CPI Quality Management Plan
Fiscal Year 2009-2010
Northeast Region
Child Protective Investigations Quality Management Plan

The key components of the Northeast Region’s Child Protective Investigations (CPI) Quality Management Plan includes:
- CPI Unit Supervisory Discussions
- Semi-Annual Quality Assurance Reviews
- Stakeholder Surveys
- Semi-Annual Discretionary Quality Assurance Reviews Focused on a Region Specific Concern(s)
- Duplicate/No Jurisdiction Reviews (small sample added to the Semi-Annual and Discretionary Reviews)
- Special Quality Assurance Reviews Focused on a Case Specific or Practice concern
- Child Death Reviews

CPI Unit Supervisory Discussions

CPI Supervisors are required to review investigations 72 hours after an initial assessment regarding child safety is completed by the CPI, and every 30 days thereafter. The statewide Quality Assurance Model requires an additional level of review on investigations submitted for approval for closure. At a minimum, the additional CPI Unit Supervisory Discussion is completed on three randomly selected cases per CPI each calendar month through a facilitated discussion of critical and qualitative aspects of the investigation.

The CPI Supervisor is required to assess documentation in the following areas:
- All prior reports to the Hotline and outcomes
- Intake summary and allegations
- Household composition and frequent visitors
- Interview notes of child and family members
- Use of collateral contacts in assessing the family
- Assessment of criminal background checks
- Referrals to Child Protection Team and law enforcement, as required
- Completeness of Child Safety Assessment
- Consultation with Children’s Legal Services as appropriate
- Referral for behavioral health assessment, as required

The Supervisory Discussion Guide and process facilitates a qualitative focus and discussion between the CPI Supervisor and CPI by addressing the following questions:
- What is the CPI’s thought process during the assessment?
- Is the investigative plan appropriate to the alleged maltreatment and findings?
- Are service needs appropriately identified?
Is the investigation on track to ensure the alleged maltreatments are thoroughly addressed?

Is additional investigative activity needed to ensure quality?

Minimally, each CPI Supervisor will conduct a qualitative discussion/review on three investigations per CPI per month, and document the supervisory discussion/review in the Florida Safe Families Network (FSFN), and the basic content of the discussion and any follow up action required.

### CPI Semi-Annual Quality Assurance Reviews

Region Quality Assurance staff will conduct CPI Semi-Annual Reviews in each circuit, with the initial review conducted between July 1, 2008 and December 31, 2008, and the second review conducted between January 1, 2009 and June 30, 2009.

The Quality Assurance review will be conducted using the Department approved CPI Quality of Practice Review Tool and Interpretive Guidelines. The review tool contains 37 review elements. The initial 28 review elements are assessed for each investigation in the sample, and the final 9 review elements are assessed for each investigation involving the removal of a child. The reviewer will determine if the review element was fully Achieved, and assign a score of 9, or Substantially Achieved and assign a score of 7, or Partially Achieved and assign a score of 5, or Not Achieved and assign a score of 0. A score of 7 will be assigned if the reviewer determines the deficiency or omission did not negatively impact the CPI's assessment of risk and child safety, and/or the disposition of the investigation. A score of 5 will be assigned when the deficiencies or omissions may have negatively impacted the CPI's assessment of risk and child safety, and/or the disposition of the investigation.

The Semi-Annual Quality Assurance Review Report will array the data and analysis of each of the 37 review elements. The report will also include circuit specific performance on the Dashboard measures, and address any ongoing performance improvement initiatives in the circuit.

Each sample will also include additional files closed as “duplicate” or “no jurisdiction” reports to ensure decision-making consistent with Department policies and procedures. The review findings for “duplicate” and “no jurisdiction” reports will be summarized separate from the reports selected for the CPI Semi-Annual Review.

### Sampling Methodology

Each review is conducted on 50% of a 90/10 sample by circuit, with the total sample estimated to be approximately 120 investigation files for each CPI Semi-Annual Review.
The region will query FSFN 30 days before the actual review for a list of investigations closed during a two calendar month period prior to the date the list is generated. For example, if the review begins on October 1, the sample will include investigations closed from July 1 through September 30. The circuits will be responsible for locating and forwarding the investigation files to the designated Quality Management circuit liaison. The Region Quality Assurance staff will be responsible for conducting a prior and subsequent history of investigations and services in advance of the scheduled review.

The sampling methodology will be based on the 90% confidence level with a 10% confidence interval formula, and will provide the region with a 90% confidence level the findings accurately reflect the total population. One-half of the 90/10 sample will be used for each CPI Semi-Annual Review (approximately 40 investigations per circuit twice annually).

Sample selection will follow the broad parameters established by the Department to ensure a standardized approach. Investigations selected for the semi-annual reviews will not include cases closed “No Jurisdiction” or “Duplicate” (as the region is conducting a separate review of these cases), or identified as “Special Conditions,” or “Institutional” reports. The sample pulled will be consistent with the percent of investigations handled judicially and non-judicially, and consistent with the percent of investigations handled by each unit within the circuit. Additionally, the sample will include no more than four cases involving a removal/shelter for each circuit. The methodology used to reach the random sample will be explained in the review report.

**Stakeholder Surveys**

Stakeholder surveys will be completed for each CPI Semi-Annual Review, using the approved statewide CPI Stakeholder Survey format. Circuit Administration will be asked to provide input on the individuals and agencies to be surveyed, and participants will at a minimum include key Department and community partners, e.g., Children’s Legal Services, Child Protection Team, CBC lead agency, dependency court judges, law enforcement, domestic violence service providers, diversion and early intervention service providers, etc.

The revised survey allows all survey participants to respond to nine general questions in Part I. Part II contains six questions specifically asked of judges, and Part II contains five questions specifically asked of Children’s Legal Services (CLS) staff. Survey participants may document a response of Strongly Agree, Agree, Strongly Disagree, Disagree, or document Not Applicable or Don’t Know. Not Applicable or Don’t Know responses are not factored into the overall rating.

The survey results will be summarized in the final report and the preliminary results shared with the circuit at the time the Exit Conference is held.
CPI Discretionary Quality Assurance Reviews

CPI Discretionary Quality Assurance Reviews will be conducted in the quarter a CPI Semi-Annual Quality Assurance Review is not scheduled. Because quality assurance reviews were suspended for the first quarter, the initial Discretionary Review will be conducted between January 1, 2010 and June 30, 2010, and will focus on qualitative supervisory discussions, through observation and completion of a review tool aligned with the requirements of mentoring and modeling quality.

Quality Assurance Review Schedule

See attached calendar for CPI Quality Assurance reviews scheduled for Fiscal Year 2009/2010.

Exit Conferences

An Exit Conference will be conducted within 30 days of completing the case file reviews in each circuit following completion and analysis of the CPI Semi-Annual Quality Assurance and Discretionary reviews.

Process for Challenging Review Findings

Immediately following the Exit Conference, the completed review tools will be electronically transmitted to each CPI Operations Manager for distribution. Each circuit is given five workdays to complete a review of the tools and submit any concerns, questions or alternative viewpoints regarding the review findings, using the CPI Quality Assurance Feedback form (See attached form.) Once received, a written response is documented for each Feedback form and forwarded to the Circuit CPI Operations Manager.

Requests for Action

A Child Safety Request for Action Form may be generated during the course of conducting a CPI Semi-Annual or Discretionary Quality Assurance Review, to document immediate safety or potential ongoing concerns about risk to a child or children in the case under review.

Administrative Requests for Action

Administrative concerns impacting permanency, e.g., failure to engage an interested relative, etc., or well-being, e.g., failure to follow-up on a medical, educational or mental health need, etc. (not related to child safety) will also be documented on the Child Safety Request for Action Form.
Administrative concerns regarding incorrect or needed case record information, e.g. misspelled names, missing documents, etc., will be documented on the case review tool and provided to operations staff for review and follow-up.

**Child Safety Staffing Requests for Action**
A Child Safety Staffing may be requested based on immediate and unresolved safety concerns.

**Reporting**

The region will provide review information consistent with the statewide reporting format, with additional detail added as needed or requested by the Region. The written report will be provided to the Circuit Administrators and Regional Director within 30 days of the case file reviews being completed.

**Quality Assurance Reviewer Responsibilities**

1.) Region Quality Management staff responsible for the case record review, will document Child Safety or Administrative concerns using the Request for Action Form. The information will be documented in an objective and factual manner, and sufficiently complete to guide necessary follow-up. Additionally, each Request for Action will include behaviorally specific recommendation(s).

2.) The completed Request for Action is submitted to the Region Quality Manager for review, approval, and transmission to the designated circuit liaison for review and follow-up.

3.) Child Safety Requests for Action documenting unresolved concerns about a child’s safety will be completed on the same day identified when possible and no later than the following workday. Administrative Requests for Action that are not urgent may be documented at the time the individual case record review is completed.

**Region Quality Manager’s Responsibilities Regarding Requests for Action**

1) Review completed Requests for Action to ensure each request is accurate and complete and the recommendations are specific and appropriate.

2) Assign the response due date based on the presenting concerns.

**Lead Reviewer’s Responsibilities Regarding Requests for Action**

1) Enter the Request for Action on the Request for Action Log, and before closing out ensure the following information is documented: Type of Request for Action, Date and Time Received, Name of Reviewer, Case Name, Brief Description of Presenting Issue, Date and Time Forwarded to Designated Liaison, Response
Due Date, Response Received Date, Brief Description of Resolution, and Date Closed.

2) Track the timely receipt of responses to Requests for Action.

3) Review the responses to Requests for Action to ensure they are responsive to the presenting concerns.

4) Schedule and chair the Child Safety Staffing on the same workday when possible, but no later than the following workday when the risk to child safety is assessed to be high, the response to the Child Safety Request for Action does not resolve the presenting concerns to the satisfaction of all parties, or additional planning and coordination is needed.

5) Schedule and chair the formal staffing within five workdays when the risk to child safety is low and the response to the Child Safety Request for Action does not resolve the presenting issue to the satisfaction of all parties or additional planning and coordination is warranted.

6) Ensure staffing participants are notified and include minimally: assigned reviewer, designated lead Operations Review Specialist, Northeast Region Quality Manager, Northeast Region Program Administrator, or designee, CBC Quality Manager, and designated CBC or department representatives with knowledge of or supervisory oversight for the case if the case is active to ongoing services.

7) Ensure the staffing is documented and at a minimum reflects the participants, discussion and agreed upon follow-up actions noted and tracked to completion. (See attached Request for Action Child Safety Staffing Form.)

**Child Death Reviews**

Region Quality Management staff are responsible for conducting ongoing reviews of child deaths. Each child death investigation is assessed through a Limited or Comprehensive review process and documented in a summary report. Statewide systemic recommendations, as well as circuit specific recommendations are noted when appropriate.

The Information Review is scheduled 30 days after the FSFN report is received. Participants are notified of the meeting via email, shortly after the report is received. The purpose of the meeting is to conduct a thorough internal review of the circumstances of the child death, prior investigations in the context of the current investigation, and the status of the current investigation. Concerns related to the prior or current investigations are identified and agreement reached by the staffing participants on the actions to be completed prior to the
investigation being approved for closure. Preliminary findings may be discussed based on the evidence gathered to date.

Participants in the Information Review are determined collaboratively by the Death Review Coordinator and involved CPI staff. Information Review participants at a minimum should include: CPI Operations Program Administrator (OPA) or Program Operations Administrator (POA), CPI Supervisor, and the assigned CPI. Additionally, the CLS Managing Attorney, and CPI staff in training may also attend. Community Based Care (CBC) case management staff, law enforcement personnel or other community participants directly involved in the investigation of the child death may also attend the review.

Prior to the review, the Death Review Coordinator will complete background information on the Information Review form. The information documented in the form is formatted to allow for it to be copied and included in the Limited or Comprehensive Report.

Following the Information Review, the information discussed and the follow-up actions agreed upon are documented on the Information Review form and forwarded to the CPI OPA or POA, CPI Supervisor and CPI. (Please refer to the Information Review form, and Death Review Checklist attached.)

A final review of the investigation of child death occurs prior to case closure to ensure the investigation is thoroughly documented, all required fields in FSFN are entered, and the findings made are consistent with the evidence gathered.

Limited reports are assigned to all of the Operations Review Specialists to write, as workload permits, and submitted for final review and approval to the Northeast Region Quality Manager and Program Administrator. Once approved, the entire content of the report is copied and pasted into the Department’s Incident Reporting System.

Comprehensive reports are also assigned to all of the Operations Review Specialists to write, as workload permits, and submitted for final review and approval to the Northeast Region Quality Manager, Program Administrator, Program Management Director, Circuit CPI Operations Manager, and Circuit Administrator or Region Director based on the Circuit involved.

Information regarding the Northeast Region’s child deaths are documented in an Child Death Access Database that allows for easy retrieval of critical data.

Quality Management Training

Northeast Region Quality Management staff participate in the ongoing training of CPI staff to ensure they have a working knowledge of the 39 quality review elements applied in the CPI Semi-Annual and Discretionary Quality Assurance
reviews. Currently, Quality Management staff train CPI staff in the quality review elements, process for correctly determining Temporary Assistance to Needy Families (TANF) eligibility, child death review process, and mentoring and modeling quality through supervisory qualitative discussions.

### Ongoing Quality Improvement Activities

#### Northeast Region

The Northeast Region and Circuits have a number of ongoing quality improvement activities aimed at improving the quality of investigations and strengthening the partnership with key community stakeholders.

**Region-wide Quality Improvement Team Regarding CPI Retention**

Purpose: To address the factors contributing to CPI turnover.

Frequency: Monthly

Participants: CPI Supervisor, CPI OPA, CPI Operations Managers, CPI Hiring Coordinator, and CPI Specialist and Human Resource staff.

**Region-wide Quality Improvement Team Regarding False Reporting**

Purpose: To establish a region-wide system for identifying, tracking and responding to false reports.

Frequency: Monthly

Circuit Administrators, Regional Managing CLS Attorney, CPI Specialist, and CPI Operations Manager, and Circuit 3/8 Legal Counsel.

#### Circuits 3/8

**Training and Professional Development Plan**

Purpose: Current training plan will be updated for new fiscal year. Ron Moffit’s Leadership Model for High Performance will be carried over from current plan. All staff have professional development plans with training activities identified through September of 2008.

Frequency: To be determined.

Participants: CPI's, supervisors, and OPAs

**Field Based Training and Technical Assistance**

Purpose: Provide dedicated trainers to provide ongoing technical assistance and training to CPIs regarding investigative and case management techniques.

Frequency: Daily for identified CPIs

Participants: The trainers will be working with all CPIs one on one on a rotating basis

**Quality Assurance Case Review Tool**

Purpose: Involve CPI Supervisors in an ongoing review of completed investigations using a reduced review tool focused on opportunities for improvement. CPIs also use the tool to self-check an investigation submitted for
closure to ensure thorough and completed. OPA and Operations Manager also randomly check cases using the review tool.
Frequency: Daily on all cases reviewed. OPA and Operations Manager randomly check cases monthly
Participants: CPI supervisors, CPIs, OPA, and Operations Manager

**Joint Case Review**
Purpose: To achieve improved accuracy in the use of the QA Case Review Tool.
Frequency: Monthly at OPA/Supervisor meetings
Participants: CPI Supervisors break into teams of two and read the same case, complete the review tool and compare results.

**Supervisor Field Based Reviews**
Purpose: Monitor CPI field performance, reinforce good practice and provide direction and technical assistance regarding opportunities for improvement.
Frequency: CPI Supervisors accompany each CPI in the field monthly.
Participants: CPIs and CPI Supervisors

**Caseload Review and Management**
Purpose: Achieve workload standard of no more than 12 new reports per month and ensure equitable distribution of workload
Frequency: CPI supervisors review and discuss caseloads with CPIs during monthly one on one supervision. CPI Supervisors report and discuss caseload distribution weekly/monthly with OPA. OPAs report and discuss caseload distribution with Operations Manager monthly.
Participants: CPI's, Supervisors, OPAs and Operations Managers

**FSFN Training and Technical Assistance**
Purpose: Improve CPIs and Supervisors knowledge and use of FSFN.
Frequency: Quarterly refresher training prepared by Operations Management Consultants (OMC) offered online. Conduct a monthly review of FSFN issues at OPAs/CPI Supervisors meetings by milestone experts and OMCs.
Participants: CPI's, CPI Supervisors, OMCs and OPAs

**Daily Report**
Purpose: Monitor and ensure casework timeframes are achieved through the use of a tool to review casework milestones and direct corrective action.
Frequency: Published twice per day
Participants: CPIs, CPI Supervisors, OPAs, Word Processing Systems Operators, and Operations Managers

**Red Flag and High Risk Reviews**
Purpose: Ensure all possible actions are taken to ensure the safety of children in high-risk cases.
Frequency: Weekly
Participants: CPIs, CPI Supervisors, OPAs, Operations Managers, Circuit Administrator, and CLS Attorneys

**Team Decision-Making with MSW Consultation – Alachua County Pilot**

Purpose: Ensure effective decision-making through gathering assessment information, consideration of all service options and determination of need for shelter for children in high risk cases.

Frequency: Daily

Participants: CPIs, CPI Supervisors, OPA, OMC, CLS Attorneys, MSW Consultant, Service Specialists, and Providers

**Quarterly Performance Reviews**

Quarterly performance reviews are conducted with both Circuit 3 and Circuit 8 staff in attendance, and provide an excellent opportunity to share best practices, develop strategies to address performance gaps, and strengthen the team. The Data Specialist provides a power point presentation on current performance data and topics for discussion identified by each unit. The Circuit Administrator, Operations Manager, and NE Region Program Office staff also attend and participate in these reviews.

**Strategic Decision Making**

On July 1, 2009, implemented a Structured Decision Making (SDM) Tool (an actuarial risk assessment) to provide uniformity in the assessment of risk factors. This tool assists the CPI in quantifying the risk to the child based on the age and characteristics of the child, prior history, and substance abuse and/or mental health problems. The tool enables the CPI to assess risk versus safety, and is part of the investigation file and shared with the services team when a case is transferred. Once the in-home case is transferred to the service unit, a follow up risk assessment is conducted three months after the initial assessment is completed. For out-of-home care cases the SDM Tool is completed at the time of the two, four, and seven month case staffings, and whenever reunification is considered or the goal of reunification is changed.

**Decision Team Meetings**

Multidisciplinary teams meetings are convened to removal is likely to determine if there are interventions that would allow the child to safely remain in the home. An Master’s level clinician serves as the Decision Team Coordinator, and the team is comprised of the CLS attorney, CPI, CPI Supervisor, Operations Program Administrator, and the Operations Management Consultants IIs. When appropriate, the team also includes the Family Care Counselors (FCCs), FCC Supervisors, a Child Protection Team Coordinator, a representative from the area domestic violence shelter, substance abuse and mental health providers, and in-home service providers.
Early Engagement Voluntary Protective Services
Circuits 3/8 have implemented an Early Engagement process for Voluntary Protective Service cases. The Early Engagement process begins with the CPI determining the family needs immediate services. The CPI is responsible for making a joint home visit with the assigned FCC the same day and service referrals are completed within 24 hours. The identified service provider begins working with the family prior to case transfer staffing. The intent is to engage the family in services while they are in crisis. If the investigation is not legally sufficient to pursue a dependency court action, the family’s motivation to engage in services may be lessened.

Continuous Quality Improvement (CQI) Committee - Early Engagement
Monthly reviews of investigations and service cases are conducted to ensure compliance with the key components of the Foster Care Redesign and identify barriers to expediting a referral for Early Engagement, as well as any barriers to making timely service referrals for families involved in the Early Engagement process. The Early Engagement process requires service referrals be made within 24 hours of initially engaging the family. The CQI Committee convenes monthly meetings to discuss the Early Engagement process with direct service CBC and DCF staff, build on the strengths, and identify the changes needed to better serve children and families. The CQI Committee is also responsible for monitoring FSFN demographic data to ensure accuracy in reflecting race, ethnicity, and home address for all subjects, and monitoring casework to assess compliance with established timelines, the achievement of case milestones, and resulting outcomes. The CQI Committee has developed a CQI Checklist Tool to assist the members in consistently documenting review findings.

Substance Abuse and Mental Health (SAMH) and Domestic Violence (DV) Committee
An SAMH/DV committee was established to develop in-depth substance abuse and domestic violence training opportunities for CBC and CPI staff, monitor outcomes on direct file cases served through the Dependency Drug Court Program, and explore barriers that impede service provision or communication between the teams providing services to children and families. The SAMH/DV Committee created an SAMH Protocol for Early Engagement to ensure staffs’ understanding of the process. The SAMH Protocol provides frontline staff the information needed to understand SAMH intervention during Early Engagement. The SAMH/DV Committee is also responsible for monitoring the use of a Lethality Assessment for domestic violence cases and the processes used to effectively engage families with needed services, through a coordinated community response to Circuit 8 domestic violence cases. This coordinated response will improve communication and ensure consistency in the services and support provided to families experiencing domestic violence. The SAMH/DV Committee also facilitated meetings with all Circuit 3 and 8 domestic violence shelter directors to ensure their services were consistent with Foster Care
Redesign goals. Domestic violence and substance abuse training opportunities are ongoing for staff throughout Circuits 3 and 8.

**Circuit 4**

**Quality Improvement Team - Weekend/Staggered Hours**  
Purpose: Stabilize CPI staff through the provision of alternative work hours and limited hoteling.  
Frequency: Monthly  
Participants: CPI OPAs, CPI Specialist, and other staff as needed.

**Quality Improvement Team - Case Equalization in Duval County**  
Purpose: To improve process for assignment of investigations  
Frequency: Monthly  
Participation: Program Administrators, CPIS, CPIs, Circuit Data Specialist, Case Assignment Supervisor and Quality Performance Team.  
Note: The recommended changes we have put in place are working well. The last phase will be to implement flex schedule recommendations for unit staff, to counter the coverage needs of cases and concerns with staff time adjustment needs.

**Quality Improvement Team - Closure Letters**  
Purpose: To improve performance in providing closure letters to clients, in response to negative feedback from client surveys.  
Frequency: Quarterly  
Participants: CPI Supervisor, CPI Specialist, and CPI

**Quality Improvement Team - Reopening Supervision Cases**  
Purpose: To improve the timeliness of reopening a closed supervision case.  
Frequency: Monthly  
Participants: CPI Pas, CLS Managing Attorney, CPI Specialist, and CBC Representative

**Green Belt Training with Bruce Berger**  
Six teams have been established, three Family Safety teams, with one focused solely on CPI “Quality Casework.” CPI Supervisors and the CPI Specialist participate on the Quality Casework team. Additionally, there is a team focused on Independent Living and a team focused on Voluntary Protective Supervision. The service teams are comprised of CBC Counselors, Supervisors and Managers.

**Collaboration with the Domestic Violence Program Office**  
Contract, managed by Headquarters, was entered into with Domestic Violence expert, David Mandel. David Mandel is contracted to provide training and consultation over the next six months. A CPI in each unit has been selected to participate in the training and ultimately serve as a Domestic Violence Subject Matter Expert. Additionally, a region-wide community meeting was held with the
CPI Supervisors, Program Administrators and the Operations manager, and a needs assessment was conducted with the CPI and Diversion staff.

**Increased collaboration with Hubbard House, the Duval County Domestic Violence Shelter.**
A Domestic Violence Advocate is now co-located with the Duval County CPI staff to strengthen the working relationship and provide a variety of outreach services, including weekly support groups for shared clients.

**Family Intervention Specialist Program**
Circuit 4 is involved in developing and enhancing the Family Intervention Specialist program to ensure better service delivery for cases involving substance abuse.

**Increased Collaboration in Prevention Efforts**
Seven CBC Prevention staff (1 coordinator, 1 support staff and 5 Diversion Specialists) are collated with the Duval County CPI staff and are available to respond immediately to CPI referrals, to prevent removal.

**Court Mediation Workgroup**
The workgroup is developing a proposal and plan to adopt key components of the Marion County mediation model, with the primary goal of keeping families out of the dependency court system. Mediation will be scheduled at the time of the emergency shelter hearing and occur 7 to 10 days after the shelter hearing and before arraignment, with the goal of engaging the families in voluntary services. The mediation program will be piloted with the FSS MHRC Case Management agency, and Judge Gooding’s court division.

**Foster Care Redesign Training**
A CPI PA is conducting training bi-weekly for all CPIs, CPI Supervisors, and CBC staff on the Foster Care Redesign.

**Duval County Institutional Unit** was formed to establish consistency and collaboration with Foster Care Licensing and Child Care Licensing. Joint investigations are conducted routinely on all institutional cases, and the unit is co-located with both licensing units.

**Duval County Death/Critical Injury Unit** was formed to promote collaboration and consistency when investigating death and critical injury cases in Duval County. This unit is to establish a working relationship with Jacksonville Sheriff’s Office (JSO), Child Protection Team (CPT), State Attorney’s Office (SAO) and others in order to have more effective and organized investigations where child safety is a concern. This presents an opportunities for specialization and expertise development in investigating critical injury cases, and strengthening the collaboration between DCF, CPT and law enforcement. The unit will specialize in the investigation of maltreatments associated with Death, Asphyxiation, Inflicted Burns, Bone Fracture, Failure to Thrive/Malnutrition and Internal Injuries.
Specialized training is scheduled with Dr. McIntosh, the Child Protection Team Medical Director.

**An Integrated Practice Team (IPT)** was developed to ensure child safety issues are continually addressed and provide CPIs needed support in their decision making. This multi-disciplinary team includes representatives from domestic violence, mental health, housing, substance abuse, health/nurse, education, ACCESS (Economic Self-Sufficiency), Master's level Social Worker, child legal services, a family advocate and other agencies as identified. The goal of the IPT members is to staff cases with CPIs, Family Services Counselors, prevention staff and supervisors to assist with the development of a comprehensive family services plan, through innovative ideas based on areas of expertise and ensure the family’s individual needs are met while safely maintaining children in their own homes.

**The Family Assessment Support Team (FAST)** was implemented for cases that may or may not meet the legal standard for dependency, when the CPI and CPI Supervisor believe safety factors justify FAST services to allow children to be safely maintained in the home. Parents consent to services and supervision, and understand court action may be taken if the family fails to cooperate with the in-home services case plan.

**Co-Location of CBC and CPI Staff**
To improve and promote collaboration among programs and agencies, several units are co-located. The Institutional unit is co-located with the Foster Care and Child Care Licensing programs. The Sexual Abuse unit is co-located with Jewish Family and Community Services; the identified CBC working all sexual abuse cases. Three CBC (FAST) units are co-locating with Duval CPIs on August 20th.

**Red Flag and High Risk Reviews**
Weekly staffings and risk resolution through staffing investigations that meet red flag criteria. Participants include CPIs, CPI Supervisors and Program Administrators. As appropriate, Operations Manager, CLS, CPT and CBC staff attend.

**Daily Meetings with CPI and CPI Supervisor**
Purpose: Review of daily reports and individual conferences with each staff to review performance.
Frequency: Daily

**Monthly and Quarterly Performance Reviews**
Performance reviews held monthly in each of the three sections. Quarterly reviews are held with the entire circuit. Data Specialist provides a power point presentation. This is an excellent opportunity for team building. Operations Manager and Program Administrators recognize staff and supervisors - Top Performing Supervisor, Top Performing CPI and Top Performing Unit.
Circuit 7

Field Based Training and Technical Assistance
Purpose: Mentors dedicated to providing training and technical assistance to new CPI staff.
Frequency: During pre-service training on "field" days and during the first year of employment until certified.
Participants: Level 2 CPIs and new CPIs. The University of South Florida (USF) provides the level 2 CPIs receive specific training on mentoring prior to being assigned a mentor.

Daily Report to Monitor Compliance with Timeframes
Purpose: Provide a report that allows easy access to daily data regarding unit compliance.
Frequency: Daily
Participants: All CPI Supervisors are trained on the two ways to access the daily report to ensure effective management and compliance with timeframes. CPI Supervisors are responsible for training the CPI staff in their respective units.

High Risk Reviews
Purpose: Ensure timely staffing and risk resolution through staffing investigations that meet the high-risk criteria.
Frequency: Daily
Participants: CPIs, CPI Supervisors and POAs.
Note: We have established action steps to this process that include timely notification of circuit leadership, identification of key tasks that must be completed to mitigate ongoing risk, staffing with service providers to assess progress, and consistent and timely follow up until resolved.

Quality Improvement Review Tool
Purpose: Review and address deficiencies noted in the last CPI Semi-Annual Quality Assurance Review.
Frequency: One review per month per CPI Supervisor.
Participants: CPI Supervisors
Note: Some CPI Supervisors are requiring the CPIs to complete a QA review tool on one of their completed investigations to increase awareness of the QA review elements and identify areas in need of improvement. Additionally, Circuit 7 plans to expand the case file reviews and require each OPA to complete one review per month.

Quality Improvement Team
Purpose: Monthly reviews of the 12 QA CAP Criteria by CPI Supervisors and distribution and discussion of results at the monthly Supervisors Meeting.
Frequency: Monthly
Participants: All CPI Supervisors, in groups of three on a rotating basis.
Note: We have created and utilize a review tool that measures compliance with the 12 criteria, and the number of Qualitative Discussions completed by each unit. We are seeing progress and plan to continue this indefinitely.

**Partnersing for Better Outcomes**  
**Purpose:** Performance improvement on meeting the Federal requirement of Early Child Screenings within the mandated 72-hour timeframe.  
**Frequency:** As needed with an emphasis on meeting the timeframe.  
**Participants:** Dr. Malcolm of Deltona and the Department.  
Note: Dr. Malcolm has agreed to complete Early Childhood Screenings for our children. This provides CPIs on both the East and West sides of Volusia County an additional resource for timely screenings.

**Field Based Training and Technical Assistance**  
**Purpose:** Provide mentors dedicated to providing technical assistance and training to new CPI staff.  
**Frequency:** During pre-service training on "field" days and during the first year of employment until certified.  
**Participants:** Level 2 CPIs and new CPIs. The level 2 CPIs receive specific training on mentoring through USF, prior to being assigned a mentor.

**Red Flag and High Risk Reviews**  
**Purpose:** Ensure timely staffing and risk resolution through staffing investigations that meet red flag criteria.  
**Frequency:** CPIs staff bi-weekly with the CPI Supervisor and POA.  
**Participants:** CPIs, CPI Supervisors and POAs.