QUALITY MANAGEMENT
Fiscal Year 2009-2010 Report

An Assessment of the Quality of Practice of Case Management Services

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SECTION ONE – QUALITY MANAGEMENT DEPARTMENT

Agencies involved in the provision of child welfare case management and supervision services are required to have a system of measuring differences in the quality of care and outcomes of the children and families served, and a mechanism for focusing continuous quality improvement on areas in need of improvement.

The primary purpose of the Heartland for Children’s (HFC) Quality Management System is to strengthen practice and improve the timeliness, accessibility, quality and effectiveness of services. HFC seeks to identify in-process and end-process measurements to ensure conformity with federal requirements and achievement of the Contract Performance Measures set forth in HFC’s contract with the Florida Department of Children and Families. It is our belief that commitment to continuous improvement in quality services and outcomes for children and families of Polk, Highlands and Hardee counties is a shared responsibility throughout the HFC System of Care.

1.1: BACKGROUND

The Regional Quality Management System implemented statewide in July 2008 requires a minimum number of case files to be reviewed by Quality Assurance (QA) staff from the Regions and Community Based Care (CBC) agencies each quarter. This report provides findings from the reviews that were conducted during the second, third, and fourth quarters of fiscal year 2009-2010 for Heartland for Children.

Twenty-five cases were reviewed each quarter with a total of 75 cases reviewed for fiscal year 2009 - 2010. The QA review of case management practice is a three step process.

- The first step requires CBCs to conduct an internal review of 17 of the 25 randomly selected cases. This process is known as “Base Reviews.”

- The second step requires the Regions and CBCs to conduct a review of the remaining eight cases jointly. This is known as “Side-by-Side Reviews.” Regions and CBCs, working together, review the same case, at the same time, using the same standards, and subsequently reach consensus on measuring performance. This process creates an environment that helps ensure ongoing inter rater reliability and builds effective partnerships.

- The third step is requires the Regional QA staff to identify two cases for an “In-Depth Review”. In this process, the Regional QA staff conducts case specific interviews, e.g., interviews with the child, the parents, foster parents, providers, and others involved in the case. In addition, interviews are conducted with other community stakeholders not involved in the specific case.

1.2: METHODOLOGY

Each quarter, the Family Safety Program Office provides an extract for each CBC that is inclusive of all cases that are eligible to be reviewed within the quarter. The extract is stratified by permanency goals. From the extract, cases are selected based upon the following criteria:
- **Maintain and Strengthen** - For cases with the goal of Maintain and Strengthen, four cases are to be selected involving children under six (6) years of age and four cases involving children over six (6) years of age.

- **Reunification** - For cases with a goal of reunification, eight (8) cases are randomly selected.

- **Adoption** - For cases with a goal of adoption, four (4) cases are randomly selected.

- **Permanent Guardianship** – One (1) case is randomly selected with a goal of permanent guardianship.

- **Permanent Placement with a Relative** – Two (2) cases are randomly selected with a goal of permanent placement with a relative.

- **Another Planned Permanent Living Arrangement (APPLA)** – Two (2) cases are randomly selected with a goal of APPLA.

During the 2009-2010 fiscal year, cases were reviewed for three quarters due to the completion of specialized reviews on psychotropic medications during the first quarter. As a result, a total of 75 cases were reviewed. The cases were randomly select by goal as illustrated in the graph below. The sample of cases reviewed by goal differs slightly from the prescribed sampling process due to incorrect labeling of goals in FSFN as well as a small sample of cases with a goal of permanent placement with a fit and willing relative. Additional APPLA cases were swapped out during one quarter due to DCF specialized review.
SECTION TWO – SUMMARY OF CASE MANAGEMENT PRACTICE TRENDS

The section addresses QA findings over the fiscal year. Strengths in casework practice as well as areas needing improvement are outlined. The Quality of Practice Standards for Case Management Review Tool is utilized to review cases. The tool consists of 138 questions, separated into the following sections: safety, permanency, CFSR, (Child and Family Services Review), and well-being.

2.1: QUALITY MANAGEMENT ACTIVITIES

During the 2009-2010 fiscal year, HFC was involved in numerous quality management activities that are listed below:

- Each quarter (with the exception of the 1st quarter), HFC’s QM team evaluated improvement in supervisory reviews, engagement of parents, frequency of visits by the Case Manager, and the quality of these visits. These reviews evaluated performance in the above areas based upon a 90 day review period instead of the 9 month review period utilized in the base reviews.

- As an element of HFC’s contractual requirements, during the base reviews, when deficiencies were noted in the areas of initial family assessment, unplanned placement changes, supervisory reviews, visitation with parents and sibling, involvement of parents in decision making, independent living services, and frequency of visits, a Request for Action (RFA) was submitted to the Case Management Organization (CMO) for resolution. Once resolved all RFAs meeting the above criteria were also submitted to the DCF Contract Manager for further review and monitoring.

- The QM team and HFC’s executive management team developed a birth parent survey that was piloted with Gulf Coast Community Care in an effort to evaluate parents’ satisfaction with Case Management services.

- Semi-annually, relative/non-relative and foster parent surveys were distributed to obtain feedback on satisfaction with services.

- On a weekly basis, HFC’s QM Specialists discussed elements of the case review tool with participants on the Performance Improvement Call in an effort to increase an understanding of quality standards.

- On a quarterly basis, the Performance and Quality Improvement Committee (PQI) met to discuss various quality improvement measures.

- Specialized reviews were conducted throughout the fiscal year to evaluate three areas:
  - Supervisory reviews: In December 2009, 48 cases were reviewed to specifically evaluate the quality of the supervisory reviews. Based upon these reviews, it was determined that the supervisory reviews were strong in the areas of compliance and providing appropriate direction; however, improvement was needed to fully address safety, well-being, and follow up on tasks. To address the deficiency HFC’s QM specialist coordinated with the CMOs to sit in and videotape the scheduled qualitative discussions with their staff. The second part of this action plan was then to review the supervisory
o Psychotropic medications: During the first quarter of the 2009-2010 fiscal year, a total of 125 children were reviewed to evaluate whether or not express and informed consent or a court order was obtained for children in out of home care who were prescribed psychotropic medications. This review also determined the accuracy of the information documented in FSFN. As a result of this review, express and informed consent was obtained for children in care; and when consent could not be obtained, a court order was obtained. To monitor progress on the RFAs submitted, a weekly meeting was held between the CMO and the QM staff until all RFAs were resolved.

o Independent living: In March 2010, a specialized review was conducted to evaluate services to independent living youth who were 17 years or older. As part of this review, the QM team conducted interviews with the youth to determine the services provided and their readiness to age out of care. In May 2010, another review was conducted for youth ages 13-16 years of age.

• The QM team conducted priority reviews on six cases as requested by the Executive Management Team. The priority reviews were conducted to evaluate concerns regarding the death of a teen due to a substance abuse overdose, the death of a three month old, the hospitalization of a one month old, injury to a two month old child, independent living services provided to an incarcerated youth, and concern raised by youth during an interview pertaining to an extending visit during the holidays.

2.2: EVALUATION OF PERFORMANCE

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<th>HFC Comparison of Fiscal Year Results by Outcome</th>
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HFC evaluates the quality of services through the completion of case reviews, data analysis on the weekly performance improvement call, incident reports, specialized and priority reviews, and satisfaction surveys. Based upon these tools, several areas of strength and opportunities for improvement were identified as discussed below:

➢ STRENGTHS

• In the area of safety, HFC has demonstrated significant improvement with keeping children safe while residing in home with one or more parent.

• Completion of qualitative initial family assessments was an area noted as needing improvement during the 2008-2009 fiscal year; during the 2009-2010 fiscal year, this area showed significant improvement.

• Assessment of the child’s mental health needs is an area that demonstrated improvement during the 2009-2010 fiscal year.

• Efforts to ensure visitation showed dramatic improvement this fiscal year as HFC placed continued focus on family centered practice.

• Completion and implementation of teen plans for independent living youth is area of continued strength; the teen plans allow for teens in foster care to engage in normalcy activities.

• Placement stability continues to be an area of strength as identified in the case reviews.

• Based upon the results of the foster parent surveys, foster parents are generally satisfied with the support and services provided by their licensing and re-licensing specialists.

• Based upon the results of the relative/non-relative surveys, caregivers are overall satisfied; this is an improvement since the previous survey distribution.

➢ OPPORTUNITIES FOR IMPROVEMENT

• During case reviews, the reviewer identified several emerging dangers that were not documented as addressed in FSFN or in supervisory reviews. This is an area in need of continued improvement.

• The ongoing family assessment was identified as an area in need of continued improvement. Since the last fiscal year, the standard for family assessments was modified to include only family assessments documented in FSFN; whereas, the standard previous allowed for several documents that could be utilized to complete the assessment. The CMOs are currently utilizing FSFN exclusively for the completion of the ongoing family assessments and are working on improving the quality of their work product as well as reducing the number of family assessment showing as pending in the system.

• Dental service provision continues to be an area needing improvement; the obstacles identified as a barrier to improvement is the lack of dental providers available in Polk, Highlands, and Hardee counties who accept Medicaid.

• Engaging the father is an area that was identified as a continued need for improvement; the obstacles identified with father engagement are their incarceration and lack of diligent search efforts. HFC in partnership with the CMOs has launched a fatherhood initiative targeted at improving engagement of fathers.

• Although the Case Managers generally visit with the children and caregivers every 30 days, there continues to be a need to increase visits when the needs of the
participants or the risk to the children dictate a greater frequency. In addition,
visits with the parents, when the goal is reunification or maintain and strengthen,
continues to be an opportunity for improvement.

- The quality of visits, although improved since last fiscal year, is an area in need of
  further improvement. The visits often include basic information about the visit, but
  fail to document that children were seen alone and often do not sufficiently
  describe the discussions and observations in the visit.

- Documentation of provision of services to meet the children’s educational,
  physical, and mental health needs continues to be an opportunity for
  improvement. Often the FSFN notes document some service provision in these
  areas, but the files fail to contain the provider reports/notes.

- Although the majority of supervisory reviews are completed on a quarterly basis,
  the reviews continue to struggle with documenting all elements of safety and well-
  being and providing follow up on completion of tasks. Documenting all elements
  as it pertains to permanency has improved significantly during this fiscal year.

- Based upon the results of the foster parent surveys, foster parents are dissatisfied
  with the information provided at the initial placement of children in their home and
  the difficulties with Medicaid.

**2.3: QUALITY IMPROVEMENT EFFORTS**

Based upon deficiencies identified during the quality management activities, numerous
efforts were made to improve the quality of services provided to children and families as it
relates to safety, permanency and well-being.

- **Ongoing Family Assessments:** An analysis of ongoing family assessments was
  conducted in March 2010. Based upon this analysis, it was identified that the
  primary reason family assessments were rated as a deficiency was due to the lack
  of completion in FSFN. As a result, the QM team worked with Data Services to
  develop a FSFN ad hoc report that indicates current compliance with family
  assessments based upon completion every six months. This report is posted
  weekly as part of the performance improvement packet. Effective June 30, 2010,
  compliance was 76%.

- **Supervisory Reviews:** During the 2009-2010 fiscal year several efforts have
  been implemented to improve the quality of supervisory reviews:

  o Supervisors were trained on the qualitative discussion guide in January
    2009 for the initial training. Based upon the need for improvement, an
    additional training was provided specific to each CMO in July of 2009.

  o During the second quarter of fiscal year 2009-2010, the QM Specialists
    observed the supervisors as they conducted as supervisory review on a
    case reviewed during the base reviews. Upon documentation of the
    supervisory review in FSFN, the QM specialist met with the supervisor to
    discuss the observation and the documentation of the review in FSFN

  o A special review was conducted on the supervisory reviews to determine
    the primary reason the supervisory reviews were not considered
    qualitative. Based upon these reviews, it was identified that the areas of
    safety and well-being were the primary reasons for deficiencies.

- **Dental Services:** Based upon the continued struggle to obtain dental services in
  Polk, Highlands, and Hardee. HFC is pursuing the feasibility of grant opportunities
through Healthy Smiles, Healthy Children (HSHC), and the Foundation of the American Academy of Pediatric Dentistry to help with service deficiency.

- **Father Engagement:** Father engagement was identified as an opportunity for improvement based upon the results of the case reviews. This need was brought before the PQI committee; as a result father engagement efforts have been initiated. In October 2009, trainings were held to help educate Case Managers on incarcerated parents. In June 2010, a survey was distributed to all Case Managers to obtain their feedback on obstacles to father engagement and to garner suggestions about ways to engage fathers. In June 2010, HFC purchased Father’s Day cards for the CMOs to distribute as means to foster a greater level of involvement.

- **Family Centered Practice:** Shifting case management to the family centered practice philosophy is an ongoing improvement initiative that will continue in the upcoming fiscal year. This approach is intended to improve the overall quality of services and engagement of families as measured by the quarterly QA reviews. HFC has embraced the philosophy behind family centered practice and required all case managers and supervisors to participate in the 5 day QA training. The introduction to family centered practice has also been integrated into the pre-service training curriculum for all new hires. HFC has also offered the trainings to our stakeholders to include DCF investigations, Guardian Ad Litem, and Local Judges and Magistrates.

- **Foster Parent Satisfaction/ Placement Stability:** HFC hosted a compression planning session to address perceived barriers in communication between foster parents, HFC and the CMOs. The session was used as a means to brainstorm strategies to improve service delivery and lines of communication with our foster parents, thus mitigating the need for alternative placement options.

- **Independent Living:** Independent living has historically been an area in need of improvement for HFC. Beginning in 2009 until current HFC has implemented numerous performance improvement strategies to increase the quality of services for youth in care.
  - In October of 2009, HFC established a peer mentoring program and hired four former foster youth to work with youth ages 13 – 15. Later that same year an Ameri-Corp grant was received and an additional 40 volunteers were hired to mentor youth and young adults.
  - Life skills provision has greatly been enhanced for the FY 2009-2010. Workshops on Arise life skills, passport to self-sufficiency, combat cooking, money management, and I CAN were incorporated into the array of skill development opportunities for youth. The I CAN program is sponsored in conjunction with HFC and Devereux of Florida. I CAN is a six week program aimed at providing young adults real world experiences. The program aids in developing personal insight and coping skills to everyday life occurrences. In the control setting of the program, youth and young adults learn to identify their options, make comparisons, analyze and make appropriate decisions.
  - HFC hosted a graduation banquet in honor of twenty-eight youth and young adults graduating from high school or higher education. A field trip to Universal Studios was also sponsored as means to celebrate their success.
  - A training session on normalcy and money management was incorporated into the annual HFC Conference specifically for youth and young adults in care. A total of ninety-six youth were attendance at this event.
HFC also sponsored numerous youth to attend several conferences and summer camps to include the Myron Rolle Leadership Camp, 4H Ocala Leadership Camp, 4H Shooting and Fishing Sport Camp, About Face Summer Camp, and the Project Life Camp. HFC sponsored over thirty youth to attend the National Independent Living Conference in Nashville, TN, the Florida State Foster/Adoptive Parent Association (Teen Conference) 2010, and the National Independent Living Conference in Washington, DC.

In addition to the activities mentioned above, HFC conducted a survey of sixty young adults receiving Road to Success services. The results of the survey offered that overall 96% of the young adults were satisfied with the services they received and 97% of the young adults reported that they had received valuable guidance and support from their success coordinators. The survey also noted that 95% of the young adults reported that they were helped to set and achieve personal goals to aid in their independence. The survey results support the belief that HFC is providing quality services to aid youth in transitioning to adulthood.

SECTION THREE – PRACTICE TRENDS

This section evaluates the practice trends of safety, assessments, family engagement, service planning and provision, promoting case plan progress, and supervisory reviews based upon the results of the quarterly case reviews.

3.1: SAFETY

Overall, the safety trends identified for the fiscal year 2009-2010 were positive. Children residing in home previously had been identified as receiving a significantly higher rate of re-abuse during the last fiscal year, when compared with children in out of home care. During this fiscal year, a greater number of children in home were kept safe. This performance improvement may be attributed to the addition and modification of in home service providers contracted by HFC.

3.2: ASSESSMENT

The trends identified as related to safety shows an overall upward movement; however, further improvements efforts are needed in multiple areas as related to assessments. Increases in performance occurred with the initial family assessment, exit interviews, assessment of children, assessment of the mother and caregiver, and assessment of the child’s mental health needs. However, further improvement efforts are needed regarding the ongoing family assessment, services to post placement supervision cases, and for the pre-independent living youth. Several improvement initiatives have been initiated as specified above.

3.3: FAMILY ENGAGEMENT

Overall, the trends regarding family engagement has shown little improvement over the fiscal year. Many areas have remained the same since the last fiscal year. The areas that have demonstrated drastic improvement include visitation between the parents and children and efforts to engage the mother.
3.4: SERVICE PLANNING AND PROVISION
Overall, the service planning and provision trends indicate some improvement in providing appropriate services and referrals consistent with family needs. Although not reviewed last fiscal year, normal life skills activities provided to teens appears to be an area where we have excelled. Areas in need of continued improvement include the well-being areas of education, physical health, dental and mental health services.

3.5: PROMOTING CASE PROGRESS
Overall the trends indicate that placement stability, case plan goal, and the content of the case plan are developed to achieve permanency and maintain the child safely in home. Although there was a fourth quarter decline in performance in promoting case progress through the delineation of appropriate tasks, overall this area has been one of noticeable improvement.

Maintaining the child safely in home following discharge from out of home care has been an area without any improvement since last fiscal year. This standard is discussed and tracked weekly through discussions in the weekly performance meeting around contract measure FS 302.

Inquiries regarding Native American or Alaskan Native heritage is an area of ongoing improvement. A targeted review has been completed this past fiscal year on this standard and is also monitored internally by HFC contract management staff. Improvement has been ensuring the inquiries are received from DCF investigation at the point of case transfer but the information is not typically verified by case management. Submitting ICPC requests in a timely manner following the Order of Compliance is also an area of concern; however, the documents and ICPC packet submitted reflects quality work.

3.6: SUPERVISORY REVIEW AND OVERSIGHT
As mentioned earlier supervisory reviews continues to be an area of concern for HFC. As noted below supervisory reviews were strong in the areas of compliance and providing appropriate direction; however, improvement was needed to fully address safety, well-being, and follow up on tasks. Overall supervisory reviews have not been qualitative primarily due to the safety and well-being areas not being fully addressed. In the instance were case specific guidance and direction was provided, follow-up on the tasks outlined were not always noted. Continued technical assistance through one on one discussions and group sessions is being provided to the CMO supervisors to improve performance in this area.

SECTION FOUR – ADDRESSING FINDINGS

4.1: ADDRESSING FINDINGS
Initiatives implemented based on the case review findings are as addressed above. One of the primary activities in which HFC addresses and monitors contract measures and identified case management standards are through the weekly performance call meeting. The performance improvement packet developed for these meetings contains the current
baseline performance status on contract and other identified measures. The packet also contains comparative statewide data, trends, strengths and areas for improvement. The performance improvement packet is distributed weekly to over 100 stakeholders including HFC board members, providers, CLS, GAL and DCF. The Performance Improvement Call and Meeting is utilized as opportunity to discuss deficiencies, determine action plans, and monitor measures put in place. The call is open to all HFC staff, HFC’s Board of Directors, Case Management Organizations, Contracted and Community Providers, Child Legal Services, Department of Children and Families, and other community stakeholders. Data included in the packet is obtained from Florida Safe Families Network (FSFN), DCF Dashboard, HFC Tracking Systems, Mind Share, and self-reports from CMOs and other providers.

SECTION FIVE – 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 HFC was completed through conducting interviews and focus groups with key agency staff, stakeholders, and community partners and the results are summarized below.

5.1: Systemic Factors

I. Agency Responsiveness.
Stakeholders surveyed for this Systemic Factor: Circuit 10 Administrator, Heartland for Children (HFC) Executives, several Community Based Care (CBC) Program Directors, Contract Manager, HFC’s Data Specialist and the Senior Vice President for One Hope United, Case Management Organization (CMO).

Responses from these stakeholders included the following:

- All Stakeholders indicated that HFC is quite effective in their engagement in ongoing consultation with consumers, service providers, foster care providers, juvenile court and other public and private child and family serving agencies. This is evident in feedback obtained from consistent surveys completed, such as Foster Parent Surveys, Exit Interviews, Bio-Parent and Provider Surveys.
- The Youth Advisory Council has been fundamental in regards to licensing, as feedback is obtained from teens currently being served through the System of Care.
- HFC is currently piloting the Eckerd Youth Quality Initiative Program in order to improve the quality of care for children in Foster Care, which incorporates feedback from foster care providers.
- Input from the community is constantly incorporated into the system of care to foster prevention efforts. HFC is touching the community at large, as everyone is responsible for preventing child abuse.

II. Case Review System
Stakeholders surveyed for this Systemic Factor: Circuit Judge, staff from the Guardian Ad Litem (GAL) Program and a Foster Parent.

Responses from these stakeholders included the following:

- HFC is effective in ensuring each child has a timely written case plan; however, there is concern that the case plans are not developed jointly with the parents. Instead, it is perceived that case plans are prepared, and then presented to the parents; this is especially evident in updated case plans.
A vast majority of case plans are developed informally with the child's parents. Parents are known to provide input in regards to their case plan at mediation and the case plan is developed upon what is agreed upon at mediation. Mediation and Family Team Conferences assist the CBC in ensuring the child's and parent's self identified needs are incorporated into their case plans.

Case Plan development conferences are not taking place, which are required by Statute.

In Circuit 10, the Case Plan is to be completed in 9 months, instead of a year. There is also a four month Judicial Review Policy, instead of the six month requirement. It is felt that the six month Judicial Review is not sufficient, as there is not enough time to make adjustments if needed, or deal with any circumstances that may arise. Having the Judicial Reviews completed within 4 months, has helped Circuit 10. If any changes are needed to the case plan, there is enough time to address any barriers. The CBC and Children’s Legal Services (CLS) do a good job with the Termination of Parental Rights (TPR) Process; however, the follow through after completing the TPR paperwork can drag for over a year, which is a concern due to diligent searches not being done in a timely manner. Inadequate diligent searches and delays in diligent searches can extend the case well past limitations.

Concern was noted regarding the coordination and communication between case management staff and CLS, as there seems to be a breakdown due to case managers not having the authority to settle their cases during mediations. It is recommended that more Case Manager Supervisors participate in mediation.

III. Foster and Adoptive Parent Licensing, Recruitment and Retention

Stakeholders surveyed for this Systemic Factor: HFC’s Licensing Specialist, foster parent and Child Protective Investigation and Case Manager Supervisors

Responses from these stakeholders included the following:

- A lot of efforts go into recruiting foster and adoptive families. Data is closely examined in regards to families and the number of kids in care. Recruitment Specialists are known to look at data showing the age range of kids coming in to care, and the environment/community in which the children are being placed. The focus is to keep children in their community. During the Data Calls or Management Meetings, HFC looks to how they are marketing and branding foster care in the community. They address the need in the community, and try to educate the community in the area of fostering and adoption.

- HFC is effective in conducting thorough home studies of prospective foster and pre adoptive parents, and they do a good job of completing background checks on potential foster and adoptive parents.

- HFC takes great strives to assess families from the beginning, critically assessing families by asking the right questions up front in order to determine the mindset of the individual, and weed out those who may not be the right fit, prior to orientation.

- HFC has made strides to grow and approve on a continuous basis. Staff makes sure homes are adequate and individuals are aware of what is required to be a foster parent or adoptive parent.

- During the assessment process, staff works with foster parents informing them what the expectations are for the family.

- Re-licensing specialists are in the home monthly, at least two to three times a month, when it’s a new home to ensure safety in the home and to assess the environment. By staff visiting the home frequently, it provides a support system to the parent and makes them feel successful in their fostering.

- Training is provided throughout the year, which consists of new learning material and refresher courses.

- During the first year staff frequent the home in order to prepare the families for re-licensing. Staff ensures foster parents complete their necessary required trainings, communicates with the foster parent through emails, information such as the time, date and location of upcoming trainings.
- Foster Parents have been known to relocate, and when they want to continue to be a foster parent, HFC will partner with that CBC in order to help get things in order for the foster parent to become a foster parent in the new location. HFC works with other CBC Agencies, such as writing letters of recommendations for a foster parent.
- HFC will also receive letters of recommendation from other CBC Agencies in order to link a foster parent new to the area with a community in another Circuit.
- HFC is currently looking to see if training is effective by piloting the Eckerd Youth Program Quality Initiative Program, such as determining effectiveness of training in helping a first or second placement foster home, and determining what foster parents need before they get licensed.
- Foster parents are learning what the role of the case manager is, and have been known to accompany a case manager on a home visit.
- Annual Surveys are conducted to determine what foster parents think is needed to better be able to provide care to children.

IV. Quality Assurance System-
Stakeholders surveyed for this Systemic Factor: HFC Executives, CBC Board Member and HFC Quality Assurance (QA) Director.

Responses from these stakeholders included the following:
- The QA System is consumer focused, and geared to provide a safe and stable environment for children at risk, or in care. The System is multi-faceted, having different branches, such as Side-by-Side Reviews, which are thorough and staff are doing a really good job. CMOs utilize the same QA Tool used during Base and Side-by-Side Reviews and CMO Supervisors are going through QA Training.
- The Quality Improvement Call, wherein data collection is analyzed and discussed, and problem solving takes place.
- Tracking Incident Report, and utilization of Satisfaction Surveys, which are being completed with Foster Parents, Youths, Relative Caregivers, and Biological Parents.
- Contract Staff are going out into the homes to look for improvement adhering to the QM Standards in order to monitor improvement and the impact on Family Engagement and Quality Improvement.
- HFC does a good job looking for gaps and improving services. Management and the Executive Team are driven, always looking for ways to improve the services being provided to the community.
- Constant evaluations of performance occur. The QA System offers a second look at a case that may have problems. The QA System is looking at and focusing on quality instead of compliance.
- QA Reviews are completed to identify deficiencies; as well as track reports generated from FSFN and Mindshare. Information is reported out verbally through Performance Calls.
- Targeted and Base Reviews are also completed, which return immediate feedback while at the Service Centers. Debriefings and Exit Interviews of QA Findings occur after completion of file reviews, which is felt to be a strength. QA embraces improvement. QM Staff are known by other staff in the field which helps a lot.
- Information from QA tools and reports are used to enhance policy and procedures, and to revise policies that are out of date.
- It is recommended that a work day consisting of all QA Staff be held, wherein everyone can come together and look at the QA tool in an effort to work on the questions to make the answering of the questions more consistent.

V. Service Array
Stakeholders surveyed for this Systemic Factor: Community Providers and Child Protection Team (CPT) Representative.
Responses from these stakeholders included the following:
- CBC's service array in meeting the needs of the children and families served is felt to be effective and progressive; however, more is needed, as it does not allow systemic measures to provide feedback.
- Staffings occur and the CBC is trying, as much possible to get services to the families to meet their needs.
- In home services, such as FIT, Family Builders, Health Families and Youth Villas are available to keep families intact and prevent removal and are felt to be effective and intensive services. These programs provide strong wrap around services to ensure children can remain safe in their homes. For example, an increase in the number of cases referred to FIT has occurred, in order to prevent removal.
- HFC is efficient with funding necessary services.

VI. Staff and Provider Training
Stakeholders surveyed for this Systemic Factor: HFC Training Coordinator, foster parent and Child Protective Investigators and Case Managers.

Responses from these stakeholders included the following:
- HFC does an excellent job providing and ensuring completion of adequate training, pre-service and ongoing in-service training.
- The system is set up for success through such documents, processes and events as: Training Plan, In-service Schedule, Pre-Service Calendar (Current and Integrated, if available), Training Needs Survey and Process and Conference.
- If a QA Review reveals an area of needed improvement, training is one of many counter measures for implementing positive change.
- QM Director and Director of Organizational Development and Learning collaborate on what is needed from an In-Service Training. QA will continue to track progress on these areas.
- The QM Team has been asked to review the results of the Training Needs Survey to give input on objectives and presenters for requested topics that may have QM/QA impact. Some examples of trainings developed from QM Reviews include: Exit Interviews, Documentation Skills, which was co-facilitated by a QA Staff, working with incarcerated parents and supervisory reviews.
- Provision and completion of training are tracked with a database developed to ensure HFC staff completed the required 15 hours of training. This information is then sent in a report to DCF, every six months as per contract. Currently, HFC has offered 50-70 events from January through June of 2010, including HFC’s annual two day conference.
- Pre-Service classes are tracked through the Pre-Service Calendar, sign-in sheets and other state mandated documents.
- At the beginning of each quarter, individual and summary reports are run and distributed. Individual reports are sent to staff so they can review current documentation on file, which provides for the opportunity to submit any missing documents. Summary reports are sent to the management team to track agency progress.
- Case Managers are responsible for entering all their training information into SkillNet. HFC requires case managers and supervisors to attend a minimum of 12 hours of training per quarter, including mandatory events. CMOs are responsible for tracking staff training and submitting quarterly reports to HFC, which contain summary information related to performance targets listed in their contracts.

VII. Statewide Information System
Stakeholders surveyed for this Systemic Factor: Circuit 10 Administrator, Child Protective Investigators and Supervisors, Case Managers and Supervisors, several CBC Program Directors, Contract Manager, HFC’s Data Specialist and the Senior Vice President for One Hope United.
Responses from these stakeholders included the following:

- Monthly statistics are generated through FSFN and are useful in regards to Performance Reports.
- Wednesday Performance Improvement call is reliant upon FSFN Data. Real Time Information is obtained, and FSFN takes snapshots of “almost” Real Time Performance. There are some reliability issues, as you are not able to reproduce the same number in regards to data. The numbers will be a few percentage points apart. Information is used as a quick reference (an indicator) and not the sole source for information due to reliability.
- Initial data entry is ensured by timely documentation and data entry is monitored for timeliness. Chronological note entry is to be entered into FSFN within 48 hours, so that the time is closer to the actual date/time of the event.
- FSFN Data is monitored by supervisors; and caseloads are taken from FSFN.
- HFC has a new process, wherein documents are being directly scanned into FSFN, which has made everything more accessible to staff.
- Data is managed in FSFN, and reports are generated from FSFN in order to get a closer look at operations and workload. Spreadsheets are created from the data obtained in FSFN, which includes tracking the dates when child/children are seen and checking background screens.
- Reports are user friendly, and provide a closer look at trends and areas needing improvement. Program managers are known to ensure accurate information is being entered into the system.
- Peer Reviews also take place, wherein a case manager will look at the work of a fellow case manager in order to provide feedback and ensure that data has been entered correctly into the system.
- Other processes occur, such as randomly auditing travel vouchers to ensure that initial data entry is correct, as there should always be a corresponding entry in FSFN.
- The Quest Survey, formerly known as Survey Monkey is completed by Child Protective Investigation Supervisors regarding various activities in a case, and ensures that prior abuse reports are reviewed prior to commencement. Quest Surveys are completed to ensure initial data entry is correct and to resolve data errors.

Summary and Recommendations:

1. Ensure Case Managers are knowledgeable regarding the status and current activities on their cases prior to staffings, as feedback revealed that there have been incidents wherein case managers have not been prepared or current regarding their assigned cases at staffings, such as not knowing what was on a case plan or tasks that had been completed.

2. HFC has good intentions in regarding to promoting positive working relationships, as they value others opinions; however, it is believed the GAL is not getting the opportunity to be heard in staffings, as at times, they are contacted during the middle of the actual staffings and they do not have the opportunity to drop what they are doing and participate. Therefore, HFC is not getting valuable information from a key participant, who knows case specific information.

3. More attention is needed in regards to the roles and abilities of a Protective Service Case Manager. There is concern that some case managers may not be aware of their responsibility to assess risk, and make reports to the Hotline, when needed. Training is recommended regarding Risk Assessment.

Signed by:  
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July 28, 2010  

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July 29, 2010