**Introduction**

Kids First of Florida (KFF) utilizes Continuous Quality Improvement to identify, describe, and analyze areas of strengths and problems, and then test, implement, learn from and revise solutions. Integral to this approach is an atmosphere that is proactive and supports continuous learning. Data collected from Quality Assurance (QA) activities is utilized to develop improvement plans in support of achieving performance targets, program goals, client satisfaction, and positive client outcomes through a broad-based, community-wide process, inclusive of KFF staff and stakeholders.

**Quality and Risk Management Process:**

The KFF quality and risk management process builds on the components of:

a) Quality Control – narrow focus; the actual measurement and assessment of output to determine whether specifications are being met.

b) Quality Assurance – broader focus; any activity that impacts the maintenance of quality at the desired level. Refers to entire system of policies, procedures, and guidelines the project has established to achieve and maintain quality; extends from the design of services and processes through to the quality assessment of system outputs.

c) Continuous Quality Improvement – broadest focus; integrative management concept directed at continuous improvement in the quality of services by involving all levels and functions of the organization. Goal is to build in quality from the beginning by making quality everyone’s concern and responsibility.

KFF focuses on quality control, quality assurance, and continuous quality improvement in a comprehensive and continual systems evaluation process.

**Quality Improvement Steps:**

When an area in need of improvement is identified, KFF Quality Improvement (QI) activities are implemented and include the following 7 steps:

1. Reason for Improvement (Display Problem)
2. Current Situation (Stratify Problem)
3. Analysis (Identify and Verify Root Cause)
4. Countermeasures (Identify and Implement Countermeasures)
5. Results
6. Standardization
7. Future Plans (Lessons Learned)

**Underlying Assumptions:**

- Essential to the implementation and success of the CQI process is the participation of all KFF management, staff and other stakeholders, including the community.
- All QI activities are equal in importance.
- Each manager, staff member, and other stakeholder has an equal responsibility in the quality improvement process.
Successes are shared and celebrated among management and staff members and other stakeholders.

KFF’s QA Department consists of a QA Manager and Coordinator. In addition to KFF QA staff coordinating and completing reviews, collecting and analyzing data and coordinating quality improvement activities, members of KFF management and staff (including QA staff) and other stakeholders meet as necessary to address emerging issues. These meetings are used to set goals and develop plans to improve the quality of services. Minutes of the meetings are shared with other KFF management and operations staff and the QA Manager, in a continuous loop to facilitate communication and plan follow up activities.

QI meetings can be scheduled along with, or in place of, a regularly scheduled staff/unit meeting. Meetings are scheduled at a time when all stakeholders have the opportunity to participate. Each meeting may consist of several members with varying roles within the agency who provide alternative perspectives on an issue. Each meeting may be attended by a member of the QA Department to provide support and guidance to the meeting participants. Meeting participants are encouraged to identify relevant issues, and may also be asked to address an issue identified through QA Case Reviews, Incident Reports, Client Grievances or Satisfaction Surveys. Allowing meeting participants to address issues ensures ownership of the action plan developed and the efforts required to achieve the desired outcome.

QI teams have decision-making authority. Meetings result in:

1. The identification of needs, goals and available resources.
2. Discovery and utilization of strengths throughout the program.
3. Development of action plans to implement identified improvements.
4. Identification of unresolved issues to present to the next level.

**Agenda for QI Team Meetings:**

An agenda for QI meetings may include, but is not limited to:

- Review and celebration of successes
- Review of incident reports—client, staff involved reports as well as service complaints
- Participant and other stakeholder satisfaction and input data
- Case review findings
- Program improvement data and barriers to achieving outcomes addressed
- QI projects/updates and new proposals
- Action planning

Through the early identification of areas in need of improvement, KFF can more efficiently and effectively develop corrective steps to increase compliance.

**Key Elements of the Quality Improvement Process**

The following areas are highlighted as key components of the quality improvement process.
1. **Grievances** - A grievance reporting process was developed to ensure individuals are informed of their right to file a written grievance and provided the appropriate grievance form when needed. Individuals have a formal avenue to express their concerns and complaints. Grievances are received, in writing, utilizing the Client Grievance form. The grievance process is outlined on the form.

2. **Satisfaction Surveys** – Clients and community stakeholders, foster parents, courts, Guardians ad Litem (GAL), providers, etc., are provided a formal satisfaction survey annually to communicate their satisfaction or concerns related to their experience with KFF. The survey findings are summarized and reported to the Senior Management Team. Information is also shared with the Board of Directors.

   Satisfaction surveys are currently mailed on an annual basis. Responses are then compiled and a written report is furnished to the Senior Management team and Board of Directors. The information gathered is evaluated and utilized by KFF Management in the strategic planning process to ensure KFF is sensitive to the needs of the service community while providing quality services to our clients.

3. **Incident Reporting** - An incident reporting process was developed to ensure that all significant events that occur outside of established business practices or cause or could cause harm to a client, staff member or facility, are reviewed. Incident reports are tracked and trended and reported to Senior Management, agency staff and DCF. The process regarding the receipt and review of Incident Reports is detailed in KFF Policy and Procedure 100.005, Incident Reporting.

4. **Exit Interviews** - Results of the interviews of children exiting a licensed substitute care family or shelter home after a minimum of 30 days of residence will be tracked as a means to evaluate the quality of substitute care services provided by licensed providers of KFF.

**Quality Improvement Focus**

KFF’s CQI approach to quality and risk management can best be conceptualized by focusing on the following two areas of the process:

a) Coordination and Process

b) Results

**Focus on Coordination and Process**

**Unit Supervisory Reviews:**

1. At least once every 90 days, 100% of an individual Family Services Counselor’s (FSC) assigned children will be staffed in supervision by the Family Services Counselor Supervisor (FSCS) to ensure child safety, well-being and permanency are being addressed for every child. Providing adequate support and supervision to the FSC will enhance the counselors’ abilities and lead to enhanced services to children and families.
2. The FSCS shall complete all supervisory reviews and a chronological note shall be entered into the Florida Safe Families Network (FSFN).

3. At a minimum, the following information will be documented in FSFN chronological notes for each child assigned:
   - Date of Supervision and Individuals Present
   - Status of Follow-up Tasks from Last Review
   - Placement Type
   - Medical, Dental, Mental Health and Educational Needs
   - Psychotropic Medications Prescribed
   - Case Plan Goal, Tasks, and Progress
   - Barriers to Permanency
   - Identified Safety Concerns
   - Follow-up Tasks, Person Responsible and Date Due

   The FSCS may cut and paste the information into the FSFN note or type the information in the FSFN note. The FSCS must note in FSFN that a “supervisory review” was conducted.

4. A supervisory review is required on all cases open 60 days or more in any given quarter. Subsequent supervisory reviews are required at least once every 90 days.

5. On a quarterly basis, KFF will randomly select 10 Supervisory Review notes and conduct a qualitative review. The data gathered will include the following:
   - Reviews were completed at least once every 90 days
   - FSCS’s considered all aspects of the child’s safety, well-being and permanency
   - FSCS’s ensured follow through on guidance and direction or documented the reasons the guidance and direction were no longer necessary.

6. FSCS’s not meeting the qualitative review elements stated above will be required to submit action plans for performance improvement.

7. KFF will include the performance data in the Quality Management Report.

8. KFF will, as requested, provide performance data to DCF and the Board of Directors.

**Qualitative Service Reviews:**

**Purpose:**

KFF will conduct Quality Service Reviews using the Quality Service Review (QSR) protocol and web based tool established by the Department of Children and Families. The QSR process will focus on child welfare practices involving ongoing cases. All KFF staff who conducts In-depth QSR’s will be trained by DCF to conduct such reviews within six months of employment, if the training is offered by DCF. Community stakeholders not trained in the QSR process may shadow trained QA staff.
The QSR is a self-evaluation tool that will help KFF assess the effectiveness of its practices and the interventions provided to the families served. It helps KFF learn how families are doing and which service functions are working. Because the QSR is directly tied to the core components of individualized practice - engagement, assessment, planning, implementation, and results - each QSR measures the degree to which true individualized and participatory practice is occurring with each individual family being reviewed.

QSR results and findings will be combined with existing quantitative data (e.g. FSFN production reports) in order to provide meaning to the regularly reviewed performance data. Simply stated, data speaks, but "stories" teach. QSR results are not intended to be “generalizable” to all open cases, but rather to learn and understand themes and patterns that may not be readily identified from regularly produced data on all open cases.

**Sampling:**

Each quarter, the Office of Child Welfare data unit will provide an extract to KFF that lists all children who are eligible to be reviewed by permanency goal. The extract will be pulled the first week of the month that precedes the beginning of a new quarter. Each quarter, the KFF QA Manager or designee will identify cases from the extract and two (2) cases will be identified for a QSR. QSR reviews will include, as much as possible, one in-home service cases (non-judicial and judicial) and one out-of-home service cases.

KFF QA will track the cases reviewed from quarter to quarter, discarding duplicate cases from subsequent samples. Decisions to discard a randomly selected case from the sample list will be approved by the KFF QA Manager, who must also document the basis for the decision as it relates to the discard criteria.

**Quality of Practice Standards Review:**

**Purpose:**

At least quarterly, and on an ongoing basis, KFF will conduct a record review of selected cases utilizing the Quality of Practice Standards Review protocol. The standards in this review protocol are linked to desired outcomes for Child Safety, Permanency and Well-Being, and provide useable discrete data in those specific domains to continually inform local operations, management and leadership. These standards also map back to the federal review guidelines. Each KFF staff completing these reviews is trained/certified in the process.

**Sampling:**

Each quarter, the KFF QA Manager will utilize the extract provided by the Office of Child Welfare data unit to identify twelve (12) cases for a QPS review.

The sample for QPS reviews will include, as much as possible, an equal share of In-Home service cases (non-judicial and judicial) and Out-of-Home service cases. After this initial
stratification, KFF may choose to stratify the samples further if there is a need to focus reviews in specific areas of local practice.

The number of cases required for review is based on the number of children served. The sample size is based on the 90/10 confidence level and margin of acceptable error. It is a statistically valid sample.

Decisions to discard a randomly selected case from the sample list will be approved by the KFF QA Manager, who must also document the basis for the decision as it relates to the discard criteria.

KFF QA will track the cases reviewed from quarter to quarter, discarding duplicate cases from subsequent samples, and conduct various data analyses. The KFF QA Manager or designee will ensure the list of cases selected for the QPS review is unduplicated and make another random selection, if the same case is identified for both the QPS review and QSR.

**Florida’s Safety Decision Making Methodology Quality Assurance Reviews:**

KFF is scheduled to begin implementation of the Florida’s Safety Decision Making Methodology Model on October 1, 2013. Until a Quality Assurance review tool is developed and approved, KFF will continue to complete the other QA reviews and QI activities identified in this plan. After a tool is developed, this plan will be revised.

**Supplemental QPS Reviews:**

Psychotropic medication Supplemental Reviews will also be conducted each quarter during fiscal year 2013-2014. For these cases, only Standards 36.5, 37.5, 46.6, 67, 72.2 will be reviewed.

In addition to the above reviews, KFF may also conduct additional QPS reviews of its performance in specific program areas that data analyses show a need for improvement.

**Executive Management and Region Discretionary Reviews:**

**Special Quality Assurance Reviews:**

Region and KFF QA staff may be assigned responsibility for conducting a special QA review that may be based on concerns related to decision-making and/or service provision. The need for a Special QA Review may be identified by Region or Circuit Administration or KFF Management. When necessary, KFF and DCF will work cooperatively to complete these reviews.

Client complaints may surface at the local level, both internally at KFF or DCF. Regardless of where the complaint is received, KFF works to resolve the complaint by reviewing the information in the complaint, gathering factual information regarding the circumstances of the case and situation and reviewing the situation to determine if appropriate action was taken to resolve the issues. At times, case summaries are required to provide a “full picture” of the
case beginning with the service initiation date through the current date, including the events related to the issues in the complaint. From this summary, a formal written response is provided to the complainant. When possible and appropriate, many complaints are resolved with telephone calls, email correspondence, and letters rather than detailed summaries. This process has led to a number of teaching and learning experiences focused on improving the quality of casework and services to children and families.

KFF responds to other Discretionary Reviews in a manner similar to that of the complaint review process. When a request for information is received, the Chief Executive Officer (CEO) processes the request to determine who the best respondent would be within KFF. In most instances, an FSCS reviews the case to gather factual information regarding the circumstances of the case, and provides a summary of the information in the format requested. There are times however, when this may not be the most appropriate approach and KFF conducts a QA review of the case or cases and reports on the findings. With either approach, the lessons learned lead to improved case management skills and improved quality of care.

Collaboration with DCF Quality Assurance:

KFF QA staff will participate in quarterly meetings and trainings (contingent on availability of funding) with DCF quality assurance staff to collaborate on federal and state quality assurance initiatives.

Psychotropic Medications for Children in Out-of-Home Care:

The QA Department is responsible for monitoring and assisting in ensuring that the KFF Psychotropic Medication for Children in Out-of-Care policy and procedure is being followed for all children in out-of-home care.

Florida Safe Families Network:

Through FSFN and Mindshare Data Mining and Analytics, KFF’s FSCS continually assess FSFN data accuracy and completeness of data by regular review of case specific information and reports. Mindshare and reports, including but not limited to, Children Active Receiving In-Home or Out-of-Home Services; AFCARS Foster Care Errors; Fingerprints, Birth Verification, and Photographs; and Removal Placement Exceptions Listings are reviewed by the supervisors regularly. Review and correction (if necessary) of FSFN data, has been incorporated into the supervisory review process.

To ensure accuracy of placement information, the Placement Coordinator enters all placement changes into FSFN.

Local Schedule:

In-Depth QSR, QPS and Supplemental QPS Reviews:
- July – September: 2 QSR, 12 QPS and Supplemental QPS reviews completed on business days throughout the quarter
• October – December: 2 QSR, 12 QPS and Supplemental QPS reviews completed on business days throughout the quarter
• January – March: 2 QSR, 12 QPS and Supplemental QPS reviews completed on business days throughout the quarter
• April – June: 2 QSR, 12 QPS and Supplemental QPS reviews completed on business days throughout the quarter

Incident Report Review:
Purpose: Review incident reports
Frequency: Quarterly
Participants: QA Staff

DCF Contract Manager Quarterly Monitoring:
Purpose: Monitor DCF contract performance
Frequency: Quarterly
Participants: DCF Contract Manager

QA Unit Review Meeting:
Purpose: Review unit performance on quality assurance reviews and monitor internal corrective action
Frequency: Quarterly
Participants: CPO, FSCS’s, and QA Supervisor or Coordinator

Subcontract Monitoring:
Purpose: Review performance of sub-contractors
Frequency: Based on Risk Assessment
Participants: Subcontract staff, QA Supervisor, and Contract Coordinator

Community Based Care Meetings:
Purpose: Focus on KFF’s performance on contract requirements
Frequency: Every other month
Participants: KFF and DCF staff

Clay Action Coalition Meetings:
Purpose: Information sharing
Frequency: Monthly
Participants: Partner agencies

Mercy Network Meetings:
Purpose: To coordinate/discuss community resources
Frequency: Monthly
Participants: KFF and the faith based community

School Social Workers/CBHC/KFF/CPI Meetings:
Purpose: Joint training and agency updates
Frequency: Yearly
Participants: School Social Workers, Clay Behavioral Health Center, KFF, and DCF Child Protection Investigators (CPI)

Dependency Court Improvement Program:
Purpose: Discuss ways to improve and strengthen the dependency court process
Frequency: Quarterly meetings
Participants: Judge, Magistrate, attorney's, Children’s Legal Services, DCF CPI’s, and Guardian Ad Litems

Community Alliance:
Purpose: Oversight of CBC agencies and providers, and advocacy on issues relevant to children and families in Northeast Florida.
Frequency: Monthly
Participants: Members of the community, local schools, county government, courts and law enforcement

KFF Board Meeting:
Purpose: Provide governance and oversight of KFF
Frequency: Monthly
Participants: Professional and non-professional volunteers representative of Clay County

**Focus on Results**

**Performance Measures:**

KFF collects and reports data on performance indicators and outcome measures on a monthly, quarterly, and annual basis.

**Community-Based Care (CBC) Lead Agency Scorecard (Monthly):**

The following areas will be monitored utilizing the CBC Lead Agency Scorecard:

1. No Verified Maltreatment within 6 Months of Termination of Family Support Services
2. No Verified Maltreatment During In-Home Services
3. No Verified Maltreatment within 6 Months Termination of In-Home & Out-of-Home Services
4. Children in Care 8 Days-12 Months with No More than Two Placements
5. Children Achieving Permanency within 12 Months of Entering Care
6. Children Achieving Permanency after 12 or More Months in Care
7. Children Not Re-entering Out-of-Home Care within 12 Months of Achieving Permanency
8. Children in Licensed Out-of-Home Care Age 12 and under in DCF-licensed Family Foster Homes
9. Overall Score on Education Report Card
10. Former Foster Youth Ages 19-22 with Diploma or GED
11. Administrative Expenditures as Percent of YTD Expenditures
Quality and Risk Elements:

1. Supervisory Reviews (quarterly)
   a. Data collected via:
      i. FSFN chronological notes and reports
      ii. Tracked by FSFN and Mindshare

2. Complaints (quarterly)
   a. Data collected via:
      i. Grievance forms
      ii. Tracked by KFF QA Supervisor

3. Exit Interviews (monthly)
   a. Data collected via:
      i. Exit interview forms
      ii. Tracked by Administrative Staff, Reviewed by QA Staff

4. Incident Reports (monthly)
   a. Data collected via:
      i. DCF Incident Reporting forms
      ii. Tracked by QA Staff

5. Family Assessments (quarterly)
   a. Data collected via:
      i. Family Assessment Form and FSFN Reports
      ii. Tracked by FSFN

6. Initial Family Team Conferences (quarterly)
   a. Data collected via:
      i. FTC Case Plan
      ii. Tracked by Family Team Conference Coordinator

7. Status of KFF Foster Homes (monthly)
   a. Data collected via:
      i. Foster Home Licensing Report
      ii. Tracked by Licensing and Placement Staff

8. Birth Verification Compliance (monthly)
   a. Data collected via:
      i. FSFN report(s)
      ii. Tracked by Mindshare
9. Photograph Compliance (monthly)
   a. Data collected via:
      i. FSFN report(s)
      ii. Tracked by Mindshare

10. Finger Prints Compliance (monthly)
    a. Data collected via:
       i. FSFN report(s)
       ii. Tracked by Mindshare

Quality Improvement (QI) Activities:

KFF utilizes data collected to identify and address areas in need of improvement at the case level. By looking at issues at the case level, improvements may be made in the way individual children and families are served and over time for the system of care as a whole. Case level reviews have resulted in the identification of problems, and the development of action steps to address both case specific and systemic issues.

On a monthly basis, KFF monitors its performance on DCF performance measures and other qualitative indicators such as CBC Lead Agency Scorecard, Family Team Conferencing, exit interviews completed, and photos/fingerprints/birth certificates obtained. Additionally, KFF staff meets to discuss compliance with performance measures, and performance improvement steps are reviewed.

The following areas were addressed in QI activities during the last FY:

1. Required Mother and Father Contacts with a Case Plan Goal of Reunification.
2. Medical, Immunization, and Dental Services for Children in Out-of-Home Care.
3. Engagement and Teaming of Case Participants.
4. Two-Way Communication with Service Providers.
5. Psychotropic Medication for Children in Out-of-Home Care
6. TANF Forms

Results of Quality Improvement Activities are reported to the KFF Senior Management Team and the Board of Directors.

The following areas will be targeted with QI activities during the next fiscal year:

1. Teaming with all of the people who provide support and services to the child and family.
2. Ongoing assessment of the mother and father’s needs for case planning purposes.
3. Encouraging the mother and father to be an active participant in shaping decisions pertaining to the child’s needs and activities.
4. Supporting and engaging the mother and father in services.
5. Actively involving all case participants in the case planning process.
6. Closely monitor children prescribed a psychotropic medication.
7. Facilitating service planning and informing team members of progress, concerns, and issues in a timely manner.
8. Ensuring follow through on guidance and direction or documenting the reasons the guidance and direction are no longer necessary.
9. Increasing two-way communication with service providers.
10. Increasing unannounced visits in the home.
11. Meeting with the children alone during visits.
12. Ensuring relapse prevention plans are in place when there are allegations of substance misuse.
13. Increase the number of children reunified within 12 months of entry into out-of-home care.
14. Decrease the number of verified maltreatment within 6 months of termination of services.

**Subcontract Monitoring:**

Subcontractor compliance, service delivery outcomes, and quality and timeliness of services are continually monitored utilizing reports submitted by the subcontract provider.

The KFF Contract Manager monitors each KFF subcontractor. The frequency of monitoring is based on a Risk Assessment and other agencies monitoring the provider. The review may consist of an on-site visit or desk review. The quality and adequacy of services delivered by each provider is reviewed using one or a combination of three methods: record review, interview, and observation. The monitoring tools utilized assess compliance with federal, state and other requirements associated with the service purchased.

When possible, and to reduce duplication effort, monitoring results may be drawn from other monitoring conducted throughout the year from other sources.

KFF transmits the results of the on-site subcontract monitoring, its findings and recommendations, and any other relevant information by preparing and submitting a written report to the provider.

**Federal Child and Family Services Reviews (CFSR):**

These reviews are led by the Administration of Children and Families, Children’s Bureau. Should the Children’s bureau determine that Florida’s child welfare system will undergo another CFSR, KFF QA staff will participate as needed.
How KFF Will Evaluate and React as New Information Becomes Available:

KFF is an agency focused on making changes and doing what is in the best interest of the children and families we serve. KFF’s quality control, quality assurance and continuous quality improvement system allows KFF to recognize and react to emerging trends at various levels within the agency and within the system of care. KFF works closely with DCF to review performance and ensure the safety, permanency and well-being of children is prioritized. As trends are identified, action plans are put in place. As stated previously, KFF reviews performance at the case level (through performance and case file reviews). By looking at issues at the case level, problems are identified and action steps implemented to address both case specific and systemic issues. Improvements occur for the individual children and families served, and over time for the system of care as a whole. This approach allows for an ongoing analysis of established trends and quality improvement activities and/or provides an opportunity to update existing action plans. In addition, this approach allows for the establishment of new action plans to address emerging trends identified through the various QA activities.

Critical Life, Health, or Safety Threat to a Child:

If a critical life, health, or safety threat to a child is identified during any QA or other review activity, it is immediately addressed by KFF. When a QA reviewer determines there is a threat to the child’s life, health or safety a Request for Action Form is completed and documents the unresolved concerns and case specific and demographic information. The completed form is routed to the KFF CPO. The CPO reviews the document to note the issues of concern and immediately forwards the document to the FSS and FSC responsible for the case. The FSS and FSC immediately begin working toward resolution of the issue of concern. When the issue is resolved, information is submitted to the QA Supervisor who is responsible for documenting the actions taken to resolve the issue. If there is a need to react immediately to ensure the child is safe, KFF and/or the QA reviewer completing the form ensures the appropriate immediate action is taken, i.e. calling law enforcement, calling 911, calling the FSC to ensure the situation is addressed immediately, etc. KFF will then either approve the actions taken or re-submit the form to the FSS and FSC for additional information or follow-up. This process continues until the issue is satisfactorily resolved.

Strategic Planning:

KFF and its Board of Directors have adopted the contract and other key measures identified in KFF’s contract with DCF as their strategic objectives. DCF strategic objectives are reported utilizing the DCF Dashboard. The Dashboard is reviewed by the KFF Senior Management Team and provided to the Board of Directors. KFF has also incorporated the goals of the CFSR Federal Audit Quality Improvement Plan into its strategic planning process. In addition, KFF considers it important to obtain diversity in its funding source. This diversification has been added as goal in the agencies strategic planning.
Accreditation:

KFF became accredited with the Council for Accreditation (COA) on October 8, 2010. COA, which accredits child welfare agencies, evaluated the entire organization and all services provided by the agency. KFF has begun the reaccreditation process and a site visit has been scheduled for July 2014.

Risk Identification and Management

Risk Identification and management is one of the key components of KFF’s Continuous Quality Improvement process. The system for the identification of risk includes a review of documents and reports during quarterly quality improvement reviews and/or meetings. The review may include an examination of the following activities:

- Incident Reporting
- Customer/Client Satisfaction Data
- Grievances
- Other Third Party Reports
- DCF Data/Reports
- Criteria-Based Outcome Studies and Presentations
- Quality Improvement Reports and Minutes
- Legal Complaints and Suits
- On-Call Reports and Scheduling
- Outside Requests for Client Records
- Exit Interviews
- Placement Stability
- Runaway Trends/Improvement and Follow-Up
- Emergency Preparedness Planning

When a risk is identified, during the normal operation of business, the Chief Executive Officer will make the final determination as to whether or not the identified risk should be brought before the Board of Directors.

Annually, in cooperation with the Board of Directors, Senior Management will conduct an internal assessment of overall risk. The assessment will include a review of the following:

- compliance with legal requirements, including licensing and mandatory reporting laws, fiscal accountability, and governance;
- insurance and liability;
- health and safety, including use of facilities;
- contracting practices and compliance;
- staff training regarding areas of risk;
- volunteer roles and oversight;
- research involving program participants and other clients’ rights issues; security of information, including client confidentiality;
- financial risk;
- fundraising;
• conflict of interest;
• employment practices; and
• interagency collaborations.

Risk Management:

The Risk Manager is responsible for the implementation and coordination of risk management activities. In order to carry out these activities, the Risk Manager will have access to staff and all necessary agency data. The designated Risk Manager for KFF is the Chief Programs Officer (CPO) for risk management activities related to programs, the Chief Financial Officer (CFO) for risk management activities related to finance, the Human Resources Manager for risk management activities related to human resources, the Information Technology Manager for risk management activities related to Information Technology and the Chief Executive Officer (CEO) for risk management activities related to administration. The Quality Assurance Unit will assist the Risk Managers with risk management activities.

Responsibilities of the Risk Managers:

Risk Managers or designees will be responsible for the following functions within the risk management process:
  a. Review and follow-up of incident reports, if indicated.
  b. Coordinate quality improvement and risk management activities.
  c. Communicate with the insurance carrier by notifying the carrier of serious incidents, potential claims and litigated claims. Perform follow-up on incidents and potential claims as requested by the carrier.
  d. Serve as a resource person to KFF staff on risk management issues/questions.
  e. Provide reports for the Chief Executive Officer (CEO) and Board of Directors.
  f. Coordinate, plan and implement educational programs designed to minimize the risk of harm to clients, staff and facilities.

Immunity:

No staff member or individual reporting, providing information opinion, or counsel shall be liable in a suit for damages based upon such reporting, provided that the individual acted in good faith and with a reasonable belief that said actions were warranted in connection with, or in furtherance of the functions of the risk management program.

Confidentiality:

Documents and records that are a part of the risk management process, and contain client identifying information, shall be maintained in a manner consistent with KFF’s Notice of Privacy Practices.
Quality Management:

The following areas, outlined in the quality management process, are also highlighted as key components of the risk management process.

a. Client/Customer Satisfaction
A client/customer satisfaction reporting process has been developed in which clients, community stakeholders, foster parents, courts, Guardians ad Litem (GAL), service providers, etc., have a formal vehicle to express their concerns and complaints. The survey findings are summarized and reported to the Risk Managers.

b. Incident Reporting
An incident reporting process has been developed in which all significant events that are outside of normal business practices or have caused, or could cause harm to other or the facility are reviewed and investigated (if applicable). Incident reports are tracked and trended and reported to the Risk Managers.

c. Client Outcomes
Client outcomes are reviewed and monitored through the QI process. Data analysis from Florida Safe Families Network management reports and other data tracked by KFF are shared with the Risk Managers.

d. Exit Interviews
Results of interviews with children exiting a licensed substitute care family or shelter home after a minimum of 30 days are reviewed by the applicable Risk Manager.

Employee Practices:

Comprehensive risk management requires the review of the following human resources practices. They include:

- Job Descriptions
- New Employee Orientation
- Worker’s Compensation
- Civil Rights Compliance Requirements
- American’s with Disability Act
- Protected Health Information (HIPPA)
- Employee Safety
- Family and Medical Leave Act
- Sexual Harassment
- Equal Employment and Affirmative Action
- Employee Satisfaction
- Employee Theft
- Wrongful Termination
- Disaster Planning
**Client Records:**

Policies and procedures related to the maintenance of client records have been developed. Client records are the property of KFF while conducting official business as the Lead Agency providing child welfare services in Clay County. Records will be kept in accordance with state, federal and Council on Accreditation requirements. Access to records will be limited to authorized staff and external monitors. Release of Information procedures will meet all state and federal requirements and will be monitored through the quality improvement process.

**Client Rights:**

In order to comply with federal and state law regarding access to services regardless of race, religion, gender, ethnicity, age or disability, procedures has been developed to address the following:

- Client Rights and Responsibilities
- Grievance Process
- Client Confidentiality/Privacy Practices