



# Communities Connected *for Kids*

## Annual Summary of Quality Assurance Review Findings Fiscal Year 2017-18



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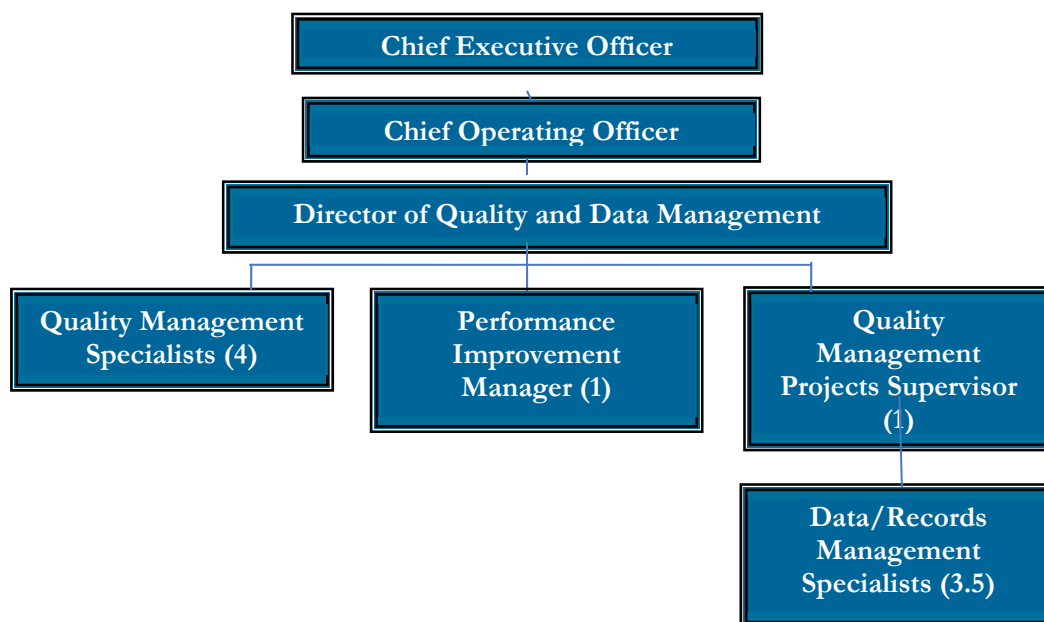
## **I. Introduction**

Communities Connected for Kids (CCKids), formerly known as Devereux Community Based Care of Okeechobee and the Treasure Coast, has been the Lead Child Welfare Agency in Circuit 19 since November 1, 2013. As of July 1, 2018, the agency has undergone an organizational name change and is now known as Communities Connected for Kids. This name change occurred as a result of a 5-year strategic plan which allowed the agency to become a community-led organization.

CCKids' Strategic Plan guides the organization's success, which includes guiding the Financial Viability Plan that allows for budgeting associated with cost projection and drivers that impact the organization. The three main areas of impact are the number of children entering out-of-home care, cost of children in care and children exiting care. The following action items were put in place to assist leadership in the continual development of future staffing, budgeting and attainment of performance improvement goals for fiscal years 2017-18 and 2018-19.

- ❖ Evaluate current removal trends in partnership with the Southeast Region Child Protective Investigators
- ❖ Reduce the number of new shelters that occur as a result of abandonment of children receiving services from the Agency for Persons with Disabilities (APD), Department of Juvenile Justice (DJJ) or mental health services
- ❖ Incentive plan for contracted recruitment agencies/foster homes for placement of children stepping down from higher levels of care or for sibling groups of three or more
- ❖ Increase number of new and retained foster families
- ❖ Forever Families marketing initiative for children permanently committed without an identified adoptive family
- ❖ Review relative placement disruption trends for root causes and design supports to address

All Viability Plan action steps are tied to evidence-based or best practice, planned activities, performance targets and timeframes. Organizational capacity is constantly being assessed to ensure adequate resources are allotted to meet strategic goals. For example, after close assessment of organizational needs by leadership and the Board of Directors, the Quality Management department benefited from the addition of a Performance Improvement Manager and a Quality Management Projects Supervisor.



The Quality and Data Management Department structure consists of three components: Quality Management, Performance Improvement and Data Management. The Department is managed and staff guided by the Director of Quality Management. The Quality Management team consists of four (4) Quality Management Specialists, one (1) Performance Improvement Manager and one (1) Quality Management Projects Supervisor. The Quality Management team is responsible for scheduling, completing and evaluating all quality assurance and improvement activities. These activities include case file reviews, incident reporting, tracking and follow-up, complaint and grievance tracking, customer satisfaction surveys, missing children, human trafficking, interstate compact on the placement of children, out-of-county services, exit interview compliance, foster care referrals for group care and sub-contract monitoring. There are three fulltime and one part-time (3.5) Data Management Specialists that are overseen by the Quality Management Projects Supervisor. The Data Management Specialists' role is to help support the system of care by obtaining and scanning case documentation into FSFN, assisting with file audits, performing multi-system searches to locate information requested by staff, creating non-licensed placements in FSFN, processing Out-of-County Services requests, and assisting with Interstate Compact on the Placement of Children, record requests and fingerprinting.

CCKids utilizes several resources to support Quality Assurance and Continuous Quality Improvement. These resources assist the department in gathering information to inform and change practice both qualitatively and quantitatively. The Quality Assurance and Quality Improvement process involves additional monitoring of activities to measure local performance, including those listed below:

Daily/Weekly

- ❖ Incident Reports
- ❖ Exit Interviews
- ❖ Missing Child Reports

- ❖ Management Reports
- ❖ Management Meetings

Monthly

- ❖ Contract Performance Measures
- ❖ Scorecard Performance
- ❖ Performance Measures Meetings
- ❖ Quality Assurance Subcommittee/Board Meetings
- ❖ Continuous Quality Improvement (CQI) Meetings
- ❖ Permanency Round Table

Quarterly

- ❖ Florida Continuous Quality Improvement Reviews (FLCQI)
- ❖ Child and Family Service Reviews (CFSR)
- ❖ Rapid Safety Feedback Quality Assurance Reviews (RSF)
- ❖ Circuit 19 System of Care Meetings

Annually

- ❖ Annual Provider Monitoring
- ❖ Other Case File Reviews (e.g. TANF)
- ❖ Action 4 Child Protection Training to strengthen casework practice

Contract Performance Measures Metric(s) and Statewide Benchmark Targets:

Performance Measures		Jul-Sept 17	Oct-Dec 17	Jan-Mar 18	Apr-Jun 18	Target
SAFETY	Rate of Abuse per Day in Out-of-Home Care	12.66	10.68	9.52	7.11	8.50
	No Abuse during In-Home Services	95.75%	95.63%	96.32%	98.43%	95.00%
	No Verified Maltreatment within 6 Months of Case Closure	98.15%	96.00%	96.10%	96.30%	95.00%
	Kids Seen Every 30 Days	99.96%	99.98%	99.91%	99.92%	99.50%
WELL-BEING	Educational Status at Age 18	83.78%	80.00%	88.46%	83.33%	80.00%
	Kids Receiving Medical Care Within Last 12 Months	97.69%	97.32%	96.55%	97.59%	95.00%
	Kids (3+) Receiving Dental Care Within Last 7 Months	94.57%	96.01%	92.55%	94.21%	95.00%
PERMANENCY	Placement Moves per 1000 Days in OOHC	3.84	3.72	3.41	3.33	4.12
	Kids Exiting OOHC to a Permanent Home w/in 12 Months of Removal	53.38%	37.96%	44.44%	45.31%	40.50%
	Kids in OOHC 12-23 Months who Exit to a Permanent Home	61.40%	73.43%	71.43%	60.87%	43.60%
	Kids Who do Not Re-enter OOHC within 12 Months of Exit	96.88%	88.37%	72.92%	86.21%	91.70%
	Sibling Groups Placed Together in OOHC	74.03%	72.22%	76.88%	78.57%	65.00%

\*OOHC = Out-of-Home Care

FL CQI Child and Family Services Reviews Metric(s) and National Benchmark Targets:

		CFSR Base	Q1 n=15	Q2 n=6	Rating Change between Q1 and Q2		Q2 n=6	Q3 n=8	Rating Change between Q2 and Q3		Q3 n=8	Q4 n=11	Rating Change between Q3 and Q4	
Safety Outcome 1	Children are, first and foremost, protected from abuse and neglect.		100.00%	100.00%	→	-	100.00%	80.00%	↓	-20.00%	80.00%	100.00%	↑	20.00%
Item 1	Timeliness of Initiating Investigations of Reports of Child Maltreatment	91.50%	100.00%	100.00%	→	-	100.00%	80.00%	↓	-20.00%	80.00%	100.00%	↑	20.00%
Safety Outcome 2	Children are safely maintained in their homes whenever possible and appropriate.		46.67%	83.33%	↑	36.66%	83.33%	62.50%	↓	-20.83%	62.50%	72.73%	↑	10.23%
Item 2	Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care	76.50%	90.91%	80.00%	↓	-10.91%	80.00%	100.00%	↑	20.00%	100.00%	100.00%	→	-
Item 3	Risk and Safety Assessment and Management	71.30%	46.67%	83.33%	↑	36.66%	83.33%	62.60%	↓	-20.73%	62.50%	72.73%	↑	10.23%
Permanency Outcome 1	Children have permanency and stability in their living situations.		55.56%	75.00%	↑	19.44%	75.00%	66.67%	↓	-8.33%	33.33%	66.67%	↑	33.34%
Item 4	Stability of Foster Care Placement	81.80%	66.67%	100.00%	↑	33.33%	100.00%	83.33%	↓	-16.67%	83.33%	83.33%	→	-
Item 5	Permanency Goal for Child	74.50%	88.89%	75.00%	↓	-13.89%	75.00%	40.00%	↓	-35.00%	40.00%	83.33%	↑	43.33%
Item 6	Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	67.30%	77.78%	100.00%	↑	22.22%	100.00%	83.33%	↓	-16.67%	83.33%	83.33%	→	-
Permanency Outcome 2	The continuity of family relationships and connections is preserved for children.	85.00%	44.44%	75.00%	↑	30.56%	75.00%	50.00%	↓	-25.00%	50.00%	66.67%	↑	16.67%
Item 7	Placement With Siblings	85.00%	71.43%	100.00%	↑	28.57%	100.00%	33.33%	↓	-66.67%	33.33%	66.67%	↑	33.34%
Item 8	Visiting With Parents and Siblings in Foster Care	69.00%	50.00%	100.00%	↑	50.00%	100.00%	25.00%	↓	-75.00%	25.00%	50.00%	↑	25.00%
Item 9	Preserving Connections	85.00%	100.00%	75.00%	↓	-25.00%	75.00%	100.00%	↑	25.00%	100.00%	83.33%	↓	-16.67%
Item 10	Relative Placement	72.00%	77.78%	75.00%	↓	-2.78%	75.00%	100.00%	↑	25.00%	100.00%	83.33%	↓	-16.67%
Item 11	Relationship of Child in Care With Parents	60.00%	50.00%	75.00%	↑	25.00%	75.00%	33.33%	↓	-41.67%	33.33%	50.00%	↑	16.67%
Well-Being Outcome 1	Families have enhanced capacity to provide for their children's needs.		73.33%	66.67%	↓	-6.66%	66.67%	50.00%	↓	-16.67%	50.00%	72.73%	↑	22.73%
Item 12	Needs and Services of Child, Parents, and Foster Parents	51.30%	100.00%	83.33%	↓	-16.67%	83.33%	62.50%	↓	-20.83%	62.50%	81.82%	↑	19.32%
Item 12A	Needs Assessment and Services to Children	88.00%	100.00%	100.00%	→	0.00%	100.00%	87.50%	↓	-12.50%	87.50%	81.82%	↓	-5.68%
Item 12B	Needs Assessment and Services to Parents	55.00%	100.00%	83.33%	↓	-16.67%	83.33%	62.50%	↓	-20.83%	62.50%	100.00%	↑	37.50%
Item 12C	Needs Assessment and Services to Foster Parents	80.00%	100.00%	100.00%	→	-	100.00%	100.00%	→	-	100.00%	100.00%	→	-
Item 13	Child and Family Involvement in Case Planning	63.30%	78.57%	66.67%	↓	-11.90%	66.67%	50.00%	↓	-16.67%	50.00%	81.82%	↑	31.82%
Item 14	Caseworker Visits With Child	72.50%	53.33%	66.67%	↑	13.34%	66.67%	12.50%	↓	-54.17%	12.50%	54.55%	↑	42.05%
Item 15	Caseworker Visits With Parents	43.50%	57.14%	66.67%	↑	9.53%	66.67%	50.00%	↓	-16.67%	50.00%	55.56%	↑	5.56%
Well-Being Outcome 2	Children receive appropriate services to meet their educational needs.		83.33%	100.00%	↑	16.67%	100.00%	83.33%	↓	-16.67%	83.33%	57.14%	↓	-26.19%
Item 16	Educational Needs of the Child	92.00%	83.33%	100.00%	↑	16.67%	100.00%	83.33%	↓	-16.67%	83.33%	57.14%	↓	-26.19%
Well-Being Outcome 3	Children receive adequate services to meet their physical and mental health needs.		41.67%	80.00%	↑	38.33%	80.00%	66.67%	↓	-13.33%	42.86%	66.67%	↑	23.81%
Item 17	Physical Health of the Child	85.00%	40.00%	0.00%	↓	-40.00%	0.00%	57.14%	↑	57.14%	57.14%	75.00%	↑	17.86%
Item 18	Mental/Behavioral Health of the Child	72.00%	77.78%	33.33%	↓	-44.45%	33.33%	60.00%	↑	26.67%	60.00%	87.50%	↑	27.50%

## **II. Performance Improvement**

Communities Connected for Kids utilizes several systemic processes to review practice trends and performance and employ performance improvement strategies for outcomes and measures that are routinely reviewed.

### **Quality Assurance Case Reviews**

During FY 2017-18, the three (3) types of Quality Assurance reviews completed were Rapid Safety Feedback (RSF), Florida CQI (FL CQI) and Children and Families Services Review (CFSR). All three (3) forms of case reviews provide an understanding of what is behind the safety, permanency and well-being numbers in terms of day-to-day practice in the field and how that practice is affecting child and family functioning and outcomes. RSF reviews target the highest-risk population of children in the child welfare system. This review allows us to target age-specific populations to identify key risk factors impacting the safety of children receiving in-home services. During this review period, forty (40) cases were reviewed using the RSF tool. In addition to RSF case reviews, forty (40) FL CQI reviews were completed using the Children's Bureau Child and Family Services Reviews Onsite Review Instrument; two (2) of those reviews were in-depth reviews which included case participant interviews. Seven (7) additional cases were reviewed side-by-side with a co-reviewer from the Department of Children and Families (DCF) as part of the CFSR Performance Improvement Plan. Consultations with the case managers and case management supervisors were held on 100% of the cases reviewed. Coaching through case consultation is a key component of this process, and is intended to improve case managers' and supervisors' critical thinking skills related to risk assessment.

#### **a. Rapid Safety Feedback**

The charts below illustrate the overall percentage ratings for the forty (40) RSF case file reviews completed during each of the past two fiscal years (2016-17 and 2017-18). The statewide comparison is also included for FY 2016-17.

*The target population was children 0-4 years of age receiving in-home services with maltreatments of Household Violence Threatens Child, Intimate Partner Violence Threatens Child, Substance Misuse (Alcohol, Illicit Drugs & Prescription Drugs).*

### 1.1 Is the most recent family assessment sufficient?



### 1.2 Is the most recent family assessment completed timely?

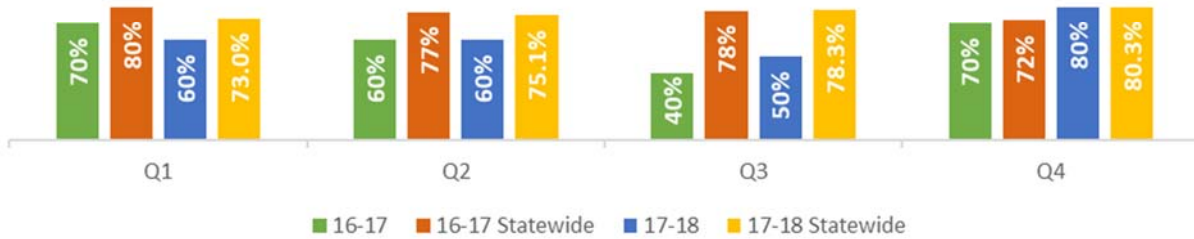


### 2.1 Is the quality of visits between the case manager and the child(ren) sufficient to address issues pertaining to safety and evaluate progress toward case plan outcomes?

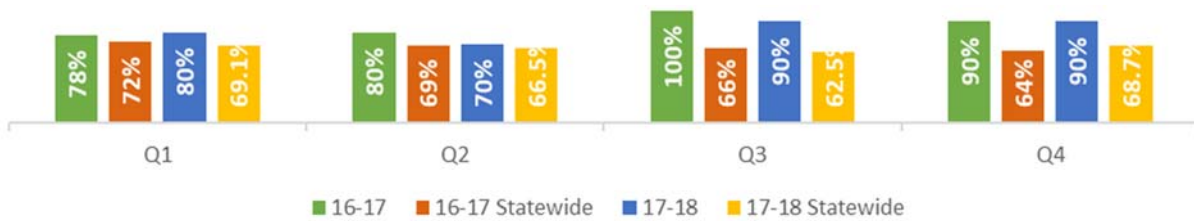




2.2 Is the frequency of visits between the case manager and the child(ren) sufficient to ensure child safety and evaluate progress toward case plan outcomes?



2.3 Is the quality of visits between the case manager and the child's mother sufficient to address issues pertaining to safety and evaluate progress toward case plan outcomes?



2.4 Is the frequency of the visits between the case manager and the child's mother sufficient to ensure child safety and evaluate progress toward case plan outcomes?



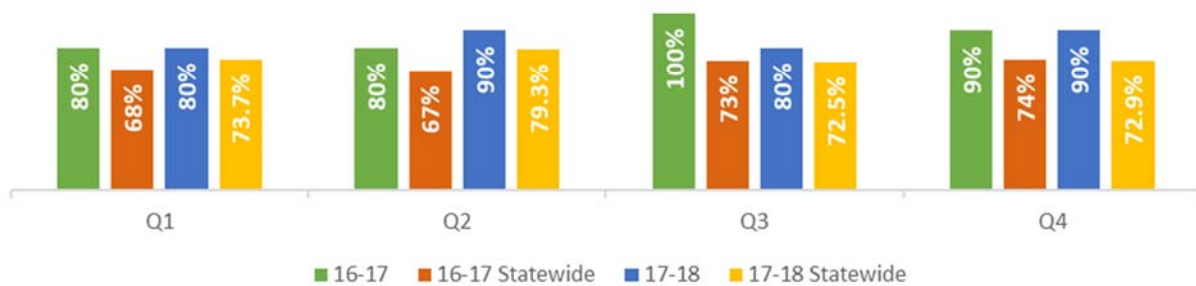
2.5 Is the quality of the visits between the case manager and the child's father sufficient to address issues pertaining to safety and evaluate progress toward case plan outcomes?



2.6 Is the frequency of the visits between the case manager and the child's father sufficient to ensure child safety and evaluate progress toward case plan outcomes?



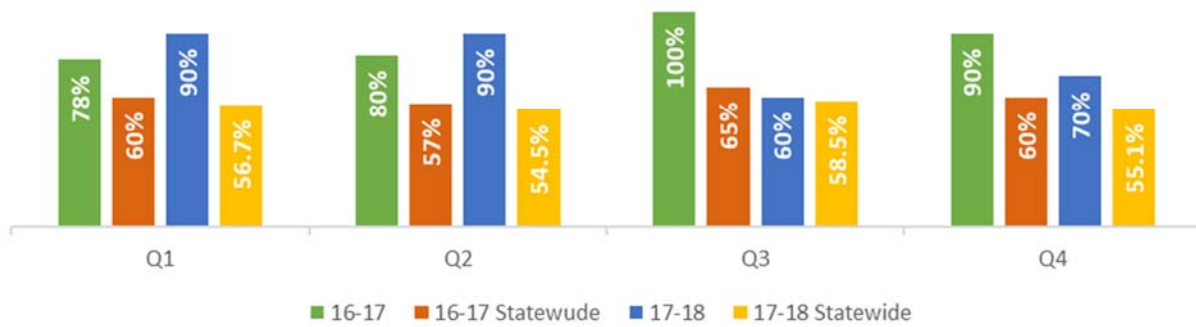
3.1 Are background checks and home assessments completed when needed?



### 3.2 Is the information assessed and used to address potential danger threats?



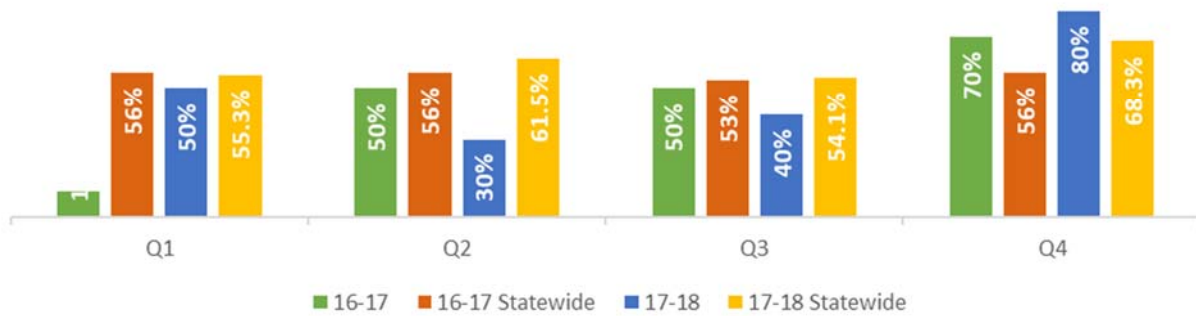
### 4.1 Is the safety plan sufficient?



### 4.2 Is the safety plan actively monitored to ensure that it is working effectively to protect the child(ren) from identified danger threats?



### 5.1 Is the supervisor regularly consulting with the case manager?



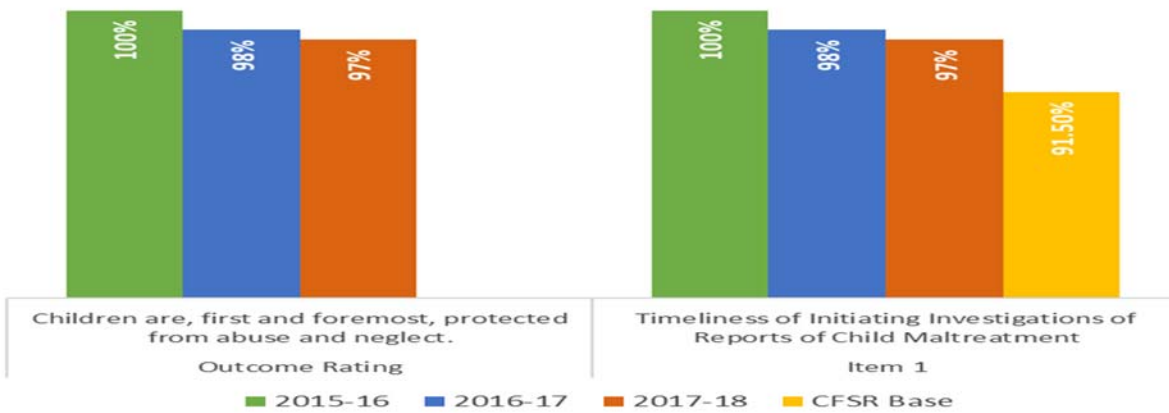
### 5.2 Is the supervisor ensuring recommended actions are followed up on?



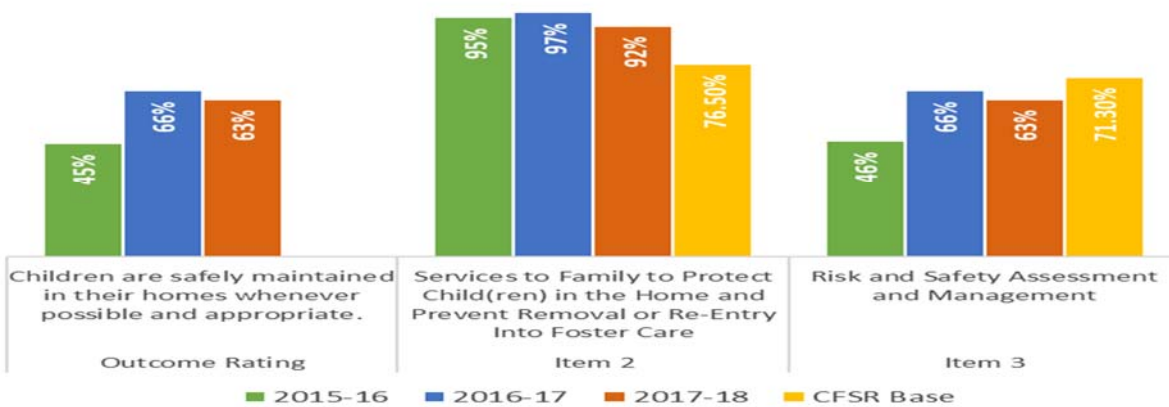
#### b. Florida CQI Reviews

During FY 2017-18, CCKids' Quality Management department staff were required to complete FL CQI reviews using the Children's Bureau Child and Family Services Review tool on forty (40) cases. The charts below include all forty (40) cases for FY 2017-18 plus a comparison of the two previous fiscal years. The Charts reflect the rating outcomes for both in-home and out-of-home (foster care) cases. The performance ratings include areas of strength, areas needing improvement and areas not applicable. The outcome ratings include substantially achieved, partially achieved, not achieved and not applicable.

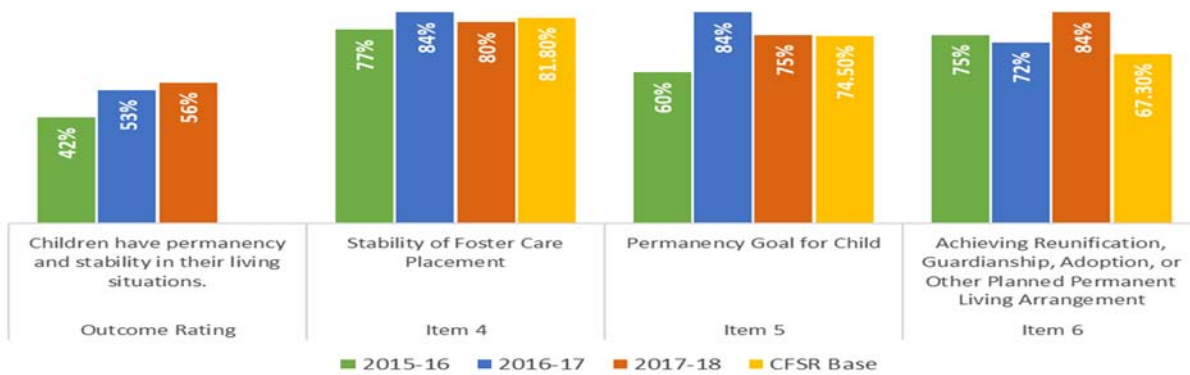
### Safety Outcome 1



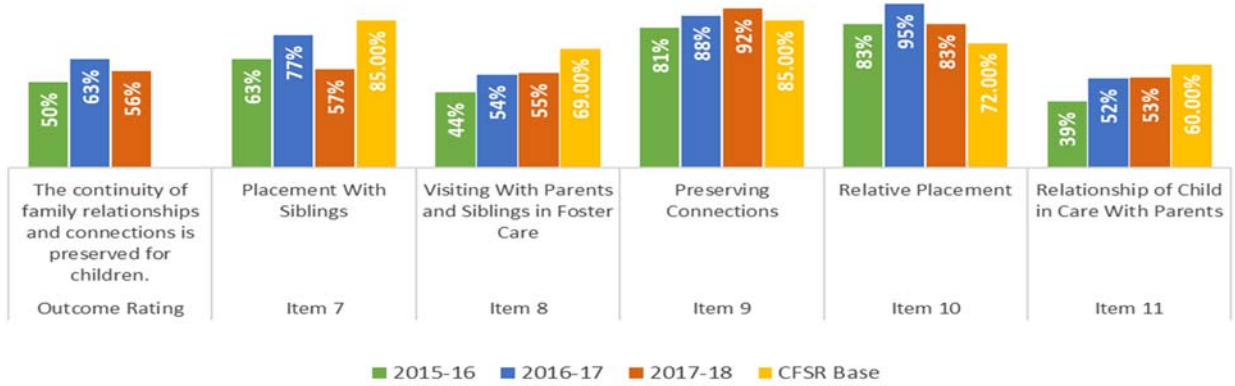
### Safety Outcome 2



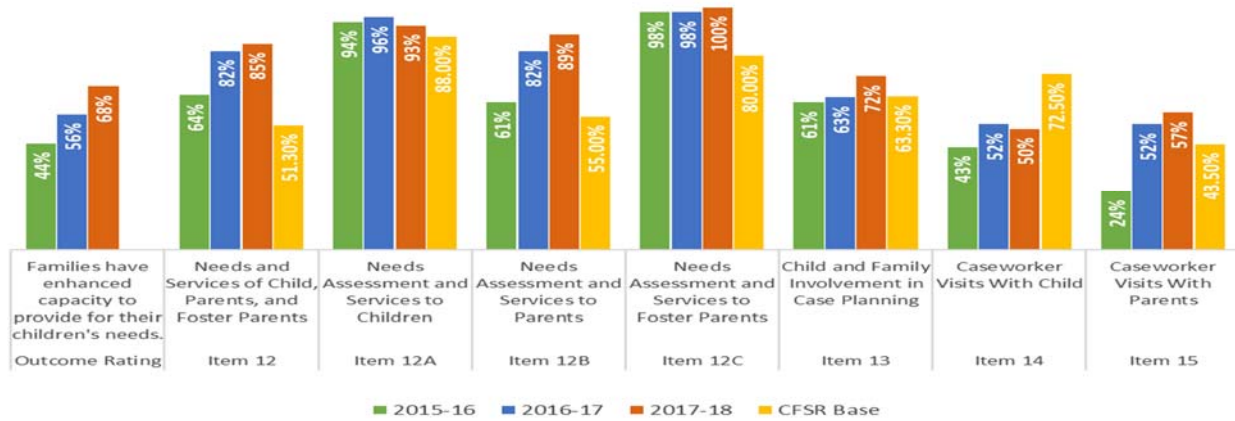
### Permanency Outcome 1



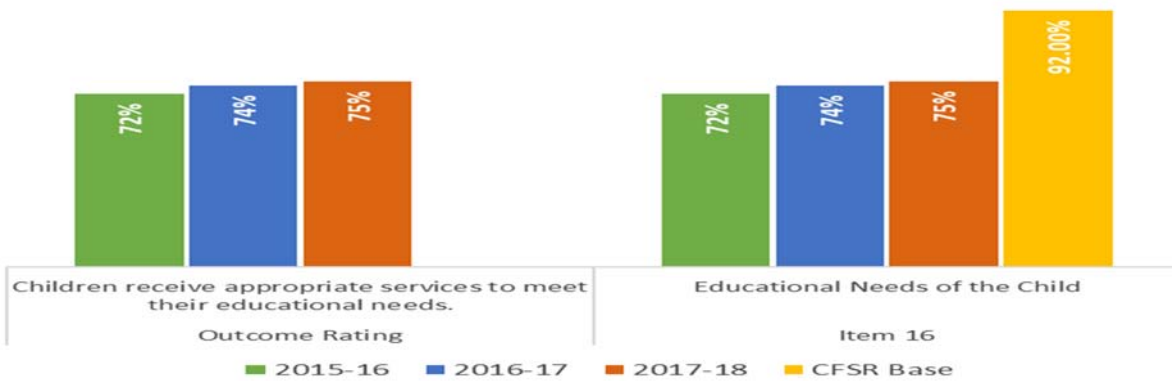
### Permanency Outcome 2



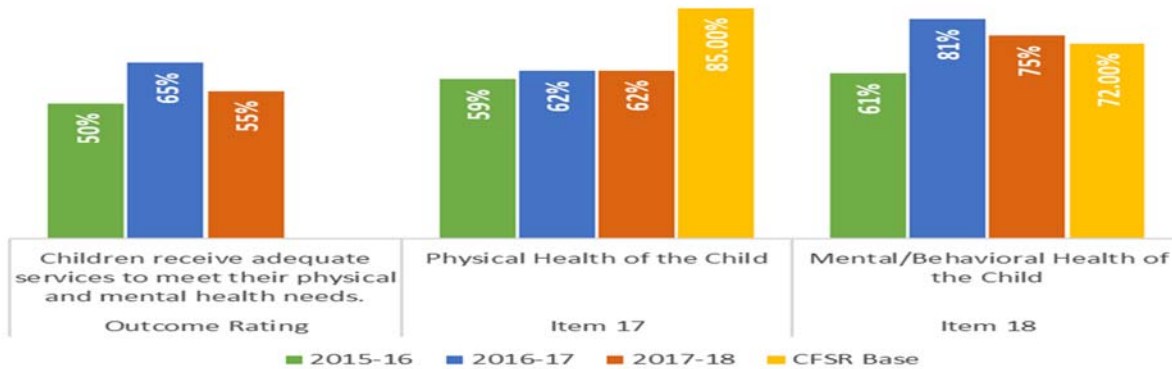
### Well-Being Outcome 1



### Well-Being Outcome 2



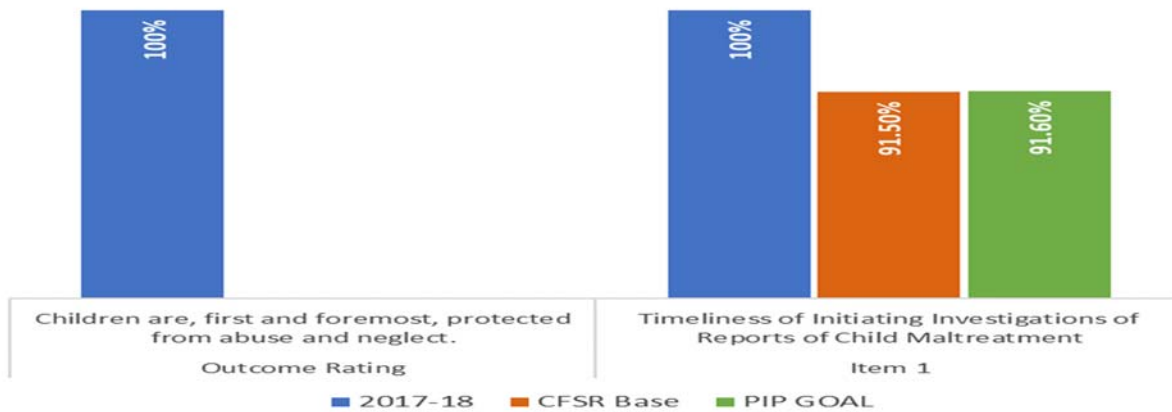
### Well-Being Outcome 3



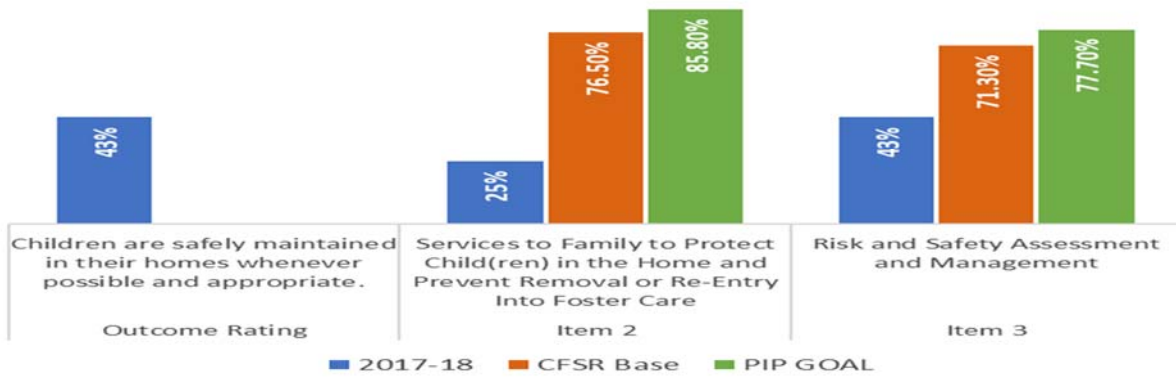
### c. CFSR PIP Reviews

During FY 2017-18, CCKids’ Quality Management department staff were required to complete CFSR Reviews using the Children’s Bureau Child and Family Services Review tool on seven (7) cases. The seven (7) cases were reviewed side-by-side with a co-reviewer from the Department of Children and Families (DCF) as part of the CFSR Performance Improvement Plan. The charts below include all seven (7) cases for FY 2017-18. The Charts reflect the rating outcomes for both in-home and out-of-home (foster care) cases. The performance ratings include areas of strength, areas needing improvement and areas not applicable. The outcome ratings include substantially achieved, partially achieved, not achieved and not applicable.

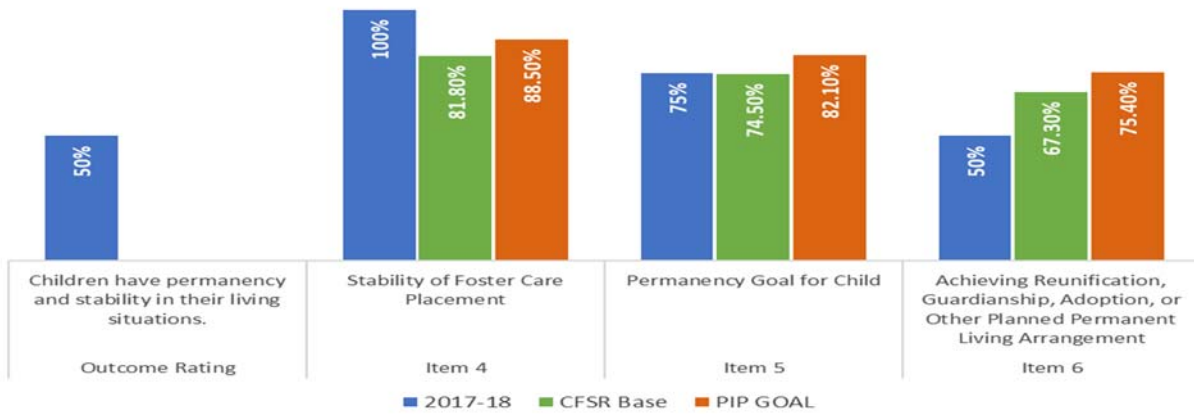
### Safety Outcome 1



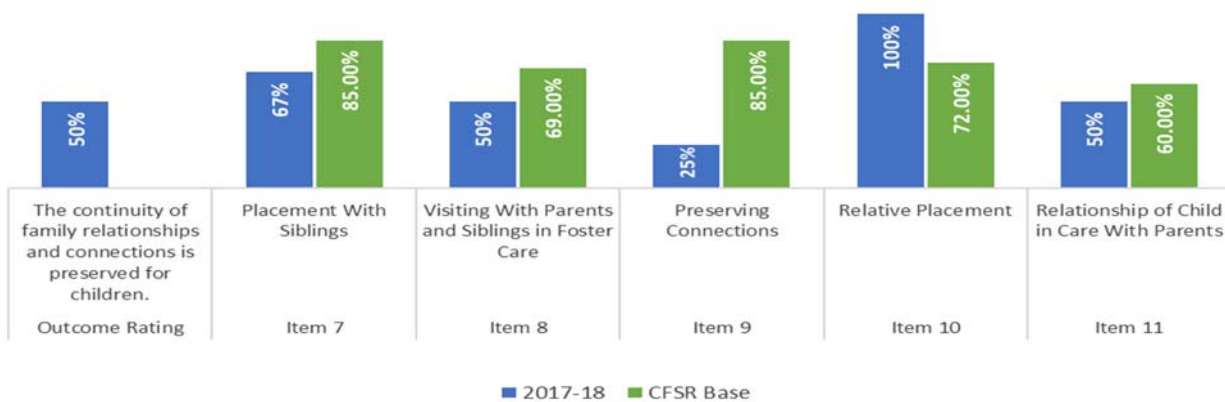
### Safety Outcome 2



### Permanency Outcome 1

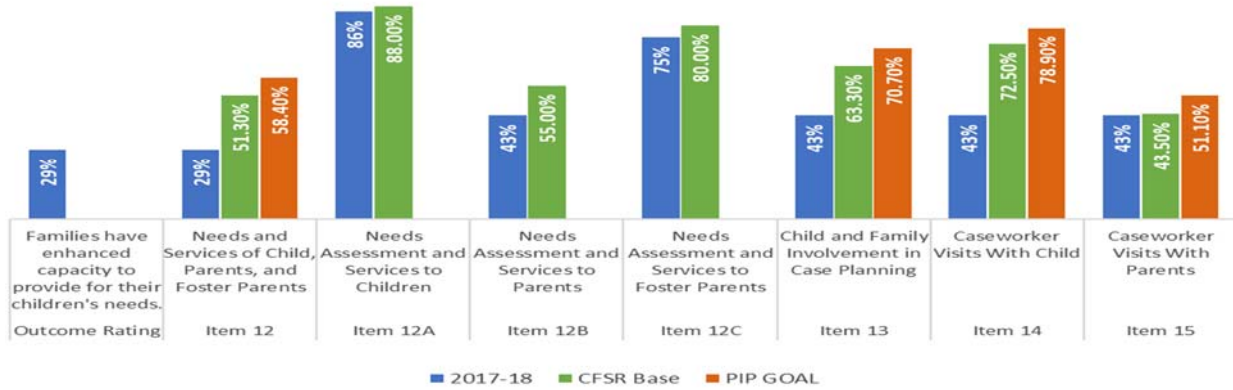


### Permanency Outcome 2

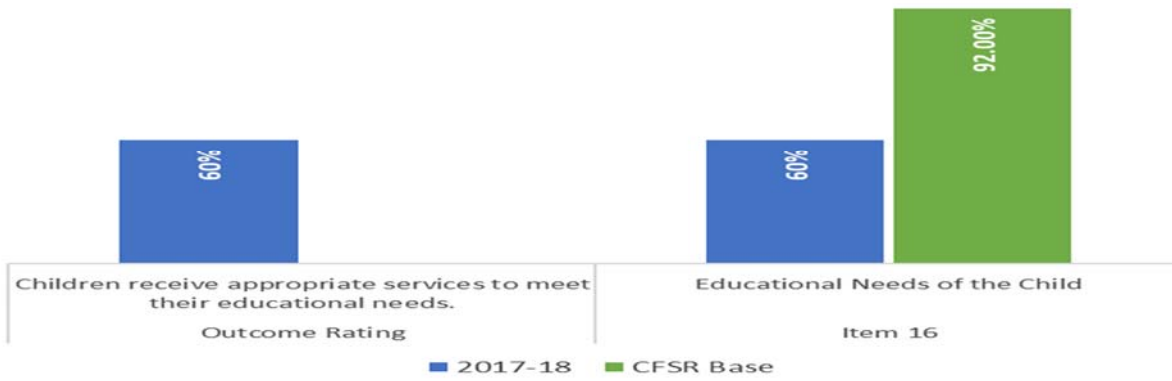




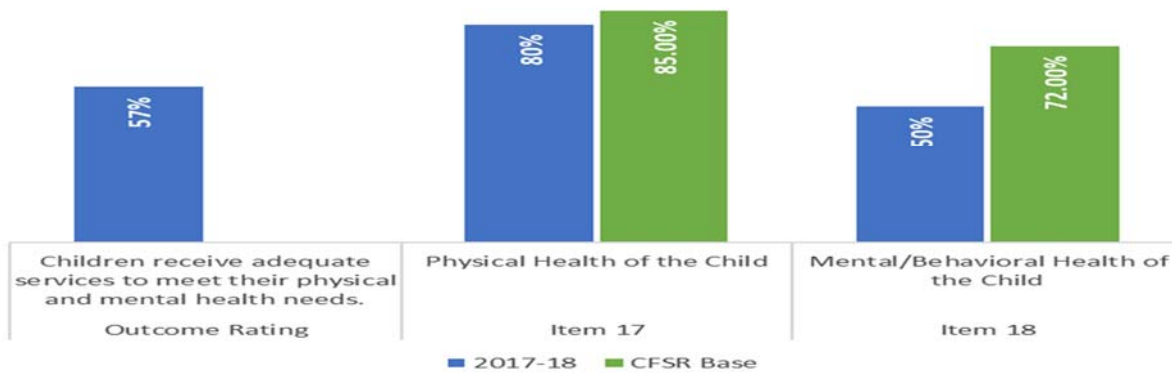
### Well-Being Outcome 1



### Well-Being Outcome 2



### Well-Being Outcome 3



#### **d. Local Practice Trends in Response to RSF and Florida CQI Data:**

##### **a) Safety Analysis and Trending**

CFSR Safety Outcome 1 evaluates children being, first and foremost, protected from abuse and neglect. The items reviewed measure timeliness of investigations or reports of maltreatment.

Data in this area shows 97% compliance as to timeliness of investigation in the cases that were applicable to this item.

CFSR Safety Outcome 2 evaluates whether children are being safely maintained in their homes whenever possible and appropriate. The items reviewed measure services to the family to protect child(ren) in their homes and prevent removal or re-entry into foster care as well as risk and safety assessment and management.

One area of strength identified is CCKids' provision of services to the family to protect child (ren) in the home and prevent removal or re-entry into foster care. Despite a 5% decrease from the previous fiscal year data, the FL CQI reviews show a 92% strength rating in this area. This strength is further illustrated by CCKids having exceeded the established target for the contract performance measure Abuse or Neglect during In-Home Services for the entire fiscal year.

While the area of sufficiency of family assessments remains an area needing improvement, there has been some progress over the past two fiscal years. FY 2017-18 had an outcome range of 60% - 70% which is a slight decrease from FY 2016-17 data that had a range of 60% - 80%. However, the past two (2) fiscal years show substantial improvement over FY 2015-16's range of 20% - 70%. This data supports CCKids' progress toward increased proficiency in the use of the Practice Model as well as positive changes occurring due to ongoing case consultations following case reviews.

Sufficiency of the safety plan is seen as an area needing improvement in both the RSF and FL CQI reviews. It should be noted that this item was rated at 90% compliance in the first two (2) quarters of the fiscal year using the RSF tool; however, in quarter three (3) the data shows a decrease to 60% followed by an improvement to 70% in the fourth quarter. The FL CQI reviews showed a slight decrease of 3% from FY 2016-17 to FY 2017-18; however, the performance rating overall showed gains of 17% from FY 2015-16.

##### **b) Permanency Analysis and Trending**

CFSR Permanency Outcome 1 evaluates children having permanency and stability in their living situation. The items reviewed measure stability in foster care placement, permanency goal for child and achieving reunification, guardianship, adoption or other planned permanent living arrangement.

Data in this area shows an overall outcome rating of Partially Achieved in 56% of cases reviewed for the year, and demonstrates an upward trend over the past three (3) fiscal years. Data indicates that 80% of cases reviewed showed children are stable in their foster care placements and that 75%

of permanency goals for the child were established in a timely manner. Though there is a 9% decrease in permanency goals being established timely from the previous fiscal year, this data still shows a 15% increase from the 2015-2016 fiscal year when the FL CQI reviews were implemented. Concerted efforts were made to achieve case plan goals in 84% of the cases reviewed, which is a 12% increase from the previous fiscal year.

The organization's adoption goal was one-hundred thirty-five (135) and the organization exceeded the adoption goal by fifty-one (51) children for a total of one-hundred and eighty-six (186) adoptions, which is a reflection of concerted efforts made to achieve permanency goals.

CFSR Permanency Outcome 2 evaluates whether continuity of family relationships and connections is preserved for children. The items reviewed measure placement with siblings, visiting with parents and siblings in foster care, preserving connections, relative placement and relationship of child in care with parents.

A positive trend in this area is preserving connections to ensure that concerted efforts were made to maintain the child(ren) in their neighborhood, community, faith, extended family, Tribe, school and friends. This area has shown a continuous upward trend over the last three (3) fiscal years from 81% – 92%. Additionally, data shows that children are being placed with relatives in 83% of the applicable cases. Though this is a decrease of 12% from the prior fiscal year, this is still seen as a strength in case practice.

Areas needing improvement in this area include whether children are placed with their siblings. Though this was seen as a strength and positive trend last fiscal year, there was a decrease of 20% during this fiscal year; however, it should be noted that CCKids exceeded the established CBC Scorecard target of 65% for sibling groups placed together in out-of-home care in all four (4) quarters of the fiscal year. Data shows that 55% of children are visiting with parents and siblings in foster care; though this remains an area needing improvement, it shows a slight upward trend over the past three (3) fiscal years. Additionally, data indicates an ongoing area needing improvement in 53% of cases reviewed regarding the relationship of children in care with their parents.

### **c) Well-Being Analysis and Trending**

CFSR Well-Being Outcome 1 evaluates whether families have enhanced capacity to provide for their children's needs. The items reviewed measure needs and services of the child, parents, and foster parents, needs assessment and services to children, parents and foster parents, child and family involvement in case planning, and case worker visits with children and parents.

Data in this area shows an overall strength in 68% of cases reviewed. Assessing needs and services continues an upward trend over the past three (3) fiscal years, with strength ratings in 85% of cases reviewed. Reviews indicate that concerted efforts were made to assess the needs of children and foster parents and provide them with the services they need to successfully achieve case goals and address issues related to agency involvement. 93% of cases showed that children were assessed and provided the appropriate services, and 100% of cases showed that foster parents were assessed and provided with appropriate services. Data shows that in 89% of the cases reviewed, parents

were assessed and provided with the appropriate services they needed to achieve case plan goals and address the issues relevant to agency involvement, which continues to be an upward trend over the past three (3) fiscal years.

Child and family involvement in case planning was seen as a strength in 72% of cases reviewed, which is a 9% increase from the prior fiscal year. This data can also be tied to visits with the child and parents. Case progress is something that is evaluated during case worker visits with both the child and family. It is during these contacts that case management should be discussing any changes to case planning based on the progress being made. Though there is still room for improvement in caseworker visits with child(ren) and parents, the data regarding case planning is showing improvement.

The frequency and quality of case manager contacts with both children and parents continues to be an area in need of significant improvement. These two (2) items were assessed in both the RSF and FL CQI reviews during each quarter of the fiscal year. RSF data shows that neither quality nor frequency of visits with the child exceeded 80% in any of the quarters. The FL CQI reviews indicated that frequency of visits with the child is an area needing improvement in 50% of cases reviewed.

With regard to visits with the parents, the data from RSF was inconsistent throughout the year but shows an overall upward trend over the past three (3) fiscal years. In the FL CQI reviews, data shows visits with parents is an area needing improvement in 57% of cases reviewed.

CFSR Well-Being Outcome 2 evaluates whether children are receiving appropriate services to meet their educational needs. The items reviewed measure the educational needs of the child(ren).

Data in this area shows a strength in 75% of cases reviewed. Additionally, Performance Measures show CCKids exceeding the target for Educational Status at Age 18 for all four quarters of the fiscal year.

CFSR Well-Being Outcome 3 evaluates whether children are receiving adequate services to meet their physical and mental health needs. The items reviewed measure physical health and mental/behavioral health of the child (ren).

Data in this area shows that providing services for the physical and mental health needs of the child was a strength in 55% of the cases reviewed, compared to 50% and 65%, respectively, in the same area during the previous fiscal years. This measure should see an upward trend as additional resources were sought out to ensure that children receive timely dental exams and follow up.

Mental health needs of the child remains an area of strength in 75% of cases reviewed. Though this is a 6% decrease from the prior fiscal year, children are receiving the appropriate assessments and services to address any identified needs they may have.

#### d) Case Consultations

Supervisory Consultation is an area that Communities Connected for Kids has spent a considerable amount of time working to improve. Data shows significant improvement efforts being made over the past three (3) fiscal years as this area has increased from 10% compliance in FY 2015-16 to 80% in FY 2017-18. Regardless of the upward trend in the data for the most recent fiscal year; however, we continue efforts to ensure ongoing improvement in this area. Reviews indicate improvement in the areas of qualitative discussion with case managers and documentation in the case file. Through case consultations, reviewers are able to reiterate the critical necessity of supervisory oversight and follow up and the importance of documenting supervisory consultation and/or review, which case consultations reveal actually occur much more often than is reflected in the case records. This appears to be an area in need of ongoing training and guidance in the Practice Model; during the 2017-18 fiscal year, CCKids contracted with Action 4 Child Protection to provide training in case consultations.

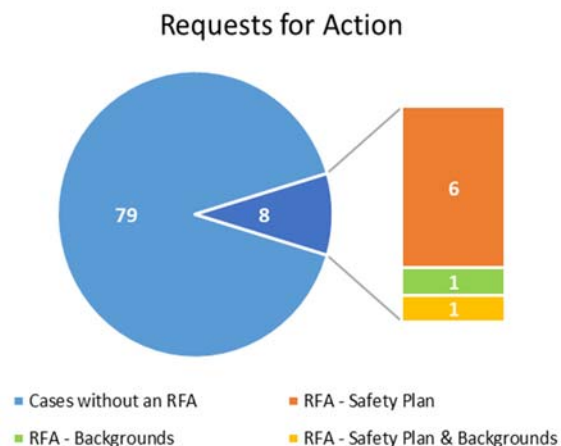
The Quality Management department explored additional options to ensure that case consultations are beneficial for supervisors and case managers. It was determined that continuing face-to-face consultations away from staffs' desks is a beneficial practice and ensures the reviewer has the full attention of the supervisor and case manager. Additionally, face-to-face contact has allowed for interactive discussion of the review and permits Quality Management staff to identify gaps that may result in areas needing improvement. During Continuous Quality Improvement meetings, strategies are being discussed to address any areas needing improvement.

#### e) Safe Case Closure

Safe case closure remains an area of strength for the agency. Communities Connected for Kids exceeded the target for No Verified Maltreatment within Six (6) Months of Case Closure in all four quarters of the fiscal year.

#### f) Requests for Action

Of the eighty seven (87) total reviews completed, there were eight (8) Requests for Action (RFA) sent to the case management agencies. Any immediate safety concern identified by the reviewer resulted in an RFA.



## **g) Systemic Processes Utilized for Reviewing Practice Trends and Performance**

Daily/Weekly Data Reports: CCKids has developed data packets and metric mail reports that are compiled from a variety of sources. These reports are designed to drive production, ensure accountability and provide constant, ongoing data information to all case management agencies within Circuit 19's system of care. Data reports and metric mail are shared with the agency management, staff and/or providers and are disseminated on a daily, weekly, monthly and quarterly basis. The Florida Safe Families Network (FSFN) is the primary data source used to develop these reports. Other data (obtained from hard copy file reviews) will be incorporated into the data packet on an as-needed basis. CCKids' goal is to make performance improvement a priority in our day-to-day operations and use them as a benchmark to gauge the success of our activities in meeting our contract measures and the service needs of our families.

Monthly Quality Assurance Subcommittee meetings: CCKids has a Quality Assurance subcommittee comprised of members of the Board of Directors and CCKIDS Quality Management staff. This subcommittee meets on a monthly basis to review data, performance, incidents reports, current and future improvement initiatives and any other areas of risk or concern. In addition to the summary of information discussed during QA Subcommittee meetings, the full Board of Directors also receives an extensive monthly data report containing information on performance indicators, caseload, turnover, service population and operations.

Monthly At-a-Glance Views of Performance: CCKids provides comprehensive data reports to stakeholders throughout the community. One of the more popular forms of delivery is the monthly At-a-Glance report, which is a snapshot of the agency's performance on significant indicators from one month to the next, color-coded to indicate improvement or decline, and including a calculation of the degree of movement in either direction.

Monthly Performance Measure/CQI Meetings: CCKids holds a monthly Performance Measures meeting to review progress on scorecard and contract indicators. Following the review of performance measures, the Quality Management department presents data and trending from the RSF, FL CQI and CFSR reviews as well as any other area within the system of care that needs to be addressed. The meeting is attended by CBC leadership, case management supervisors, and directors from all four (4) counties, and provides a forum for discussion, identification of challenges, and problem-solving. It also ensures frequent contact between the case management agencies and fosters a supportive environment and a feeling of helping each other succeed.

Quarterly Circuit 19 System of Care Meetings: Circuit 19 has a System of Care /Joint Performance Review meeting which is led by the CBC quality management department and includes participants from DCF, CCKids, Children's Legal Services (CLS) and community providers. This group meets on a quarterly basis to review performance data and circuit trends.

All of these components work collectively to drive service delivery, ensure compliance, communicate with management, the Board and interested stakeholders, and serve as teaching aids.

### **III. Findings**

RSF and FL CQI data continues to be gathered with root cause analysis in place for making improvements. Several areas of strengths have been identified through RSF and FL CQI reviews. The FL CQI reviews show a strength rating in CCKids provision of services to the family to protect children receiving in-home services for the last three (3) years despite a slight decrease in the 2017-18 fiscal year. This strength is further illustrated by CCKids having exceeded the established target for the contract performance measure regarding Abuse or Neglect during In-Home Services for the past two fiscal years (2016-2018).

RSF data shows that CCKids is seeing strong outcomes in background screening and home assessments being completed as appropriate. Data from the 2015-16 fiscal year shows that CCKids was doing very well in this area. There was a decline in performance during the 2016-17 fiscal year but data for FY 2017-18 again shows strong outcomes.

FL CQI data indicates that children continue to be stable in their foster care placements over the past three (3) fiscal years despite a 4% decrease between fiscal years 2016-17 and 2017-18.

Achieving permanency has shown a strong upward trend over the past three (3) years. A contributing factor to this area is due to CCKids continuing to exceed their adoption goals. In 2016-17 the goal was exceeded by fourteen (14) and in 2017-18 the goal was exceeded by fifty-one (51). Communities Connected for Kids Chief Executive Officer, Chief Operating Officer, County Directors and Case Management meet monthly, in all four counties, to review the youth placed in out-of-home care to review efforts for permanent placement. This is a reflection of concerted efforts made to achieve permanency goals.

Preserving connections the child had prior to coming into care continues to show as an area of strength over the past three (3) years and continues to trend upward. Over the past three (3) years, needs assessments for children, parents, and foster parents continues to strengthen. It should be noted that significant gains have been seen in the area of assessment of the parents.

CCKids has identified risk and safety management as a significant area needing improvement in FY 2017-18. Data from RSF reviews showed a significant downward trend between fiscal years 2015-16 and 2016-17. Though there was some improvement shown in the area of appropriate safety plans in FY 2017-18, this is still an area needing significant improvement. With regard to monitoring the safety plan, this area has seen a downward trend over the past three (3) years. FL CQI data supports the findings from the RSF reviews, though it shows an increase from fiscal years 2015-16 to 2016-17 and a decrease in FY 2017-18.

Despite CCKids exceeding the target on the performance measure of Sibling Groups Placed Together in OOHC, FL CQI data shows this as an area needing significant improvement. A 14% increase in strength ratings was seen between FY 2015-16 and 2016-17, but there was a 20% decrease in FY 2017-18.

There is a positive trend showing in the area of visits with the parents with an 11% increase in strength rating over the past three (3) fiscal years; however, this remains an area needing significant improvement.

The relationship of the child in care with their parents shows a 14% increase in strength rating over the past three fiscal years. Despite this improvement, this remains an area in need of significant improvement.

Data from both the RSF and FL CQI data shows that caseworker visits with children is still an area that continues to need improvement. Data from fiscal years 2015-16 and 2016-17 showed a 9% increase in rating but then fell 2% in FY 2017-18.

Despite CCKids exceeding the established CBC Scorecard target during the entire 2017-18 fiscal year for the performance measure regarding children receiving medical care within the last 12 months, FL CQI data shows that this continues to be an area in need of improvement. Data from the FL CQI reviews shows that CCKids had a 3% increase in ratings between fiscal years 2015-16 and 2016-17; however, there was no change between fiscal years 2016-17 and 2017-18.

CCKids will continue to address the analysis of findings in the FY 2018-19 Annual Quality Management/Performance and Quality Improvement Plan.

#### **IV. Gaps Between Findings and Benchmarks**

Community Connected for Kids created action steps and continues to document the monthly progress on the following findings based on the 2017-18 Contract Oversight Unit monitoring.

- Quality of contacts with children to address safety and evaluate progress toward case goals (RSF 2.1)
- Making concerted efforts to address risk and safety concerns for children (CQI Item 3)
- Quality of contacts with fathers to address safety and evaluate progress toward case goals (RSF Item 2.5)
- Ensuring the quality and frequency of visitation between children in out-of-home care and their parents is sufficient to maintain positive relationships (CQI Item 8)
- Establishing timely permanency goals and ensuring concerted efforts are made by the case managers to assist the family in achieving the goals (CQI Item 5 and 6)

CCKids spent a great deal of time during FY 2017-18 exploring why risk and safety management continue to be an area needing improvement. Through case consultations reviewers determined that the deficiencies lie in the area of monitoring the safety plan, which has not shown significant progress in outcomes in the rapid safety reviews. It has been determined that in many cases, case management is not following the specifics of the safety plan, such as contacting Safety Management Providers according to the timelines set forth in the plan or more frequently depending on the circumstances of the case. It was also noted through the reviews and case consultations that many case managers are in fact discussing the safety plan but not consistently documenting their discussions in the case record. Additionally, reviewers determined that safety plans may not be updated to reflect changes in



case activity when warranted. In order to address the area of concerted efforts being made to address risk and safety concerns for children (RSF item 4.0 and FL CQI Item 3), CCKids contracted with Action 4 Child Protection to complete safety planning trainings. Additionally, the CCKids training department conducts training on safety planning. To address the need for additional assessment of the case participants, CCKids' training department has been completing home visit assessment trainings to ensure that case workers know what they should be looking for during their contacts in the home.

CCKids continues to struggle with high numbers of children placed outside Circuit 19 or in group care, often due to a scarcity of available foster homes in the local area. This is also a contributing factor to the areas of siblings being placed together, visitation of children in care with their parents and relationship of child in care with parents. Reviewers believe that a contributing factor to this area needing improvement may be a lack of documentation in the case file showing the supportive efforts made to place children together. Reviewers believe that more specific documentation on sibling separation and permanency staffings could provide clearer explanation as to why children are not placed together and what efforts have been made to place them together. It would also be beneficial if these staffings document any additional efforts made to locate placement resources, discussions with the children and family about potential placement resources that may accept the sibling group and follow-up about those searches. With there being a lack of local foster homes or placements able to accommodate our larger sibling groups or large age span with sibling groups, children are placed out of circuit and in many cases separated from their siblings. When this occurs, it affects the family's ability to visit and maintain their relationship. FY 2016-17 saw the addition of a fourth contracted child-placing agency, with continuing efforts to increase the number of families licensed to provide family-based care for local children in their home communities. The Quality Management department participates in monthly meetings with our local child-placing agencies to address the issue of children in group care without active adoption recruitment plans, permanency options or relative/non-relative placement options. During these meetings, foster home recruitment efforts intended to successfully address the needs of these children are discussed. Child-placing agencies are required to conduct and report matching activities for upcoming newly-licensed homes, and for homes from which children are being discharged, leaving bed availability. The Targeted Recruitment Project identifies one child per child-placing agency each month for intensive recruitment to move from group care to a foster home. Additionally, the One School One Child Initiative recruits school board employees to become foster parents; the goal is for every school to have at least one employee as a foster parent. A financial incentive was included in the CPA contracts to remove any financial barrier to accepting siblings groups of three or more. These financial incentives are granted to both the CPA and the Foster Parent to fund activities and support services. Case managers are advised during case consultations and supervisory consultations that they need to document in FSFN all efforts made to ensure that visitations between the child and their parents and siblings occur per the case plan, as well as the frequency of visits.

Ongoing consultation and training continues with case management to address Case manager Visits and Quality of contacts with parents and children to address safety and evaluate progress toward case goals (RSF 2.1 - 2.6 & FL CQI item 15). Reviewers identified that visits with children were in fact appropriate, but that children were not always seen alone, which results in an automatic rating of area needing improvement in both the Rapid Safety and FL CQI reviews. Through case

consultations, reviewers discuss options for documenting appropriate interactions with children that may not be appropriate to speak with alone or are unwilling. Additionally, workers did not always see the children in the home according to the appropriate frequency required to ensure child safety; however, data from performance measures shows that Communities Connected for Kids is exceeding the target of children been seen at least every 30 days. Case managers are continually reminded through case consultations with reviewers as well as during supervisory consultations that they need to ensure that they see all children alone during the home visit and clearly document their conversations on safety and case planning. If the child is not able to be seen alone, the Case manager will clearly document the efforts made and why they were unsuccessful in their attempts. Interview training has been incorporated into the Pre-Service training curriculum. Reviewers were able to identify that face-to-face contact with parents was not consistent throughout the case reviews and that when face-to-face contact was not possible, there was a lack of documentation showing efforts to maintain communication at a minimum of monthly. When contact was documented in case notes, reviewers determined that contacts were lacking in in depth discussions of the child's and/or parent's needs, case plan goals and behavioral changes.

CCKids continues to struggle with the physical health of the child (FL CQI item 17). Reviewers determined through case consultations that children are seeing their physicians but due to difficulties obtaining records from certain provider offices, records are not always located in the case files. When records are retrieved there is a lack of follow-up or documentation of the follow-up found in the case file. Despite this being a low percentage, the CBC Scorecard performance measure Children Receiving Medical Care within the Last 12 months exceeded the target in all four (4) quarters of the fiscal year. Additionally, Children (3+) receiving Dental Care within the Last 7 Months exceeded the target in the first two (2) quarters of the fiscal year, falling just short of the target in the last two (2) quarters. Additionally, dental care has been identified as an area needing improvement through both FL CQI data and the CBC Scorecard performance measure Children (3+) Receiving Dental Care within the Last Seven (7) months which only met the benchmark target in one of four quarters in the 2017-18 fiscal year.

The following are evidence-based, best/promising, and/or emerging practices used by Communities Connected for Kids.

- ❖ Permanency Roundtables, as described below
- ❖ Quality Parenting Initiative
- ❖ Wraparound mental health services through the partnership with the managing entity.
- ❖ Collaboration between the Independent Living Program, Road to Success, and the clinical team to co-facilitate Regis Little staffings in order to ensure a multidisciplinary approach to young people with developmental disabilities so that they have the appropriate support and services in place as well as guardians appointed, if needed.
- ❖ Communities Connected for Kids continues to explore evidence-based strategies surrounding visitation between parents and their children in out of home placements that address bonding and attachment for implementation in the near future.
- ❖ Through our participation in the statewide evidence-based parenting initiative, we have mapped our local evidence-based parenting resources, and developed a uniform

reporting template to provide a greater level of detail on parental progress in the services.

- ❖ Rapid Response In-Home Family Services program uses the evidence-based family support model designed and provided by Father Flanagan's Boys Town of Florida.
- ❖ Contracting with Safety Management Providers offering evidence-based services such as parenting.
- ❖ Rapid Family Engagement - meeting within 5-7 business of shelter to immediately engage the parents and discuss conditions for return and begin case planning process.

## **V. Intervention Findings**

In response to the practice trends found in the RSF and FL CQI data, the following improvements were put into place during FY 2017-18:

CCKids contracted with Action 4 Child Protection during FY 2017-18 to provide trainings to strengthen the quality of casework. Action 4 Child Protection's monthly conference calls with staff included training in case consultations, safety planning and compliance with the Practice. The trainings held, along with the conference calls, helps to address areas needing improvement such as risk and safety management and home visits.

Revision and enhancements were made to the current Case Management Peer Review Tool that allow case management supervisors and staff to review case files utilizing elements from the RSF and FL CQI tools. By using a tool developed from the RSF and FL CQI tools, case managers can become more familiar with the specifics needed from them that will affect their overall case management and the RSF and FL CQI reviews.

With the restructuring of the CPA Contracts, CCKids has seen an increase in the percentage of utilization in bed usage. CCKids continues to work with the four (4) contracted child-placing agencies, with continuing efforts to increase the number of families licensed to provide family-based care for local children in their home communities. Foster home recruitment efforts are intended to successfully address the needs of the children. Child-placing agencies are required to conduct and report matching activities for upcoming newly licensed homes, and for homes from which children are being reunified, leaving bed availability.

A survey was conducted with foster parents to identify their needs and prioritize implementation of recommendations to modify Partnership in Parenting (PIP) curriculum to include extra training for families with teenaged placements. The CBC Director of Licensing and Caregiver and Adoption Support Supervisor meet monthly with the child-placing agencies (CPAs) to discuss improvements. Discussion includes needed resources, training, etc., to provide a stronger base for the stabilization of placements for foster parents. As a result of the survey responses, an educational presentation was created to present to all partners in the child welfare system. This presentation focuses on communication and the need to work as a unified team for the best interest of the children.

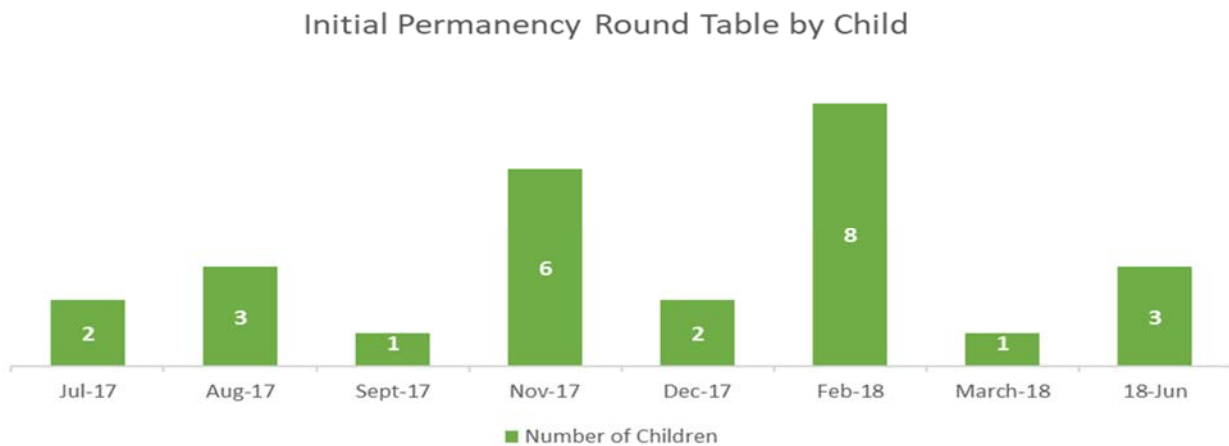
Permanency Roundtable (PRT): this initiative facilitates an intensive planning process to address the complex needs of children who have been in care for significant lengths of time and is expected to support reductions in our Average Length of Stay outcome measures. Communities

Connected for Kids completed thirteen (13) initial PRTs this fiscal year, which involved a total of twenty-six (26) children. Children chosen for PRT are those presenting with longer-than-average lengths of stay, DJJ or mental health involvement, and challenging barriers to permanency such as large sibling groups. There were a total of thirty-nine (39) follow-up staffings this fiscal year, which included follow-ups on initial PRTs completed prior to this year. Thirty-eight (38) children have reached permanency as a result of the PRT initiative to date. Communities Connected for Kids continues to conduct Youth Centered Round Tables with one (1) youth on a monthly basis.

Key achievements this year include:

- ❖ Adoption of a sibling group of three by a relative years after the initial PRT took place
- ❖ Permanent Guardianship of one youth to relatives
- ❖ Permanent Guardianship of one youth to a licensed foster parent
- ❖ Reunification of two sibling groups with their parents after a PRT took place
- ❖ Reunification of three sibling groups with their father after a PRT took place
- ❖ Adoption of a child that had two failed adoptions in the past

PRTs have been a great resource for getting all parties involved with a common goal and working as a team for the child/youth. It is expected, based upon outcomes to date, that the PRT initiative will continue to influence outcomes of other cases that have not yet been through a PRT process. Case managers, clinical staff, CLS and Guardians ad Litem (GALs) all have the option to refer cases for this project.



CCKids Quality and Contracts departments monitor the contracted service providers through a number of mechanisms. Contract managers collect and analyze provider data from FSFN and internal systems on a monthly basis. Any performance issues are discussed with the Director of Contracts and then the contract managers discuss with the provider the actions needed to improve performance. The contract manager provides any and all technical assistance necessary and documents these actions in the contract file. As CCKids evaluates and monitors programs and new information becomes available, the Quality Management department will work in conjunction with the providers and Contracts department to ensure improved outcomes.

The Quality Management department continues to strengthen the contract provider monitoring process by continual development of a real-time qualitative approach which more accurately reflects the quality and effectiveness of the services provided by contracted agencies and programs working with our children and families. There was a clear focus on the monitoring report writing this year in hopes to provide our circuit subcontractors with real-time information on their performance within our system of care.

CCKids understands the importance of obtaining and maintaining national accreditation as an additional quality assurance measure. Communities Connected for Kids achieved COA accreditation in November 2015.

**Russell Kline, MS**  
**Director Quality/Data Management**

**Date: 8/27/2018**