Sarasota Family YMCA, Inc.
Safe Children Coalition

Quality Practice Standards Data for Case Management
FY 2010-2011 Annual Report
Summary of Case Management Practice Trends

The primary purpose of the Sarasota Family YMCA, Safe Children Coalition (SCC), Quality Management System is to strengthen practice, improve the timeliness, accessibility, quality and effectiveness of services, and increase natural and enduring community supports for children and families. During Fiscal Year 2010-2011, SCC demonstrated significant progress in several key quality case practice indicators. There were also opportunities identified to improve the quality of services provided to the children and families we serve.

There were several areas of positive performance identified though the Quality Assurance file review process during the past fiscal year. Seventy-five file reviews were conducted during FY10-11 utilizing the Quality of Case Practice Standards, 59 base reviews were conducted by SCC Quality Management staff and 16 side-by-side reviews were conducted in collaboration with DCF Quality Management staff. The chart bellows summarized the overall case practice trends in five key areas: Assessment, Family Engagement, Service Planning and Provision, Promoting Case Progress, and Quality of Supervisory Reviews, Direction, and Follow-up.

![Chart showing case practice indicators for Safe Children Coalition FY10-11]
SCC has demonstrated consistent performance in the achievement of safety outcomes. In 75 cases reviewed during FY10-11, 65 of the children were not victims of re-abuse or re-neglect. In each instance ameliorative interventions were initiated on behalf of the child. The standard related to service referrals consistent with identified needs remains strong with 100% of the identified children receiving appropriate referrals. All immediate and emerging safety concerns were addressed and additional needed interventions were provided to protect the child in 31 of 39 applicable cases in FY10-11. A thorough safety assessment of the home was completed prior to reunification or placement of a child in an unlicensed out-of-home care setting in 30 of the 37 applicable cases (81%).

Children are seen consistently with each child seen at least monthly, with more frequent visits as needed to assess changing circumstances, recognize achievements and modify interventions toward the goal of family stability with safe and successful case closure. The intensity of services, family engagement, and sense of urgency drive focused visits to the home. SCC remains consistently above statewide performance with regard to children seen, with 100% of children being seen in ten of the twelve months of FY10-11.

A key strength of the SCC is the diligent efforts made to ensure Placement Stability for children who must be removed from their home and placed in an out-of-home care setting. SCC exceeded the state target of 86% on performance measure FS306 – the percentage of children with no more than two placements within 12 months of removal was 87.87% for FY 10-11. SCC performance was 84.40% in the first quarter, 85.54% in the second quarter, 84.73% in the third quarter, 88.38% in the fourth quarter with three of the four quarters exceeding statewide performance on this key performance measure. The data collected during the quality assurance file reviews in FY10-11 on placement stability demonstrate high performance on this measure, 88% of the children experienced no more than two out-of-home care placements during the period under review.

Ongoing efforts to ensure children maintain family connections and potential relative placements are continually explored for youth currently placed in licensed care. In 93% of the cases children’s current placement was in close proximity to the parents to facilitate face-to-face contact between the child and parent while the child was in out-of-home care. SCC continues to strive to maintain permanent connections for children in care and continues to implement a Family Finders program with the intent to foster connections for children placed in out-of-home settings. The Safe Children Coalition has had challenges in maintaining sibling groups together in out-of-home placements (65%) due to increasing high number of new cases entering out-of-home care, however if they are not able to maintain all siblings there are concerted efforts made to ensure visitation (or other forms of contact if visitation was not possible) between the child and his or her siblings (93%). These visits are of sufficient frequency to maintain or promote the continuity of sibling relationships. The data collected during the
quality assurance file reviews on maintaining connections demonstrate high performance on this measure with 62 of 64 children (97%) maintaining important connections while in out-of-home care.

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 was 53.15% in FY10-11, which exceeded the target of 29.10%.

The Safe Children Coalition continues to achieve success in children attaining permanency through reunification with family members and adoption. The SCC has exceeded the target for adoptions for several years, and in FY2010-2011 successfully completed 143 adoptions which is 50 more than its contractual target for the year. The percentage of adoptions finalized within 24 months of the latest removal improved from 33.93% in FY2009-2010 to 46.85% in the current fiscal year. SCC attributes its success in exceeding its adoption target for several years to best practices associated with concurrent planning and timely/responsive services. Concurrent planning encourages early assessment of potential adoption to avoid delay to permanency. Case management and adoption specific staff participate in permanency staffings to remain knowledgeable about case progress and potential adoption. As a participant in the statewide Longest Waiting Teen Initiative, SCC has seen amazing results in the decline in the number of youth available for adoption both in the age of the youth waiting for permanency and the length of time waiting to be adopted. Staff dedicated to targeted recruitment events and presentations within the community have aided in the success of finding permanency for children and youth. Building partnerships increases engagement and trust in the adoptions process. SCC works closely with foster and adoptive parents associations, faith based organizations, the Heart Gallery of Sarasota, and Florida Baptist Children’s Home. Providing consistent support develops trust and encourages solutions. All adoptive families receive support throughout the adoption process: Specialized outpatient counseling such as certified reactive attachment therapy and fetal alcohol syndrome services, counseling and supportive services to children and their families, support groups, parent groups, case management, and coordinated services and support with schools and other agencies.

Another Planned Permanent Living Arrangement (APPLA) as a permanency option is appropriate when reunification, adoption, guardianship and/or placement with a fit and willing relative are not in the best interest of the youth, and may provide a permanency plan that is safe, stable, and of the highest quality. However, it is only appropriate when all other avenues have been explored. SCC has been successful in maximizing existing connections and support systems for youth in care as evidenced by a substantial reduction in youth with the goal of APPLA since 2010 (67 to 13, 81% reduction). Thanks to ongoing efforts by the case management and legal staff the Safe Children Coalition has one of the lowest percentage of youth with a goal of APPLA in the state. The SCC has 4% of the children in the state in OOHC, but only 1% of
those children have a goal of APPLA. Effective strategies to find permanent placements include: Increased participation in joint review of cases with legal services, participation in the Department’s Permanent Connections Project (to assess appropriateness of goal, determine next steps) and SCC Permanent Connections Initiative (to find lifelong supports), interviews conducted with all youth with the APPLA goal, and ongoing system prompts at all case reviews (to continually identify supports and family connections).

The SCC achieved the performance outcome measure for the goal of reunification for children within 12 months of the latest removal in the second and third quarters of the past fiscal year, and exceeded statewide performance in the second, third and fourth quarters of FY10-11. Quality assurance file reviews did identify an opportunity for improvement on concerted efforts being made during post placement supervision to manage risks following reunification to prevent re-entry into out of home care when children are reunified.

The SCC places significant emphasis on ensuring the well-being of children served by our agency. Necessary services are arranged for those children with identified physical health needs through the Westcoast Access to Children’s Health (WATCH) program. The WATCH program is coordinated through Children’s Medical Services and provides two nurse care coordinators who are co-located with the case management staff to ensure children’s physical and dental health needs are addressed. Completed service referrals are consistent with the needs identified through assessments for physical and mental health needs, and those children with identified needs receive appropriate treatment. Documentation is present to reflect communication with service providers occurs and the information is utilized to ensure the appropriate services are provided to children and family members to promote successful outcomes. Quality assurance file reviews conducted in FY10-11 findings indicate that concerted efforts were made to assess the mental health needs (96%), educational needs (89%), and physical health needs (68%) of children in care; however concerted efforts to assess dental needs are lagging (24%). The SCC is reviewing files for all children in out-of-home care in response to the statewide Barahona Action Plan. As a result of the review several challenges have been identified in accessing dental services due to the low number of dental providers that accept Medicaid patients. SCC is working with a local Community Coalition to develop a cadre of dentists who will provide dental services to children in care as a service to the children in our community.

An area identified as an opportunity for improvement during FY09-10 was the overall quality of supervision. SCC requires supervision with the case manager occur no less than once per month. This is a critical setting, and supervisors have been specifically trained in working with the case manager to mentor professional development, all the while overseeing the case. This is a front line, real time quality review process which allows cases to move forward without undue delay. Routine qualitative discussion with case managers that focuses on
child and family specific outcomes is critical in order to assure needed safeguards and services are in place and that casework activity is moving the child to permanency. Quality Assurance file review findings indicate that 74 of the 75 required supervisions were completed timely. The SCC determined the quality of supervision was an area that needed additional oversight to ensure improvement during FY10-11. The Sarasota Family YMCA QA team provided job coaching for supervisors, mentoring for new supervisors and ensured all supervisors completed the Supervision for Excellence training to improve outcomes in the area of qualitative supervisory oversight. Additional reviews of the quality of supervision were conducted by the SCC Quality Management staff during FY10-11, with positive trends noted in all indicators. The qualitative supervisory reviews and follow-through improved from 57% in July 2010 to 89% in June 2011.

SCC staff have completed Family Centered Services Training and have provided training to several key partners including representatives from the Foster Parent Associations, Guardian ad Litem office, Children’s Legal Services, and the Office of Attorney General. We continue to develop and implement strategies to ensure the deployment of family centered practice principles throughout the system of care in order to positively impact outcomes in the critical area of ongoing engagement of families. Concerted efforts are required to promote, support, and maintain positive relationships between the child in care and his or her mother and father. A focus during FY10-11 was to provide opportunities for families to actively participate in the decision making for their children while they are in care. Mothers are encouraged and supported to participate in making decisions about her child’s needs and activities in 73% of the cases reviewed, fathers were encouraged in 58% of the cases reviewed.

Family team meetings are held at key critical junctures to ensure supports and services are in place to support successful outcomes for children and their families. Concerted efforts were made to actively involve all case participants in the case planning process in 62 of the 73 cases reviewed (85%). The SCC focuses on building a solid foundation for quality case practice as families enter the system of care. Supervisions are conducted within 15 days of the Early Services Intervention staffing to ensure a clear understanding of the safety, permanency and well-being factors for each child and their family. The quality of the Initial Family Assessment and the ongoing Family Assessments at critical junctures will be a focus of the SCC this upcoming fiscal year.

**Addressing Findings**

To ensure excellence and continual improvement, the Safe Children Coalition addresses each area through a team approach. Once an area is identified as an area for improvement based on performance data and quality assurance reviews, the Quality Management department and members of the Continuous Quality Improvement Committee (CQIC) review the data and determine the improvement
strategies needed to achieve compliance. Meetings are conducted on a monthly basis, participants include case management program managers and supervisors, quality management staff, and operations staff. A review of the data is completed on all key indicators and results; root cause analysis is conducted, and strategies are developed to address areas in need of improvement. Please see attached FY10-11 Monthly Management Reports.

Prepared by:

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