www.performanceweb.org/CENTERS/Social_Health/Events/S179/S179.htm.

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The Health & Human Services Performance Update is provided as an informational newsletter to all social services, public health and workforce development agencies about news and innovations in performance management reforms in social service and public health programs.

The Performance Institute is a private think tank that serves as the nation's leading authority and repository on performance-based management practices for government organizations. Its mission is to identify, study and disseminate the leading management innovations pioneered by "best-in-class" government programs at federal, state and local levels. Through its national conferences on pressing issues, interactive executive training programs, and best practice research projects, the Institute provides cutting-edge expertise in the design, implementation and evaluation of strategies to solve operational challenges and enhance government performance.

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