Partnership for Strong Families
Quality Management and System Improvement Plan
Fiscal Year 2012-2013
Executive Summary

Partnership for Strong Families’ (PSF) system of Quality Control, Quality Assurance and continuous Quality Improvement is designed to monitor, assess and improve the system of care and services provided to children and families in accordance with the DCF contract and service delivery model, and also in accordance with state and federal law, administrative rule, and DCF operating procedures. Additionally, PSF employs the concepts of Total Quality Management (TQM) in evaluating and improving the system in a shared decision-making model. In the TQM model, crises and reactive thinking are replaced by ongoing, data-driven evaluation and planning at the case and system levels.

The responsibility for PSF’s Quality Assurance and Quality Improvement efforts resides with the PSF Director of Program Quality and Accreditation. The Director of Program Quality and Accreditation reports directly to the Senior Vice President of Finance and Administration. The Director of Program Quality and Accreditation supervises two (2) Quality Assurance Monitors who are dedicated to quality assurance and improvement activities. The efforts of these staff are supported by every department within PSF, the PSF Executive Management Team and the PSF Board of Directors. PSF Quality staff are required to have at a minimum, a Bachelor’s Degree in counseling, social work or related field from an accredited college or university with experience working in child welfare programs.

Overall, the PSF Quality Assurance and Quality Improvement process involves staff across all levels throughout the PSF and subcontracted provider network. Staff continuously gather and analyze data and make improvements to services and processes when compliance is not met or when safety/security issues arise. Departments within PSF and agencies PSF contracts with share information with one another in an effort to eliminate duplication, increase collaboration and knowledge, and to work together to identify and address areas in need of improvement as well as to identify and share best practice modalities. Information is collected and shared using multiple mediums such as Florida Safe Families Network (FSFN), Department of Children and Families (DCF) Information Portal, PSF Data Systems, meetings, email, Power Point presentations, Excel spreadsheets, etc. PSF promotes the philosophy that everyone is a member of the Quality Assurance and Quality Improvement team, including stakeholders, families, children, caregivers, foster parents, and PSF and subcontract provider staff at all levels. PSF works collaboratively with community stakeholders (including DCF, the Circuit 3 and 8 Community Alliance (when the Alliance is functioning and holds meetings), providers, and child and family representatives to define the indicators of success; review and enhance quality management data collection and reporting system/process, and to periodically review performance and institute changes at the system and case levels, to drive improvement.

PSF has a centralized data collection system used to support the quality management system. Data is shared and analyzed on an ongoing basis by the various departments within PSF and with the Subcontracted Case Management agencies which supports system-wide planning and in correcting problem areas.
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Overview

PSF tracks client outcome data consistent with the federal Adoption and Safe Families Act (ASFA) domains, and Child and Family Service Reviews (CFSR) and other state mandates, including the specific performance measures outlined in the contract with DCF and within the DCF Scorecard. This data is reported to the various departments within PSF, DCF Regional and Circuit Administration, PSF Senior Management Team, PSF Board of Directors, the Circuit 3 and 8 Community Alliance (when requested by the Alliance), and Case Management Agency Directors/Quality Assurance and Family Care Supervisors. PSF also examines satisfaction data based on surveys from children and families, providers, foster parents, relative and non-relative caregivers, the courts, DCF and other community stakeholders to identify and remedy areas of weakness or concern. In addition, PSF identifies and assesses overall system performance through data analysis relative to access and quality, efficiency and effectiveness of services.

State requirements for the 2012-2013 Quality Assurance Plan are as follows:

- Quality assurance (QA) activities planned for FY 2012/2013;
- Continuous Quality Improvement Process that encourages and support activities that drive system improvement;
- Sampling criteria for case file reviews - Base Reviews, Quality Service Reviews and Special Area Reviews - to be reviewed quarterly through the Case Review process;

PSF’s quality improvement process includes the full participation of the various departments within PSF as well as contracted providers, and assesses performance of both PSF itself and its subcontracted agencies. The PSF internal quality improvement process includes, but is not limited to:

- A plan for quality improvement which is clear, concise, accurate and provides direction for end users and management;
- Continuous oversight and evaluation of safety and permanency decision-making by subcontracted providers;
- Evaluation of subcontractor compliance with contract requirements;
- Evaluation of subcontract compliance with statute, rule, regulation, and policy;
- Evaluation of PSF internal processes for compliance with Department contract requirements;
- Evaluation of PSF internal processes for compliance with statute, rule, regulation, and policy; and,
- Evaluation of client and stakeholder satisfaction.
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PSF engages all consumers in an ongoing evaluation of the project and services, and encourages input and shared-decision making in a community-based model to provide direction for improvement processes.

Quality Assurance (QA) Activities Planned for FY 2012-2013

- **Case Reviews (Base, Quality Services Reviews and Special Area Reviews):**

  **Base Reviews (Quality Practice Standards)** - Case Management Agency Monitoring (Base Review) is designed to evaluate the quality of case management practices and processes utilized in service delivery. The goal is to monitor and assess completion of case practice activities, adherence to best practice standards, and that quality services are being provided to the children and families served.

  PSF will use the state approved Community Based Care (CBC) Case Management Review Tool and Interpretive Guidelines to conduct the Base Reviews. The review tool is comprised of standards assigned to Safety, Permanency and Well-Being. The Base Review information will be entered into the DCF Web Portal QA system database.

  PSF conducts baseline reviews of 18 client cases randomly selected via the state approved random sampling process. The sample for case file reviews will include an equal share of In-Home service cases (non-judicial and judicial) and Out-of-Home service cases. After this initial stratification, the sample may be stratified further if need to focus reviews in specific areas of local practice.

  The PSF Quality Staff (The Director of Quality and Accreditation or Quality Assurance Monitor) will complete the Base Reviews.

  All staff who conduct Base Reviews must complete the DCF and PSF approved statewide or region training within 6 months of assignment of duties for case file reviews. It is preferred staff be trained prior to participating in base reviews, but given staff changes occur and trainings are periodically scheduled this may not be possible.

  All 18 Base Review records will be completed by the end of the quarter in which the case was assigned for review.

  The reviews will be completed in the format approved by DCF (electronically or paper format) and will be submitted to the PSF Quality Staff for who will review for accuracy and completeness.

  Quarterly, PSF will compile and analyze the data obtained from the Base Review and submit via the approved electronic format to the Contract Manager, Northeast Region Quality Manager and/or Tallahassee as required. The data will document the degree of compliance with each standard for the overall PSF system of care. CBC QA staff in conjunction with PSF Quality Operations staff, PSF
Information Technology staff and with the subcontracted Case Management Agency staff will analyze the data collected overall and identify trends, effective practices, and areas of concern, synthesizing the information to demonstrate and discuss CBC practices and performance. The findings and analysis will be shared with PSF CEO, PSF Senior Vice President of Administration and Finance, Senior Vice President of Operations, and the Sub-contracted Case Management Agency Program Directors, QA staff and Supervisors.

An annual report will be completed and submitted to Tallahassee by the timeframe set by DCF. The report will follow the requirements set forth by DCF.

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

PSF Quality Staff will provide technical assistance to the Case Management Agencies as needed.

**Quality Service Reviews (QSR):**

The In Depth Service Reviews for A Child and Family Documentation states that the process and protocol are used for appraising:

- Current status of a child possibly having special needs in key life areas
- Status of the parent/caregiver
- Performance of key system practices

The documentation further states: “the protocol examines recent results for children receiving services and their caregivers as well as the contribution made by local service providers and the system of care in producing those results.”

Quality Service Reviews significantly change the case review process utilized by CBC and DCF for the past few years. Quality Service Reviews focus less time on reviewing documentation and more time interacting and interviewing key case participants. The process focuses on two major components:

- Child and Family Status Indicators - how the child and family/caretaker are functioning related to the following subcategories:
  - Safety from Exposure to Threats of Harm
  - Child Vulnerability
  - Stability
  - Living Arrangement
  - Permanency
  - Physical and Dental Health
  - Emotional Well-being
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- Early Learning and Development
- Academic Status
- Pathway to Independence
- Parent and Caregiver Functioning and Resourcefulness

- Practice Performance Indicators how the system of care, services, case professionals impact the life of the child and family related to the following subcategories:
  - Engagement Efforts
  - Voice and Choice
  - Teaming
  - Assessment and Understanding
  - Planning for Safe Case Closure
  - Planning for Transitions and Life Adjustments
  - Implementation
  - Maintaining Quality Connections
  - Tracking and Adjustment
  - Cultural Awareness and Responsiveness
  - Psychotropic Medication Management

Each subcategory is reviewed via documentation review and case participant interviews for quality and compliance with core concepts and consideration ideals and is ranked on the following 6 point scale:
- 6 – Optimal Status/Practice
- 5 – Good Status/Practice
- 4 – Fair Status/Practice
- 3 – Marginal Status/Practice
- 2 – Poor Status/Practice
- 1 – Adverse Status/Practice
- N/A

A summary report is completed regarding the findings. The summary report contains the following information:
- Facts about the Child and Family (150 words):
  - Family Composition and Situation
  - Agencies Involved and Providing Services
  - Reasons for Services
  - Services Presently Needed and Received

- Child’s Current Status (250 words): Describe current status of the child and family using the status review findings as a basis. If any unfavorable status result puts the child at risk of harm, explain the situation. Mention

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relevant historical facts necessary for an understanding of the family’s current status. The narrative should support and explain the overall status rating.

- **Caregiver’s Status (150 words):** Because the child’s status is often linked to the family’s status, document whether the family is receiving the supports necessary to adequately meet the child’s needs and maintain the integrity of the home.

- **Factors Contributing to Favorable Status (100 words):** When the status is positive, identify the contributions child resiliency, family capacities, and use of natural supports and generic community services made.

- **Factors Contributing to Unfavorable Status (about 100 words):** Describe the local conditions that seem to be contributing to the current status and how the child may be adversely affected now or in the near-term future if status is not improved.

- **System Performance Appraisal Summary:** Describe the current performance of the service system for this child and family using a concise narrative form. Mention any historical facts or local circumstances necessary for understanding the situation.

- **What’s working Now (250 words):** Identify and describe which service system functions are now working adequately for this child and family. Briefly explain the factors contributing to the current success of these system functions.

- **What’s Not Working Now and Why (150 words):** Identify and describe any service system functions not working adequately for this child and family. Briefly explain the problems that appear to be related to the current failure of these functions.

- **Six-Month Forecast/Stability of Findings (150 words):** Based on the current service system performance found for the child, is the child’s overall status likely to improve, stay about the same, or decline over the next six months? Take into account any important transitions likely to occur over the same time period, and explain your response.

- **Practical Steps to Sustain Success and Overcome Current Problems (100 words):** Suggest several practical next steps to take to sustain and improve successful practice activities over the next six months. Suggest practical steps that could be taken to overcome current problems and improve poor practices and local working conditions for this child and family in the next 90 days.

Each quarter a random sample of 2 open cases primary to the services units will be selected for this review process. The sample will be chosen by utilizing either a listing provided by DCF or if that listing is not available/provided by DCF then PSF will utilize the FSFN report Children Active Receiving In-Home or Out-of-Home Services Daily Listing by Agency. This report will be sorted to only capture primary case assignments. PSF will not review a case twice in the same fiscal year.

All reviews will be completed in teams of two. Reviews consist of documentation review, case interviews and debriefings with the Family Care Counselor and the Family Care Counselor Supervisor. Note: Due to the geographic size of the 13 counties for which PSF is responsible all interviews with case participates may be completed by telephone.
Special Area Reviews:
Each quarter PSF will complete 10 Special Area Reviews as set forth by DCF. The Special Area Reviews will cover specific target groups of cases and will be set by DCF. Target groups may include: children on psychotropic medications, independent living cases, etc. The sample will be chosen via the method approved by DCF. Reviews will be completed using the case review tool in the DCF portal and only questions pertaining to the subject matter will be completed, all other questions will be answered N/A (non applicable). The Special Area Reviews are focused reviews to provide information and data not only locally but statewide on topics/areas in need of special attention. These reviews will be entered into the DCF web-tool by the following dates:

Base Review, Quality Service Reviews and Special Area Review Process and Protocol:

All reviews will be completed and entered into the DCF web-based tool at: http://apps1.dcf.state.fl.us/WebSecurity/login.aspx

Reviews will be entered into the DCF web-tool by the following dates:
1. October 30, 2012 (for reviews completed in July – September 2012)
3. April 30, 2013 (for reviews completed January – March 2013)
4. July 30, 2013 (for reviews completed April – June 2013)
• **Performance – Contract Measures, DCF Scorecard, and Other CBC Areas of Focus.**

The PSF Quality Assurance and Administration staff, in conjunction with all other departments within PSF manages a system for collecting and reporting data on performance indicators and outcome measures on a monthly, quarterly, and annual basis. The elements and minimum frequency are outlined below and are subject to change with changes to the contract requirements, DCF QA process and from local identification of new issues to be addressed.

• **CBC Scorecard: Monthly**
  
  - In-State Children Seen within 30 Days (In-Home & Out-of-Home) – 99.5%
  - No Verified Maltreatment During In-Home Services or within 6 Months of Termination of Services (In-Home & Out-of-Home) – 96%
  - Ratio of Children Receiving Family Preservation Services to Children with Verified Maltreatment – 2.00
  - Required Mother & Father Contacts: Child in Out-of-Home Care, Goal Reunification – 50%
  - Children Reunified within 12 Months of Entry – 48.4%
  - Reunified Children Who Re-entered Care within 12 Months – 9.9%
  - Ratio of Adoptions in Last 12 Months to Children in Care More than 12 Months – 0.500
  - Children in Care 8 Days-12 Months with No More than Two Placements – 86%
  - Medical, Immunization, Dental Services – 90%
  - Children Ages 5-17 Enrolled in School – 95%
  - Former Foster Youth Ages 19-22 with Diploma or GED – 40%
  - Administrative Expenditures as Percent of YTD Expenditures

• **Contract Performance Measures: Quarterly**
  
  - The percentage of children served in out-of-home care who are not maltreated by their out-of-home caregiver shall be at least 99.68%
  - Percent of children under supervision who are required to be seen every 30 days, who are seen every 30 days shall be at least 99.5%
  - The percentage of children reunified who were reunified within 12 months of the lasted removal shall be at least 76.2%
  - The percentage of children reunified who re-entered out-of-home care within 12 months shall not exceed 9.9%
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- The percentage of children who were adopted who were adopted within 24 months of the latest removal shall be at least 36.6%

- The percentage of children in out-of-home care 24 months or longer on July 1 who achieved permanency prior to their 18th birthday and by June 30 shall be a least 31%

- The percentage of children in out-of-home care for at least eight days, but less than 12 months, who had two or fewer placement settings, shall be at least 86%.

- The number of children with finalized adoptions between July 1, 2012 and June 30, 2013 shall be at least 170

- No more than 629 children will be in out-of-home care

- % of youth who have aged out of care completing high school or GED by 20 years of age. Baseline Year

- % of youth who have completed high school or GED and are involved in post secondary education. Baseline Year

- % of youth age 18 and over receiving Independent Living services who have a job (including joining the military). Baseline Year

- % of young adults in safe housing. Baseline Year

- % of 17-year-old youth in licensed out of home care who had a transition plan signed by the youth and filed with the court. Baseline Year

- **System Improvement Plan (see pages 22-23)**
  - Plan developed from information gathered during QA activities and via the Independent Evaluation from the 2011-2012 fiscal year. PSF will review and update this working document throughout the 2012-2013 fiscal year. The plan is designed to address Family Centered Practice and its implementation throughout PSF’s system of care. The plan outlines ideals and processes related to furthering the implementation of Solution Based Casework more specifically addressing:
    i. Funding understanding and oversight
    ii. Interdepartmental communication
    iii. Provider and Service requests
    iv. Ongoing education and coaching
    v. Implementation of Continuous Quality Improvement Process (CQI) for Solution Based Casework
As stated above this is a working document with items and processes subject to change as items are reviewed, analyzed and addressed.

- **Other CBC Areas of Focus** (again subject to change regarding analysis of need)
  
  - **Management Reports** –
    
    i. Reports and data related to operations – information/spreadsheets and database information is shared with the subcontracted Case Management Agencies for their utilization to manage their caseloads and activities. Items include but are not limited to and are subject to change:
    1. Medical, dental and immunizations
    2. Caseload trends (intakes, investigations, shelters, total out-of-home care numbers, out-of-home care by placement type, total in home care number, total prevention/diversion numbers and caseloads)
    3. Children seen
    4. Children on psychotropic medications
    5. Fingerprint, birth certificates and photos
    6. RDC usage
    7. Supervisory reviews
    8. FSFN notes (shows the amount of notes entered into FSFN by the worker entering the note. This report is a good indicator of the number of words used to document a case)
    9. Placement errors
    10. Placements reported timely
    11. Face sheet compliance

  - **Supervisory Reviews**
    
    i. Quarterly review of (by supervisor)
    1. Number and percent of supervisory reviews completed by supervisor
    2. Number and percent of supervisory reviews completed by agency
    3. Percent compliance by supervisor with quality reviews of data related notes including discussions of (6 randomly selected notes per supervisor):
       a. Discussion of Safety.
       b. Discussion of Permanency.
       c. Discussion of Wellbeing.
       d. Discussion of Independent Living.
       e. Discussion of Progress.
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○ Complaints
  i. Complaints are processed on an as received basis by the PSF Quality Management staff. Complaints are logged into and tracked through completion via the PSF automated data system. As part of the process the PSF Quality Management staff review the complaint, assign the complaint to the appropriate agency/staff to address, provide guidelines and timeframes for responses and review and approve completed responses.

○ Exit Interviews
  i. Exit Interviews are submitted to PSF QA staff who review for completeness and to note any questions answered denoting an area in need of attention. PSF maintains an automated data system which houses information related to exit interviews. Information includes exit interviews that are due, exit interviews completed and exit interviews not needed. Once an exit interview is received by PSF it is processed and information from the exit interview is entered into the PSF automated database. Additionally the exit interview is sent to the licensing authority over the placement being addressed in the exit interview. Data from the automated system is used by PSF and the subcontracted case management agencies as a management tool to assist with oversight of this process.

○ Incident Reports
  i. Incident reports are processed by PSF QA staff as they are received. Information from incident reports are entered into the DCF Portal as required and all incidents are entered into the PSF automated database. PSF QA reviews the incident and makes recommendations to the subcontracted case management agencies for follow-up to be completed by the Family Care Counselor. When there are abuse/neglect regarding actions of the foster parents or when there is a foster home facility complaint these issues are reviewed at the Incident Report meeting and if necessary by the Foster Care Review Committee. No new placement holds are put on foster homes with open reports of abuse/neglect. Issues are reviewed and followed until the issue has been addressed. Results can be no findings, counseling 1:1 with the foster parent, support plan, corrective action plan and in extreme and/or repeat cases revocation of the license.
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- Utilization Management
  - Services
    - Family Service Facilitators refer children and families for appropriate services as a result of family planning, case plan development, on-going family assessment, and individual needs by reviewing supporting documentation for the service request to verify referrals for services occur as a result of family planning developed in coordination with the family team, assessments, court orders, or other appropriate means.
    - The Clinical and Community Services Department / Family Service Facilitators require the referral requestor to complete a Service Request Form which details referral source contact information, case and client information, provider action request regarding family and individual level goals and objectives, and information about children’s needs and desired outcomes if applicable.
    - The Clinical and Community Services Department requires a referral requestor requesting a high-end assessment or evaluation to complete an Assessment/Evaluation Request Form which details specific information regarding the purpose and type of information needed from the assessment or evaluation to ensure the request is appropriate and provide detailed information to the provider around the referral question. Management staff within the Clinical and Community Services Department review and approves requests in addition to the Family Service Facilitators to ensure quality and appropriateness of request.
    - Family Service Facilitators include supporting documentation with referral requests to verify there is justification for the need for the services and provide background information to providers to assist with treatment planning.
    - Family Service Facilitators make certain the providers receive approved referral packets complete with information regarding client contact, case details, referral source contact, service authorization, and invoicing, to ensure the provider will be informed and prepared to meet the client’s needs.
    - Family Service Facilitators specialize in knowledge regarding the available services in the areas PSF serves and coordinate referrals based on client strengths and needs, provider specialization, provider location, provider capacity, and client preferences.
Family Service Facilitators routinely review requests for additional, ongoing services to determine if additional services are appropriate and remain relevant to the client and/or family’s progress, goals, and objectives.

Family Service Facilitators attend Case Progression Staffing and other multi-disciplinary staffings as requested to offer support and information regarding service and provider information as well as service engagement history.

Utilization Management staff partners with service providers and referral sources to afford support and assistance in their work with children and families as well as helping with reducing logistical concerns involving referrals, invoicing, communication of information, and general problem-solving on any issues.

Prior to establishing a formal relationship with a community provider, PSF evaluates the need for the services to be rendered and determines if there is a gap in the current service array that can be filled through having a formal relationship with a new provider.

When considering new providers, Utilization Management staff request and receive a summary of services along with a fee schedule, an active license or certification (if applicable), professional insurance, appropriate tax information, Professional Resumes/CVs, and clear background screening documents (if current within last 5 years and Licensing credentials may substitute for background screening as determined by Utilization Management staff).

Utilization Management staff use the P-Kids automated data management system to authorize all services with provider information, discrete units of service, length of service delivery, eligibility information, rate of service, and other relevant information ensuring quality in one consistent location.

Utilization Management staff routinely review data obtained from the P-Kids automated data management system to track and analyze trends in service utilization, improve the provision of services, manage available resources, and monitor expenditures.
ii. UM Coordinator
   - Multidisciplinary staffings for each child in Specialized Therapeutic Foster Care (STFC), Therapeutic Group Care (TGC) and Statewide Inpatient Psychiatric Programs (SIPP), funded by Medicaid or Magellan, at least once every 90 days. Multidisciplinary staffings discuss the current behaviors and treatment of each child, the team also makes a recommendation for continued care.
   - Monthly status check on all current Comprehensive Behavioral Healthcare Assessment (CBHA) referrals and open assessments.
   - Assists Magellan and Medicaid with their yearly monitoring of all in area STFC providers (currently only FL Mentor Gainesville).
   - Reviews no less than 5 CBHAs per month at random to assess quality and thoroughness.
   - Sends two CBHAs per month at random to Magellan to review for quality and thoroughness.
   - Monitors monthly tracker for all dependent children placed in TGC or SIPP to schedule 90 day suitability assessments timely.
   - Monitors all current CBHA assessors to ensure they meet yearly requirements.
   - Reviews and monitors all new CBHA assessors.

   o Foster Care Licensing
      i. PSF has partnered/contracted with Community Partnership for Children for them to complete the foster home licensing attestation process for foster homes licensed by PSF. Additionally, PSF has a licensing specialist whose duties are to review foster home licensing packets for accuracy and completeness. These two processes serve as a checks and balance system for foster home licensing. As stated in the Incident Report section, when there are abuse/neglect regarding actions of the foster parents or when there is a foster home facility complaint these issues are reviewed at the Incident Report meeting and if necessary by the Foster Care Review Committee. No new placement holds are put on foster homes with open reports of abuse/neglect. Issues are reviewed and followed until the issue has been addressed. Results can be no findings, counseling 1:1 with the foster parent, support plan, corrective action plan and in extreme and/or repeat cases revocation of the license.

   o Finance and Eligibility
      i. PSF contracts with an outside agency at least once a year to complete a Fiscal Audit. The auditors review records and data and complete a report of findings. Any
identified areas in need of improvement are notes and PSF develops and implements action plans to address such areas.

o **Overcapacity Reviews and Approvals**
  i. PSF Placement staff prepare all documents related to overcapacity waiver requests. These requests are reviewed and approved or denied by the PSF CEO. When the PSF CEO is not available these requests are reviewed and approved by the PSF Senior Vice President of Programs.

o **Strategic Plan**
  i. During this fiscal year PSF will be working with staff at all levels within the agency and with the PSF Board of Directors on enhancing and making changes to the existing strategic plan. The current strategic plan expires in 2012. The object of the Strategic Plan is to provide an overview of the actions that are necessary to fully carryout PSF’s Vision and to partner with PSF employees as well as Board members and stakeholders in creating a document that is meaningful and useful.

o **Quality Analysis & Improvement - Utilization of Data, Planning and Implementation:**

  **Meetings Designed to Review and Address Performance:**

  o **Scorecard Meeting:**
    o PSF and its Subcontracted Case Management Agencies take the CBC Scorecard seriously and work in conjunction with one another to review data, validate data, identify systemic or data entry/extraction issues and to create action plans designed to improve knowledge and performance.

    o PSF and the Subcontracted Case Management Agency staff meet on a bi-weekly basis (subject to change according to need) to:
      ▪ Review most recent scorecard results – by agency and CBC totals
      ▪ Identify data and performance/systemic issues and discuss strategies and efforts to address identified issues
      ▪ By Agency present updates on action plans developed as a result of the prior meeting – Discuss changes to action plans and what is to be presented at the next meeting

  o **Meetings with DCF Regional Director to review CBC Performance:**
    • Discussions include information related to:
      o PSF’s compliance with contracted performance measures
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- Fiscal and budgetary information
- Programmatic and service processes and issues
- Initiatives

- Quarterly Meetings/Training with DCF Quality Assurance Staff
  - These meetings occur quarterly as allowed by DCF funding availability
    - Meeting with CBC quality assurance staff and the Department’s quality assurance staff to collaborate on federal and state quality assurance initiatives

- PSF Board of Directors Meeting
  - This meeting occurs as scheduled via the bi-laws
    - Topics discussed include are not exhaustive and are subject to change:
      - CEO Report
      - Finance Committee Reports
      - Quality Assurance Committee Reports
      - Executive Committee Reports
      - Community and Government Relations Committee Reports

- Monthly PSF and Subcontracted Case Management Agency Provider Meeting
  - This meeting occurs the second Tuesday of every month
    - Issues reviewed include
      - PSF’s and Each Subcontracted Case Management Agencies’ compliance with contracted performance measures
      - Programmatic and service processes and issues
      - Initiatives
      - Updates to policy and protocol
      - News Updates
      - Training

- PSF Clinical and Community Services Department and Service Provider Meeting – Held every two months:
  - Meeting occurs every two months
    - Issues reviewed include
      - Sharing of relevant information
Utilization of Data to Identify Need and Effect Change:

PSF utilizes the data collected regarding the scorecard, performance measures, data management report, the Base Reviews/Quality Service Reviews/Special Area Reviews to identify areas of best practice and areas in need of improvement. PSF works with the various departments within the CBC as well as with the subcontracted Case Management Agencies to identify and address areas in need of improvement. This partnered approach is designed to look at issues related to quality and performance at both the system and case levels. By looking at issues at the case level progress can be made for individual children and families and over time for the system as a whole. Identifying issues at the case level has led to pinpointing problems. From this case specific information trends can be identified and action steps put into place to address both case specific and systemic issues.

Partnership for Strong Families plans to use the findings of the QSRs completed in the 2011-2012 fiscal year to help guide the system of care. PSF plans to take the information from the Quality Service Reviews, other case file reviews, performance measure findings, DCF Contract Oversight review and findings, scorecard results and findings from other quality assurance activities and PSF plans to utilize this information in a workshop to be held with PSF and the Subcontracted Case Management Agency staff. During the workshop PSF and the Subcontracted Case Management Agency staff will review the results of the quality activities from the Fiscal Year 2011-2012 and will work in conjunction with one another to identify strategies to address shortcomings.

On a monthly basis PSF meets with the subcontracted case management agencies, specifically with their Program Directors, Quality Assurance staff and Supervisors. During this meeting we review data, their compliance as it relates to the performance measures and other performance indicators and provide training, guidance and technical assistance when needed. This meeting has been a vehicle through which PSF can share new initiatives, services and updates to policy and procedure. It has also been a vehicle through which staff can share challenges, initiatives, and best practices.

PSF completes a quarterly report on PSF’s compliance with each of the contracted performance measures. This report identifies if PSF is in compliance with each of the measures and, when necessary, addresses specific action plans to address areas in need of improvement. Action plans are based on shared data review initiatives and on analysis and work done with the case management agencies as described in the paragraph above. This report is provided to DCF (when requested) and the PSF Board of Directors.

Additional meetings focused on collaboration, cooperation, and performance/system improvement include:
  1. Executive Management Team Meeting
  2. Total Quality Management Meeting
  3. Scorecard Meeting
Quality Assurance Plan - Following Statewide Quality Assurance Planning Criteria
For Fiscal Year 2012-2013

- Incident Report Meeting
- Quality Operations Meeting
- Provider Meeting
- Subcontracted Provider CEO Meeting
- Adoption Permanency Meetings
- Adoption Review Committee Meetings

PSF will continue to complete quarterly performance measure compliance reports, and present these reports to DCF as requested and to the PSF Board of Directors. These reports combine data obtained from the DCF dashboard, DCF web portal, and FSFN. The report outlines compliance for contracted performance measures. In addition, the report includes, when necessary, action plans for improvements when performance is found to be below contracted standards. These action plans include the information previously described above, specifically the collaborative data reviews and analysis by the sub-contracted Case Management Agencies and by PSF in coordination and in conjunction with one another. These collaborative efforts have led to shared decision-making, identification of case level and systemic challenges and the implementation of and follow-up on action plans aimed at improving the quality of services offered to the children and families we serve.

PSF will continue to utilize these approaches throughout this new fiscal year, building on what we have learned and enhancing action plans previously implemented. PSF will incorporate the Independent Annual or Multi-Year Evaluation of Child Welfare Practice and Outcomes into this year's improvement planning. PSF will continue to work side-by-side with the Case Management Agencies, Providers and other stakeholders to improve the quality of services provided both internally to one another and to the families we serve. PSF will, when appropriate, continue to use the case level data review approach along with the trend analysis approach. In doing so, PSF will continue to review the data and participate in the collaborative monthly meetings with the Case Management Agencies. The Case Management Agencies will continue discuss performance, initiatives, lessons learned and best practices.

Additionally, PSF will continue with the established Quality Improvement Teams designed to create learning experiences and drive system improvement. The teams responsible for reviewing performance and risk data include the Executive Leadership Team, Quality Operations Team, Incident Report Review Committee, PSF Case Management Agency Supervisors Meeting, and PSF Board of Directors Quality Management Subcommittee. They evaluate data and direct decision-making to implement changes to processes at both the service and case levels. Appropriate lessons and process changes are translated into new or enhanced policies and procedures, and shared with network agencies, stakeholders, or other interested parties as indicators of solution-focused thinking and processing.

The PSF Quality and Administration staff also supports performance through standardized quality assurance activities to evaluate increased success and compliance. Additionally, the Quality and Administration department provides technical assistance to the Quality Improvement teams, agencies, and individuals as necessary.
PSF is an agency focused on making changes and doing what is in the best interest of the children and families we serve. PSF's quality control, quality assurance and continuous quality improvement system allows PSF to recognize and react to emerging trends at various levels within the agency and within the system of care. PSF has worked and will continue to work closely with DCF Administration and its sub-contracted Case Management Agencies to review performance and address safety, permanency and well-being of children as prioritized. As trends are identified action plans are put in place both internally (CBC Lead Agency level) and/or at the Case Management Agency level. As stated previously in this plan, PSF and the Case Management Agencies review performance at the case level (both performance reviews and Quality Service Reviews). By looking at issues at the case level, problem areas can be identified and progress can be made for individual children and families served, which will improve the system as a whole over time. From this case specific information trends can be identified and action steps put in place to address both case specific and systemic issues. This approach allows for ongoing analysis of established trends, making improvements and/or updates to existing action plans if the data does not support improvement. In addition, this approach allows for the establishment of new action plans for emerging trends identified through the various levels of quality assurance.

**Reporting:**

PSF will complete and submit the following reports to DCF:

- Quality Service Review Reports quarterly into the Department’s QSR Review Tool:
  - October 30, 2011
  - January 30, 2012
  - April 30, 2012

**Accreditation Status:**

On June 22, 2007, PSF achieved full accreditation as a Lead Agency through the Council on Accreditation (COA) through June 30, 2011. Organizations accredited by COA may: (1) receive monetary incentives, (2) be deemed in compliance with state and county requirements, (3) receive regulatory relief and (4) have increased opportunities for grants and state/federal funding. COA accreditation also fulfills the state contract's mandate. PSF's subcontracts for case management services and requires the Case Management Agencies providing child welfare services to be accredited by a nationally recognized accreditation organization to uphold high standards of service and care. PSF completed the COA re-accreditation process in May 2011 and has again achieved full accreditation as a Lead Agency this accreditation is through June 30, 2015.
System Improvement Plan

PSF, one of the Innovation Sites for Family Centered Practice, utilizes Solution Based Casework as the evidence-based model from which case management activities are structured. As one of the Innovation Sites, PSF had the opportunity to be evaluated along with the two other sites as part of an evaluation completed by the Ounce of Prevention. The evaluation was conducted in phases with Phase 1 being completed January 2011 and Phase 2 being completed in December 2011. The Evaluation Brief for Years 1 and 2 was completed in March 2012.

Partnership for Strong Families approach to address continued improvement is based on the establishment of goals and targets for the following areas. A plan of action for each will be created as the Solution Based Casework continues to be integrated into our system of care.

- Funding understanding and oversight and Provider and Service requests
  - System wide understanding of funding and how to refer for and receive services appropriate for the individualized needs of the families.
  - Making changes to the referral process - assessment referral and regular referral
- Interdepartmental communication (specialized position)
- Ongoing education and coaching
- Implementation of Continuous Quality Improvement Process (CQI) for Solution Based Casework to include meetings to address case specifics and also a process to review the quality of Solution Based Casework within supervisory reviews and case file reviews.
- As part of a yearly review and in preparation of changes as a result of the Child Protection Transformation Project that is occurring statewide in Florida, we are currently constructing action plans internally to tackle the more prominent implementation issues that continue to be a barrier to our system benefiting from the full effects of using this practice model. Planning with Utilization management, Quality Assurance, Training and Operations/Programs is currently underway with pre-planning discussions with the Case Management
Agencies, Child Legal Services and Judiciary up next. These internal action plans will be used in the SBC Advisory Committee to keep our implementation focused on working through barriers and highlighting strengths so that we may achieve full integration of SBC and be prepared for practice and tool changes as a result of child protection transformation project.

- Our continued commitment to co-constructed family solutions and case plans has challenged us to apply for an additional federal grant to build upon our long term commitment to the family group decision making model. We are looking forward to using what we have learned from our previous grant that concludes in September, to further strengthen and maximize the effects of this process for the families we serve.