Family Integrity Program
Quality Assurance and Management Plan
2015-2016
Introduction and Background

The St. Johns County Board of County Commissioners Family Integrity Program (herein referred to as “FIP”) is a division within St Johns County’s Health and Human Services Department. The Health and Human Services department also contains the county’s Social Services and the Housing and Community Development divisions. The SJCBOCC initially received the contract to provide dependency case management services in 2003 and the Family Integrity Program was established. The contract was renewed in 2014 for five years, expiring in 2019. FIP is responsible for dependency case management services, Family Diversion services (also known as “voluntary” or prevention services), foster care licensing, contract management, adoption services and independent living services. In 2015, FIP is expected to contract with Children’s Home Society to provide diversion services to cases that have been determined to be low or moderate risk by the Department of Children and Families.

The Family Integrity Program’s system of Quality Assurance and Continuous Quality Improvement is designed to ensure services are provided to children and families consistent with the Department of Children and Families’ contract and service delivery model, and in compliance with state and federal law, administrative rule, and DCF operating procedures. Additionally, FIP employs the concepts of evaluating and improving the system in a shared decision-making model; crises and reactive thinking are replaced by ongoing, data-driven evaluation and planning at the case and system levels.

Overall, the FIP Quality Assurance and Quality Improvement process involves staff across all levels throughout FIP and the St. Johns County Health and Human Services Department. The Quality Assurance team continuously gathers and analyzes data to make improvements to services and processes when compliance is not met or when safety/security issues arise. FIP promotes the philosophy that everyone is a member of the Quality Assurance and Continuous Quality Improvement team, including stakeholders, families, children, caregivers, foster parents, and FIP staff at all levels. FIP works collaboratively with community stakeholders (including DCF, service providers, and child and family representatives) to define the indicators of success; review and enhance the quality management data collection and reporting system/process; and periodically review performance and institute changes at the system and case levels, ensuring continual improvement.

FIP has a centralized yet program specific data collection system used to support the quality management system. Performance data is analyzed on a weekly basis by the Quality Assurance staff, which is then reported to management at FIP. In addition, case review data is analyzed on a quarterly basis to support organization-wide planning and correction of problem areas in regards to case management efforts.

The quality Assurance staff tracks trends within the data and reports to DCF Administration, St. Johns County Health and Human Services Executive Team, and FIP Management and Supervisors, in regards to client outcome data that is consistent with the federal ASFA domains, and CFSR and other state mandates, including the specific performance measures outlined in the contract with DCF. FIP also examines satisfaction data from children and families, providers, the courts, DCF and other community stakeholders to identify and remedy areas of weakness or concern. FIP engages all consumers in an ongoing evaluation of the project and services, and encourages input and shared-decision making in a community-based model to provide direction for improvement processes.
The FIP internal quality improvement process includes, but is not limited to:

- A plan for quality improvement which is clear, concise, accurate and provides direction for end users and management;
- Evaluation of FIP internal processes for compliance with Department contract requirements;
- Evaluation of FIP internal processes for compliance with statue, rule, regulation, and policy; and,
- Evaluation of client and stakeholder satisfaction.
- Conducting periodic reviews of the service delivery process, in compliance with the Office of Child Welfare guidance and standards
- Review progress and deficiencies among the various activities related to quality assurance and develop necessary plans to ensure improvement
- Develop policies and procedures based upon agency needs and requirements

**Description of QA Staff Resources and Infrastructure**

The Family Integrity Program is the lead agency for St Johns County and there are no Case Management Organizations (CMO) within or managed by the agency. The responsibility for the Family Integrity Program’s Quality Assurance and Performance Quality Improvement efforts reside with the St. Johns County Health and Human Services Director, the FIP Program Manager, the Health and Human Services Finance and Contracts Manager and the Health and Human Services Quality Services Supervisor. The Health and Human Services Finance and Contracts Manager directly supervises the Quality Services Supervisor; two (2) Quality Services Specialists are directly supervised by the Quality Services Supervisor. The Quality Services Supervisor and Quality Services Specialist positions require a Child Welfare certification through the Florida Certification Board, as a “best practice” approach to ensuring the staff has adequate knowledge regarding child welfare practices.

The Finance and Contract Manager, in addition to supervising the Quality Services Supervisor, supervises the Contract Coordinator, the Federal Funding Specialist, and the FIP Accounting Technician. The Finance and Contract Manager coordinates with the DCF Contract Manager and is the point of contact for all contractual obligations.

Additionally, FIP has supervisory staff designated as an ICPC Specialist, a Missing Children Specialist, and a Permanency Staffing specialist who work in conjunction with the Quality Assurance and Continuous Quality Improvement team. These staffs’ efforts are supported by the Health and Human Services and the FIP Executive Management Team.

**Performance and Quality Assurance Activities**

The FIP Quality Assurance team conducts activities through the year to ensure practices are aligned with safety, permanency and wellbeing for the children and families served. These activities, outlined below, ensure that these practices are upheld and identify areas needing improvement.
Rapid Safety Feedback Reviews (RSF) - Case file reviews are designed to evaluate the quality of case management practices and processes utilized in service delivery. Specifically, the RSF reviews have been designed to “flag key risk factors in in-home services cases that could gravely affect a child’s safety”. The goal is to ensure completion of case practice activities, adherence to best practice standards, and quality services to ensure that children can safety remain in their homes. RSF case file reviews will be conducted and focus on children ages birth to four years old, receiving in home services and placed with their removal parent/caregiver.

The sampling methodology will align with the Office of Child Welfare’s Continuous Quality Improvement guide, Windows Into Practice. Due to FIP being one of the smaller Community Based Care agencies, eight (8) file reviews will be conducted, per quarter. The goal would be to comply with the factors set forth and outlined in the Windows Into Practice, although due to the agency’s smaller population, the total number of reviews able to be completed may be less than the recommended amount. At the discretion of the Quality Services Supervisor, the age range of the focus area may change, to ensure that file reviews capture the agency’s total population served. As an example, if the sample of children ages 0-4 years old do not indicate the true population of the agency, then a new sample to include children under 5 years old would be included. The age would increase, by year, as necessary to obtain the recommended, accurate sample. All sampling methodology changes and discards will be described and addressed in the Annual Report.

In adherence to the Continuous Quality Improvement focus of the agency, feedback will be provided to the agency’s case manager and supervisor on an individual basis. A Quality Management Progress Report identifying the case strengths, areas of improvement and items missing from the file will be provided to the case manager and their direct supervisor. A face to face case consultation will be held and a Request for Action will be issued if an immediate safety threat is identified during the reviews or if there are significant areas identified as needing improvement.

It should be of note that after the August 2015 Quality Improvement Quarterly Meeting, that the Rapid Safety Feedback tool was modified after concerns that the data derived from the tool was not an accurate reflection of the service performance around the state. The overall intent of the review was not changed and questions were modified to provide clarification or to split a two-part question into two separate questions. Once the tool is modified and is able to be utilized, QA staff will be able to begin utilizing this new RSF tool to apply it to the agency’s Diversion cases, which will increase the total number of reviews that are able to be completed.

Florida’s Children and Families Services Reviews (FCFSR) – The FCSFR will be completed on eight (8) case selected each quarter. Two of the eight cases selected will also include stakeholder surveys and provide an “in depth” look into the case. The cases selected will be through a random sample, generated by the AFCARS submission and provided by the Office of Child Welfare. These reviews will be entered exclusively into the federal Online Management System (OMS). The cases selected will be opened for a minimum of 7 months and the review period will begin nine months preceding the review period quarter. The cases selected will follow a 60/40 split with 40% of In Home cases and 60% of Out of Home case selected per quarter.

In Depth file reviews will occur on cases that have been open for a minimum of seven months. One In Home case and one out of home case will be selected for the In Depth...
review process each quarter. Stakeholder interviews on the In Depth reviews will include, but are not limited to, case managers, supervisors, service providers, parents, CLS, and other essential case participants.

As with other case file reviews, case consultations and Requests for Action will be issued if there are immediate safety concerns noted during the reviews. Quality Management Reports will be completed and provided to case management, supervisors, and the Program Manager on each FCFSR completed. Quarterly data will be analyzed and provided to FIP’s management team to identify strengths and areas needing improvement.

➢ Federal Child and Family Services Review (CFSR)

Every five years, a formal federal CFSR is conducted on the state of Florida and is under the guidance of the Children’s Bureau. In 2016, the state will participate in a two-phase, “state conducted” review process in which quality assurance and improvement staff, both through DCF and the CBCs will conduct the onsite reviews, in partnership with Children’s Bureau staff. The first phase of the CFSR process involves a statewide, systemic evaluation, where identified individuals throughout the state will complete a statewide assessment, using data indicators to evaluate programs and examine outcomes. The Family Integrity Program’s QA staff’s role in the first phase is unknown at the time of this plan, although the QA staff is available to assist and participate in whatever function is needed.

During the second phase of the CFSR, FIP’s QA staff will participate in the onsite review process. Due to FIP’s small population served, it has been proposed that only one of FIP’s out of home cases be reviewed. The QA team will be responsible for reviewing the one out of home case, in May 2016; one of the Quality Services Specialist, will be paired with a Regional DCF QA reviewer to complete the review. The second level review will then be completed by the Quality Services Supervisor, and the third level review will be completed by Quality Assurance staff through the Office of Child Welfare. The onsite review process is tentatively scheduled for three days, in the second week of May 2016. Stakeholder interviews, as well as a full review of the file and other documents, will occur during the review.

➢ Supplemental Reviews

In addition to the RSF Reviews and the FCFSR, additional supplemental reviews that may be required by DCF can be conducted throughout the year, by quarter. Communication with OCW QA will occur to determine which area of focus should be reviewed, if additional reviews are determined to be required.

The Contract Oversight Unit determines contract compliance each year during the annual visit. The QA team is responsible for ensuring all Corrective Action Plan (CAP) areas identified from the audit are monitored and reviewed on a monthly or quarterly basis. At this time, the agency is not under a CAP, although COU is expected to audit the agency in September 2015.
Schedule of Reviews

- **1st Quarter-** Eight (8) Florida CFSR, two (2) of which will include Stakeholder Interviews
  - Eight (8) Rapid Safety Feedback reviews
- **2nd Quarter-** Eight (8) Florida CFSR, two (2) of which will include Stakeholder Interviews
  - Eight (8) Rapid Safety Feedback reviews, to include Diversion cases
- **3rd Quarter-** Eight (8) Florida CFSR, two (2) of which will include Stakeholder Interviews
  - Eight (8) Rapid Safety Feedback reviews, to include Diversion cases
- **4th Quarter-** Eight (8) Florida CFSR, two (2) of which will include Stakeholder Interviews
  - Eight (8) Rapid Safety Feedback reviews, to include Diversion cases
  - One (1) federal CFSR review, conducted in May 2016

Supplemental reviews will be distributed among the quarter and determined as needed or required.

Family Diversion Program Case Reviews

The Family Integrity Program’s Family Diversion unit receives cases through the DCF investigation units that are determined to be unsafe, through In Home Non-Judicial Services or are Very High to High risk cases, through voluntary services. The children served remain in the home with the parents/ caregivers while Florida Certification Board certified case managers work with the families in regard to identified concerns. The case remains open approximately 3-6 months while services are implemented.

Due to the specific questions on the RSF tool, Diversion in home cases could not be reviewed utilizing that tool. Once the RSF tool is modified, the QA team will begin to pull Diversion, unsafe children receiving In Home Non-Judicial cases for reviews utilizing this new modified tool. This is expected to occur in October 2015, at the beginning of the second quarter. The numbers of cases reviewed will be determined based upon the total number of reviews needed for that quarter, in addition to the needs of the agency.

The Family Diversion unit is continuing to align with policies and practices determined through the Safety Making Methodology.

Description of Reviewing Standards

- The FIP Quality Assurance staff will serve as the lead for the reviews. Reviews will be completed by the Quality Service Specialists. The Quality Service Specialists will consult with the Quality Service Supervisor concerning the reviews, as necessary; the Quality Service Supervisor will approve the reviews after completion. In the event additional assistance is needed, unit supervisors and/or additionally certified QA reviewers may be asked to participate.
- FIP will ensure when assigning a case file for review, the reviewer does not have any direct or previous involvement with the management or supervision of the case for the entire period under review.
- All staff who conduct reviews must complete the DCF QA Reviewer Training before participating in a review.
- All Reviews will be completed by the 10th of the month following the end of the previous quarter in which the case was assigned for review.
The completed review tool will be submitted to the Quality Services Supervisor for approval. The QS Supervisor shall insure that all tools are approved and marked in the database portal as final review.

FIP will compile and analyze the data obtained from the review. The data will document the degree of compliance with each standard, and be summarized at the individual unit level and for all units to reflect the overall system of care.

Quarterly reports will include both summary and detailed data, and will be provided to the FIP Management and Supervisors.

Each Case Management Unit is responsible for addressing deficiencies and items that warrant Performance Quality Improvement activities.

FIP will work closely with the DCF Quality Management staff to ensure a complete understanding of the case file review process.

The Quality Assurance staff will provide technical assistance to the Case Management staff as needed.

**Supervisory Reviews**

The Dependency Case Manager Supervisor (DCMS) is required to complete supervisory reviews on all open cases at least every 90 days and once per quarter. The reviews are required on 100% of cases within their designated unit and should occur on cases opened a minimum of 30 days. The DCMS will utilize the Supervisory Discussion Guide, or other similar, approved document to guide their reviews and discussions. The main focus of the reviews will ensure the elements of safety, permanency and well-being are being addressed for all children via proper case management procedures. Supervisory reviews also prove to:

- Assist the supervisor in being a mentor to the Dependency Case Manager by allowing them to provide proper guidance and support and follow up;
- Focus on the quality of the case work and identify any gaps in services identified; and,
- Assist in ensuring the minimum requirements for case supervision are properly addressed:
  - Permanency goal
  - Progress and Barriers to permanency
  - Tasks and who is responsible
  - Follow-up on tasks
  - Emerging risk and Safety Concerns
  - Parental Behavioral Change
  - Required documents relating to the case

By utilizing this structure to guide discussions and assist with ensuring the above areas are completed, the nature and purpose of the supervisory review is focused on supporting the Dependency Case Manager. Providing adequate support and supervision to the Dependency Case Managers will enhance the counselors’ abilities and lead to enhanced services to children and families.

Supervisory Review Audits will occur and adhere to the following standards:

- On a quarterly basis, the FIP Quality Assurance Team will gather data regarding supervisory reviews that were completed during the preceding quarter. The data gathered will include:
  - Number and percent of supervisory reviews completed by the Dependency
Case Manager Supervisor

- Number and percent of supervisory reviews completed by the agency

- On a quarterly basis, the FIP Quality Assurance Team will randomly select a minimum of five (5) Supervisory Review notes completed per Unit Supervisor and conduct a qualitative review. An internal audit tool has been created to ensure consistency of these audits. The data gathered will include a review of the following:
  - overall compliance by the supervisor in regards to the timeliness of the completion of the reviews
  - related notes including discussions of but are not limited to:
    - Child Safety
    - Permanency goal
    - Progress and barriers to permanency
    - Tasks and who is responsible
    - Follow-up on tasks
    - Independent Living Referrals and Services
    - Collaboration with Department of Juvenile Justice and documentation of joint planning activities
    - Psychotropic Medication
    - Home studies, background checks, family assessments
  - Tasks/ directives provided to the Dependency Case Manager and subsequent follow up on previous directives

- A copy of the audit tool, completed by the Quality Service Specialist and reviewed by the QS Supervisor, will be provided to each supervisor and the Program Manager.

- Unit supervisors not meeting the qualitative review elements, i.e., focusing on presenting concerns, identifying progress and barriers to permanency, identifying needed follow-up and tracking to completion, will be required to submit action plans for performance improvement to the FIP Program Manager

- FIP will, as requested, provide performance data to DCF and the St. Johns County Health and Human Services Director.

Discretionary/Special Reviews

Discretionary or Special Reviews will be conducted by the Quality Assurance team as requested by DCF staff, stakeholders, the HHS Director or the FIP Program Manager. The purpose and focus are discussed with the requestor, as well as the results of the review.

Continuous Quality Improvement Activities

Each month, the Quality Services Supervisor will meet with FIP management to discuss CQI activities and performance; typically this meeting coincides with the weekly supervisory meetings held with FIP management. Areas that have been identified are based on areas needing improvement discovered while performing case reviews, from COU monitoring, and requests from FIP Supervisors. Areas include Psychotropic medication, safety plans, home studies, ICPC home studies, Independent Living outcomes, performance measures, adoptions, reunifications, and permanency concerns. Other areas can be added to the CQI meeting as necessary and are usually determined by annual or quarterly data trends and COU findings.
Surveys

Annually, in October, electronic Foster Parent, Stakeholder and Employee Satisfaction Surveys will be conducted. The results are gathered, analyzed and presented to HHS and FIP management for performance improvement purposes as well as areas identified as strengths. A document containing results is disseminated to staff, as well as stakeholders. Areas identified as needing improvement, based upon this feedback, are analyzed and programmatic changes may occur or an improvement plan implemented.

Request For Action

FIP has a system in place for ensuring critical threats to a child’s life, health or safety are addressed immediately. When the reviewer determines there is a threat to the child’s life, health or safety, a Request for Action Form is completed which documents the unresolved concerns and case specific and demographic information. The form is routed to the Quality Services Supervisor. The Quality Services Supervisor reviews the document to note the issues of concern and within the same workday, forwards the document to the Case Management Unit Supervisor responsible for the case. The Case Management Unit will have a set number of days (date will be determined by the QS Supervisor) from the date the form was submitted to FIP, to review and resolve the issue and returns the form to the QS Supervisor, documenting the actions taken to resolve the issue. If there is a need to react immediately to ensure the child is safe, FIP and/or the reviewer completing the form ensures the appropriate immediate action is taken, i.e. calling law enforcement, calling 911, calling the Dependency Case Manager to ensure the situation is addressed immediately, etc. FIP then either approves the actions taken or re-submits the form to the Case Management Unit Supervisor requesting additional information or follow-up. This process continues until the issue is satisfactorily resolved. Additionally, when any threat to a child’s life, health, or safety is identified during any other quality assurance activity, the same procedure will apply. Safety concerns are tracked until the concern is resolved. An RFA chronological note will also be entered and resolved in FSFN by the QS Supervisor.

Incidents

The Quality Assurance team is responsible for receiving and tracking all client and employee related incidents. Internal policies have been created in regards to incident reporting and grievance procedures. Client incidents are input through the DCF Web Portal Incident Reporting System (IRAS) and documented through an internal indent report. The incidents are analyzed and reported on a quarterly basis. Employee incidents are collected through the St Johns County Human Resources Department and are composed departmentally to be analyzed and reported on. These procedures are aligned with COA standards.

Grievances

The Quality Assurance team is also responsible for collecting and tracking all client and employee grievances. The grievance procedure for clients served is outlined in both a Parent and a Caregiver Handbook that is provided to all parents and caregivers served by FIP. A foster parent manual is also provided to all foster parents, outlining this procedure as well. All grievances are handled through FIP management and the HHS director, when necessary; monitoring is through the QA team. DCF Tracker complaints, IG reports and
county wide grievances (collected through a system called “PRIDE”) are all monitored by the QA team. The QA team also assists management when the grievance necessitates it.

- **Quarterly Partnership Meetings**

  FIP Management, DCF Contract Specialists, the Regional Director and other staff meet quarterly to discuss performance measures, corrective action plans, the DCF Score Card, and any other concerns. The QS Supervisor provides data and performance measure outcomes to the Contract Manager upon request in preparation for these meetings.

**Measures and Outcomes**

The FIP Quality Assurance staff will monitor and utilize the FSFN report system for the purpose of collecting and reporting data on performance indicators and outcome measures on a weekly, monthly, quarterly, and annual basis. The elements and minimum frequency are outlined below and subject to change.

- **Performance Measures/Scorecard** - The Family Integrity Program utilizes the DCF created “Scorecard” and Performance Measures for Continuous Quality Improvement purposes. This tool reports all CBC statewide performance with their level of compliance and service delivery. The scorecard and performance measures are reviewed monthly by the QA team upon release. At least once per month, Quality Assurance staff report on FIP’s compliance with each of the contracted performance measures and scorecard results. This report compares compliance from one month/quarter to the next, identifies if FIP is in compliance with each of the measures and addresses specific action plans to address areas in need of improvement. Performance data is compared to quarterly case review data and analyzed to determine trends, whether strengths or areas the agency should focus on to improve. Action plans are based on shared data review initiatives and on analysis.

- **Quality and Risk Elements**

  FIP management meets on a weekly basis to determine performance elements in service delivery. The weekly meetings are held with the HHS Director, Program Manager, Case Management Supervisors, the Licensing/Placement Supervisor, the Contract and Finance Manager, and the Quality Services Supervisor. During the meetings, the CQI process utilizes and data is shared in regards to performance and corrective action plan improvements. The following areas are discussed during the meetings:

  - Supervisory Reviews (quarterly)
  - Exit Interviews (weekly)
  - Incident Reports (monthly)
  - Birth Verification, Photograph, and Fingerprint Compliance (weekly)
  - Medical, Dental, and Immunization Compliance (weekly)
  - Birth Parent Contact (monthly)
  - AFCAR errors- Adoption and Foster Care (weekly)

  Other area surrounding performance or quality improvement elements are discussed on an “as needed” basis depending upon issues or needs occurring within the agency at that moment in time. Minutes of the meetings are kept by the Office Manager to comply with COA standards.
Data Collection and Analysis

FIP utilizes the data collected regarding the performance measures and works with the Case Management Units to identify and address areas in need of improvement. This partnered approach is designed to look at issues related to quality and performance at the case level. By looking at issues at the case level progress can be made for individual children and families and over time for the system as a whole. Identifying issues at the case level has resulted in a more focused approach to performance improvement. From this case specific information trends are identified and action steps put into place to address both case specific and systemic issues.

FIP will continue to utilize these approaches throughout this new fiscal year, building on what we have learned and enhancing action plans previously implemented. FIP will continue to use the case level data review approach along with the trend analysis approach. Initial utilization of these processes has led to improved outcomes in obtaining timely medical and dental appointment, managing safety plans and understanding psychotropic medication requirement. We look forward to continuing to enhance this process by building upon the foundation created. In doing so, FIP will continue to review the data and participate in the collaborative monthly meetings with the Case Management Units.

FIP Supervisors Meeting continue to occur weekly to include the entire team in the quality service delivery and CQI processes. Appropriate lessons and process changes are translated into new or enhanced policies and procedures, and shared with DCF/FIP Partnership, stakeholders, or other interested parties as indicators of solution-focused thinking and processing.

FIP will continue to address the short-term and long-term strategic plan goals and action plans with the St. Johns County Health and Human Services Executive Team.

The FIP Quality Assurance staff also supports performance through standardized quality assurance activities to evaluate increased success and compliance. Additionally, the Quality Assurance team will continue to provide technical assistance to individual case management units as necessary.

Quality Assurance Analysis Report

Quality Assurance Analysis Report is created annually to address the areas identified in the various reviews and other quality assurance activities conducted throughout the year. FIP expects to continually utilize the results from the previous year’s activities to gauge growth and current performance. This in conjunction with the case level analysis of performance measure compliance will provide an overall picture of case practice and identify needed improvements. The report will be provided to the HHS director, Program Manager, DCF Contract Manager and OCW QA Manager annually.
Training and Certifications

Case management staff, supervisors and licensing staff are certified and re-certified in adherence to the Florida Certification Board (FCB) standards. As part of the Quality Assurance team responsibilities, employee trainings and the certification process are monitored and tracked to ensure proper certification is maintained. Employee training files and spreadsheets are updated and maintained within the agency, by the QA team. Frequent reviews of the training files ensure that employees maintain continuous professional development. The QS Supervisor also serves as the Point of Contact for the FCB to ensure all requirements are met for the certification process.

Implementation of CQI

A true Continuous Quality Improvement process involves all levels of staff and includes external stakeholders, including families served, providers, caregivers and the judicial system. The HHS management team is fully committed to the CQI process and understands that open communication between administration and direct services is integral to providing the most effective services for the clients served. Quality Assurance and Improvement plans must remain fluid and adaptable to the ever changing field of working with children and their families. The Family Integrity Program remains a leader in child welfare to the children and families served, which is an accurate indication of the communication and partnerships needed in the child welfare system.

Council on Accreditation

The Health and Human Services Department was initially accredited in November 2008. The Family Integrity Program was included in this initial accreditation in the areas of Adoptions Services, Child Protective Case Management Services, Foster Care/ Kinship Care, and Youth Independent Living Services. The Family Integrity Program, under the HHS, was re-accredited in November 2012. The Quality Assurance team monitors COA standards and requirements in preparation for re-accreditation, due in November 2016.