

UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS
Western Division

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ROSIE D., et al.,)	
)	
Plaintiffs)	
)	
v.)	Civil Action No.
)	01-30199-MAP
)	
DEVAL PATRICK, et al.,)	
)	
Defendants)	
)	
_____)	

Affidavit of Dr. Mary I. Armstrong

I, Mary I. Armstrong, hereby state as follows:

(Qualifications and Experience)

1. I am an Associate Professor in the Department of Child and Family Studies, College of Behavioral and Community Sciences, at the University of South Florida. I have been a member of the Department since 1995. The Department of Child & Family Studies (CFS) is one of eight departments and schools within the College of Behavioral & Community Sciences (BCS) at the University of South Florida. The mission of the Department is to generate hope and solutions for the complex issues confronting individuals, children, families and communities through leadership in research and evaluation, theory, policy, and practice innovation. Another commitment of the

Department is to promote accountability and improvement of services through supporting and influencing local, state, and federal policy-making bodies, funding agencies, communities and neighborhoods, and other organizations that support individuals and families.

2. I have a Ph.D. in Social Work from Memorial University of Newfoundland. For the past 35 years I have been engaged in practice, policy, and evaluation research activities regarding at-risk children and their families, with a specialized focus on children with emotional and behavioral problems and children in the child welfare system.
3. I have extensive experience in conducting evaluation, research, and policy studies for state, tribal and local governments. Currently I am the co-Principal Investigator on the evaluation of Florida's IV-E Waiver and the Principal Investigator for the evaluation of the Western and Pacific Child Welfare Implementation Center, a regional center that offers intensive consultation to states and tribal governments on major child welfare reforms. I have consulted with many states on system reforms in both children's mental health and child welfare. Currently I am consulting with the state of Washington on a child welfare reform that includes performance-based contracts and the privatization of case management services. I am also consulting with the state of Delaware on the development of a SACWIS system that supports an integrated children's services system.

(Review of the Case Review Protocol (CSR))

4. I strongly support the use of a case review protocol to assess system effectiveness. I agree with the assumption that every child and family is a microcosm of how "the

system” is serving children and families. I have used case review protocols in studies with many states, including Florida and Iowa, and have argued for their inclusion as a vital component for a total quality assurance system. I also believe that quality assurance systems need to rely on other indicators, including the use of administrative datasets (e.g., claims and eligibility files) and the use of standardized measures to assess progress on child functioning and clinical status.

5. I have reviewed the current version of the case review protocol, the Community Service Review, and have concerns regarding the scope of the review and its appropriateness as a monitoring tool in a lawsuit with a state Medicaid authority. I believe that some of the domains that remain in the current version of the CSR are the responsibility of other state agencies. Two specific areas are permanency and education. The consistency and permanency of primary caregivers domain in the CSR assesses the status of child/youth issues including having a permanent living situation, adoption, and placement stability. The areas of permanency and child safety are the responsibility of a state child welfare agency, and not of the Medicaid authority. Another CSR domain, education, includes an assessment of items such as whether the child is attending school and reading at grade level. Education is the responsibility of the state education department. It is appropriate for the CSR to assess whether a child is receiving appropriate behavioral supports related to his/her education.
6. In summary, I fully endorse the use of a case review protocol as one tool in a total quality assurance system and have recommended this use to many states and communities. I

question its use in a lawsuit against a Medicaid authority if its scope covers domains that are not the responsibility of a state Medicaid authority.

Signed under the pains and penalties of perjury this 22d day of September, 2010,

/s/ Mary I. Armstrong

Dr. Mary I. Armstrong