Devereux Community Based Care of Okeechobee and the Treasure Coast

Annual Summary of Quality Assurance Review Findings
Fiscal Year 2013-14
Annual Report of Case Management Practice Trends:

Introduction:

On November 1, 2013, Devereux Community Based Care of Okeechobee and the Treasure Coast (Devereux CBC) assumed the role of Lead Agency for Circuit 19. Reviews conducted during the first quarter of FY 2013-14 were conducted under the Department of Children and Families’ contract with United for Families, Inc. While there was a change in Lead Agency, however, all Quality Management staff members transitioned to Devereux CBC, providing continuity and consistency in the review process.

Quality Assurance Reviews:

Quality Services Reviews (QSR) were completed for quarters one and two of FY 2013-14. The Quality Services Review (QSR) process helps child welfare and social services agencies assess the effectiveness of their practices and the interventions provided to the families they serve. The QSR is directly related to the core components of individualized practice and measures the degree to which true individualized and participatory practice is occurring with each individual family being reviewed. The Quality Services Review process includes the following elements that promote assurance for a thorough assessment of the case being reviewed: intensive training for all QSR reviewers, comprehensive pre-review planning and preparation for the review, the actual task of conducting the QSR with a focus on interviewing all key case participants, clear understanding of the Interpretive Guide Rating Key when determining the overall ratings, case worker/supervisor debriefing, review of the case with those deemed appropriate and a Written Case Summary assessing practical steps to sustain success or overcome problems.

A sample extract of cases eligible for review during the selected review period was provided by the Department of Children and Families. Four (4) cases from the extract were randomly chosen by the CBC for review during quarters one and two, and a review of each case was completed by a team of two members of Devereux CBC Quality Management staff. During the reviews, teams examined all applicable documentation and reviewed Florida Safe Families Network (FSFN) for case details. Review teams utilized the DCF Web Portal to provide ratings and comments. A Case Review Summary was completed on each case to tell the story during the case debriefing process. QSR data is analyzed and presented at quarterly Continuous Quality Improvement (CQI) meetings.

Quality of Practice Standards (QPS) reviews were also completed for quarters one and two of FY 2013-14. These reviews are designed to increase oversight and accountability at all levels of the service delivery system in order to improve outcomes for children and families. The Quality Management Department is cognizant, observant, and conscious of similarities and differences among and between cultural groups and integrates cultural sensitivity into all aspects of case reviews.

Quality of Practice Standards apply to both in-home and out-of-home cases. A sample extract of cases eligible for review during the selected review period was provided by the Department of Children and Families. Thirty-four (34) cases from the extract were randomly chosen by the CBC for review during quarters one and two. Data collected utilizing these standards provides local administrations a “window into practice” in real-time, and helps focus quality improvement efforts at the local and state level.
Rapid Safety Feedback Quality Assurance Reviews (RSF) were completed for quarters three and four of FY 2013-14. The RSF review affords an opportunity to target the highest-risk population of children in the child welfare system. Coaching is a key component of this process, which is intended to improve case managers' and supervisors' critical thinking skills related to risk assessments. During this review period, one hundred nine (109) cases were reviewed; consultations with the case managers and case management supervisors were held, as needed.

Devereux CBC’s Quality Assurance and Quality Improvement process involves various types of reviews, data analysis and meetings, including but not limited to the following:

- Quality Services Reviews (QSR)
- Quality of Practice Standards Reviews (QPS)
- Rapid Safety Feedback Quality Assurance Reviews (RSF)
- Quarterly Continuous Quality Improvement (CQI) Meetings
- Incident Reports
- Exit Interviews
- Missing Child Reports
- Management Reports (daily, weekly and monthly)
- Management Meetings
- Contract Performance Measures
- Scorecard Performance
- Monthly Performance Measures Meetings
- Other Case File Reviews

Strengths and Gaps (areas in need of improvement) are identified through the QSR/QPS/RSF process and are addressed at quarterly CQI meetings. Attendees include staff from the CBC, case management agencies, DCF, CLS, and community providers. Performance data and outcomes are discussed among the attendees and improvement strategies are developed.

Performance trends identified through analysis of contract performance measures and scorecard data are addressed at monthly Performance Measures meetings which include representatives from the CBC and case management agencies. Again, data and findings are discussed, root causes identified, and improvement strategies developed.

The quarterly CQI meetings foster cohesion and partnership between the lead agency and the subcontracted agencies, giving participants a voice in ongoing quality improvement efforts. Other ongoing improvement efforts include system of care trainings in such areas as incident reporting, ICPC/OCS procedures, protocol for missing children and human trafficking.

The Devereux CBC Quality Management team partners with the Quality Assurance Specialists from the case management agency when conducting their specific Quality Services Reviews. This gives the case management agency the ability to address any findings with case management staff immediately when necessary.
**Quality Services Review (QSR) Rating:**

Indicators in the QSR are divided into two domains: Child and Caregiver Status and Practice Performance. Each indicator contains sub-parts termed “rating rationale”, which are determined to be either a Strength or a Gap (if applicable) by the reviewers. These rationale are, in turn, used to determine an overall rating for the indicator.

Overall ratings are selected from the following rating categories:

- 6 - Optimal Status
- 5 - Good Status
- 4 - Fair Status
- 3 - Marginal Status
- 2 - Poor Status
- 1 - Adverse Status

**Child and Family Status Indicators:**

Identified Strengths:

- Safety from Exposure to Threats of Harm: the degree to which the child is free of abuse, neglect and exploitation by others in his/her place of residence, school, and other daily settings.
- Living Arrangement: the degree to which, consistent with age and ability, the child is living in the most appropriate/least restrictive living arrangement.

No Gaps were identified in the Child and Family Indicators. (4 cases were reviewed)

The charts below illustrate the overall ratings for the Child and Family Status Indicators for the four (4) Quality Services Reviews completed during quarters one and two of FY 2013-14.
Child & Family Status Indicators: Overall Average for FY 2013-14

- SAFETY
- CHILD VULNERABILITY
- STABILITY
- LIVING ARRANGEMENT
- PERMANENCY
- PHYSICAL HEALTH
- EMOTIONAL WELL-BEING
- EARLY LEARNING STATUS
- ACADEMIC STATUS
- PARENT/CG FUNCTIONING

*10 - Path to Independence: Not applicable to any case reviewed

Child & Family Status Indicators: Comparison by Quarter

- Qtr 1
- Qtr 2
- Avg

*10 - Path to Independence: Not applicable to any case reviewed
**Practice Performance Indicators:**

Identified Strengths:

- **Assessment and Understanding:** the degree to which those involved with the family understand the “big picture” situation and dynamic factors impacting the child and family sufficiently to guide the intervention.
- **Planning Process:** the degree to which the planning process is individualized and matched to the child and family’s present situation, preferences, and long-term view for safe case closure.
- **Implementation:** the degree to which planned and accessible intervention strategies, services, and supports being provided to the child and family have sufficient power and beneficial effect to meet needs and achieve outcomes necessary for safe case closure.

Identified Gaps:

- **Teaming:** the degree to which appropriate family members and providers have been identified and formed into a working team that shares a common “big picture” understanding and long-term view of the child and family.
- **Monitoring and Adjustment:** the degree to which the team routinely monitors the child and family’s status and progress, interventions, and results and makes necessary adjustments.

The charts below illustrate the overall ratings for the Practice Performance indicators for the (4) Quality Services Case Reviews completed during quarters one and two of FY 2013-14.

**Practice Performance Indicators: Overall Average for FY 2013-14**

*29 - Psychotropic Medication: Not applicable to any case reviewed*
Practice Performance Indicators: Comparison by Quarter

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<thead>
<tr>
<th>Indicator</th>
<th>Qtr 1</th>
<th>Qtr 2</th>
<th>Avg</th>
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<td>5</td>
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<tr>
<td>31 Voice &amp; Choice</td>
<td>5</td>
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<tr>
<td>32 Teaming</td>
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<td>3.5</td>
<td>4</td>
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<tr>
<td>33 Assessment &amp; Understanding</td>
<td>4</td>
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<td>4.5</td>
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<td>24 Planning Process</td>
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<tr>
<td>27 Maintaining Connections</td>
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<tr>
<td>28 Monitoring &amp; Adjustment</td>
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*29 Psychotropic Medications Not applicable to any case reviewed*
**Quality of Practice Standards (QPS) Ratings:**

Areas of Strength include:

- 6.0 - Service referrals were completed timely and were consistent with the needs identified through investigative assessment(s) and other assessments related to safety.
- 22.0 - The current case plan goal was appropriate based on the child’s and family’s circumstances.
- 24.0 - The case plan activities are individualized and matched to the child and family’s present situation and preferences, and include a realistic, long-term view toward safe case closure.
- 48.0 - An ongoing assessment of the child(ren)’s needs was conducted to provide updated information for case planning purposes.
- 50.0 - An ongoing assessment of the mother’s needs was conducted to provide updated information for case planning purposes.

The charts below illustrate the overall percentage ratings in areas identified as strengths in the thirty-four (34) Quality of Practice Standards Reviews completed during quarters one and two of FY 2013-14.

![Quality of Practice Standards (QPS) Ratings Chart](image-url)
Areas in need of improvement include:

- 7.0 - A quality updated family assessment was focused on the immediate and prospective safety of the child, as well as any changes and implications in the family’s situation related to emerging concerns and service needs.
- 12.0 - All of the people who provide support and services for this child and family were identified and collaborated in problem solving to inform an effective working team.
- 20.2 - Supervisor considered all aspects of the child’s safety, well-being and permanency.
- 20.0 - Qualitative supervisory reviews and follow-through were conducted as needed and required.
- 25.0 - The services worker facilitated service planning and informed team members of progress, concerns, and issues in a timely manner.
- 55.0 - Concerted efforts were made to actively involve all case participants in the case planning process.
- 56.0 - The frequency of the services worker's visits with all case participants was based on the assessed level of risk in the safety plan and is sufficient to address issues pertaining to the safety, permanency, and wellbeing of the child.
- 57.0 - The quality of the services worker’s visits with case participants was sufficient to address issues pertaining to the child’s safety, permanency and well-being.
- 72.0 - Case work activities are accurately documented in the Florida Safe Families Network.

The charts below illustrate the overall percentage ratings in areas identified as areas needing improvement in the thirty-four (34) Quality of Practice Standards Reviews completed during quarters one and two of FY 2013-14.
The Quality of Practice Standards reviews reveal that our major shortcomings are in the areas of supervisory reviews, family assessments, and frequency of visits. Supervisory reviews lacked qualitative assessment of all aspects of child safety, well-being and permanency, and failed to provide follow-up on guidance and directives given in previous reviews. Family assessments and frequency of visits were discussed at CQI meetings with the case management supervisors. These performance areas have been explored for root causes and improvement initiatives. Consultations on these indicators have been conducted with case management staff. Devereux CBC will continue to address these practice trends with case management agencies during monthly Performance Measures meetings and quarterly CQI meetings.

**Rapid Safety Feedback Quality Assurance Reviews (RSF):**

The charts below illustrate the overall percentage ratings for one hundred nine (109) RSF Reviews completed during quarters 3-4 FY 2013-14.
Rapid Safety Feedback
April 2014

Devereux CBC  Statewide

Rapid Safety Feedback
May 2014

Devereux CBC  Statewide
**Rapid Safety Feedback**

**June 2014**

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**Post-Baseline Performance**

- **Case Plan**: Qtr 4 2013-14 (78.4%) vs. Baseline: Qtr 3 2013-14 (63.0%)
- **Safety Planning**: Qtr 4 2013-14 (60.8%) vs. Baseline: Qtr 3 2013-14 (50.0%)
- **Parents’ Behavior Change**: Qtr 4 2013-14 (80.4%) vs. Baseline: Qtr 3 2013-14 (63.0%)
- **Emerging Dangers**: Qtr 4 2013-14 (74.1%) vs. Baseline: Qtr 3 2013-14 (57.1%)
- **Quality of Contacts**: Qtr 4 2013-14 (62.7%) vs. Baseline: Qtr 3 2013-14 (48.1%)
- **Frequency of Contacts**: Qtr 4 2013-14 (44.4%) vs. Baseline: Qtr 3 2013-14 (21.6%)
- **Background/HS**: Qtr 4 2013-14 (72.5%) vs. Baseline: Qtr 3 2013-14 (55.6%)
- **Communication**: Qtr 4 2013-14 (49.0%) vs. Baseline: Qtr 3 2013-14 (42.6%)
- **Supervision**: Qtr 4 2013-14 (62.7%) vs. Baseline: Qtr 3 2013-14 (44.4%)

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**Devereux CBC** vs. **Statewide**
During the six months of RSF reviews (January-June 2014), significant improvements were made in eight of the nine focus areas. Frequency of contacts with the child and family, quality of contacts with case participants, and communication with stakeholders have been identified as areas needing improvement. It should be noted that while these items remain in need of further improvement, significant gains have already occurred in two of the three. Areas needing improvement are discussed in further detail below.

Frequency of contacts with the child and family displays the most significant performance gap. The data indicates that frequency of contacts is not sufficient to ascertain and respond to known threats and emerging dangers. Outcomes in this area dramatically declined in quarter four when compared to the established baseline. Reviewers identified the following issues contributing to the low performance in this area:

- Supervisory reviews documented how frequently visits with the family should occur in order to ensure safety; however, visits did not always occur in accordance with these recommendations.
- The initial home visit with the family following case transfer was not always conducted within the required time frame.
- There was limited documentation of contact with the non-custodial parent.

This area of concern has been addressed in case consultations with case managers and case management supervisors. It was reported on multiple occasions that the case manager and supervisor had staffed the case to decrease the number of visits per month; however, there was a lack of documentation to support this case activity.

Quality of contact with case participants is another area needing improvement. Reviewers noted the following issues in this area:

- Documentation of speaking to age-appropriate children alone is lacking.
- When the child was not age appropriate, there was a lack of documentation of the child’s interaction with the parent(s) or assessment of the child’s development.
- Discussion of active safety plans and agreed-upon safety actions was not always documented.
- Home visits were not always of sufficient duration to address safety, permanency and well-being. FSFN documentation of home visits often did not include the end date and time of the visit, which presented a challenge in determining the quality of visits, as the length of the visit could not be determined.

Outcomes reveal performance gaps in the area of communication with stakeholders as well. Deficiencies in this area include the following:

- Case managers did not sufficiently document ongoing communication with service providers involved with the family.
- Family assessments were not always completed.
Of the family assessments which were completed, many did not address all case participants. An increase in the quality of ongoing assessment is anticipated with the implementation of the Family Functioning Assessment component of the Florida Safety Decision Making Methodology.

**Requests for Action**

Of the 109 Rapid Safety Feedback Reviews completed, there were twenty (20) Requests for Action (RFA) sent to the case management agencies. Any immediate safety concern identified by the reviewer resulted in an RFA. The majority of the RFAs stemmed from issues related to Safety Plans that were either unable to be located or were lacking in sufficient content, including contact with the safety monitors. Some of the RFAs had multiple concerns; however, for reporting purposes, the twenty RFAs were sorted into the following categories:

- Safety Plans: safety plans either could not be located in the case file, lacked documentation indicating that the safety actions were followed, or contained no evidence of any updates to the plan. (14)
- Emerging dangers: documentation did not support sufficient urgency in follow-up to identified dangers, resulting in child(ren) being left in potentially unsafe conditions or situations. (6)

![REQUESTS FOR ACTION](image)

- Safety Plan: 70%
- Emerging Dangers: 30%
**Addressing Findings**

Devereux CBC will continue to address the issues identified by analysis of findings through quality improvement systems currently in place. These include the following processes, components and partners:

- Analysis of Performance Measures outcomes
- Performance Measures Workgroup
- Identification of root causes
- Implementation of performance improvement initiatives
- Continuous Quality Improvement (CQI) meetings
- Contract Oversight monitoring
- High risk case reviews
- Special/ad hoc reviews
- Case management agencies
- Service providers
- Community partners
- DCF Contract Oversight Unit

**Initiatives to Improve Practice:**

In an effort to improve the quality of practice in the areas of safety, permanency, and well-being in FY 2014-15, several programs and program components were introduced to the System of Care in FY 2013-14:

- Devereux CBC added a new Diversion Program to Circuit 19.
- Devereux CBC initiated the Permanency Round Table in Circuit 19.
- Devereux CBC implemented a County Director Model in Circuit 19.
- Devereux CBC added a new Foster Home Care/Licensing Provider in Circuit 19.
- Devereux CBC established an in-house Utilization Management position

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Quality Management Director  

Date: 8/1/2014