Community Based Care Annual Report of Quality Assurance Review Findings
FY 2009/2010
Summary of Case Management Practice trends:

Child Safety:

As CBCS continues to move the continuum of serving children in out of home care to servicing more families in an in-home setting it is imperative to be able to ensure the child’s continued safety. CBCS anticipated that we might experience an increase in re-abuse for children in home last year as more children remained in the home with the parents. However, this has not occurred and in fact just the opposite, we have seen a steady increase in the child’s safety being insured for in home cases.

Child safety questions focus on if the child was abused or neglected during the review period, and whether appropriate services were provided to ensure the child’s safety.

- CBCS has seen a steady increase each period under review with a total combined increase of 34% points from the beginning of the 2008-2009 reviews to the fourth period review of 2009-2010 reviews on maintaining children safety in their home. Case managers have been able to implement services timely and are focused on building the parents protective capacities to care for the child.
- CBCS has been consistent in performance of maintaining children safely in out-of-home care. Services have been appropriately provided to both children in licensed care and relative/non-relative placements to ensure the child remains safely in the placement. CBCS has immediately and effectively addressed safety concerns to resolve safety issues that were identified. Many of the safety actions resulted in removals of the children out of the placement but only after all attempts of services were exhausted to maintain the child safely in the home with the parent.
- CBCS expects to continue to see continued improvement on this performance measure as case managers continue to increase assessment skills. It is also essential that effective and timely services continue to be available to children and families.

Permanency:

CBCS develops case plan goals that have positive outcomes for children. Permanency can be achieved through the following goals: reunification, adoption, or guardianship. There are systemic factors that have impacted CBCS’ ability to reach permanency timely. As more and more children are served in-home settings the children that are placed in out-of-home care are increasingly becoming the more difficult families with older or more complex children that require an array of services, and with the poorest prognosis for successful reunification or the achievement of the other preferred permanency goals of adoption and guardianship. This has equated to an increasing length of stay and a larger APPLA population.

Another systemic factor is our differing interpretation and practice around goal change from reunification to adoption/guardianship. CBCS is currently working with Children’s Legal Services to get clarification regarding this issue.
Well Being:

CBCS has improved considerably since the previous year on ensuring that the educational needs of children are met. For children placed in out-of-home care documentation could be located in the file including: school reports, IEP’s, and written plans on how to meet the child’s educational needs. Case managers have documented in many of the files that children are receiving routine/periodic medical and dental appointments however, there is limited documentation from the provider to document the appointment, outcome or recommended treatment. Treatment providers for routine appointments generally only provide a receipt type form of the type of visit. In cases in which the child had substantial medical issues case management did an excellent job of having records in the file and monitoring the treatment plan recommendations. The most significant barrier to obtaining documentation was more evident from dental providers. The children placed in a licensed out-of-home care placement received services timely to address any identified mental health concern. For children residing in relative or non-relative placement case file reviews revealed delays in service delivery. CBCS has concerns regarding the turnover in mental health counselors providing treatment to the children in out-of-home care and the impact the turnover has on the effectiveness of the service and the likelihood of improvement in the child’s mental health.

Practice Trends

1. Assessments

CBCS’ case management agencies have not demonstrated an improvement in performance on completing thorough on-going assessments. Assessments continue to be completed late and contain no more information than what was included in the initial assessment. Assessments were not completed when a substantial change occurred and this impacted the case manager’s success in planning for reunification and for a placement change. On-going assessments are essential to identifying the needs of the family based on the status of the case. Assessments can help the case manager plan for events and explore different strategies to address the continuous needs of the family.
2. Family Engagement

CBCS has sustained performance in ensuring visitation between parents and their children and that they are frequent and in a least restrictive family friendly setting. One of the areas CBCS will continue to focus on for the upcoming year is the quality of family engagement. Case management agencies are required to have at least bi-monthly contact with both parents, and at least one of the visits must be a face-to-face contact per the CBCS system of care. Case reviews and FSFN reports document that this is not always occurring. CBCS’ contracted case management agency supervisors began meeting the parents at the Shelter Hearing which has improved engagement of parents at the front end of a case. It is a goal for the next year to improve the frequency and the quality of this parental contact. The earlier in the case that the case managers are able to engage a parent and provide effective timely services the more likely the parent will be successful, engage in services and improve the timeliness of reunification with their children. The quality of the engagement of the parent is an indicator for reunification readiness, or conversely the lack of for adoption/guardianship.

3. Service Planning and Provision

CBCS has streamlined funding approvals to ensure that families can receive service referrals timely. However improvement is needed in obtaining progress notes and maintaining contact with service providers. CBCS is restructuring quality assurance initiatives as it relates to utilization management to evaluate the effectiveness of the services provided by network providers. Currently the CBCS Director of Utilization is responsible for funding approvals; troubleshooting service barriers and reviewing the quality of provider notes. As the children and families we service enter our system of care many have complex service needs. Our goal is to evaluate the timeliness of the service implementation, determine how provider turnover affects case progression, verify coordination between multiple providers, and ensure that the providers understand the service needs of the family. It is case management’s responsibility to monitor the
services provision and ensure the appropriate service referral was made but it is imperative that CBCS evaluates the quality of service provision and the outcomes to the child/family.

4. Promoting Case Progress

CBCS develops case plans designed to achieve permanency. Supervisors need to monitor when case plan goal dates are expired. Case plans need to be amended when a goal is changed or goal date has expired. An area needing improvement is that all reunification and maintain and strengthen case plans should also have tasks for fathers. In many of the cases reviewed the case plan addressed the mother’s needs but did not always include tasks for the father because the father was not an active participant in the case.

5. Supervision and Oversight

Supervisor reviews have made a slight improvement since the last fiscal year. Reviews are being completed at least quarterly (usually monthly) and address the minimum requirements of reviewing safety, permanency, and well-being. However, the supervisor reviews are very task focused and are not qualitative or clinical in content. In many of the cases it appears supervisors did not review the previous supervisory review they had completed as many of the directives or guidance provided to case managers was not completed by the subsequent review. Reviewers were unable to locate documentation of barriers to complete tasks assigned to case managers in previous reviews. Generally supervision that is occurring consists of either 1) supervisors having a discussion with the case managers and not verifying the documentation in the file with what is verbally being reported. (This is causing some discrepancies between what is written in case
notes by the case managers and what the supervisor has entered in the supervisory note). 2) The supervisor is only reviewing case notes and is not reviewing FSFN to ensure the accuracy of the information entered and not troubleshooting with the case manager to remove barriers.

### Addressing Findings

CBCS has updated the Quality Management Plan for the 2010-2011 fiscal year and includes both QA and QI activities to address the deficiencies in the following areas: assessments, family engagement, quality of services and supervision.

In September 2010 a specialized in-depth review will be completed on the quality of supervision. 100% of the cases per supervisor will be reviewed to evaluate the strengths and trends of each unit supervisor. A plan will be developed with each case management agency to build on the strengths of each supervisor and areas needing improvements will be addressed. A second review will occur in the second half of the year to measure improvements have been made and to identify further strategies to improve the supervisor’s performance.

CBCS will improve utilization management’s evaluation of the effectiveness and the quality of services our network is providing. CBCS will conduct reviews and implement changes based on the finding of these reviews. CBCS anticipates that improvement actions could increase placement stability, and achievement of stable permanency options for the children and families served in Seminole county.

CBCS will continue to use performance reports, compliance reports, and surveys that are distributed to the network to evaluate and establish on-going quality assurance initiatives. CBCS has developed monthly reports to address compliance with timeliness of initial and on-going assessments, and to measure parent contact. This data will continue to be reviewed as well as the information from case file reviews to ensure ongoing improvement is occurring. Data and performance are reviewed monthly at the CBCS/Case Management Program Director Meeting. Program Improvement Plans are implemented when necessary and monitored accordingly.

### Regional Input

The Statewide quality assurance process includes a review of case files, case specific interviews, and a quarterly review of all seven systemic factors for each Community-Based Care lead agency. A systemic review of CBC of Seminole was completed by DCF Central Region QA through conducting interviews and focus groups with key agency staff, stakeholders, and community partners. The results are summarized below.

#### I. Agency Responsiveness:
Responses from the following Stakeholders: Circuit 18 Operations Manager and Community Based Care (CBC) Executive Management.

- The CBC has begun a Federation of Families that is primarily made up of foster and adoptive parents. The CBC receives feedback from their active Youth Advisory Board. The CBC holds monthly stakeholder meetings facilitated with the Sheriff’s office. There are also meetings with the Guardian Ad Litem program and the Dependency/Delinquency Judges periodically. Engagement by the CBC occurs with the Children’s Cabinet of Seminole County, the Foster Parent Association and is one of the key partners in the Pathways to Homelessness Program.
• The CBC is effective in ongoing consultation with consumers, service providers, tribal representatives, foster care providers, juvenile court and other public and private child and family serving agencies. There are ongoing Chamber Meetings, contacts and collaboration with the Youth Advisory Board, as well as with the Department of Children and Families (DCF) for breakthrough services. Consultations with the juvenile court are noted through court liaisons and the Youth Advisory Board. These collaborative efforts have resulted in revision of the teen plan and the normalcy plans used by the CBC. The weakest link currently is communication and collaboration with the parents. There was some collaboration with DCF and parents in a round table discussion to address the communication and inclusion of these participants; however, this philosophy has not filtered into the everyday workings of case management.

II. Case Review System:
Responses from the following Stakeholders: Circuit Dependency Judges; Foster Parent and Children’s Legal Services (CLS).

• The CBC is extremely effective in ensuring that case plans, filing for termination of parental rights and judicial reviews are written and provided to the court in a timely manner. Although timely, the case plans being developed in tandem with the families is not so readily known. Some clients are of low educational level and are incapable of fully comprehending what is being asked of them either to complete or to provide.
• The CBC has been asked about providing a more precise face sheet to list all tasks, services, timeframes and provider referrals on a single page for the parents as an easy reference checklist. The participation and roles of case participants in permanency staffing was not known.
• There is some difficulty with Foster Parents in regards to their expectations for the children reaching permanency or adoption in their care. At times, it appears that the CBC and case manager want to “steamroll” the case to termination of parental rights without the proper processes being followed. Some foster/adoptive parents are coming to court and professing a bond with a child (baby) that had been placed in their home for several weeks.
• The system is “a well oiled system” and the case managers are always there, always know what is going on and are always available to address the needs of the family.
• Concern noted that case plans are not specific as to the children that are being served, but rather are very specific for the parents. The case plans are more designed to reflect the parent’s needs and services and though the children may be receiving services, they are not listed or delineated on the case plan document; however, this information is, most times, located in the child’s resource book as part of the CBHA.
• Foster Parents are not notified or are notified at the last minute of the judicial reviews and other hearings related to the children placed in their care, though this depends on the assigned case manager.
• CLS and case managers have effective coordination and communication between themselves.
• The CBC is very effective in ensuring case plans are written timely and input is gathered by the case managers from the case participants prior to the case plan conference set by the court. Judicial reviews are also written timely and they are the funneled information to the court to address the goal, tasks and services for the family. There was some lag in implementing the termination of parental rights process. The CBC in conjunction with CLS is working towards correcting the lag time by tightening time frames.
• CLS and case management are housed in the same building and collaboration and communication with case managers is very good. Per Mary Cagle’s directive, case managers do not speak in court unless directly addressed by the Judges.
III. **Foster and Adoptive Parent Licensing, Recruitment and Retention:**
Responses from the following Stakeholders: Child Protective Supervisors (CPS) focus group, Case Management Supervisors from Case Management Agencies (CMA) focus group, Foster Parent, and CBC Licensing Manager.

- Although it was known that a recruiter (with marketing background) was recently hired, the licensing, recruitment and retention practices of the CBC were not known to all respondents.
- The CBC and the Sheriff’s Office convene quarterly to address problematic foster homes, foster/adoptive parents and other issues related to their working relationship.
- Can contact CBC management staff in order to rectify any issues or concerns they may have on a foster home, if the issue is not resolved.
- There are some communication problems between the case management staff and protective investigators, specifically as related to commencement with case management when they are the reporters.
- Foster homes go through yearly re-licensure and have to complete a certain amount of training in order to remain current and are reviewed upon re-licensure. In regards to home studies, it is known that the Child Placing Agencies (CPA’s) complete an invasive home inspection, as well as a detailed life history of the Foster Parents. Case managers and supervisors receive questionnaires in regards to a Foster Parents abilities and home environment. Any issues arising from Foster Parents are emailed to intake/placement and the CPA is notified. Some CPA’s provide follow up to their concerns and some do not.
- There is a current campaign to recruit foster/adoptive parents for teens through the community churches and high schools. There is a checklist the prospective family is assessed with and then they complete an extensive training. A one-on-one assessment is then completed prior to graduation and a recommendation is sent to the CPA for further review.
- The training provided to Foster Parents is not adequate to address some of the more difficult situations, such as children’s behavioral issues. There is some difficulty in finding day care facilities that address children’s difficult behaviors.
- All the CPAs complete home studies for the foster and adoptive parents and are sent for review to the CBC Licensing Manager for approval and forwarding to DCF. For those homes that present with concerns or issues they are addressed via review and/or round table discussion.

IV. **Quality Assurance System:**
Responses from the following Stakeholders: CBC Executive Management and CBC Quality Assurance (QA).

- The CBC has expanded the QA, rather than an event, to the day to day operations and everyday processes currently in place. The CBC is very effective in evaluating the quality of services provided, identifying strengths and areas needing improvement, providing relevant reports and evaluating program improvement measures. The QA system is more expansive and there is continued accountability of performance by frontline staff and supervisors.
- There are a certain number of formal reports provided to Executive Management within established timeframes; however, there is a significant amount of communication on the day-to-day aspects of QA on a continuing basis. One of the weaknesses indicated is the connection between the outcomes with those performance measures that are reviewed. For example, connecting the permanency measures with the timeframes required and those measures that are designed to push the case forward to permanency. “This is an inclusive system in which quality is integrated into all facets of the process.”
The QA system is effective in evaluating the quality of service, identifying strengths and areas needing improvement. The CBC utilizes their Performance Improvement Plan to build on those things that are going well, as well as addressing those that continue to require improvement. Programs are monitored not only with file reviews, but with surveys and contacts to ensure the services that are being provided are inclusive. There are a number of reporting techniques, via email and continued communication with supervisors, frontline staff, and other programs that provide input of program improvement measures. QA is embedded in all the daily activities of the CBC.

V. Service Array:
Responses from the following Stakeholders: Independent Living youth, Child Protection Team (CPT), and Community Service Provider.

- CBC service array is effective in meeting needs. Services are readily accessible and the case manager is always available to assist with any other services deemed necessary.
- Funding does not appear to be an issue when requesting services. Suggestions for additional services included cooking classes and a thorough explanation of Medicaid for health issues. Involvement with the CBC and the Youth Advisory Board positively exposes the youth to the community.
- The CBC has a well rounded availability of services to meet the needs of the children and families involved in the dependency system. Services are individualized effectively and no funding issues exist preventing the children/families in obtaining needed services.
- The current service array provided by the CBC is inclusive of prevention and reunification services, though not for adoption or post adoption needs. The services are individualized in collaboration with the family to meet their needs. Currently there is a week waiting list with the community provider, which will be resolved shortly due to new hires. The waiting list is due, mostly to the enormous volume of investigations referred. Community resources are sought prior to requesting financial assistance from the CBC; however, there has been great success in getting the needed funding when required.

VI. Staff and Provider Training:
Responses from the following Stakeholders: Foster Parent, Case Managers focus group, and CBC Trainer.

- The provision of training is effective. The CBC Trainer completes lunch-n-learns for training staff both within the CBC and their contracted agencies.
- Attendance of trainings is tracked through sign in sheets and the CPAs track Foster Parents training through logs. Other agencies come in to inform staff of the services they provide. QA review results are provided by QA Staff and are incorporated into the upcoming trainings when necessary.
- Training provided by the CBC or how it is tracked is not readily known.
- Concern noted case managers and supervisors risk assessment skills are deficient. Continued reports are being received on the same family for the same maltreatments.
- QA review results for CPI’s in Seminole County are published and identified areas needing improvement are addressed and additional training is provided. The relationship between CPIs and case management regarding joint investigations is tenuous and training regarding working agreements would be beneficial.
- Pre-service training is adequate and includes field trips to community providers. Case managers follow the case manager currently assigned to a case, which will be transferred to them and assignment of a Mentor to assist in their transition. The CBC does not have a database to track training; however, certificates are received and input into Skillnet to maintain training hours.
Training provided is topic based. For example, Motivational Interview Training was particularly useful in engagement with the parents. QA review results are addressed on a one-on-one basis through the debriefing process. The CBC QA has assisted on cases by providing technical and directional assistance to ensure safety, permanency and well-being of the child.

- Several modes of training are provided to include scavenger hunts, lunch-n-learns and classroom instruction/interaction. Training is tracked through sign-in sheets and individuals are responsible to record their trainings in Skillnet. Topics for training are driven by QA review results and QA staff is involved in the training committee. The CBC is currently working on specific interviewing techniques for subgroups and a Services 101 training that provides tips and tricks for navigating FSFN, usable websites and other clerical short cuts that the case managers can utilize.

VII. Statewide Information System:
Responses from the following Stakeholders: Circuit 18 Operations Manager, CPI and CPS supervisor focus groups, Case Managers and Case Management Supervisor (both CMAs) focus groups,

- There is some difficulty pulling the reports from the system and at the time of interview, only one investigation supervisor had the ability to pull reports and was doing so for all supervisors on a daily basis.
- Reports provide useful information, specifically for timeliness issues. Data entry is monitored only by the supervisors. Administrative staff is also integral to ensuring data is entered correctly initially or corrected once an error is found.
- FSFN is used on a daily basis to input risk assessments, notes, search for prior reports and to input any other actions taken to ensure child safety. Only pull prior reports from FSFN which is useful information prior to commencement of a case. As to data integrity, investigators are responsible to ensure the initial data entered is correct. Data errors are sometimes caught by supervisors and on occasion, by Second Party Reviewers.
- FSFN reports are pulled on a weekly basis to provide feedback to case management staff. These reports are used to back-up the workload of each case manager and to ensure equity in case assignment. Reports are useful to a certain extent, specifically for timeliness of requirements, but supervisors did report having their own tracking logs for other critical factors. The AFCAR error report is provided on a weekly basis and that data entry errors are corrected by a Data Specialist assigned to their specific agency. The Data Specialist’s are responsible to correct and ensure data integrity.
- Case Managers use FSFN to enter all data related to their specific assigned cases.
- Average case management caseloads are fifteen (15) children. Caseloads vary by type, for example, age of children. Supervisors provide report information on a weekly basis and notify case managers if something needs to be addressed.
- At times, when entering case plans, family assessments and the like, the document “disappears” in the system and the data has to be entered a second time, which usually occurs with less detail.
- FSFN is utilized to look at progress on contract measures, view reports such as those pertaining to client visits and adoption numbers, as well as review incident report structure and content. Contract managers review and compare the data to ensure integrity and provide training when required.

Summary and Recommendations:
In summary, CBC of Seminole has incorporated QA activities in the day to day process throughout the system of care. There continues to be open communication and collaboration with community agencies through several venues. CBC of Seminole is making strides toward licensing, recruiting and retaining quality foster and adoptive parents to provide care for the
children they serve. Staff and provider training are being provided with noted needs for expansion for Foster Parents and frontline staff. The stakeholders indicated the statewide information system is providing adequate information to ensure timeframes and case management activities are recorded accurately. CBC of Seminole’s case review system is ensuring children and families are reaching permanency goals and providing appropriate services toward the achievement of those goals. The service array CBC of Seminole currently has appears to be inclusive and is individualized based on the needs of the participants of the cases received.

The following is recommended based on the responses from the stakeholders interviewed:

- Additional training to occur with foster and adoptive parents regarding permanency timelines, termination of parental rights and expectations of possible changes throughout the course of the dependency case, as well as what to expect in court. In addition to training, the licensing specialist and case managers should be having frequent open discussions with the foster and adoptive parents regarding the safety, permanency and well-being of the children in their homes, to include how to professionally present their issues and concerns regarding the children to the court.
- CBC Seminole, in conjunction with the Seminole County Sheriff’s Office, initiate meet and greets for the investigators and case management staff. This should be some kind of ongoing collaborative effort, both through professional training opportunities and informal meetings to facilitate relationships and accountability between the frontline staff.

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Signatures (deemed pertinent by the CBC and region if collaborating) Date