FSSNF QUALITY MANAGEMENT PLAN
Fiscal Year 2014-2015

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CBC Quality Management Plan General Requirements

Section 1: Background and Introduction

In order to receive federal funding, each state must submit a five-year Child and Family Services Plan (CFSP) to the Children’s Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. The CFSP is a comprehensive strategic plan that sets forth the vision and goals to be accomplished by the State to strengthen the overall child welfare system. A primary purpose of the Child and Family Services Plan is the integration of the programs that serve children and families. These include Title IV-B, Subpart 1 (Child Welfare Services) and Subpart 2 (Promoting Safe and Stable Families); the Child Abuse Prevention and Treatment Act (CAPTA); the Chafee Independent Living Program and Educational Training Voucher (ETV) Program; and the Title IV-B/IV-E Training Plan.

The DCF Office of Child Welfare staff structured the Florida Child and Families Services Plan with four major goal areas: (A) Enhance family-centered practice with an emphasis on child safety, permanency, well-being, and trauma-informed care; (B) Strengthen collaboration to support child and family well-being, nurturing, stable families, and strong communities; (C) Expand and refine the service array to ensure it reflects evidence-based, best or emerging practices about child development and family well-being; (D) Enhance continuous quality improvement, staff training, and oversight. Achievement of the major goals will be accomplished by substantial conformity with title IV-B and IV-E child welfare requirements which consists of seven safety, permanency, and well-being outcomes and seven systemic factors. Conformity is assessed during the Child and Family Services Reviews (CFSRs) process.

Section 2: Quality Management

FSSNF currently implements a complete DCF-approved quality management process consistent with the DCF contract and service delivery model, and in compliance with state and federal law, administrative rule, and DCF operating procedures. The FSSNF quality management process outlines a comprehensive approach to ensure quality services are provided to the children and families served. One of the guiding principles behind accomplishing this task is involving FSSNF staff at all levels, to include the Case Management Organizations (CMO) and community stakeholders. This comprehensive approach is accomplished by holding the Case Management Organizations (CMO) accountable for leadership, direction, and compliance through an external quality
assurance process, as well as the infusion of continuous quality improvement through an internal process focused on service delivery.

The quality assurance approach is designed as an external process that validates internal practices through the application of sound evaluation principles that ensure data is collected accurately, analyzed appropriately, and reported and acted upon effectively. FSSNF staff in collaboration with DCF provides external reviews, and coordinates all outside reviews of service delivery. While the quality assurance approach focuses on the external process, the quality improvement approach is an internal process driven and conducted by the FSSNF Quality Management Specialists in conjunction with the Case Management Organizations (CMO).

While the ultimate authority and responsibility for overseeing the exceptional quality of care at FSSNF rests with its Board of Directors, the responsibility for FSSNF’s quality assurance and quality improvement efforts resides with the FSSNF Director of Quality Management.

A. Description of QA/CQI staff resources

FSSNF’s Director of Quality Management supervises staff dedicated to quality operations, assurance and improvement activities. The staff currently includes one (1) Quality Management Specialist Supervisor, six (6) Quality Management Specialists, and one (1) Court Liaison. One of the Quality Management Specialists has been designated to focus on children 0-3 years old. The Director of Quality Management and staff, when appropriate, will attend all DCF and Region trainings pertaining to quality assurance and quality improvement issues, as well as other state and national conferences on best practices in service delivery and quality management.

The Director of Quality Management reports to the FSSNF Chief Operating Officer over Services & Support; the FSSNF Chief Operating Officer over Services & Support reports to the FSSNF Executive Operating Officer; the FSSNF Executive Operating Officer reports to the FSSNF Chief Executive Officer; and the FSSNF Chief Executive Officer reports to the Board of Directors.
The Quality Management Specialist Supervisor and the Quality Management Specialists are responsible for planning, implementing and reporting on case management quality improvement and DCF-required processes. It is also their responsibility to identify trends from all reviews and seek solutions for improvement while working with the FSSNF Training staff and Case Management Organizations (CMO) to address findings in future trainings.

The Court Liaison is responsible for working cooperatively with the Duval County Court system, FSSNF provider agencies and other service providing entities; identify deficiencies in the provision of placement services and work with provider agencies to find appropriate solutions.

Other responsibilities of the Quality Management Specialist Supervisor, the Quality Management Specialists, and/or the Court Liaison include, but are not limited to:
Quality Management Specialist Supervisor and the Quality Management Specialists:

- In collaboration with FSSNF service delivery staff and Case Management Organizations (CMO), complete all DCF-required quality assurance reviews and interviews. For FY 14-15 this will be Targeted Permanency Feedback; Targeted Well-Being Feedback; and full Child and Family Services Reviews (CFSR) that include stakeholder interviews.
- Complete DCF-required quarterly supplemental reviews. For FY 14-15 this will be Rapid Safety Feedback reviews for children ages 0-4 receiving FAST and in-home court-ordered services for Q1-Q3 and a review to be determined by FSSNF needs for Q4.
- Participate in frequent quality improvement meetings that incorporate review findings with other critical sets of data and DCF and FSSNF monitoring reports into a plan of action by using the Plan, Do, Check, and Act (PDCA) concept;
  - PLAN: plan ahead for change. Analyze and predict the results.
  - DO: execute the plan, taking small steps in controlled circumstances.
  - CHECK: check, study the results.
  - ACT: take action to standardize or improve the process.
- Assist the Case Management Organizations (CMO) in quality improvement planning by ensuring compliance with statute, rule, and policy
- Process incident reports and enter into IRAS as required by FSSOP;
- Analyze data and report results to the Director of Quality Management;
- Review client complaints, work on resolutions and track results;
- Conduct permanency and other out-of-home care staffings on a monthly and/or quarterly basis at the Case Management Organizations’ (CMO) sites.

Court Liaison:

- Attend designated hearings to ensure parents or caregivers are given information on the dependency and/or delinquency process and link them to needed services.
- Work closely with the DCF Child Protective Investigations, CMO staff, and/or Kids Central Service Center Placement Specialist to identify alternative placements to traditional foster or group home placements and to help facilitate service referrals when appropriate and necessary.
- Notify the appropriate parties of upcoming crossover case hearings. Track the children in both an open dependency case and an open delinquency case ensuring that appropriate resources are being put in place for the child.

B. Description of QA/CQI infrastructure

FSSNF believes in a continuous quality improvement system that includes input by all levels of FSSNF staff and partners across departmental and community lines. FSSNF currently directly provides court-ordered dependency services in Nassau County and contracts with the following Case Management Organizations (CMO) to provide in-home and out-of-home services: Children’s Home Society, DANIEL, Jewish Family & Community Services, Mental Health Resource Center, and Neighbor To Family.
Reports of Quality Management activities include the results of performance measures outlined in the contract with DCF and will be shared with the FSSNF’s Management Team, FSSNF Board of Directors, the FSSNF and DCF Contract Management staff, the DCF Northeast Region staff, the DCF Office of Family and Community Services-Child Welfare, and each Case Management Organization (CMO). The benefit of sharing these results is to encourage individuals to work across departmental and community lines to improve quality of services and to realize the importance of customer satisfaction and services provided to the children and families served.

The Quality Management reports will show FSSNF and the Quality Management Team which Case Management Organizations (CMO) are meeting their goals and following procedures and which ones need improvement. FSSNF’s Quality Management Team will use these reports to guide its quality improvement process. After reviewing the results of the reports, the FSSNF Quality Management Team will assist the Case Management Organizations (CMO), as needed, in developing an action plan to improve child welfare practice. However, it is ultimately each Case Management Organization’s (CMO) responsibility to address deficiencies and provide a plan of action to eliminate future occurrences of deficiencies. Also, the FSSNF Quality Management Team works collaboratively with the FSSNF Contracts Department to ensure additional oversight and monitoring are in place to assist our Case Management Organization (CMO) partners.

As stated above, the FSSNF Quality Management Department will participate in regularly scheduled meetings with other FSSNF departmental staff, Case Management Organization (CMO) staff, and other community stakeholders to discuss performance, share best practices, and address areas in need of improvement.

Section 3: Seamless QA/CQI of Case Management

A. Unit Supervisory Discussions

At a minimum, existing policy requires case management supervisors review all open cases in their units on a quarterly basis (ie. every 90 days). The supervisory review process for Duval and Nassau Counties will be as follows:

1. A supervisory review is required on all cases open 30 days or more in any 90 day period. The Family Services Counselor Supervisor (FSCS) will be required to review 100% of the cases in their unit every 90 days to ensure child safety, well-being, and permanency are being addressed for every child.

2. The FSCS shall use the Supervisory Discussion Guide or similar and approved document to assist in conducting a qualitative supervisory review. The focus of the review will be to address: Child Safety, Permanency, Well-Being, Case Status, Parental Behavior Change, and Next Steps/Follow-up.

By utilizing the Supervisory Discussion Guide or similar and approved document to focus on the safety, permanency, and well-being of the case, the FSCS and FSC will have the opportunity to identify gaps and resolve them timely. This
discussion would assure appropriate safeguards and services are in place and the cases are moving toward successful closure.

3. The FSCS shall input a chronological note in Florida Safe Families Network (FSFN) by selecting “Review-Supervisory” as the note-type to indicate the completion of a supervisory case review and include, at a minimum, the focus of the review listed in #2 above.

4. The FSCS shall complete and enter all chronological notes into FSFN within two working days of the completion of the supervisory case reviews.

Each child reviewed must be selected as a subject of the note for the review in order to document compliance with the requirement to document a supervisory case review every 90 days.

5. The FSSNF Data Department will continue to report the completion of supervisory case reviews on at least a monthly basis to show compliance by each Case Management Organization (CMO).

6. The FSSNF Quality Management Team will continue to review the quality and completeness of the supervisory reviews and report the findings to the FSSNF’s Management Team, FSSNF Contracts Department, and FSSNF Board of Directors, and each Case Management Organization (CMO) as required.

7. Case Management Organizations (CMO) with supervisors not meeting expectations will be required to submit corrective action plans for performance improvement, per stipulations of their contract with FSSNF.

B. CBC Quality Assurance Targeted Reviews

FSSNF will conduct ongoing targeted reviews of cases to determine the quality of child welfare practice related to safety, permanency, and child and family well-being. The tool in the DCF Portal consists of 25 items derived from the CFSR. Each type of targeted review responds to a specific set of items on the tool. After each case review is completed, the QM Specialist will schedule and conduct a case consultation with the FSC and FSCS. The targeted review process allows FSSNF limited resources to focus reviews on a targeted population of children who are most impacted by negative outcomes before they occur in safety, permanency, and well-being outcome areas:

1. Rapid Safety Feedback focuses on open FAST and in-home –court ordered services cases for children ages 0-4. Samples will always include the youngest children (under 12 months).
2. Targeted Permanency Feedback focuses on children ages 13-17 who are in out-of-home care
3. Targeted Well-Being Feedback focuses on children ages 5-12 who are in out-of-home care.
DCF has given each CBC the responsibility of identifying the targeted review that would most impact day-to-day practice in the field. The reviews and consultations will assist in improving the quality of day-to-day case work practice provided to the children and families. The process for preparing and conducting the reviews will be as follows:

1. Each quarter, the DCF Office of Family and Community Services-Child Welfare will provide a report in FSFN of all recipients meeting sample criteria during the defined selection period. Thirty-six cases will be selected for review per quarter. The FSSNF Director of Quality Management or designee will be required to draw and assign the sample of cases from the report for Duval and Nassau counties, ensuring the cases meet the criteria for the population quadrant under reviews by in-home (non-judicial and judicial) and out-of-home care.

2. The case reviews will be conducted by using the following schedule:

   **Duval and Nassau**
   - July-Sept. 2014 (at least 36 cases throughout the quarter)
   - Oct-Dec. 2014 (at least 36 cases throughout the quarter)
   - Jan-March 2015 (at least 36 cases throughout the quarter)
   - April-June 2015 (at least 36 cases throughout the quarter)

3. FSSNF Quality Management Team will provide consultation to the FSC, FSCS, and other CMO management following each targeted review. The goal of the consultation is to assist the FSC in developing critical thinking skills around their casework practice in order to immediately impact and improve their day-to-day practice in the field and subsequently improve child and family functioning and outcomes.

4. FSSNF Quality Management Team will request action from the Case Management Organizations (CMO) if at any time the reviews note significant safety concerns that require follow-up.

5. The FSSNF Director of Quality Management or designee will track, analyze, and report the findings of the Targeted Reviews to the FSSNF Management Team, FSSNF Contracts Department, and FSSNF Board of Directors, and to each Case Management Organization (CMO) on a quarterly basis and the DCF Northeast Region staff and the DCF Office of Family and Community Services-Child Welfare when requested and according to the contract due dates.

6. Each Case Management Organization (CMO) will be responsible for addressing any shortcomings noted during the reviews.
C. Full Child and Family Services Reviews

The Family Services Reviews (CFSR) will be completed for 2 cases per quarter. In 2015 the CFSR tool will be available nationally online, until then all questions on the tool in the DCF Portal will be reviewed for the selected cases. The process for organizing, managing, and conducting the CFSR reviews for Duval and Nassau Counties will be as follows:

1. Each quarter, the FSSNF Director of Quality Management will select 2 cases that have not previously been selected for targeted review from the QA reports DCF posted in FSFN. Other discard criteria defined in the Windows into Practice guideline will be applied in selecting cases.

2. The cases will be reviewed using all items on the tool in the DCF Portal according to the following schedule:

   **Duval and Nassau**
   - July-Sept. 2014 (at least 2 cases throughout the quarter)
   - Oct-Dec. 2014 (at least 2 cases throughout the quarter)
   - Jan-March 2015 (at least 2 cases throughout the quarter)
   - April-June 2015 (at least 2 cases throughout the quarter)

3. The full CFSR review includes reading the case files of the children and interviewing parties involved with the case.

4. FSSNF Quality Management Team will request action from the Case Management Organizations (CMO) if at any time the reviews note significant safety concerns that require follow-up.

5. Once the reviews have been completed, the FSSNF Quality Management Specialists will input the information into the DCF Portal.

6. The final step in completing the CFSR will entail the FSSNF Quality Management Team conducting a debriefing with the Case Management Organization (CMO) case manager, supervisor and others as deemed appropriate. The debriefing is intended to provide an understanding of what is “behind” the safety, permanency, and well-being compliance numbers in terms of day-to-day practice in the field and about how that practice is impacting child and family functioning and outcomes.

7. The FSSNF Director of Quality Management or designee will follow the implementation requirements of the Windows into Practice to track, analyze, and report the findings of the CFSR Reviews to the FSSNF’s Management, FSSNF Contracts Department, and FSSNF Board of Directors, and to each Case Management Organization (CMO) on a quarterly basis and to the DCF Northeast.
Region staff and the DCF Office of Family and Community Services-Child Welfare when requested and according to the contract due dates.

D. **Description of QA/CQI Activities during Safety Methodology transition**

Currently, the QA/CQI Management Team, regions and the CBCs, have agreed that while the Safety Methodology is being trained and implemented in various parts of the state, existing QA/CQI protocols will remain in place. As a result, FSSNF will continue to abide by the requirements by utilizing the current protocol and tools to conduct Targeted Reviews, CFSR, and the supplemental case reviews.

Safety Methodology practice is being rolled out during the first and second quarters of FY 14-15. The pilot rollout was in Nassau County followed by rollouts from CPI to FAST and case management following in Duval County. The goal is to have all CPI, FAST, and case management units practicing safety methodology by the end of calendar year 2014. The QM Specialist Supervisor is a Safety Practice Expert (SPE) and is able to consult on casework practices during the rollout process.

E. **Description of the Utilization of Results Towards Improvement**

Following an unfavorable statewide Auditor General Report and subsequent request for corrective action, the QM team provided training to each CMO and completed an intentional comprehensive review of all well-being and compliance requirements with regard to psychotropic medication for all 117 children in out-of-home care who were prescribed psychotropic medication. The COU review that followed the training and the intentional review documented significant improvement. The CEO established a goal for the CMO of 100% ongoing compliance with requirements for psychotropic medication. Each CMO implemented internal CQI processes and the FSSNF QM team implemented an ongoing weekly review of compliance with psychotropic medication requirements, each review was followed by a monitored request for action to correct noted deficiencies. By the end of the FY two of the CMOs had achieved 90% or greater compliance for the children in their sample.

Intense statewide media focus on child deaths during or following involvement with DCF and/or the CBCs resulted in the development and implementation of the Rapid Safety Feedback review for children 0-3. The FSSNF QM team reviewed 165 predominantly FAST cases during the Q3-Q4 period and found no immediate safety issues; compliance issues were addressed by Requests For Action. An important improvement to this review process was the implementation of an immediate consultation between the QM Specialist completing the review and the CMO FSC and FSCS. The intent of the consultation was to develop the FSC and FSCS’ critical thinking and knowledge of casework practices by consulting in real-time.

By creating key positions and having a strong data team working w/various FSSNF staff members and the Case Management Organization (CMO) quality management staff has
been driving improvements in our performance measures. It is our plan to continue this effort.

F. Florida Safe Families Network

The FSSNF Data Department pulls reports weekly and/or monthly and assists the Case Management Organizations (CMO) regarding FSFN data integrity. These reports are sent to the Case Management Organizations (CMO) for timely and appropriate corrections. Data/performance meetings are also held frequently to discuss FSFN data integrity.

The qualitative and timely completion of documenting data into FSFN is also monitored during the FSSNF Quality Management Team’s quarterly case reviews. The results are discussed and shared with our Case Management Organization (CMO) partners and other appropriate staff persons to strategize on performance improvement and sharing best practices.

Section 4: Schedule of QA/CQI Activities

A. Activity Schedule

- **Targeted Reviews: Conducted Quarterly**
  - July-Sept. 2014 (at least 36 cases throughout the quarter)
  - Oct-Dec. 2014 (at least 36 cases throughout the quarter)
  - Jan-March 2015 (at least 36 cases throughout the quarter)
  - April-June 2015 (at least 36 cases throughout the quarter)

- **CFSR Reviews: Conducted Quarterly**
  - July-Sept. 2014 (at least 2 cases throughout the quarter)
  - Oct-Dec. 2014 (at least 2 cases throughout the quarter)
  - Jan-March 2015 (at least 2 cases throughout the quarter)
  - April-June 2015 (at least 2 cases throughout the quarter)

- **Additional Reviews: Conducted Ongoing**
  - Reunification case work for children 0-6
  - Relative and Non-Relative placement

- **Meetings with Case Management Organization (CMO) staff:**
  - FSSNF staff meets every month with the Case Management Organization (CMO) Executive Directors or Chief Executive Officers, Program Directors, and Associate Directors to share information, provide training, and address concerns related to various aspects of the dependency case process. Quarterly training for CMO Supervisors will resume during Q1.
• **Meetings with the FSSNF Board of Directors:**
  - FSSNF Management staff meets every month on the second Tuesday of each month with the FSSNF Board of Directors.
  - One of the purposes of this meeting is to review the current performance for each CMO and overall agency objectives.

• **Meetings with Regional Administrator to Review CBC Performance:**
  - FSSNF Management and DCF Contract Managers, Circuit Administrator and other staff meet at least quarterly to discuss performance measures, current outcomes, resolutions/corrective action plans, DCF Score Card, and other concerns.

• **Risk Committee Meetings:**
  - The Risk Committee Meetings occur at least quarterly. The purpose of this meeting is to review and assess risks as it relates to client incidents, staff accidents, client grievances, building inspections, etc.

• **Quality Management (QM) Department Meetings:**
  - The QM Department Meetings occur weekly.
  - The purpose of this meeting is to review and discuss the findings of current case audits to improve child welfare practice, discuss new policies and procedures, develop and implement strategies for continuous quality improvement system-wide, and share “best practices” of child welfare.

All data input and reports will be completed and/or provided to the DCF Office of Family and Community Services-Child Welfare and other entities per the contract due dates.

**Section 5: Additional Reviews and Utilization of Results**

**A. Executive Management and Region Discretionary Reviews**

The FSSNF Quality Management Team will continue to work with the DCF Circuit/Region to respond to and complete special discretionary review requests (i.e. special case audit requests, child death reviews, etc.) within a mutually agreeable timeframe. This activity will likely require specially designed review tools and other protocols depending on subject matter. The FSSNF Quality Management Team will utilize the DCF approved review tool to complete these reviews.

**B. Supplemental Reviews**

The FSSNF Quality Management Team conducts supplemental reviews on at least 10 additional cases each quarter in order to assess practice for a specific topic. DCF has selected Rapid Safety Feedback as the supplemental review for Q1-Q3; the topic of the Q4 supplemental review will be at the discretion of FSSNF. The results of supplemental reviews are discussed and shared with our Case Management Organization (CMO)
partners and other appropriate staff persons to strategize on performance improvement and sharing best practices.

**Section 6: Measures and Outcomes**

**A. Additional Tracking and Reviews**

FSSNF and the Case Management Organizations (CMO) are required to provide services in a manner that achieves performance targets outlined in contractual standards. A list of the performance standards and other review areas are as follows:

- Children served in out-of-home care who are not maltreated by their out-of-home caregiver
- Children reunified who were reunified within 12 months of the latest removal
- Children reunified who re-enter out-of-home care within 12 months
- Children who were adopted who were adopted within 24 months of the latest removal
- Children in out-of-home care 24+ months on July 1st who achieve permanency prior to their 18th birthday and by June 30th
- Children in out-of-home care at least 8 days, but less than 12 months, who had 2 or fewer placement settings
- Required number of Adoptions Finalized for FY 14-15
- Children under supervision required who are required to be seen every 30 days
- Youth who have aged out of care completing high school or GED by 20 years of age
- Youth who have completed high school or GED and are involved in post-secondary education
- Youth ages 18 and over receiving Independent Living services who have a job (including joining the military)
- Young adults in safe housing
- 17 year old youth in licensed out-of-home care who had a transition plan signed by the youth and filed with the court
- Client Complaints and Incident Reports

During the ongoing tracking and review process, an opportunity to address performance issues and discuss, plan, and implement improvement strategies is presented. FSSNF accumulates the outcomes and performance indicators from FSFN, the DCF Web Portal, and other related-data sources into a bi-weekly and/or monthly scorecard. The scorecard is distributed in regular scheduled meetings (or email) to the Case Management Organization (CMO) CEOs and directors to review, identify, and discuss with their staff the performance trends in need of immediate attention. This data is also shared with FSSNF Management and DCF.
B. Strategic Objectives

The current strategic plan covers the period from 2011 through 2015. The strategic plan compliments FSSNF’s mission statement which “is to be the leader in providing safety, stability, and quality of life for all children by working with the community to strengthen the family unit.” FSSNF is committed to ensuring high-quality, community-based care for abused and neglected children in North Florida.

C. Ongoing Improvement Initiatives

FSSNF utilizes the PDCA Cycle of Quality Improvement to facilitate the performance and quality improvement process. The PDCA Cycle is a checklist of the four stages that allow a PQI process starting from identifying the problem through making necessary revisions or changes to resolve the issue. The four stages are Plan-Do-Check-Act, and the cycle is illustrated below.

- **Plan** – identify and analyze items in need of improvement or change and create the corrective action plan for implementing the improvements. Corrective action plans should include
  - Statement of Need
  - Action Steps
  - Delineation of Responsibility
  - Target Dates
  - Follow/Up Completion Status

- **Do** - deploy steps of the plan.

- **Check** - follow up to ensure the plan was implemented properly and outcomes are desirable.

- **Act** - Plan is fully implemented. The cycle begins again with an assessment to identify the next set of problems/issues to be addressed.

FSSNF will continue to complete bi-weekly and/or monthly reports to address performance issues, and continue to work with the Case Management Organizations (CMO) to make improvements.
As in previous fiscal years, FSSNF worked and will continue to work with the DCF and other CBC representatives to address findings and share best practices. FSSNF expects to utilize the results from the Targeted Reviews, CFSR, and Supplemental Reviews and the performance scorecard to gauge growth and current performance.

D. National Accreditation

FSSNF has been accredited since 2008. Current accreditation is as for network administration and for the direct provision of Foster Care/Kinship Care and for Adoption Services.