Data from the Base and Side-By-Side reviews conducted during the 1\textsuperscript{st}, 2\textsuperscript{nd}, and 3\textsuperscript{rd} quarters of fiscal year 2010-2011 were arrayed by the five Windows into Practice: Assessment, Family Engagement, Service Planning and Provision, Promoting Case Progress, and Supervisory Review and Oversight. The progress chart below documents improvement during the 2\textsuperscript{nd} quarter for Service Planning and Provision.

**Summary of Case Management Practice Trends**

**Assessment**

**Strengths:** The Base and Side-By-Side reviews documented that no child living in the home and/or out-of-home care were re-abused or neglected. Concerted efforts were made during post-placement supervision to manage the risks and prevent re-entry into care. Assessments were consistently found for youth reviewed between the ages of 13 and 15 years of age. Additionally, assessments for residential group care were also completed when required for the youth reviewed; exit interviews were completed and appropriate actions were taken; ongoing assessments of the child’s, mother’s, and out-
of-home care provider’s needs were conducted; and assessments of the child’s mental/behavioral health needs were conducted.

**Opportunities:** The Base and Side-By-Side reviews documented deficiencies in completing the initial and six-month assessments in the Florida Safe Families Network (FSFN). Additional focus is needed in documenting a thorough safety assessment prior to reunification or placement; documenting a staffing or assessment prior to the child’s placement or placement change; documenting an ongoing assessment of the father’s needs for case planning purposes; and consistently ensuring the assessment of the child’s physical and dental healthcare needs.

**Family Engagement**

**Strengths:** The Base and Side-By-Side reviews documented that parents were notified of the child’s placement changes; concerted efforts were made to ensure visitation between the child, parents, and siblings; concerted efforts were made to maintain the child’s important connections; concerted efforts were made to support the mother’s engagement with services; and informed consent or court approval was obtained for the use of psychotropic medication.

**Opportunities:** Additional focus is needed to encourage the mother and father to participate in meaningful decision-making about the child’s needs and activities; supporting the father’s engagement with services; and actively involving all of the case participants (i.e. out-of-home care providers) in the case planning process.

**Service Planning and Provision**

**Strengths:** The Base and Side-By-Side reviews documented concerted efforts were made to provide or arrange for appropriate services for the family to protect the child; ensured service referrals were consistent with the identified service needs; all immediate and emerging safety concerns were adequately addressed; the courts were informed of the child’s placement changes and reasons for the changes; appropriately monitored youth between the ages of 15 and 18; and the quality of contacts focused on the issues relevant to the child’s safety, permanency, and well-being; services were provided to address the child’s educational needs.

**Opportunities:** Additional efforts and focus are needed in documenting ongoing efforts to identify, locate and evaluate other potential relative placements when a child remains
in a licensed or unlicensed placement. Additionally, youth were not consistently afforded opportunities to participate in normal life activities in the foster home and in the community. Although there was some improvement overall, there exist opportunities for improvement in the area of assessment and ensuring appropriate services are provided to address the child’s physical and dental healthcare needs, as well as the child’s mental and behavioral health needs.

Promoting Case Progress

Strengths: The Base and Side-By-Side reviews documented the child’s current placement was stable and appropriate to meet the child’s needs; case records contained a current case plan with an appropriate goal; case plan was designed to achieve permanency, safety, and stability; child’s current placement was in close proximity to the parents to facilitate face-to-face contact; and the child was placed with all siblings in out-of-home care.

Opportunities: Additional efforts and focus are needed to ensure the case record contains a current (not expired) case plan; the case plan failed to consistently address visitation. Focus is also needed on documenting ongoing two-way communication with the service providers involved with the family. A completed Indian Child Welfare Act inquiry was not consistently found in the records reviewed. Additional focus is also needed in ensuring that a TPR petition is filed timely for children in out-of-home care for at least 12 of the most recent 22 months, and consistently document compelling reasons for not filing the TPR petition. Increased focus on ensuring that the psychotropic medication data fields in the Florida Safe Families Network (FSFN) system are accurate and up-to-date. Finally, judicial reviews should be held in a timely manner to include a thorough assessment pertaining to the child.

Supervisory Review and Oversight

Opportunities: The Base and Side-By-Side reviews documented that the supervisory reviews were not documented quarterly as required. Once completed, the supervisor did not consistently document consideration of all aspects of the child’s safety, permanency, and well-being; or ensure consistent follow through on the supervisory guidance and direction provided.
Family Support Services of North Florida
Annual Summary

**Addressing Findings:** The opportunities for improvement that are listed above will be addressed through the provision of additional trainings, evaluating the need for additional specialized positions and revising processes to include policies and procedures, when applicable.

These findings and opportunities for improvement have been addressed in the annual update of the Quality Management Plan. Due to the high turnover rate with case managers during fiscal year 2010-2011, FSSNF’s overall performance declined. However, a “call to action” occurred between FSSNF and our Case Management Organizations (CMO) during the 4th quarter of fiscal year 2010-2011, and the mass hiring of case managers were achieved and continues to remain stable. As a result, the implementation of various trainings and strategic planning meetings has allowed FSSNF and our partners to move toward continuous quality improvement.