Irene M. Toto





Don Martin

Board Chair

Kids First of Florida Annual Performance & Quality Improvement Report FY 2017-2018

I. Introductory Section

Kids First of Florida (KFF) is the lead agency for foster care and adoption related services in Clay County Florida. KFF's capacity for performing QA and CQI tasks include one Quality Assurance Department that consists of two Quality Assurance Coordinators and one Quality Assurance Manager. The Quality Assurance Department utilizes standardized tools to complete a variety of reviews through-out the fiscal year (outlined below) that assess the qualitative and quantitative data to measure the Child and Family Services Review (CFSR) outcomes goals of safety, permanency and well-being.

In addition to the quality assurance data; KFF's strategic objectives are reviewed at monthly board meetings and performance improvement actions are implemented, if a deficiency is identified. The organization's strategic objectives are directly related to performance measures included in the organizations contract with the State of Florida. Strategic objectives are also related to the outcome measures identified in the CFSR. Both the contract performance measures and the CFSR outcome measures can have a direct impact on funding. As such, the organization monitors (monthly and quarterly) strategic objectives and implements action plans, when necessary to correct deficits. The CEO and Senior Managers have an open-door policy in which clients, staff and stakeholders can meet with them upon request. The CEO and Senior Management are also dedicated to providing quality services and actively participate in the quality improvement process. When a problem is identified, the CEO, senior management, staff and stakeholders, when applicable, work together to develop an action plan to resolve the problem.

II. Performance Improvement

KFF has an internal benchmark of 80% strength performance across the child outcome goals of safety, permanency and well-being. Typically; KFF will focus on training/coaching in the areas that drop below that standard as well as any areas with fluctuating data during the quarter and/or FY. It should also be noted that all organizational staff participate in the quality improvement process. Staff are oriented to the organization's performance and quality improvement process at new employee orientation and are encouraged to participate throughout the year.

The following tables and graphs provide an analysis and evaluation of performance trends over time across multiple service delivery and management factors specific to the outcome goals of safety, permanency and well-being.

A. Contract Compliance

A DCF Contract Oversight Unit Desk Review of KFF found that KFF was not meeting the performance measure regarding the percentage of children achieving permanency within 12 months. In response, KFF developed a corrective action plan (CAP) to increase the percentage of children exiting foster care to a permanent home within 12 months of entering care.

As part of the CAP, which was implemented in December 2017, KFF developed a workgroup that meets quarterly to identify case specific and systemic barriers to achieving permanency and more closely monitors children who are in out-of-home care to ensure that they achieve permanency as soon as possible.

B. Scorecard

The Community-Based Care Lead Agency Scorecard was developed in conjunction with the community-based care lead agencies across the state. The scorecard evaluates the lead agencies on 12 key measures to determine how well they are meeting the most critical needs of at-risk children and families.



Cumulatively for fiscal year 2017-2018, KFF met or exceeded 10 of the 12 performance measure standards.

Quarterry Performance. Fiscal real 2017-2016						
Scorecard Measure	FY 2018 Q1	FY 2018 Q2	FY 2018 Q3	FY 2018 Q4		
M01: Rate of abuse per 100,000 days In foster care	4.27	6.03	1.98	9.86		
M02: % of children who are not abused/neglect during in-home services	98.70	98.50	96.50	96.40		
M03: % of children who are not neglected or abused after receiving services	98.40	98.10	96.00	96.70		
M04: % of children under supervision who are seen every 30 days	99.50	99.80	99.80	99.80		
M05: % of children exiting to a permanent home wiin 12 months of entering care	19.50	16.20	15.60	12.00		
M06: % of children exiting to a permanent home w/in 12 months for those in care 12 to 23 months	61.70	69.80	67.00	62.60		
M07: % of children who do not re-enter care win 12 months of moving to permanent home	90.90	100.00	90.90	75.00		
M08: Placement moves per 1,000 days In foster care	2.00	2.34	3.73	3.82		
M09: % of children in foster care who received a medical service in last 12 months	98.80	99.20	98.50	92.90		
M10: % of children in foster care who received a dental service in last 7 months	98.20	89.80	90.40	86.50		
M11: % of young adults exiting foster care at age 18 completed/are enrolled in sec. ed., voc. ed, or adult ed.	100.00	100.00	100.00	87.50		
M12: % of sibling groups where all siblings are placed together	72.30	72.20	70.60	71.60		
	Standard or Better	Below Standard Red	Zone	Last Updated:7/10/2018		

Quarterly Performance: Fiscal Year 2017-2018

Performance remained steady throughout the fiscal year for seven measures (up from six in FY 16-17): the percentage of children who are not abused/neglected during in home services; percentage of children who are not neglected or abused after receiving services; percentage of children under supervision who are seen every 30 days; the percentage of children exiting to a permanent home within 12 months for those in care 12 to 23 months; placement moves per 1,000 days in foster care; the percentage of young adults exiting foster care at age 18 who completed/or are enrolled in secondary, vocational or adult education; and percent of sibling groups where all siblings are placed together, KFF exceeded that standard throughout the fiscal year.

The percent of children exiting foster care to a permanent home within 12 months of entering care measure was not met in any of the quarters during the fiscal year and a corrective action plan was developed, as described above. Performance regarding the percent of children who do not re-enter foster care within 12 months of moving to a permanent home and the percent of children in out-of-home care who have received dental services in the last 7 months, fluctuated during the fiscal year. The rate of abuse per 100,000 days in foster care and the percent of children in out-of-home care who received medical services in the last 12 months measures were exceeded in the first 3 quarters but were not met in the 4th quarter. Root causes of fluctuating/declining performance were/will be explored to determine what corrective action, if any, is needed.

C. Rapid Safety Feedback Reviews

The Rapid Safety Feedback (RSF) review process is a case file review that is completed for randomly selected judicial and non-judicial in-home cases. The review process assesses case work practice related to child safety for in-home services cases involving children ages 0-4 utilizing the "Windows into Practice"-which includes the practice guidelines for conducting quality assurance reviews. The process affords an opportunity to target case reviews on the highest risk population of children in the child welfare system. At a minimum, KFF conducts 8 RSF reviews each quarter with discretion for additional reviews if warranted based upon the "Windows into Practice" Tier 1 criteria. The RSF data is compared to the statewide benchmark. In FY 2017-2018, 35 cases were reviewed utilizing the RSF review tool and entered in the Qualtrics quality assurance online portal.

D. Florida Continuous Quality Improvement (CQI) Reviews

The Florida Continuous Quality Improvement (FL CQI) review process adopts the federal Child and Family Services (CFSR) qualitative case review items. The FL CQI includes eighteen items related to child safety, permanency, and well-being. The CQI data is compared to the statewide benchmark. In FY 2017-2018, 20 cases were reviewed utilizing the CFSR review tool and entered in the federal online CFSR portal. The Florida CQI case review selection criteria incorporates a

proportionate 60/40 split between foster care and in-home cases. Of the 20 cases reviewed in FY 2017-2018, 12 were designated as foster care cases and eight were in-home judicial/non-judicial cases.

E. CFSR- Performance Improvement Plan (PIP) Reviews

In addition; on July 1, 2017, Florida began the CFSR Performance Improvement Plan (PIP) monitored case reviews. KFF currently reviews one PIP monitored case each qtr. The Office of Child Welfare has discretion to assign KFF additional reviews to reach the required number of applicable cases for each item if necessary (one additional PIP monitored case review was assigned during the first quarter of FY 2017-2018). The PIP monitored case reviews include case participant in-depth interviews and alternate between foster care and in-cases each quarter. The review is a side-by-side process consisting of one KFF Quality Assurance Coordinator and one DCF reviewer. In FY 2017-2018, KFF completed five PIP monitored case reviews and entered the findings in the federal online CFSR portal. Of those five PIP monitored cases, three were designated as foster care cases and two were in-home judicial/non-judicial cases. The PIP data is compared to the PIP Target and CFSR Benchmarks.

1. Safety

	Rapid Safety Feedback % Strength	KFF	State	KFF	State
	FY 16-17 in comparison to FY 17-18		16-17	17-18	17-18
		(n=36)	(n=851)	(n=35)	(n=841)
1.1	Is the most recent family assessment sufficient?	25.60%	50.60%	33.10%	52.60%
1.2	Is the most recent family assessment completed timely?	33.70%	44.90%	28.60%	45.50%
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?	49.30%	62.70%	44%	60.40%
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?	83.70%	76.70%	65.70%	76.90%
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?	57.90%	67.70%	25.50%	66.10%
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?	65.90%	82.10%	57.90%	79.10%
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?	48.20%	55.10%	41.80%	53.80%
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?	43.40%	54.60%	25%	50.60%
3.1	Are background checks and home assessments completed when needed?	57.50%	70.40%	75.10%	74.60%
3.2	Is the information assessed and used to address potential danger threats?	61.80%	75.80%	50.30%	78.30%

4.1	Is the safety plan sufficient?	32.70%	60.60%	32.40%	56.10%
4.2	Is the safety plan actively monitored to ensure that it is working effectively to protect the child(ren) from identified danger threats?	37.10%	53.40%	36.20%	47.80%
5.1	Is the supervisor regularly consulting with the case manager?	31.20%	55.50%	64.10%	59.60%
5.2	Is the supervisor ensuring recommended actions are followed up on?	25.60%	48.00%	65.70%	53.60%

Rapid Safety Feedback 16-17 & 17-18 Analysis:

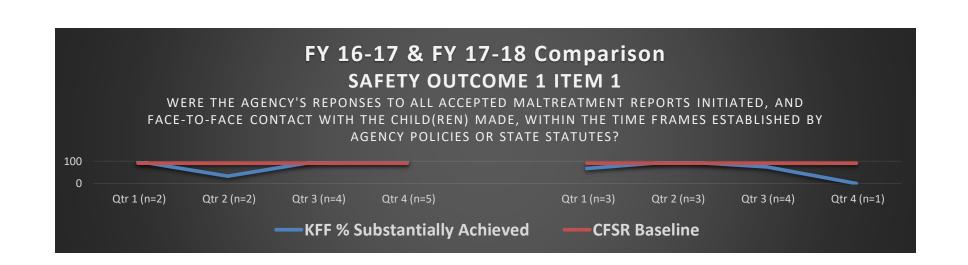
•In comparison to FY 16-17; KFF has had an increase in % strength in four of the 14 RSF Items during FY 2017-18 (Item 1: Family Assessment Sufficiency; Item 3.1 Background and Home Assessments are completed when needed; Item 5.1 Supervisor Consultations; Item 5.2 Supervisors ensuring recommended activities are followed up on).

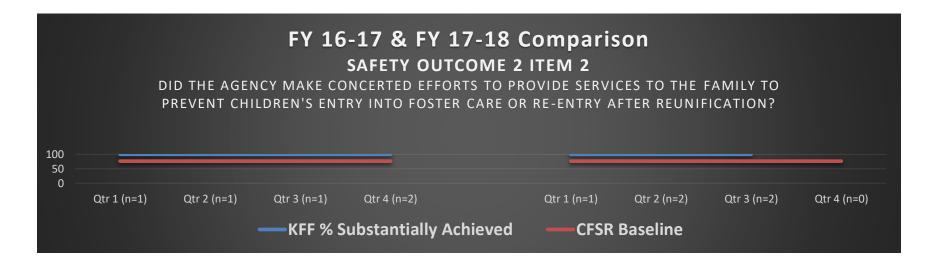
•KFF's % strength in Item 2.2 (*Frequency of the visits between the case manager and the child(ren)* is relatively close to the state standard which has been maintained for all eight qtrs. of FY 16-17 and 17-18.

•In comparison to FY 16-17; KFF's % strength has remained relatively the same in 2 of the 14 RSF Items during FY 2017-18 (Item 4.1 Safety Plan Sufficiency; Item 4.2 Safety Plan Monitoring).

•In comparison to FY 16-17; KFF has had an decrease in % strength in 8 of the 14 RSF Items during FY 2017-18 (Item 1.2 Family Assessments completed timely; Item 2.1 Quality of case manager visits with child(ren); Item 2.2 Frequency of the visits between the case manager and the child(ren); Item 2.4 Frequency of the visits between the case manager and the child(ren); Item 2.4 Frequency of the visits between the case manager and the visits between the case manager and the father; Item 2.5 Quality of the visits between the case manager and the father; Item 3.1 Backgrounds and home assessments are assessed and used to address potential danger threats).

•Overall; KFF's % strength falls below the state standard in all RSF items except for (*Item 3.1 Background and Home Assessments are completed when needed; Item 5.1 Supervisor Consultations; Item 5.2 Supervisors ensuring recommended activities are followed up on*).







Continuous Quality Improvement (CQI) Safety Outcome (Items 1-3) 16-17 & 17-18 Analysis:

•CFSR/CQI Item 1- There has been a slight decline in FY 17-18 in comparison to FY 16-17 for CFSR CQI Item 1 (*Timely investigation initiation and face-to-face contact with the child(ren) within state guidelines).* Overall the % of strength fell below the CFSR baseline of 91.5 % during Qtr. 2 of FY 16-17; Qtr. 1, 3 and 4 of FY 17-18.

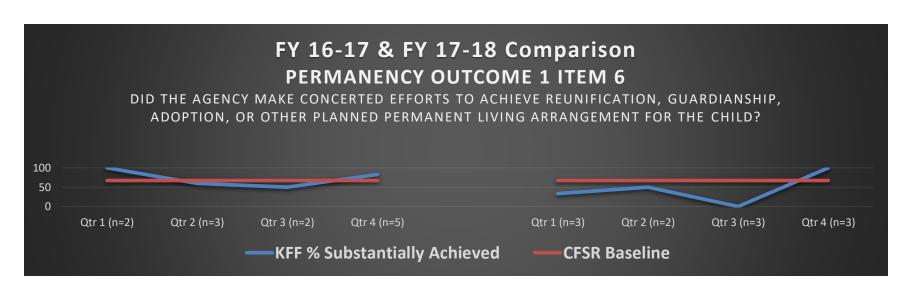
•**CFSR/CQI Item 2-** During FY 16-17 and 17-18; KFF has been above the CFSR baseline of 76.5% maintaining a 100% strength in Item 2 (*Concerted efforts to provide services to prevent removal or re-entry after reunification*) for seven consecutive quarters. *NOTE: There were no applicable cases for this item in 4th Qtr. of FY 17-18.*

•CFSR/CQI Item 3- During FY 16-17 and 17-18; KFF was slightly above the CFSR baseline of 71.3% for Item 3 (Concerted efforts to assess and address the risk and safety concerns of the child(ren) in their homes or while in foster care). during Qtrs. 1 and 2 of FY 2016-17. During FY 2017-18; KFF was below the CFSR baseline for all 4 quarters.

2. Permanency





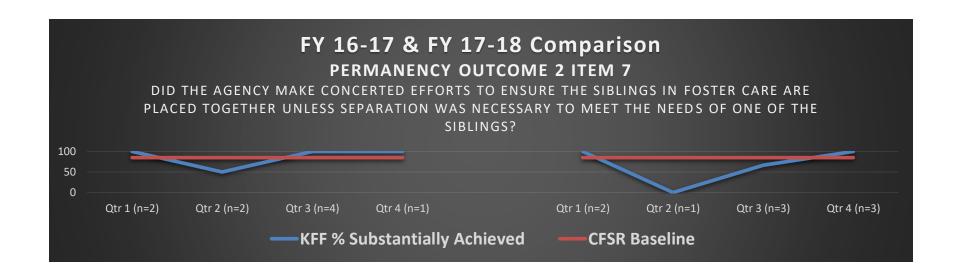


Continuous Quality Improvement (CQI) Permanency Outcome 1 (Items 4-6) 16-17 & 17-18 Analysis:

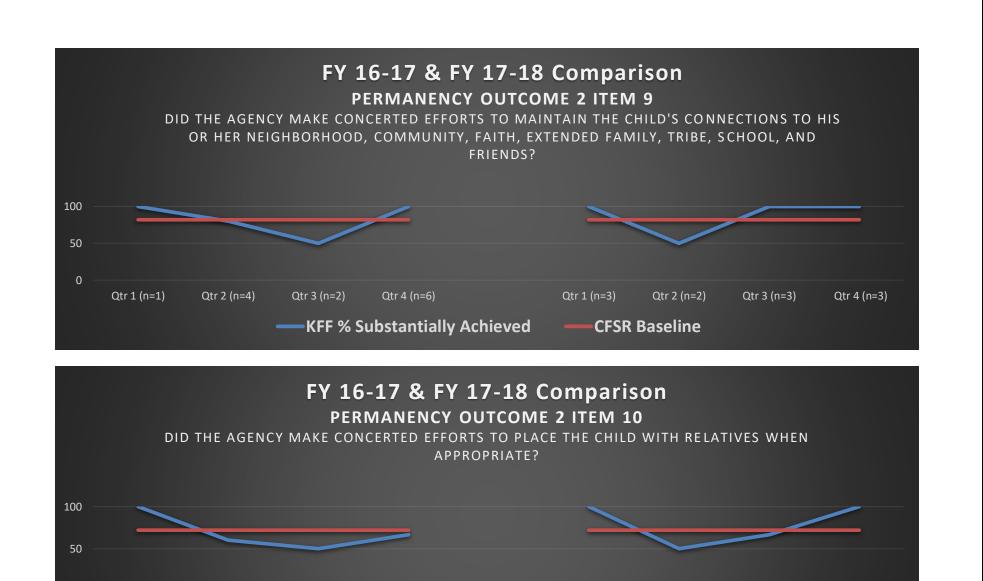
•**CFSR/CQI Item 4-** During FY 16-17 and 17-18; KFF has been above the CFSR baseline of 81.8% maintaining 100% strength for Item 4 (*Child's placement in foster care is stable and any changes in placement was in the child's best interest and consistent with achieving the child's permanency goal(s) seven out of the eight quarters.*

•CFSR/CQI Item 5- During FY 16-17 and 17-18; KFF fluctuates above and below the CFSR baseline of 74.5% during all eight quarters for Item 5 (*Timely establishment of permanency goals*).

•CFSR/CQI Item 6- During FY 16-17 and 17-18; KFF was above the CFSR baseline of 67.3% in Qtr. 1 and 4 of FY 16-17 and during FY 17-18; KFF fell below the CFSR baseline in three of the four quarters for Item 6 (Concerted efforts to achieve the child's permanency goal).







Qtr 1 (n=3)

Qtr 2 (n=2)

CFSR Baseline

Qtr 3 (n=3)

Qtr 4 (n=3)

0

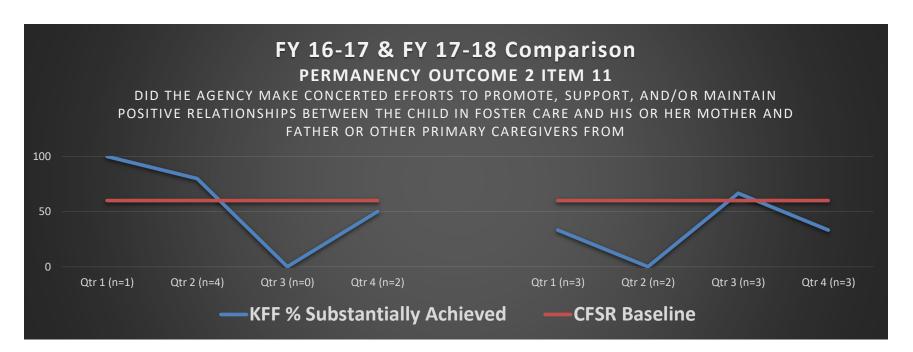
Qtr 1 (n=10)

Qtr 2 (n=3)

Qtr 3 (n=2)

Qtr 4 (n=4)

-KFF % Substantially Achieved



Continuous Quality Improvement (CQI) Permanency Outcome 2 (Items 7-11) 16-17 & 17-18 Analysis:

•**CFSR/CQI Item 7-** During FY 16-17 and 17-18; KFF was above the CFSR baseline of 85% during the 1st quarter of both FY's; declined in % strength during the 2nd quarters and increased in % strength in the 3rd and 4th quarters of both FY's for CFSR Item 7 (*Concerted efforts made to place siblings together unless separation was necessary to meet the needs of one of the siblings*).

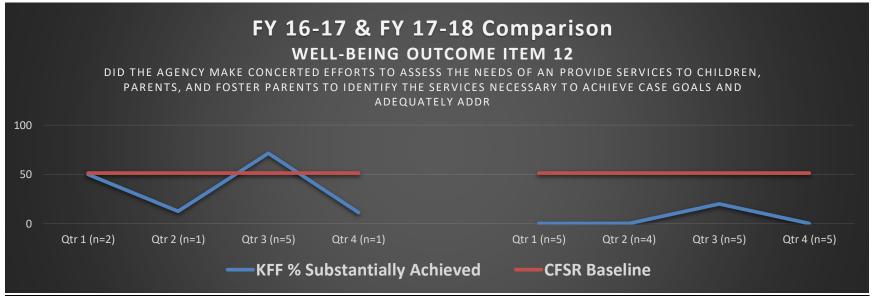
•CFSR/CQI Item 8- During FY 16-17 and 17-18; KFF has had a steady decline in the % strength compared to the CFSR baseline of 69% for CFSR Item 8- (*Concerted efforts to ensure that visitation between a child in foster care and his or her mother, father and siblings was a sufficient frequency and quality to promote continuity*). It is noted that there has been a slight increase in the % strength during the 4th Qtr. of 17-18.

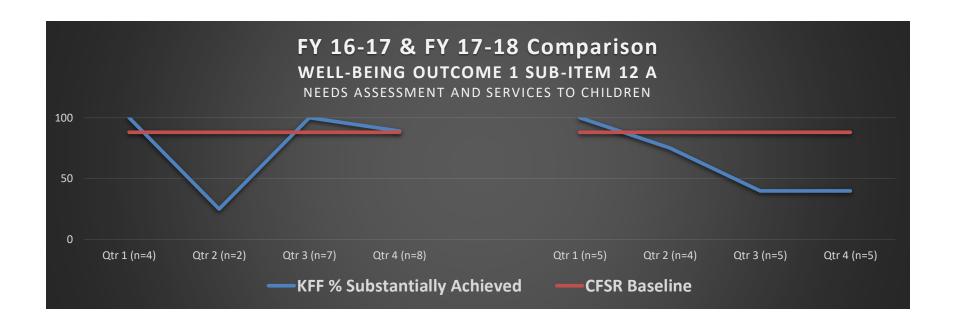
•**CFSR/CQI Item 9-** During FY 16-17; KFF was able to maintain on or above the CFSR baseline of 82% during the 1st, 2nd and 4th Qtrs. for Item 9 (*Concerted efforts to maintain the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school and friends*). During 17-18; KFF maintained above the CFSR baseline for 3 qtrs.

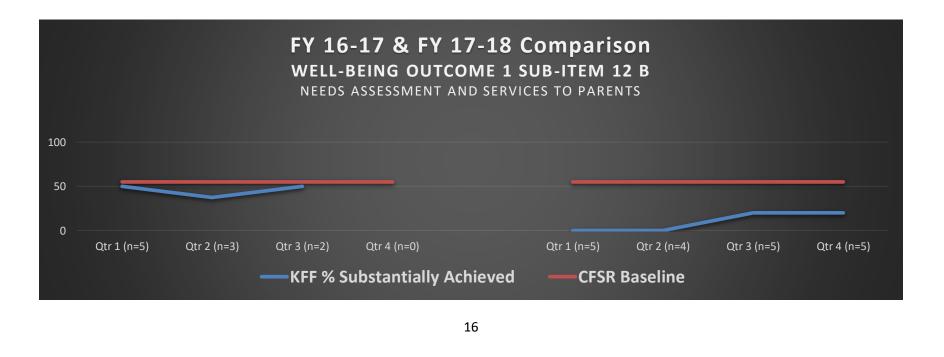
•CFSR/CQI Item 10- In comparison to FY 16-17; KFF maintained above or slightly below the CFSR baseline of 72% for Item 10 (*Relative Placement*).

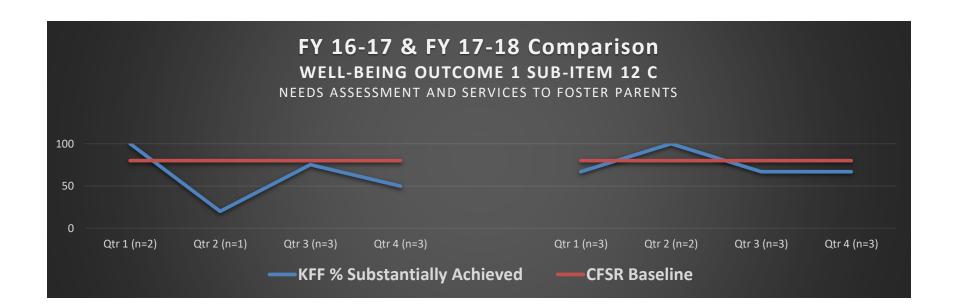
•CFSR/CQI Item 11- Overall, during the 1st and 2nd qtrs. of FY 16-17 and 3rd qtr. of FY 17-18; KFF was above the CFSR baseline of 60% for Item 11 (*Concerted efforts to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregivers from whom the child had been removed*). During FY 17-18; KFF dropped below the CFSR baseline in the 1st, 2nd and 4th qtrs. *NOTE: There were no applicable cases for this item in the 3rd Qtr. of 16-17.*

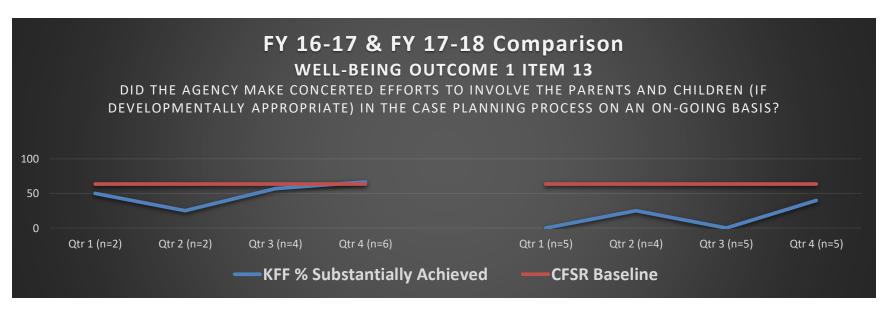
3. Well-Being

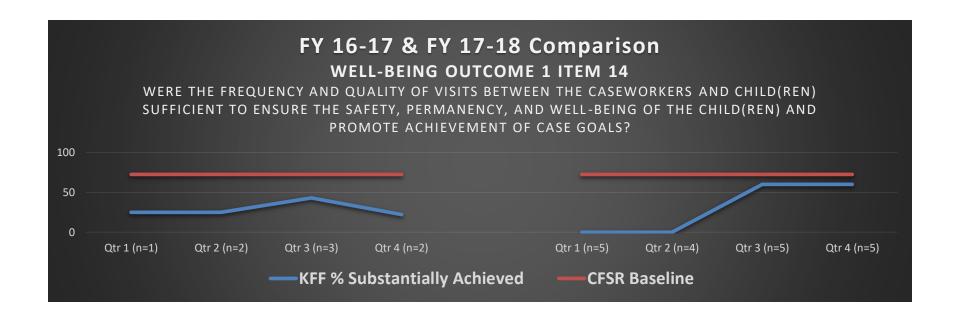


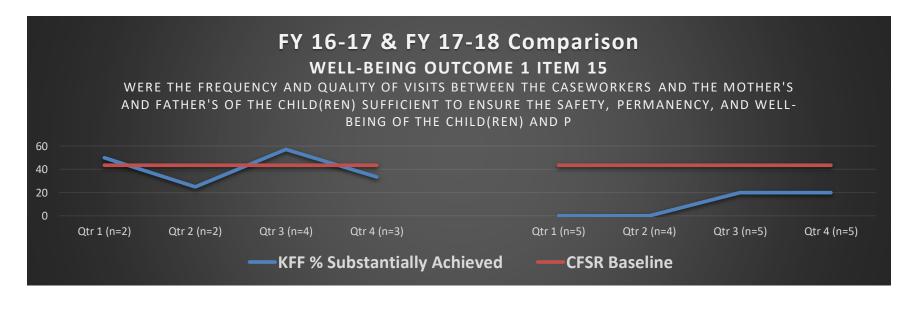












Continuous Quality Improvement (CQI) Well-Being Outcome 1 (Items 12-15) 16-17 & 17-18 Analysis:

•CFSR/CQI Item 12- Overall, during FY 16-17 and 17-18; KFF has fell below the CFSR baseline of 51.3% except for the 3rd Qtr. during FY 16-17 for Item 12 (*Concerted efforts to assess the needs of and provide services to children, parents, and foster parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family).*

•CFSR/CQI Sub-Item 12 A- During the 1st qtr. of 16-17 and 17-18; KFF has scored above the CFSR baseline of 88% and met the baseline in the 4th Qtr. of 16-17 for Item 12 A (*Needs assessment and services to children*).

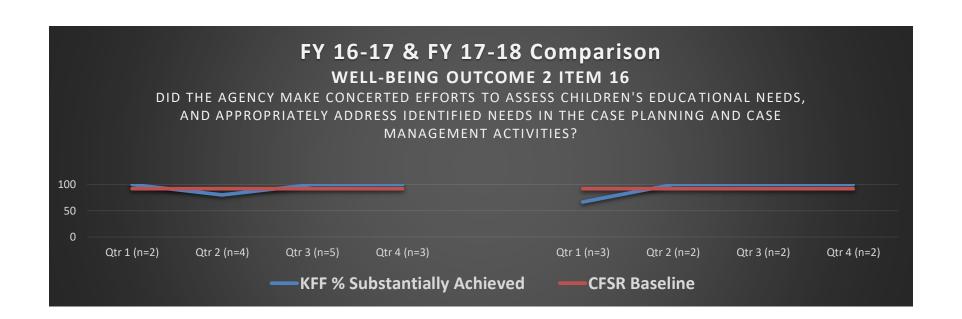
•CFSR/CQI Sub-Item 12 B- During FY 16-17 and 17-18; KFF has scored below the baseline of 55% for all eight quarters for Item 12 B (Needs assessment and services to parents). NOTE: There were no applicable cases for this item in 4th Qtr. of FY 16-17.

•CFSR/CQI Sub-Item 12 C-During FY 16-17; KFF scored above the CFSR baseline of 80% during the 1st qtr. and 2nd Qtr. of FY 17-18. KFF scored below the baseline in the remaining quarters of FY 16-17 and 17-18 for Item 12 C (*Needs assessment and services to foster parents*).

•CFSR/CQI Item 13- KFF was able to meet the CFSR baseline of 63.6% in the 4th Qtr. of FY 16-17; however, has fell below the baseline for the remaining quarters in FY 16-17 and 17-18 for Item 13 (*Concerted efforts made to involve the parents and children (if developmentally appropriate) in the case planning process on an on-going basis).*

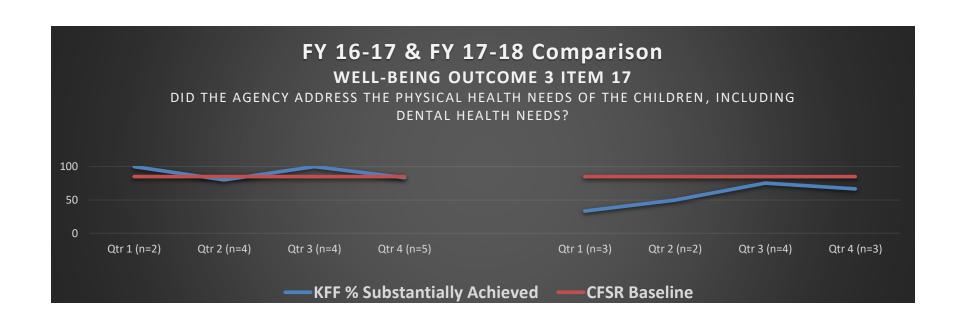
•**CFSR/CQI Item 14-** KFF scored below the CFSR baseline of 72.5% for all four quarters of FY 16-17 and 17-18 for Item 14 (Sufficient frequency and quality of the visits between the caseworkers and child(ren) to ensure safety, permanency, and well-being of the child(ren) to promote achievement of case goals).

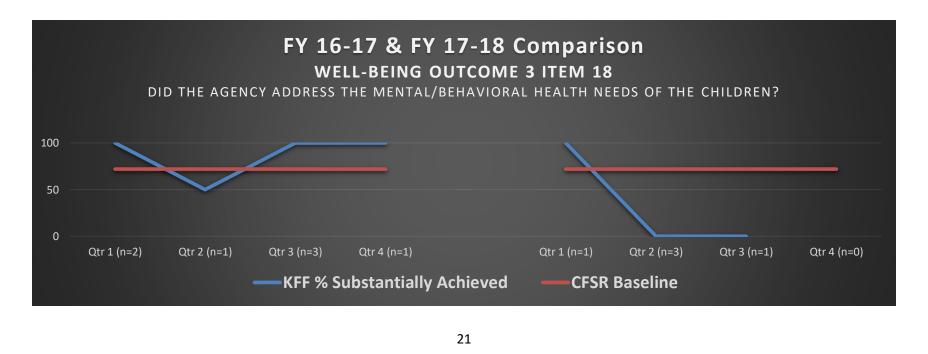
•CFSR/CQI Item 15- During the 1st and 3rd quarters of FY 16-17; KFF scored above the CFSR baseline of 43.5% and scored below the baseline during the remaining quarters of FY 16-17 and 17-18 for Item 15 (*Sufficient frequency and quality of the visits between the caseworkers and the mothers and fathers of the child(ren) to ensure the safety, permanency and well-being of the child(ren) and promote achievement of case goals).*



Continuous Quality Improvement (CQI) Well-Being Outcome 2 (Item 16) 16-17 & 17-18 Analysis:

•CFSR/CQI Item 16- During FY 16-17; KFF had a slight decrease from the CFSR baseline of 92% during the 2nd qtr. as well as in the 1st qtr. of FY 17-18. The remaining quarters scored above the baseline for Item 16 (Concerted efforts to assess children's educational needs and appropriately address identified needs in the case planning and case management activities).





Continuous Quality Improvement (CQI) Well-Being Outcome 3 (Items 17 & 18) 16-17 & 17-18 Analysis:

•CFSR/CQI Item 17- During FY 16-17; KFF maintained on or above the CFSR baseline of 85%. During FY 17-18; KFF has maintained below the CFSR baseline for Item 17 (*Physical health needs of children, including dental health needs*).

•**CFSR/CQI Item 18-** During FY 16-17; KFF maintained above the CFSR baseline of 72% for three of the four quarters. During FY 17-18; KFF was above the baseline during the 1st qtr. and fell below the baseline during the 2nd qtr. for Item 18 *(Mental/Behavioral Health Needs of children). NOTE: There were no applicable cases for this item in 4th Qtr. of FY 17-18.*

3. Local Practice Trends in response to RSF and Florida CQI data

After reviewing the results of QA activities and contract compliance/performance throughout the FY, areas were determined to be opportunities for QI activities and local practice was adjusted in efforts to improve performance. Some of those areas identified were:

- •Safety planning and monitoring
- •On-going quality family assessments
- •Safety Services
- •Conditions for Return
- •Case manager visitation frequency with the child and family
- •Background Screening
- •Sibling visitation

KFF's quality improvement process appears to work well. Through the process, improvement activities have been implemented and performance measures have improved. For example, KFF has a higher compliance rate of sibling visits being conducted and documented. This is due to the implementation of the requirement that a tracking tool for separated siblings be kept, to ensure that follow-up is made with caregivers to ensure sibling visits occur, to ensure that court orders are amended to accurately reflect the frequency in which the sibling visits are supposed to occur and to ensure the sibling visits are properly documented in the Florida Safe Families Network (FSFN).

KFF has also implemented improvement activities related to Child Placement Agreements which has improved the compliance rate of the agreements being tracked, reviewed and entered timely in the Florida Safe Families Network (FSFN). In addition, improvement activities related to Reunification and Post Placement Supervision improved the compliance rate of visit frequency as outlined in the safety plan.

Quality Improvement Teams have been developed to recognize and react to emerging trends at various levels within the organization and within the system of care. This approach allows for an ongoing analysis of established trends and quality improvement activities and/or provides the opportunity to update existing action plans. In addition, this approach allows for the establishment of new action plans to address emerging trends through various QA activities. Recent Quality Improvement Team activities have been related to background checks and safety plan sufficiency and monitoring. This has resulted in an increase in background checks and home assessments being completed and assessed when needed and an increase in safety plan sufficiency and monitoring.

In addition; KFF hired a Critical Safety Practice Supervisor in FY 17-18. The Critical Safety Practice Supervisor utilizes a safety practice fidelity monitoring tool to ensure proficiency of the practice. This measurement tool is aligned with Rapid Safety Feedback and Florida CQI. During supervision, the safety practice fidelity monitoring tool is utilized, and coaching/feedback is provided to the FSC, to ensure practice model fidelity.

KFF's Quality Assurance Manager developed and utilizes an internal non-standardized tool that allows for on-going analysis of all the qualitative and quantitative review data. The tool is utilized as a learning/coaching opportunity in a group or individual setting for KFF case managers and/or supervisors.

KFF provides services in a predominately rural community and as a result, dental care has been difficult to obtain due to lack of providers in the area. A quality improvement activity was undertaken leading to the agency entering into a working agreement with a local dental provider who can provide services in four different areas in the county. Dental care provided has shown improvement, however with limited transportation and one provider vs. the volume of clients, this area remains to be a challenge for the agency.

KFF conducts separated sibling staffing's where the agency discusses the barriers to place siblings together. In addition, KFF has increased the recruitment and licensing efforts to focus on foster families that can foster sibling groups and the importance of keeping siblings together.

KFF staff also reviews any barriers of Conditions for Return during Safety Practice Team Meetings and Permanency Staffing's to identify appropriate services and implement a plan of actions steps to address the barriers and work towards Conditions for Return. This is action involves all appropriate parties to the case i.e. (current services providers working with the family, legal team, GAL, caregivers and parents).

III. Findings

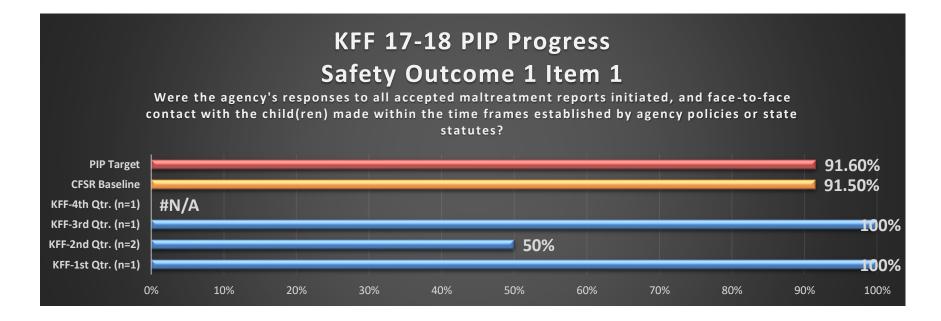
The following tables and graphs provide the number of cases reviewed in FY 2017-18 and an analysis and evaluation of performance trends during the FY 2017-2018 across multiple service delivery and management factors specific to the CFSR outcome goals of safety, permanency and well-being. The narrative and graphics describe the annual findings of the outcome measures and performance measured to the benchmark targets.

Kid's First of Florida FY 17-18 QA Reviews	Rapid Safety Feedback	CQI CFSR (with in-depth interviews)	CQI CFSR (No interviews)	PIP Monitored (with in-depth interviews)
1 st Qtr.	9	1	4	1
2 nd Qtr.	8	1	4	2
3 rd Qtr.	10	1	4	1
4 th Qtr.	8	1	4	1

A. Safety -FY17-18 Rapid Safety Feedback

Rapid Safety Feedback FY 17-18 % Strength by quarter	KFF 1 st Qt r. (n=9)	KFF 2 nd Qt r. (n=8)	KFF 3 rd Qt r. (n=10)	KFF 4 th Qt r. (n=8)	
	17-18	17-18	17-18	17-18	
1.1 Is the most recent family assessment sufficient?	0%	25%	20%	87.50%	
1.2 Is the most recent family assessment completed timely?	22.20%	0.00% 🖊	30% 1	62.50% 1	
2.1 Is the quality of visits between the case manager and the child(ren) sufficient to address issues	11.10%	37.50%	40%	87.50%	
Is the frequency of visits between the case manager 2.2 and the child(ren) sufficient to ensure child safety and evaluate progress toward case plan outcomes?	77.80%	50%	1 60%	75.00%	
2.3 Is the quality of visits between the case manager pertaining to safety and evaluate progress toward case plan outcomes?	66.70%	75%	80%	100%	
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?	66.70%	25%	90%	50%	
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?	14.30%	60%	42.90%	50%	
 Is the frequency of the visits between the case 2.6 manager and the child's father sufficient to ensure child safety and evaluate progress toward case plan 	0%	25%	25%	50%	
3.1 Are background checks and home assessments completed when needed?	55.60%	100%	100%	100%	
3.2 Is the information assessed and used to address potential danger threats?	55.60%	87.50%	100%	100%	
4.1 Is the safety plan sufficient?	22.20%	37.50% 1	20% 🖊	50%	
4.2 Is the safety plan actively monitored to ensure that it is working effectively to protect the child(ren)	0%	37.50%	20%	87.50%	
5.1 Is the supervisor regularly consulting with the case manager?	66.70%	62.50% 🖊	40% 🖊	87.50%	
5.2 Is the supervisor ensuring recommended actions are followed up on?	55.60%	50%	70%	87.50%	

	Rapid Safety Feedback % Strength	KFF	State	Comparison
	KFF FY 17-18 in comparison to State	17-18 (n=35)	17-18 (n=841)	
1.1	Is the most recent family assessment sufficient?	33.10%	52.60%	↓
1.2	Is the most recent family assessment completed timely?	28.60%	45.50%	¥
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?	44%	60.40%	↓
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?	65.70%	76.90%	Ļ
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?	25.50%	66.10%	Ļ
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?	57.90%	79.10%	Ļ
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?	41.80%	53.80%	↓
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?	25%	50.60%	→
3.1	Are background checks and home assessments completed when needed?	75.10%	74.60%	1
3.2	Is the information assessed and used to address potential danger threats?	50.30%	78.30%	Ļ
4.1	Is the safety plan sufficient?	32.40%	56.10%	↓
4.2	Is the safety plan actively monitored to ensure that it is working effectively to protect the child(ren) from identified danger threats?	36.20%	47.80%	Ļ
5.1	Is the supervisor regularly consulting with the case manager?	64.10%	59.60%	1
5.2	Is the supervisor ensuring recommended actions are followed up on?	65.70%	53.60%	1



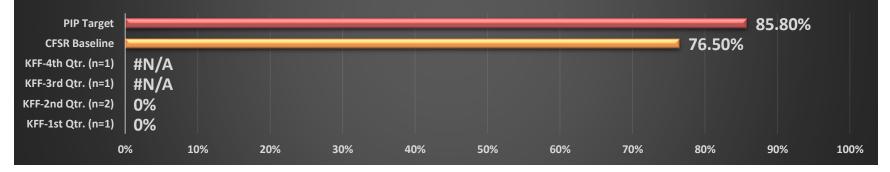
KFF 17-18 CQI-SAFETY OUTCOME 1 ITEM 1

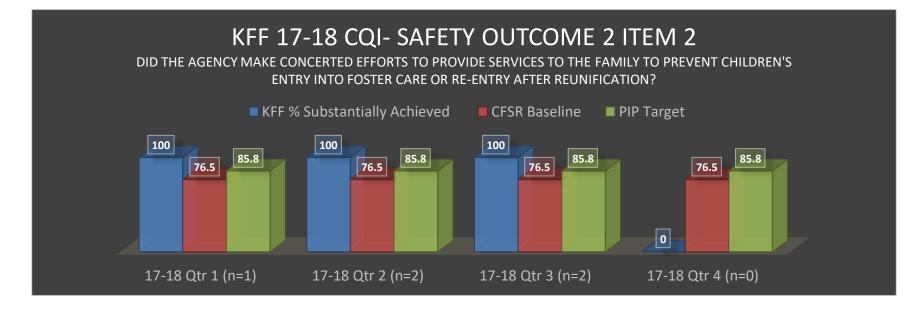
WERE THE AGENCY'S REPONSES TO ALL ACCEPTED MALTREATMENT REPORTS INITIATED, AND FACE-TO-FACE CONTACT WITH THE CHILD(REN) MADE, WITHIN THE TIME FRAMES ESTABLISHED BY AGENCY POLICIES OR STATE STATUTES?



KFF YTD PIP Progress Safety Outcome 2 Item 2

Did the agency make concerted efforts to provide services to the family to prevent the children's entry into foster care or re-entry after reunification?

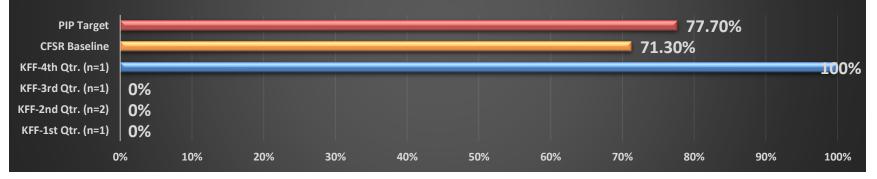


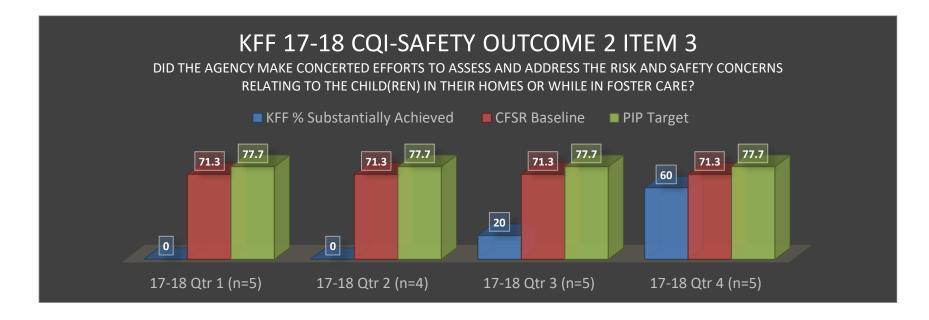


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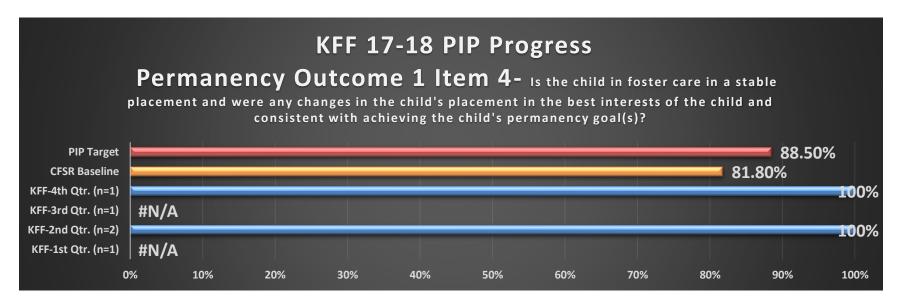
KFF 17-18 PIP Progress Safety Outcome 2 Item 3

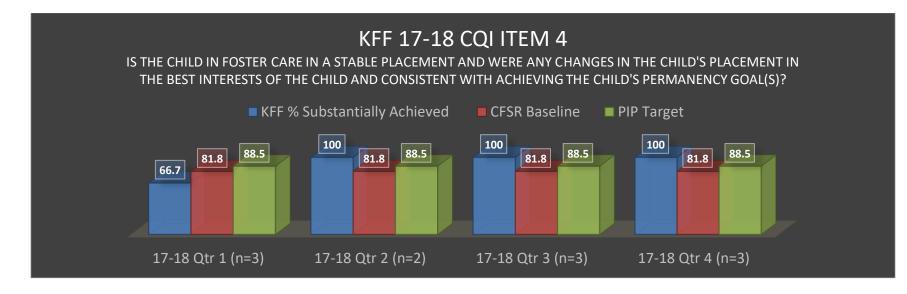
Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their homes or while in foster care?



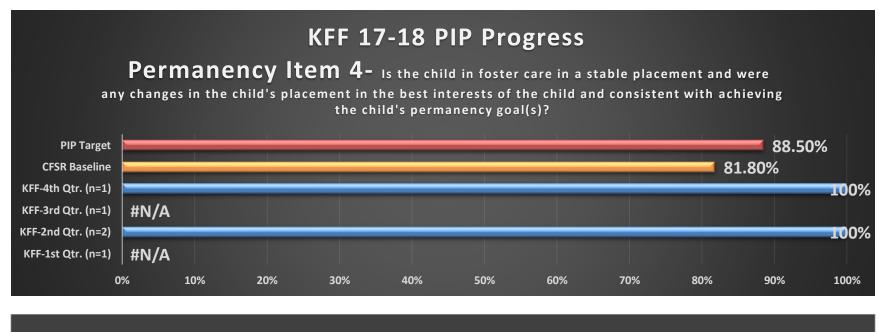


B. Permanency





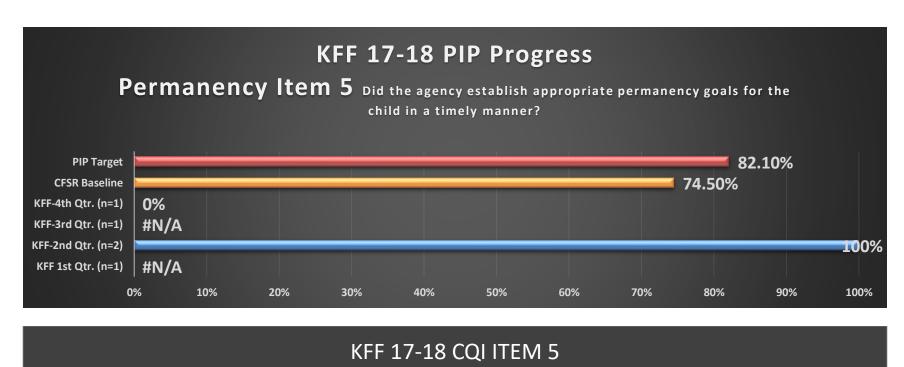
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KFF 17-18 CQI ITEM 4

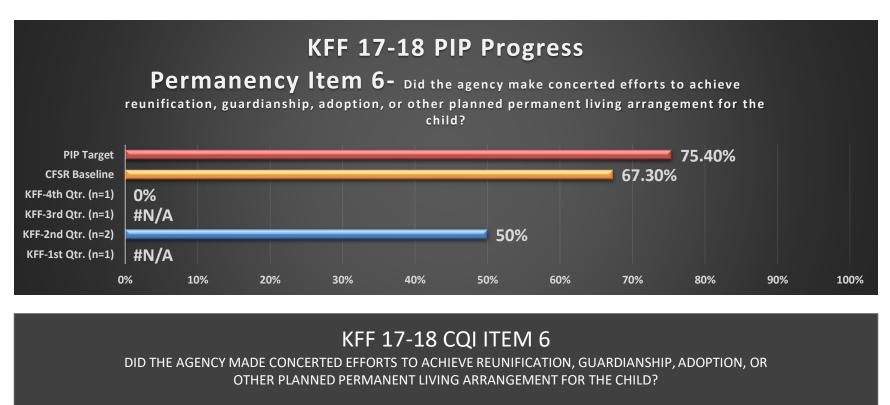
IS THE CHILD IN FOSTER CARE IN A STABLE PLACEMENT AND WERE ANY CHANGES IN THE CHILD'S PLACEMENT IN THE BEST INTERESTS OF THE CHILD AND CONSISTENT WITH ACHIEVING THE CHILD'S PERMANENCY GOAL(S)?



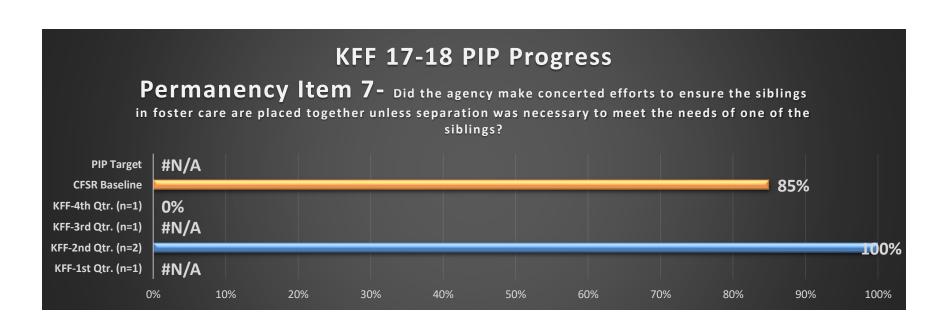


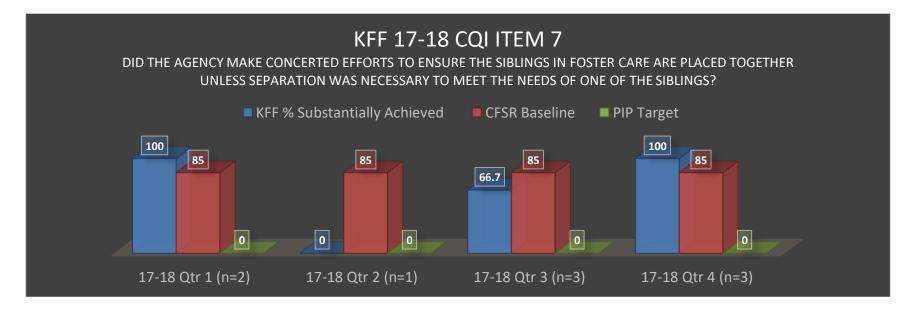
DID THE AGENCY ESTABLISH APPROPRIATE PERMANENCY GOALS FOR THE CHILD IN A TIMELY MANNER?

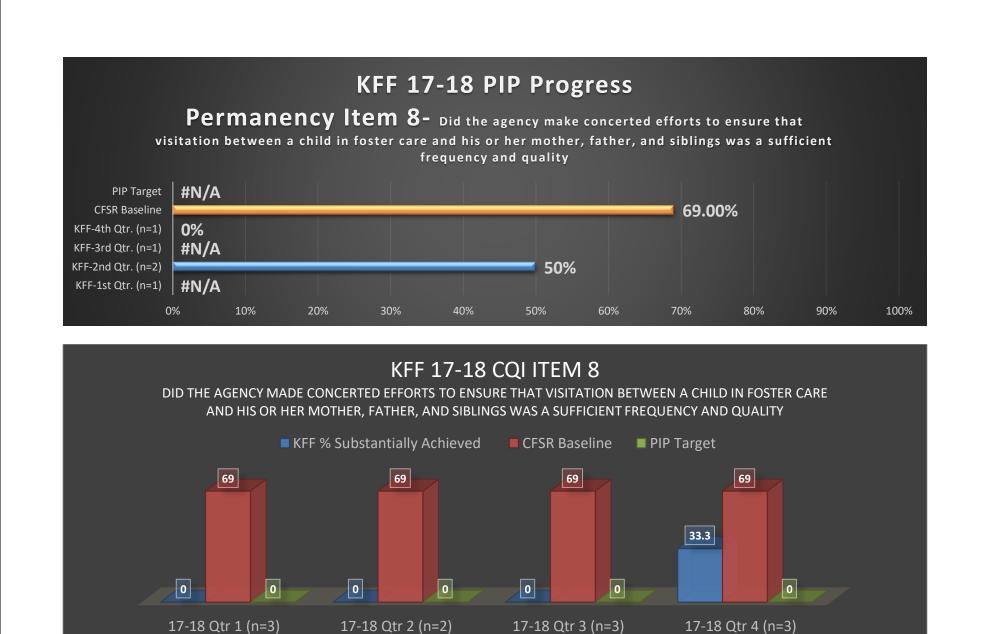


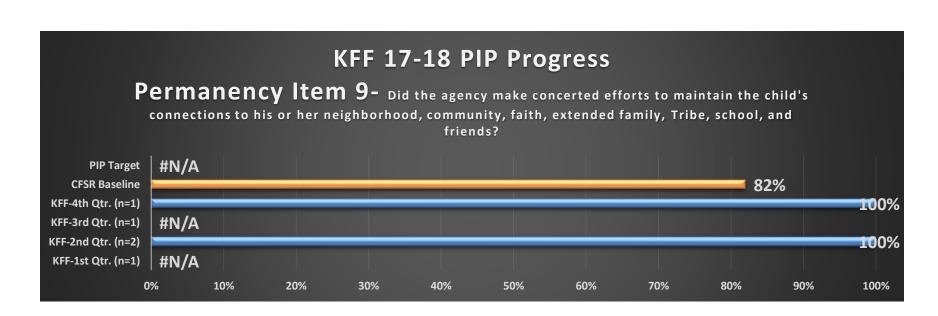


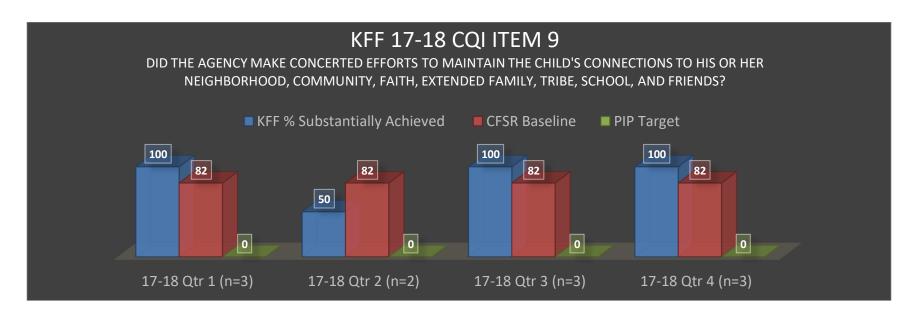


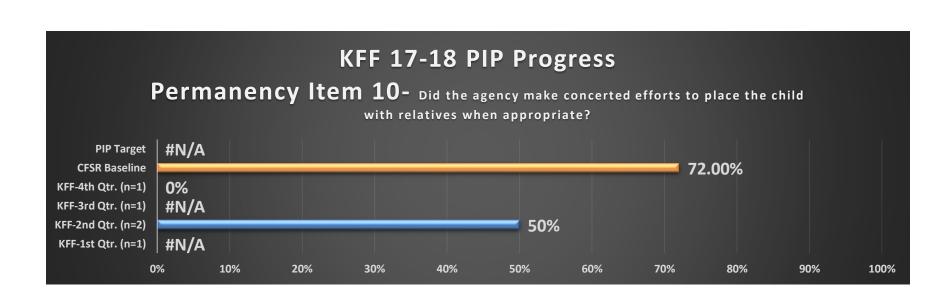


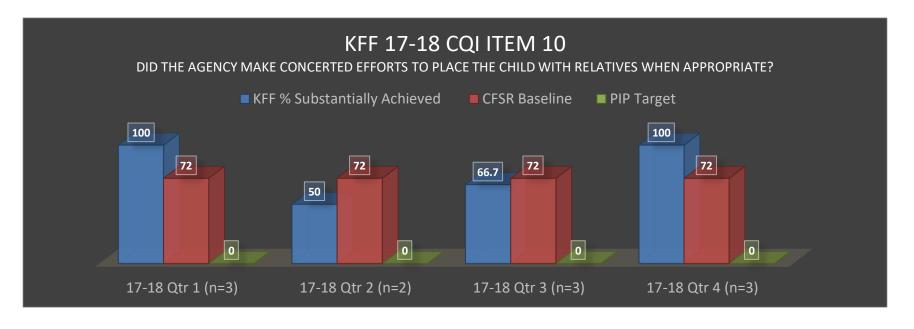


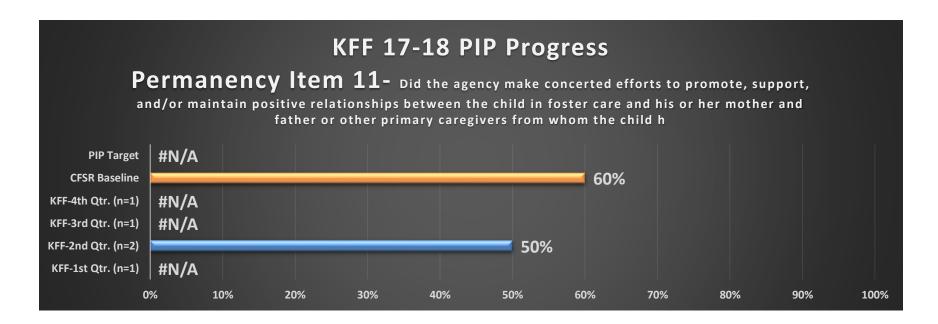


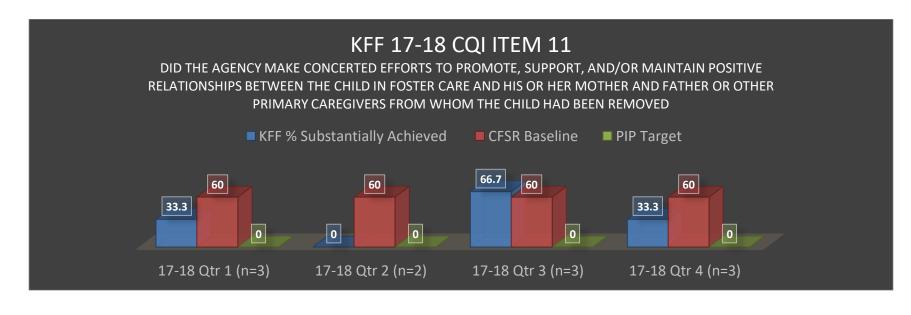




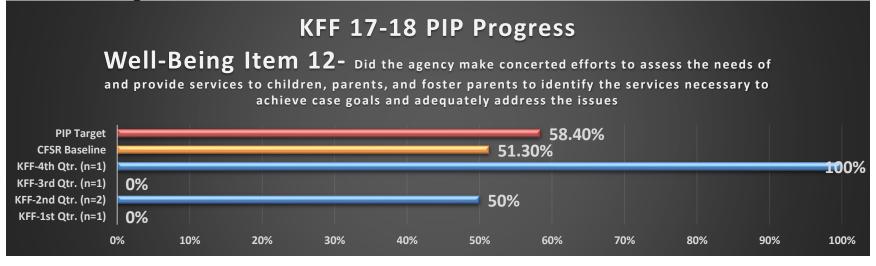


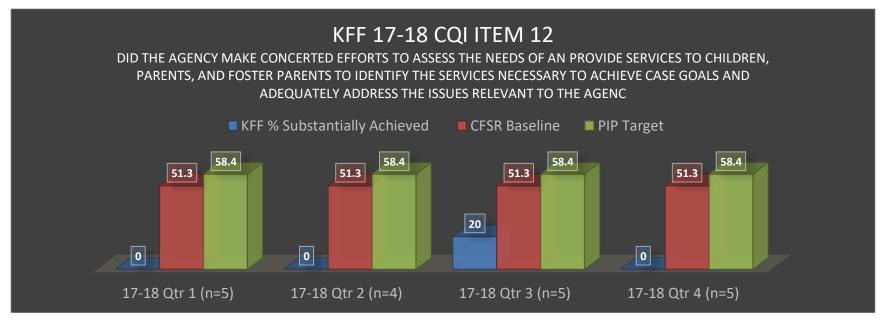


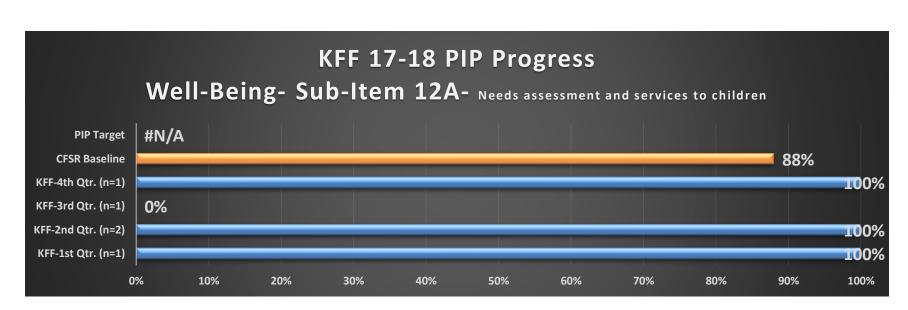


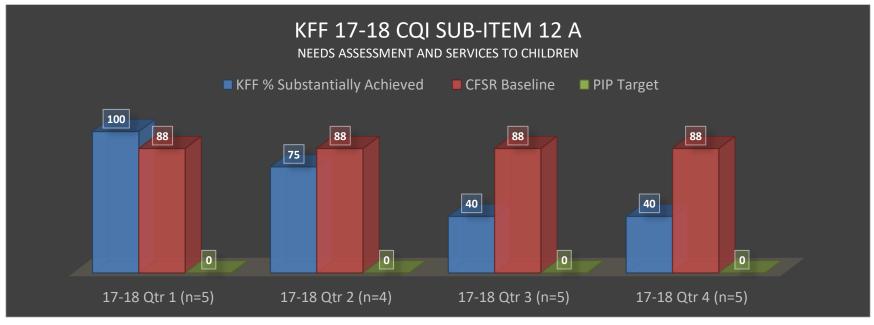


C. Well-Being

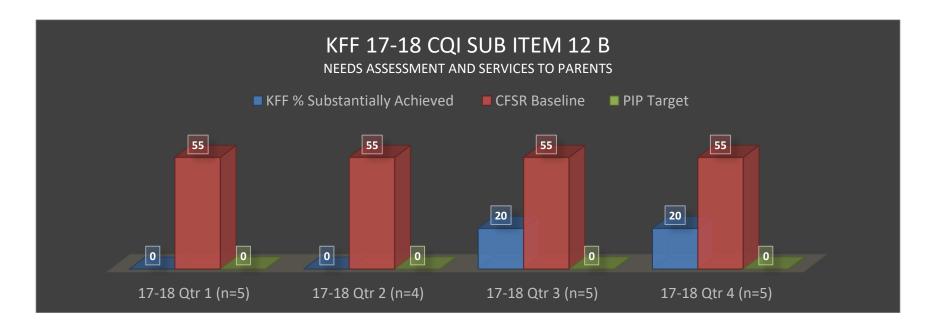


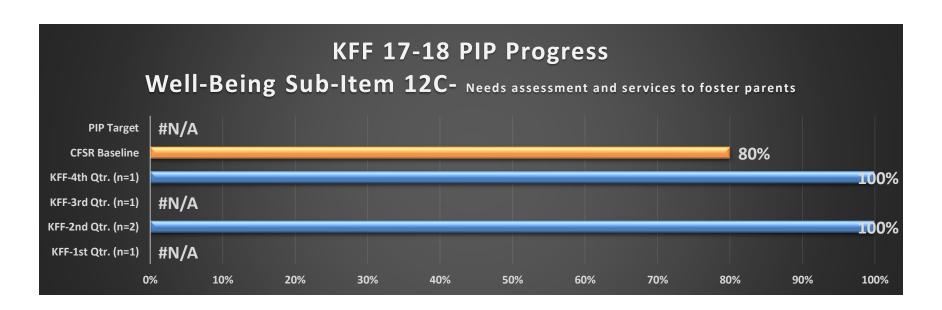


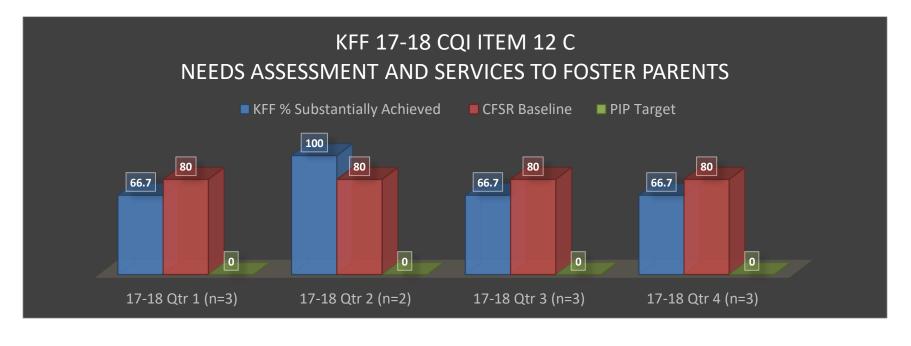


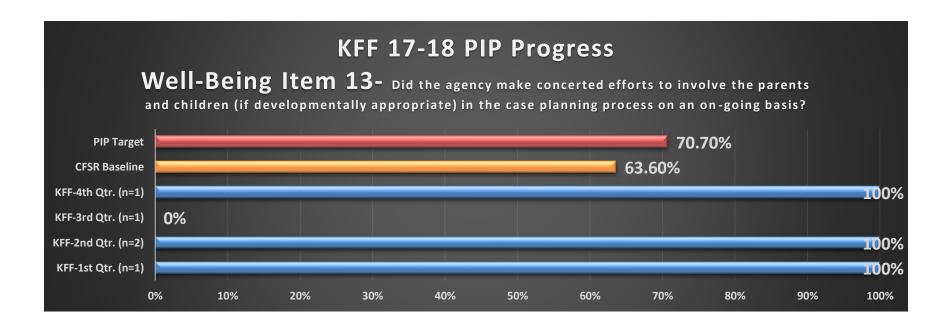


KFF 17-18 PIP Progress Well-Being Sub-Item 12B- Needs assessment and services to parents #N/A **PIP Target CFSR Baseline** 55% KFF-4th Qtr. (n=1) 100% KFF-3rd Qtr. (n=1) 0% KFF-2nd Qtr. (n=2) 50% KFF-1st Qtr. (n=1) 0% 0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

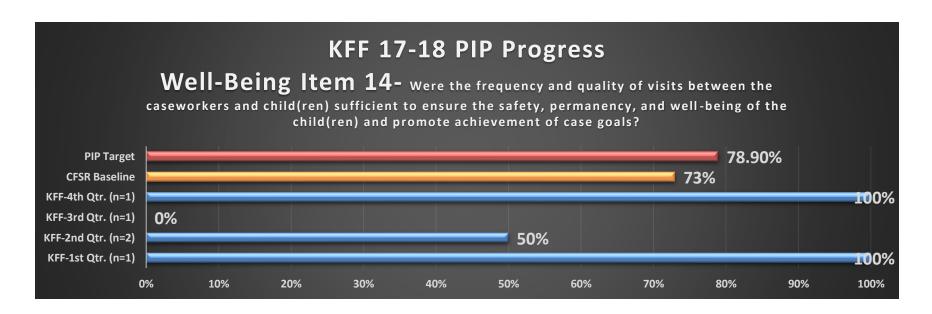


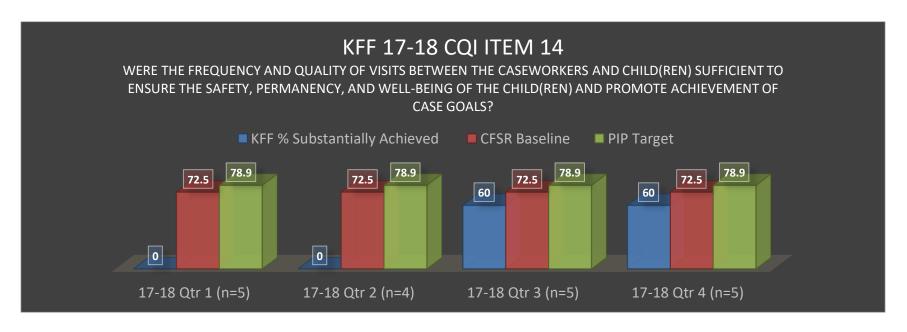


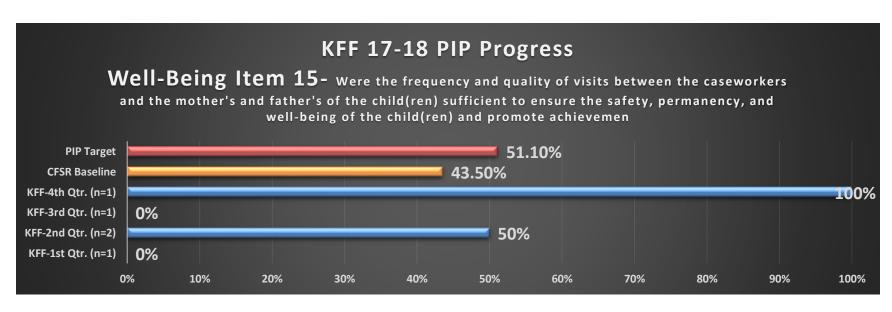


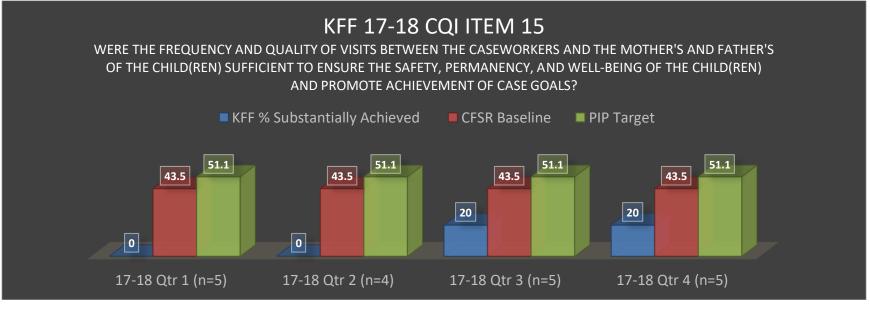


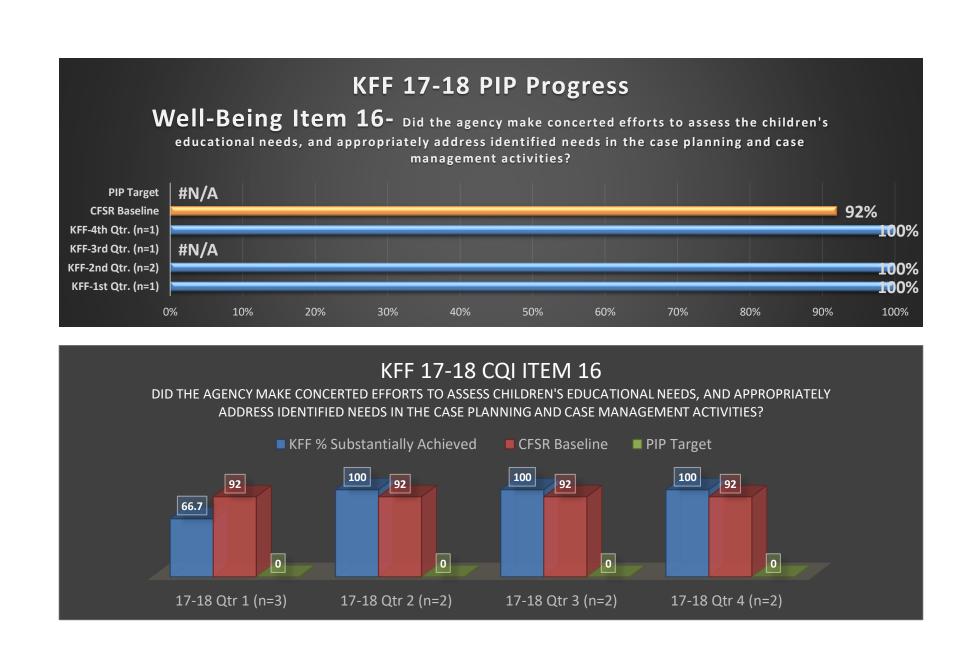
KFF 17-18 ITEM 13 DID THE AGENCY MAKE CONCERTED EFFORTS TO INVOLVE THE PARENTS AND CHILDREN (IF DEVELOPMENTALLY APPROPRIATE) IN THE CASE PLANNING PROCESS ON AN ON-GOING BASIS? KFF % Substantially Achieved CFSR Baseline PIP Target 70.7 70.7 70.7 70.7 63.6 63.6 63.6 63.6 40 25 0 0 17-18 Qtr 1 (n=5) 17-18 Qtr 4 (n=5) 17-18 Qtr 2 (n=4) 17-18 Qtr 3 (n=5)

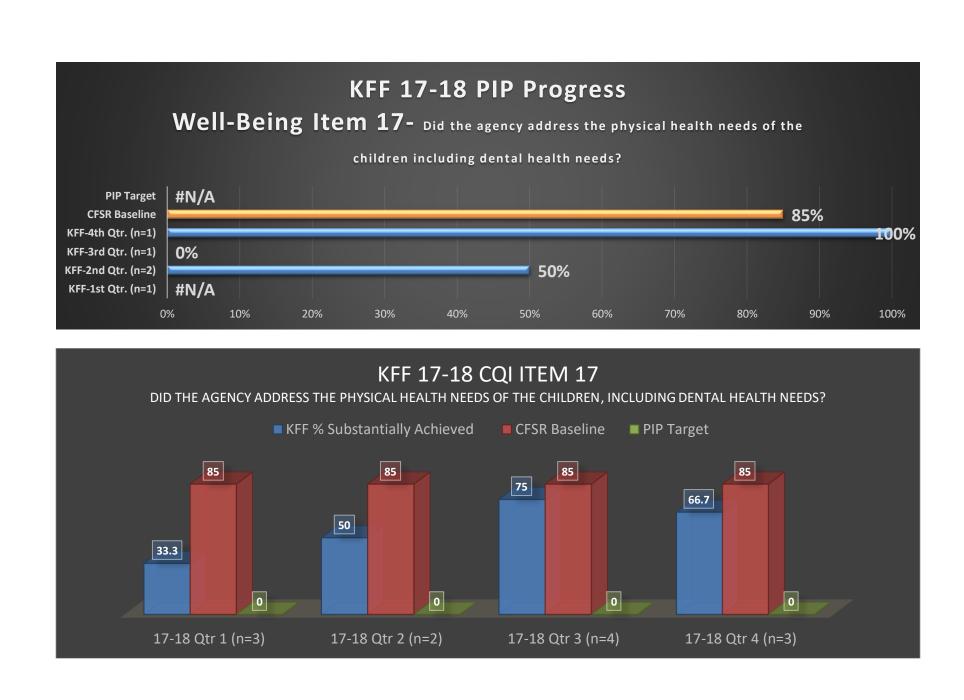


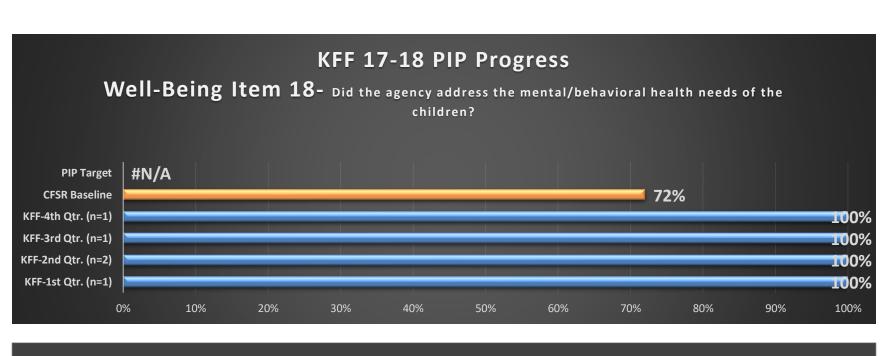


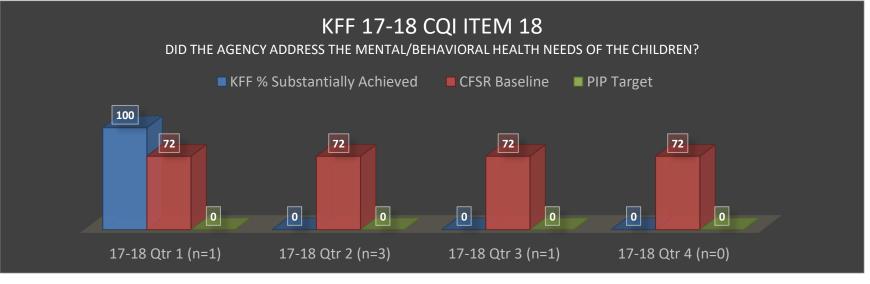












IV. Gaps Between Findings and Benchmarks

Rapid Safety Feedback (RSF):

During FY 17-18; KFF has shown a steady increase in the % strength in 12 of the 14 items (family assessment sufficiency; timely completion of the family assessments; guality of visits between the caseworkers and the child(ren); frequency of the visits between the caseworkers and the child(ren); quality of the visits between the case manager and the child's mother; frequency of the visits between the case manager and the child's father; background checks and home assessments completed when needed; background and home assessment information is assessed to address potential danger threats; safety plan sufficiency; safety plan monitoring; supervisor consultations and supervisor follow-up) of the Rapid Safety Feedback Tool; with two items (frequency of case manager visits with the mother and guality of the visits with the father) fluctuating throughout the FY.) During FY 17-18; KFF dropped below the overall state % strength in 11 of the 14 items. KFF exceeded the state % strength in three of the 14 items (3.1: Background checks and home assessments completed when needed; 5.1: Supervisor Consultations; 5.2: Supervisor ensuring recommended actions are followed up on). The gaps between the findings and the benchmarks for this item include the following: safety planning & monitoring; frequency of visits between the case manager and the mother and father; frequency of visits with the child; and frequency of visits with the mother (substantial decline in the % strength seen in the 3rd and 4th gtrs. Some of the safety plans during FY 17-18; were seen to be insufficient to manage the danger threat such as: there was a lack of a survivor and perpetrator plan developed when domestic violence was present; the plan did not contain safety actions to keep the child safe in the home; the plan did not contain the frequency at which the FSC would make visits to the home; the safety monitor and/or others did not sign the safety plan; the role of the safety monitor was unclear or inappropriate; the frequency of the case manager contact with the safety monitors was insufficient; the plan was not updated when the circumstances of the case changed; specific danger threats were not addressed in the plan; and the frequency of visits by the case manager did not occur as outlined in the plan. During FY 17-18; the frequency of the visits between the case manager and the mother, father and/or child was not sufficient to address safety and well-being of the child such as: the visits between the case manager and the mother, father and/or child was not according to the safety plan or less than once a month and there was once instance where concerted efforts were not made to meet with a father that resided in the home. During FY 17-18; the quality of visits between the case manager and the mother was not sufficient to address safety, well-being and case plan outcomes of the child such as: the documentation did not support that the case manager had quality in-depth conversations and

adequately addressed issues with the mother; efforts were not made to re-assess the mother when she relapsed; the mother's service needs were not addressed.

Continuous Quality Improvement Reviews (CQI):

Safety Outcome 2 Item 2- KFF's % strength (100%) exceeded the CFSR Baseline as well as the PIP Target in all four quarters of FY 17-18 for the five cases that were reviewed for this item. The strengths associated with this item is that overall, concerted efforts were made to provide services to the family to prevent the children's entry into foster care.

Safety Outcome 2 Item 3- During FY 17-18; KFF's % strength dropped below the CFSR Baseline as well as the PIP Target. There were 19 applicable cases reviewed for this item in the fiscal year. The gaps between the findings and the benchmarks for this item include the following: lack of on-going risk and safety assessments completed during the PUR which included no walkthrough of the home in which the child would return and/or where the child would be completing overnight visits; lack of meeting with the child alone; lack of quality discussions with the child especially pertaining to safety within the home; lack of background information on home study being addressed; insufficient safety plans; lack of informal assessments (i.e. minimum monthly contact); lack of contact with service providers; frequency of the visits with the child to ensure safety; insufficient formal assessments such as family functioning assessments (on-going)/progress updates; lack of assessing paramours and/or others residing in the home; incident focused; lack of documentation when the case is transferred to another county; and lack of quality visits with the parents to ensure safety within the home.

Permanency Outcome 1 Item 4- During FY 17-18; KFF dropped below the CFSR Baseline as well as the PIP Target in the 1st Qtr.; however, exceeded both targets (100%) for the remaining quarters of the fiscal year. There were 11 applicable cases for this item for the fiscal year. The strengths associated with this item is that overall, the target child had one placement during the PUR and that placement remained stable. The gaps between the findings and the benchmarks for this item was due to the target child having three different placements during the PUR. One placement was requested by the foster parent and the second placement was temporary.

Permanency Outcome 1 Item 5- During the 1st and 4th Qtrs. of 17-18; KFF dropped below the CFSR Baseline as well as the PIP Target; however, in the 2nd and 4th qtrs., KFF exceeded those targets (100%) for the 11 applicable cases reviewed. The strengths associated with this item is that during the 2nd and 4th qtrs., the target child's goal was established in a timely manner and when circumstances of the case changed; the case manager changed the goal timely. The gaps between the

findings and the benchmarks for this item during the 1st and 4th qtrs. include the following: the target child was in a nonrelative placement for five months before the agency changed the goal from permanent guardianship to adoption and the concurrent goal of adoption was not established timely.

Permanency Outcome 1 Item 6- During FY 17-18; KFF dropped below the CFSR Baseline as well as the PIP Target, however did exceed those targets in the 4th qtr. for the 11 applicable cases reviewed for this item. The strengths associated with this item was that the target child achieved permanency timely (adoption achieved within 13 months of the child coming into care) and the case manager aided in completing the adoption packets. The gaps between the findings and the benchmarks for this item include the following: one target child's permanency was delayed because of the turnover in case managers, a change in CLS, change in court magistrate; case manager failing to maintain contact with service providers to ensure that the mother was completing services; not establishing paternity early on during the case; poor relationship between the relative foster parent placement; reunification was not achieved in 12 months; failure of the case manager to maintain monthly contact with the parents to assess the safety of the home in which the child would return home; concurrent goal was not established; the case manager did not meet with the parents at least monthly; the court delayed reunification until the target child was out of school for the summer; delay in assessing the home in which the child would return ultimately delaying permanency; case was not priority for the case manager; target child was in foster care for 31 months prior to the permanency goal of adoption being achieved; the goal of reunification was extended three times.

Permanency Outcome 2 Item 7- During FY 17-18; KFF exceeded the CFSR Baseline and PIP Target in the 1st and 4th qtrs.; however, dropped below those targets during the 2nd and 3rd qtrs. for the nine applicable cases reviewed for this item. The strengths associated with this item is that the target child was placed with his or her siblings during the entire PUR unless it was necessary to separate them to meet the needs of one of the siblings. The gaps between the findings and the benchmarks for this item include the following: no documentation or explanation for the separated siblings and that one child had various negative behaviors resulting in the foster placement wanting the children separated; however, the agency did not make concerted efforts to address those behaviors in efforts to prevent the separation.

Permanency Outcome 2 Item 8- During FY 17-18; KFF dropped below the CFSR Baseline in all four qtrs. for the 11 applicable cases reviewed for this item. The strengths associated with this item is that the case manager created a visitation plan for the child and close family members. The gaps between the findings and the benchmarks for this item include the following: frequency of the visits between the target child and the father were not sufficient to promote continuity in their

relationship and there were no concerted efforts made by the agency to ensure the father visited the child more than once in the six month timeframe; the visits between the mother and/or father and the target child were not sufficient (less than monthly); concerns that the caregiver of the child was not allowing the mother to visit with the child however the agency did not make any efforts to ensure that visitation was occurring; and if visitations were not feasible, there was no evidence that the agency made concerted efforts to encourage or arrange for other types of contact between the target child and close family members.

Permanency Outcome 2 Item 9- During FY 17-18; KFF exceeded the CFSR Baseline during three of the four qtrs. but dropped below those targets during the 2nd qtr. for the 11 applicable cases reviewed for this item. The strengths associated with this item was that the target child was able to maintain contact with extended family; the target child was able to attend the same church that they visited prior to removal; appropriate Indian Child Welfare Act (ICWA) paperwork was completed; the case manager drove the child back and forth to school so the child did not have to change schools and the case manager contacted the school board to get the child transportation to school. The gaps between the findings and the benchmarks for this item include: the agency did not make concerted efforts to ensure that the target child maintained contact and/or visited with their extended family members or with a half sibling that was not in foster care.

Permanency Outcome 2 Item 10- During FY 17-18; KFF exceeded the CFSR Baseline during the 1st and 4th qtrs.; however, dropped below those targets during the 2nd and 3rd qtrs. for the 11 applicable cases reviewed for this item. The strengths associated with this item was that the agency completed diligent searches allowing for the target child to be placed with a relative and that the target child remained in a relative placement during the entire period under review. The gaps between the findings and the benchmarks for this item include the following: the target child was not placed with a relative and/or there was no evidence that the case manager attempted to locate, inform or evaluate any maternal and/or paternal relatives for placement.

Permanency Outcome 2 Item 11- During the FY 17-18- KFF dropped below the CFSR Baseline during three qtrs.; however, exceeded the targets in the 3rd qtr. for the 11 applicable cases reviewed for this item. The strengths associated with this item was that the father of the child was encouraged by the agency to have contact with the child and was provided updates by the foster parents regarding medical appointments, academic progress as well as vacations; the case manager informed the mother and/or father of the child's medical appointments and encouraged them to attend. The gaps between the findings and the benchmarks for this item include the following: the agency did not make concerted efforts to promote

or support a positive relationship between the mother and the child (i.e. the mother was not invited to the child's medical appointments and was not encouraged to contact the child through alternate means such as phone, video chat or email); no evidence to support that the foster parents 1. served as mentor to the parents 2. provided or arranged transportation to the parents so the parents could participate in the child's activities 3. provided opportunities for therapeutic situations to strengthen the relationship 4. encouraged/facilitated communication with parents who did not live near the child and/or unable to have frequent face-to-face visitation 5. Encouraged the parent's participation in school related activities, doctor's appointments or engagement in after school related activities; the case manager did not inform or invite the parents to the child's medical appointments and/or school activities.

Well-Being Outcome 1 Item 12 A; Sub-Item 12 B; Sub-Item 12 C- During the FY 17-18; dropped below the CFSR Baseline and PIP Target for Items 12 and the sub-items except for the 1st gtr.-Sub-Item 12 A and 2nd gtr. Sub-Item 12 C where KFF exceeded the targets for the 19 applicable cases reviewed for this item. The strengths associated with this item was relatives were provided with relative caregiver funds; the child's needs related to self-esteem, social relationships, caregiver relationships/attachment were adequately assessed, and the appropriate services were provided; initial and ongoing assessments completed on the parents; foster parents were provided what they needed and/or requested to enable them to care for the child. The gaps between the findings and the benchmarks for these items include the following: initial assessments of the primary caregiver (parents or other caregiver) were completed however the on-going assessments were not completed; no or limited contact with service providers; the appropriate service need was not provided by the agency; no or limited contact with the father during the entire period under review resulting in the lack of formal and informal assessments; mother was not provided assistance with transportation to assist her in completing the required service; referrals for a mental health evaluation and a parental fitness evaluation were not completed by the case manager; a mental health need was identified however the service was not provided; the father was not referred to required parenting classes; the agency did not assist with alternate methods of transportation to ensure the caregiver was able to get to the required service; the needs of the child were not adequately assessed including not meeting with the child alone and not providing the appropriate service to meet the child's needs; the on-going family functioning assessment was copied from the investigative FFA; lack of engagement with the child and/or parents/caregivers.

Well-Being Outcome 1 Item 13- During FY 17-18; KFF dropped below the CFSR Baseline and PIP Target during all four qtrs. for the 19 applicable cases for this item. The strengths associated with this item was that the case manager involved the child/ren in the case planning process by having discussions about how their therapy sessions were going and their

feelings and would talk to the children about talking to their mother on the phone and writing letters when she was incarcerated; the agency involved the caregiver in the case planning process by conducting family team conferences and having discussions during face to face visits as well as by phone about the services, the case plan, cleaning the home and appointments; after reunification the case manager conducted a family team conference at the mother's home to identify her strengths and areas of opportunities; the case manager actively involved the parent in the case planning process during visits, court proceedings and telephone calls. The gaps between the findings and the benchmarks for this item includes the following: the case manager did not involve the child and or parents in the case planning process on an ongoing basis during the period under review; no or limited contact with the father; the case manager failed to have age appropriate conversations with the target child regarding the case planning process.

Well-Being Outcome 1 Item 14- During FY 17-18; KFF dropped below the CFSR Baseline and PIP Target during all four qtrs. for the 19 applicable cases for this item. The strengths associated with this item was that the frequency and the quality of the visits between the case manager and the child were sufficient to address safety, permanency, well-being and promote case plan goals; the case manager made attempts were made to interview the child alone; the case manager documented their observations of the child's interactions with others in the home. The gaps between the findings and the benchmarks for this item include the following: the case manager did not meet with the child alone and did not spend any quality time engaging the child; the case manager had limited interactions with the child; the case manager did not have discussions with the child regarding safety, permanency or well-being.

Well-Being Outcome 1 Item 15- During FY 17-18; KFF dropped below the CFSR Baseline and PIP Target during all four qtrs. for the 19 applicable cases for this item. The strengths associated with this item was that the case manager met with the parents and had in-depth quality conversations regarding safety, permanency and well-being; the frequency of the visits with the parents were sufficient to ensure safety, permanency and well-being. The gaps between the findings and the benchmarks for this item include the following: the case manager did not have discussions with the parents to include, safety, permanency and well-being during each face to face visit during the period under review; the case manager only completed face to face visits with the mother after court which did not allow for open and honest conversations in addition to being very brief; limited or no contact with the mother and/or father.

Well-Being 2 Item 16- During FY 17-18; KFF exceeded the CFSR Baseline during three of the four qtrs. for the 9 applicable cases for this item. During the 1st qtr.; KFF dropped below the CFSR Baseline and PIP Target. The strengths associated

with this item was that the case manager assessed the target child's educational needs through observations, interviews with the foster parent, the target child and the school counselor; the target child had a speech impediment and the case manager referred the child for an assessment; the case manager ensured that the child was receiving speech therapy at school; the child's educational needs were assessed by way of a Child Behavioral Health Assessment (CBHA). The gaps between the findings and the benchmarks for this item include the following: the target child was assessed, and it was determined that the child needed a tutor. The tutor completed one visit. The case manager's supervisor directed the case manager to follow-up with the tutor; however, there was no evidence that the case manager contacted the tutor or made concerted efforts to provide the child with another tutor.

Well-Being 3 Item 17- During FY 17-18; KFF dropped below the CFSR Baseline during all four qtrs. for the 12 applicable cases for this item. The strengths associated with this item was that the child/ren received routine and follow-up dental care as recommended. The gaps between the findings and the benchmarks for this item include the following: there was no evidence that the target child obtained medical treatment therefore it is unknown if the child had any physical; follow-up dental care was not provided and/or requested; the CBHA recommended that the child be referred for a full developmental evaluation however the child was not referred.

Well-Being 3 Item 18- During FY 17-18; KFF exceeded the CFSR Baseline in the 1st qtr.; however, dropped below the target in the 2nd and 3rd qtr. (Note: There were no applicable cases for this item during the 4th qtr.). The strengths associated with this item was that the case manager adequately assessed the child's mental/behavioral health needs through observations, interviews with collaterals and interviews with parents/caregivers; a child was noted to have issues with listening, hitting and temper tantrums so the agency referred the child to a behaviorist to assist with these behaviors. The gaps between the findings and the benchmarks for this item include the following: the case manager did not make concerted efforts to provide grief counseling to the child; the counseling the children were referred to was delayed due to a waiting list and documentation did not support that the agency made concerted efforts to refer the children to another provider; children were referred for counseling however the agency did not follow-up with the service provider to ensure the counseling was occurring.

Performance Improvement Plan (PIP) Reviews

Overall, the strengths and gaps between the findings and the benchmarks for the four PIP cases reviewed during FY 17-18 are consistent with the RSF & CQI findings listed above.

The gaps between the findings and the benchmarks for all the reviews can be attributed to barriers related to systemic issues such as high staff turnover, limited service providers in the county served and CLS/court collaboration.

V. Intervention Findings

After an analysis of review findings; QI activities specific to opportunities for improvement will continue to be addressed as described in the annual update of the KFF Annual Performance & Quality Improvement Plan.