Quality Assurance Analysis Report FY 13-14

Q1–Q2
Quality of Practice Standards (QPS) Reviews outcomes:

<table>
<thead>
<tr>
<th>Practice</th>
<th>Q1 15 cases reviewed</th>
<th>Q2 15 cases reviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment</td>
<td>77%</td>
<td>73%</td>
</tr>
<tr>
<td>Family Engagement</td>
<td>64%</td>
<td>66%</td>
</tr>
<tr>
<td>Service Planning and Provision</td>
<td>70%</td>
<td>73%</td>
</tr>
<tr>
<td>Promoting Case Progress</td>
<td>77%</td>
<td>75%</td>
</tr>
<tr>
<td>Quality of Supervision</td>
<td>59%</td>
<td>77%</td>
</tr>
</tbody>
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Following an unfavorable statewide Auditor General Report and subsequent request for corrective action, the QM team provided training to each CMO and completed an intentional comprehensive review of all well-being and compliance requirements with regard to psychotropic medication for all 117 children in out-of-home care who were prescribed psychotropic medication. The COU review that followed the training and the intentional review documented significant improvement.

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

The CEO established a goal for the CMO of 100% ongoing compliance with requirements for psychotropic medication. Each CMO implemented internal CQI processes and the FSSNF QM team implemented an ongoing weekly review of compliance with psychotropic medication requirements, each review was followed by a monitored request for action to correct noted deficiencies. By the end of the FY two of the CMO had achieved 90% or greater compliance for the children in their sample.