



## Our Mission

*To ensure the safety of children through a holistic approach designed to support the health and well-being of families in order to build a healthier community one family at a time.*

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# Annual Performance & Quality Improvement Report FY 2019-2020

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## **I. Introductory Section**

Kids First of Florida (KFF) is the lead agency for foster care and adoption related services in Clay County Florida. KFF was awarded the contract from the Department to be the lead child welfare agency for Clay County located within the Fourth Judicial Circuit. KFF provides prevention, case management, placement and adoption services, as well as post adoption supportive and independent living services. Kids First of Florida, Inc. is accredited through the Council on Accreditation (COA) for the areas of Adoption Services, Case Management Services, Family Foster Care and, Kinship Care, and Youth Independent Living Services through October 31, 2022.

### **Capacity for Quality Assurance and Continuous Quality Improvement**

#### **A. Quality Assurance Department:**

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KFF's capacity for performing QA and CQI activities include a Quality Assurance Department that consists of two Quality Assurance Coordinators and one Quality Assurance Manager. The Quality Assurance Department utilizes standardized and non-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) outcome goals of safety, permanency and well-being. The standardized tools are both available on the Center for Child Welfare website and referenced throughout this document. The website provides details on how ratings are determined in each tool. In addition, the internal non-standardized review tools and tracking systems used by the Quality Assurance Department allows for on-going root cause analysis of all the qualitative and quantitative review data via targeted reviews. These tools are utilized as a learning/coaching opportunity and/or training tool to be used with a group or in an individual setting for KFF case managers and/or supervisors in efforts to improve practice. The Quality Assurance Manager collects, analyzes and disseminates qualitative and quantitative data throughout the agency on an on-going basis.

#### **B. KFF Data, Policy and Project Analyst:**

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The Quality Assurance Department also collaborates with the Data, Policy and Project Analyst within the agency for various QA and CQI activities when needed.

#### **C. Operations Manager:**

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The Quality Assurance Department collaborates with KFF's Operations Manager in efforts to ensure proficiency of the safety practice model within the agency. The CSPS utilizes a fidelity monitoring tool (which is aligned with RSF, CFSR and Florida CQI reviews) and data analysis from the Quality Assurance Department to determine training/coaching needs on an on-going basis.

#### **C. Quality Improvement Team:**

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KFF has a Quality Improvement Team that was 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.

#### **D. Leadership:**

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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 & 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. 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 on-going; including joining the KFF Quality Improvement Team and are encouraged to participate throughout the year.

## **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. The tables and graphs contained in this report 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 site visit of KFF was conducted on October 15<sup>th</sup> through the 19<sup>th</sup>, 2018. The visit resulted in KFF developing a corrective action plan for the following performance measures and CQI items: M01-Rate of abuse or neglect per day while in foster care, M05-Percent of children exiting foster care to a permanent home within twelve months of moving to a permanent home, M10-Percentage of children in out-of-home care who received dental services within the last seven months, CQI Item 3-Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care, CQI Item 12B-Did the agency make concerted efforts to assess the needs of and provide services to parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family and CQI Item 13-Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?

A DCF Contract Oversight Unit Desk Review of KFF was completed in June 2020. The completed report is pending.

The draft report identified the following areas as needing action:

- a. Percent of Children not maltreated within six months of termination of Family Support
- b. CQI Item 3, Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care
- c. Percent of Children exiting to a permanent home within 12 months of entering care
- d. CQI Item 6, Did the agency make concerted efforts to achieve permanency
- e. Children receiving dental care
- f. Adoption delays that are negatively impacting concerted efforts to achieve timely permanency

The draft report also identified the following opportunities for improvement:

- a. Percent of Children who don't re-enter care within 12 months of moving to a permanent home
- b. CQI Item 5, Did the agency establish appropriate permanency goals for the child in a timely manner
- c. CQI Item 12B, Did the agency make concerted efforts to assess the needs of and provide services to parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the families
- d. Relative/Non-Relative Caregiver Support
- e. Re-evaluation of previously identified opportunities for improvement to ensure performance has increased as projected. If intended results are lacking, new measures to improve should be researched and implemented.

A corrective plan will be developed when the report is completed.

## **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.

Performance remained above the standard throughout the fiscal year for the following four scorecard measures: the percentage of children under supervision who are seen every thirty (30) days, the percentage of young adults in foster care at age 18 that have completed or are enrolled in secondary education, the percentage of children exiting to a permanent home within 12 months for those in care 12 to 23 months, and the percentage of sibling groups where all siblings are placed together.

During the fiscal year, the percentage of children in out-of-home care who received dental services within the last seven months and the percent of children exiting foster care to a permanent home within 12 months of entering care measures were not met in any of the quarters and a corrective action plan was developed. As a result of corrective action, positive progress towards meeting the standard was seen in the percent of children exiting foster care to a permanent home within 12 months of entering care. Root causes of fluctuating/declining performance in other measures were/will be explored to determine what corrective action, if any, is needed.

| <b>Contract and Scorecard Measures Performance FY 19-20</b> |                            |  |                 |           |           |           |             |
|---|----------------------------|--|-----------------|-----------|-----------|-----------|-------------|
| <b>Contract Measure #</b>                                   | <b>Scorecard Measure #</b> | <b>Contract and Scorecard Measures</b>   | <b>Standard</b> | <b>Q1</b> | <b>Q2</b> | <b>Q3</b> | <b>Q4**</b> |
| 1   | M01                        | Rate of abuse or neglect per day while in foster care  | 8.50 or lower   | 1.79      | 1.68      | 3.99      | 5.36        |
| 2   | N/A                        | Number of children with finalized adoptions between July 1, 2018 and June 30, 2019                       | 55              | 21        | 15        | 17        | 20          |
| 3   | M04                        | Percentage of children under supervision who are seen every thirty (30) days                             | 99.5% and above | 99.96%    | 99.93%    | 99.87%    | 99.79%      |
| 4   | M05                        | Children exiting foster care to a permanent home within twelve (12) months of entering care              | 40.5% and above | 28.31%    | 24.59%    | 24.29%    | 25.54%      |
| 5   | M07                        | Children who do not re-enter foster care within twelve (12) months of moving to a permanent home         | 91.7% and above | 88.46%    | 89.66%    | 100%      | 97.83%      |
| 6   | M08                        | Children's placement moves per 1,000 days in foster care   | 4.12 or fewer   | 3.80      | 3.94      | 3.48      | 3.02        |
| 7   | M09                        | Percentage of children in out-of-home care who received medical service in the last twelve (12) months   | 95.0% and above | 96.45%    | 94.20%    | 88.96%    | 82.66%      |
| 8   | M10                        | Percentage of children in out-of-home care who received dental services within the last seven (7) months | 95.0% and above | 72.82%    | 68.14%    | 69.51%    | 52.49%      |
| 9   | M11                        | Percentage of young adults in foster care at age 18 that have  | 80.0% and above | 85.71%    | 100%      | 100%      | 100%        |

|     |     |   |                 |        |        |        |        |
|-----|-----|---|-----------------|--------|--------|--------|--------|
|     |     | completed or are enrolled in secondary education  |                 |        |        |        |        |
| N/A | M02 | Percentage of children who are not neglected or abused during in-home services                        | 95.0% and above | 96.22% | 95.03% | 93.35% | 94.02% |
| N/A | M03 | Percentage of children who are not neglected or abused after receiving services                       | 95.0% and above | 97.84% | 97.64% | 95.99% | 94.72% |
| N/A | M06 | Percentage of children exiting to a permanent home within 12 months for those in care 12 to 23 months | 43.6% and above | 60.64% | 65.56% | 68.57% | 66.67% |
| N/A | M12 | Percentage of sibling groups where all siblings are placed together                                   | 65.0% and above | 61.39% | 61.70% | 63.33% | 66.67% |

\*\* Considered draft until Q1 data is published.

### 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 services 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 2019-2020, 32 cases were reviewed utilizing the RSF standardized review tool as seen in chart below and the results are 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 2019-2020, 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 2019-20, 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. 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 2019-2020, KFF completed four PIP monitored case reviews and entered the findings in the federal online CFSR portal. The four PIP monitored cases consisted of two foster care cases and two in-home judicial/non-judicial cases. The PIP data is rolled up into state data and is compared to the PIP Target and CFSR Benchmarks. **It should be noted that due to the small number of Performance Improvement Plan (PIP) Reviews conducted annually by KFF, the data in this report combines the PIP reviews with the Continuous Quality Improvement Reviews (CQI) conducted by Kids First of Florida for FY 2019-2020 and FY 2019-2020. Performance trends and outcomes will be further explained in the sections below.**

#### **Rapid Safety Feedback Analysis:**

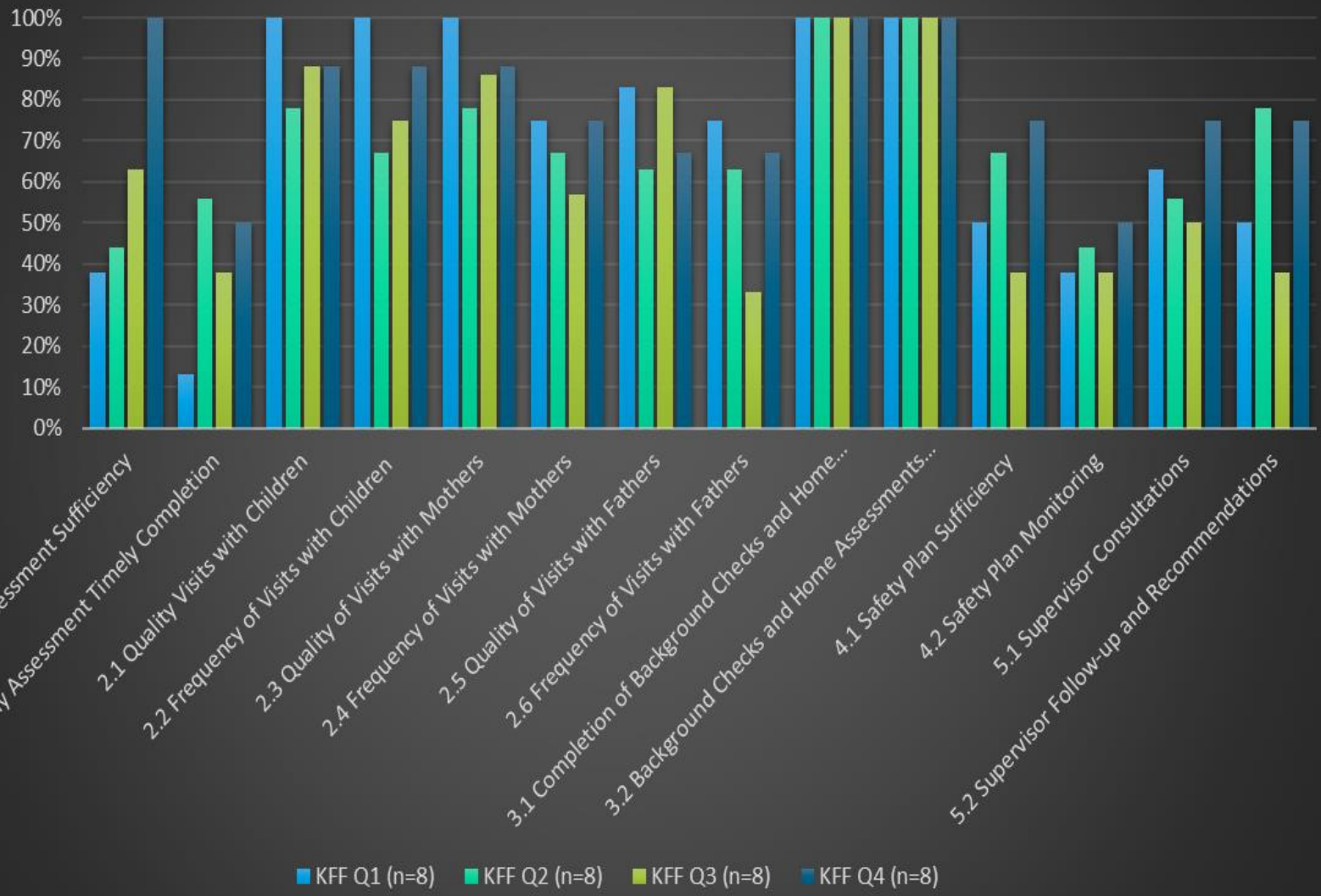
As illustrated the graphs and tables below, in comparison to FY 18-19; KFF has had an increase in average % strength in two of the 14 RSF items (Completion and Assessment of Background Checks and Assessments during FY 19-20. In comparison to FY 18-19; KFF seen a decrease in performance in 12 of the 14 case review items in FY 19-20 however, KFF's average % strength was higher than the state for FY 19-20 for 10 of those 14 items. It should be noted that KFF began a positive improvement trend in Q3 of FY 19-20. In addition, KFF did not have to issue any RFA's (Request for Action) in FY 19-20.



## Rapid Safety Feedback FY 18-19 & 19-20 KFF & State Comparison



## 19-20 Rapid Safety Feedback by Qtr.



## CFSR/PIP Continuous Quality Improvement Analysis:

### Safety Outcome 2

●**CFSR/CQI/PIP Item 2-** During FY19-20; KFF’s average has maintained 100% when compared to FY 18-19 for CSFR/CQI/PIP Item 2 (*Concerted efforts to provide services to prevent removal or re-entry after reunification*) for cases that were applicable for this item. KFF’s average for FY 19-20 is above the CSFR Baseline of 77.50% as well as the PIP Target of 85.80%.

●**CFSR/CQI/PIP Item 3-** During FY 19-20; KFF’s average was 46% compared to 52% in FY 18-19. KFF has seen a 12% decrease in average strength for CSFR/CQI/PIP 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*) for cases that were applicable for this item which is below the CSFR Baseline of 71.30% and PIP target of 77.70%.

| Kids First of Florida<br>CQI & PIP Item %<br>Strength | Description   | CFSR<br>Baseline | PIP<br>Target | 16-17<br>Average | 17-18<br>Average | 18-19<br>Average | 19-20<br>Average | Trend |
|---|---|------------------|---------------|------------------|------------------|------------------|------------------|-------|
| Item 2  | Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care | 76.50%           | 85.80%        | 100%             | 63%              | 100%             | 100%             |       |
| Item 3  | Risk and Safety Assessment and Management   | 71.30%           | 77.70%        | 55%              | 21%              | 52%              | 46%              |       |

## Permanency Outcome 1

- **CFSR/CQI/PIP Item 4-** During FY19-20; KFF’s average was 60%% compared to 87% in FY18-19. KFF has seen a 31% decrease in the average 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)*). This item remains below the CFSR Baseline of 81.80% and the PIP Target of 88.50%.
- **CFSR/CQI/PIP Item 5-** During FY19-20; KFF’s average was 73% which remains the same as in FY18-19 for Item 5(*Timely establishment of permanency goals*) falling below the CFSR Baseline of 74.50% and the PIP Target of 82.10%.
- **CFSR/CQI/PIP Item 6-** During FY19-20; KFF’s average was 29% compared to 33% in FY18-19. KFF has seen a (14%) decrease in average strength for Item 6 (*Concerted efforts to achieve the child’s permanency goal*) falling well below the CFSR Baseline of 67.30% and PIP Target of 75.40%.

| Kids First of Florida<br>CQI & PIP Item %<br>Strength | Description   | CFSR<br>Baseline | PIP Target | 16-17<br>Average | 17-18<br>Average | 18-19<br>Average | 19-20<br>Average | Trend |
|---|---|------------------|------------|------------------|------------------|------------------|------------------|-------|
| Item 4  | Stability of Foster Care Placement  | 81.80%           | 88.50%     | 100%             | 93%              | 87%              | 60%              |       |
| Item 5  | Permanency Goal for Child   | 74.50%           | 82.10%     | 86%              | 79%              | 73%              | 73%              |       |
| Item 6  | Achieving Reunification, Guardianship,<br>Adoption, or Other Planned Permanent Living | 67.30%           | 75.40%     | 73%              | 43%              | 33%              | 29%              |       |

## Permanency Outcome 2

- **CFSR/CQI/PIP Item 7-** During FY19-20; KFF's average was 67% compared to 89% in FY18-19. KFF has seen a 25% decrease in average strength for Item 7 (*Concerted efforts made to place siblings together unless separation was necessary to meet the needs of one of the siblings*) falling below the CFRS Baseline of 85%
- **CFSR/CQI/PIP Item 8-** During FY19-20; KFF's average was 60% compared to 50% in FY18-19. KFF has seen a 20% increase in average strength for Item 8 (*Concerted efforts to ensure that visitation between a child in foster care and his or her mother, father and siblings was of sufficient frequency and quality to promote continuity*). Even though KFF has seen an increase in performance for this item, it continues to fall below the CFRS Baseline of 69%.
- **CFSR/CQI/PIP Item 9-** During FY19-20; KFF's average was 85% compared to 80% in FY18-19. KFF has seen a 6% increase in average strength for Item 9 (*Concerted efforts to maintain the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school and friends*) which is above the CFRS Baseline of 82%.
- **CFSR/CQI/PIP Item 10-** During FY19-20; KFF's average was 83% compared to 86% in FY18-19. KFF has seen a 3% decrease in average strength for Item 10 (*Relative Placement*) however, rising above the CFRS Baseline of 72%.
- **CFSR/CQI/PIP Item 11-** During FY19-20; KFF's average was 44% compared to 42% in FY18-19. KFF has seen a slight increase of 5% 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*). Even though KFF has increased in average strength for this item, it still falls below the CFRS Baseline of 60%.

| Kids First of Florida<br>CQI & PIP Item %<br>Strength | Description  | CFSR<br>Baseline | PIP<br>Target | 16-17<br>Average | 17-18<br>Average | 18-19<br>Average | 19-20<br>Average | Trend |
|---|--|------------------|---------------|------------------|------------------|------------------|------------------|-------|
| Item 7  | Placement With Siblings                              | 85%              | NA            | 88%              | 73%              | 89%              | 67%              |       |
| Item 8  | Visiting With Parents and<br>Siblings in Foster Care | 69%              | NA            | 70%              | 14%              | 50%              | 60%              |       |
| Item 9  | Preserving Connections                               | 82%              | NA            | 83%              | 93%              | 80%              | 85%              |       |
| Item 10   | Relative Placement                                   | 72%              | NA            | 69%              | 71%              | 86%              | 83%              |       |
| Item 11   | Relationship of Child in<br>Care With Parents        | 60%              | NA            | 58%              | 38%              | 42%              | 44%              |       |

### Well-Being Outcome 1

- **CFSR/CQI/PIP Item 12-** During FY19-20; KFF's average was 54% compared to 40% in FY18-19. KFF has seen an increase of 35% 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*) however remains below the CFSR Baseline of 51.30% and PIP Target of 58.40%.
- **CFSR/CQI/PIP Sub-Item 12 A-** During FY19-20; KFF's average was 87% compared to 96% in FY18-19. KFF has seen a decrease of 9% for Sub-Item 12 A (*Needs assessment and services to children*) which fell slightly below the CFSR Baseline of 88%.
- **CFSR/CQI/PIP Sub-Item 12 B-** During FY19-20; KFF's average was 54% compared to 35% in FY18-19. KFF has seen an increase of 54% for Item 12 B (*Needs assessment and services to parents*) which falls slightly below the CFSR Baseline of 55%. In addition, a DCF Contract Oversight Unit Review (Onsite) of KFF was conducted in October 2018 and found that KFF was not meeting the performance measure regarding this item. KFF developed a corrective action plan (CAP) which was implemented in July FY19-20 in efforts to strengthen performance in this area. KFF was able to successfully meet the performance measure for this item which resulted in the CAP item being removed.

●**CFSR/CQI/PIP Sub-Item 12 C-** During FY19-20; KFF's average was 67% compared to 60% in FY18-19. KFF has seen an increase of 12% for Item 12 C (*Needs assessment and services to foster parents*). Even though KFF has seen an increase for this item; performance has continued to be below the CSFR Baseline of 80%.

●**CFSR/CQI/PIP Item 13-** During FY19-20; KFF's average was 50% compared to 56% in FY18-19. KFF has seen a decrease of 11% 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*) which continues to fall below the CSFR Baseline of 63.60% and the PIP Target of 70.70%. In addition, a DCF Contract Oversight Unit Onsite Review of KFF was conducted in October 2018 and found that KFF was not meeting the performance measure regarding this item. KFF developed a corrective action plan (CAP) which was implemented in July FY 19-20 in efforts to strengthen performance in this area. KFF will continue to monitor performance for this item via the CAP throughout FY 20-21. Details of the CAP related to this item will be addressed in the annual update of the Quality Management Plan for FY 20-21.

●**CFSR/CQI/PIP Item 14-** During FY19-20; KFF's average was 83% compared to 96% in FY17-18-19. KFF has seen a slight decrease 14% 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*). For It should be noted that KFF remains above the CSFR Baseline of 72.50% and the PIP Target of 78.90% for this item.

●**CFSR/CQI/PIP Item 15-** During FY19-20; KFF's average was 50% compared to 35% in FY18-19. KFF has seen an increase of 43% 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*). KFF was above the CSFR Baseline of 43.50% for FY 19-20 however remains slightly below the PIP target of 51.10%

| Kids First of Florida<br>CQI & PIP Item %<br>Strength | Description  | CFSR<br>Baseline | PIP<br>Target | 16-17<br>Average | 17-18<br>Average | 18-19<br>Average | 19-20<br>Average | Trend |
|---|--|------------------|---------------|------------------|------------------|------------------|------------------|-------|
| Item 12   | Needs and Services of<br>Child, Parents, and Foster<br>Parents | 51.30%           | 58.40%        | 36%              | 13%              | 40%              | 54%              |       |
| Item 12A  | Needs Assessment and<br>Services to Children                   | 88%              | NA            | 78%              | 67%              | 96%              | 87%              |       |
| Item 12B  | Needs Assessment and<br>Services to Parents                    | 55%              | NA            | 34%              | 17%              | 35%              | 54%              |       |
| Item 12C  | Needs Assessment and<br>Services to Foster Parents             | 80%              | NA            | 61%              | 79%              | 60%              | 67%              |       |
| Item 13   | Child and Family<br>Involvement in Case<br>Planning            | 63.60%           | 70.70%        | 53%              | 29%              | 56%              | 50%              |       |
| Item 14   | Caseworker Visits With<br>Child                                | 72.50%           | 78.90%        | 29%              | 38%              | 96%              | 83%              |       |
| Item 15   | Caseworker Visits With<br>Parents                              | 43.50%           | 51.10%        | 41%              | 17%              | 35%              | 50%              |       |

**Well-Being Outcome 2**

●**CFSR/CQI/PIP Item 16-** During FY19-20; KFF’s average was 77% compared to 88% in FY18-19. KFF seen a decrease of 13% Item 16 (*Concerted efforts to assess children’s educational needs and appropriately address identified needs in the case planning and case management activities*). The average for FY19-20 is below the CFSR Baseline of 92%.



| Kids First of Florida<br>CQI & PIP Item %<br>Strength | Description                       | CFSR<br>Baseline | PIP<br>Target | 16-17<br>Average | 17-18<br>Average | 18-19<br>Average | 19-20<br>Average | Trend |
|---|-----------------------------------|------------------|---------------|------------------|------------------|------------------|------------------|-------|
| Item 16   | Educational Needs of the<br>Child | 92%              | NA            | 95%              | 92%              | 88%              | 77%              |       |



## Well-Being Outcome 3

●**CFSR/CQI/PIP Item 17-** During FY19-20; KFF’s average was 48% compared to 89% in FY18-19. KFF has seen a decrease of 46% for Item 17 (*Physical health needs of children, including dental health needs*) which falls below the CF SR Baseline of 85% for this item.

●**CFSR/CQI/PIP Item 18-** During FY19-20; KFF’s average was 52% compared to 60% in FY 18-19. KFF has seen a slight decrease of 13% for Item 18 (*Mental/Behavioral Health Needs of Children*) falling below the CF SR Baseline of 72%.

| Kids First of Florida<br>CQI & PIP Item %<br>Strength | Description                           | CF SR<br>Baseline | PIP<br>Target | 16-17<br>Average | 17-18<br>Average | 18-19<br>Average | 19-20<br>Average | Trend   |
|---|---------------------------------------|-------------------|---------------|------------------|------------------|------------------|------------------|---|
| Item 17   | Physical Health of the Child          | 85%               | NA            | 91%              | 56%              | 89%              | 48%              |  |
| Item 18   | Mental/Behavioral Health of the Child | 72%               | NA            | 88%              | 60%              | 60%              | 52%              |  |

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

KFF’s quality improvement process appears to work well. Through the process, improvement activities were implemented (referenced below) in FY19-20 in efforts to improve performance.

●**Systemic:**

- KFF is assigned as secondary to the case immediately (at shelter). KFF has enhanced the case transfer packet process to include a joint agreement (DCF/KFF) on the checklist and process, through review of the packets, as well as trained backup staff for packet review. The case transfer process has been enhanced to include the Child and Family Services Review (CF SR) “checklist” to ensure packets are complete.

-Staff are continuously provided with one-on-one mentoring sessions as well Learning Circles that center around quality case work as well as low performing areas by the Operations Manager, Program Directors and the Quality Assurance Department.

- KFF continues to focus on improving the partnership with CLS including communication; court preparation; Conditions for Return; revised forms; implementing CFOPs and legislative changes. CLS court prep occurs on a weekly basis with staff, supervisors and the judicial program director.

- MindShare is utilized by the Quality Assurance Department as well as staff. Program Directors and supervisors use Mindshare regularly as supervisory tools for multiple purposes (caseloads, visits, medical/dental, human trafficking, etc.). Case managers are regularly using it to enter notes from the field to employ most efficient use of time. New enhancement training is provided to staff on a regular basis.

-The Quality Assurance Department provided staff with a video presentation/training by Corey Best, "Values Driven Partnerships" to learn creative ways to engage fathers, roles and definitions of fathers and how biases can impact engagement, and the protective factors framework.

-The Operations Manager provided Supervisor Consultation Training to KFF Supervisors that focused on critical thinking skills, personality types and their influences on staff, time management, and the consultation process (mentoring vs. coaching).

●**Safety:**

-The Operations Manager continues to provide on-going training/mentoring around the Safety Practice Model including safety management engagement for all KFF staff. A quality "Safety Management" tool is being utilized to measure performance and ensure the Safety Management protocol is being followed. The safety management case manager's time is now split between the KFF office and the DCF office. This improves the timeliness of the safety conference with the safety monitors which is typically occurring within 24 hours of the referral receipt, not to exceed 2 business days. Weekly meetings take place between KFF safety management and DCF to focus on immediate and effective provision of safety services. The goal is to effectively identify and coordinate all safety services the family will need and to expedite getting the services in place. This is also a time to discuss successes and address any barriers/challenges.

- Senior Management and supervisors continue to monitor the "Children Seen-Not Seen" FSN report that the KFF Data, Policy and Project Analyst sends out three times a week to ensure that visits take place every 30 days in the child's residence.

-In FY 18-19, KFF implemented a FAST (Family Assessment Support Team) Non-Judicial Program for when a family has consented to accept intensive supervision and services aimed at stabilizing the family. The purpose is to ensure the

protection of unsafe children that are at risk of abuse or neglect. The program aids to provide services for 4-6 months, depending on the service needs of the family. FAST (FSCs) are bachelor-level certified child welfare staff trained in specialized services and program assessment tools. A Peer Support Specialist was hired which will be housed with a Family Intervention Specialist (FIS) staff member, a therapist and the FAST unit. Supervisor reviews occur every 30 days on all FAST cases. The FAST program continues to work well.

- KFF continues to utilize the Integrated Practice Team (IPT). The goal of the IPT meetings are to brainstorm ideas and create immediate and/or innovative solutions to assist the family to prevent a removal.

●**Permanency:**

-KFF continues to utilize the following tracking systems in efforts to improve performance related to permanency:

- M5 tracker- The purpose is to start discussing cases at Permanency Supervision with the supervisor once a case has been open 60-90 days to ensure we are monitoring for Conditions of Return being met and if an in-home safety plan can be implemented as soon as possible. The Program Director will meet with each supervisor a minimum of twice per month to review all children that are eligible under the scorecard measure to project cases that will achieve timely permanency and identify any barriers to achieving permanency. In addition, this tracker is used to ensure cases are added to the Permanency Staffing schedule accordingly and not overlooked.
- 301 Tracker- Reviewed at a minimum of once a month at Permanency Supervision to look at any child who is set to reunify or close PG, regardless of when the case opened. This helps to project a case for permanency, monitor the components such as options through court, home study completion, backgrounds, behavioral change, etc.
- TPS (Termination of Protective Supervision Tracker- purpose is to track cases that have an identified closure date as well as tracking and looking forward to when cases can close (i.e. 6 months PPS for a reunification) to make sure LAM's are filed timely or discretion to close is requested at the court hearing closest to the closure date. This also helps in projecting caseload #'s for FSC's. This is reviewed with supervisors monthly.
- New Case Arraignment/Case Plan Conference Tracker- purpose is to ensure cases are staffed with CLS for CP tasks at least 2 weeks prior to arraignment so FSC can develop the CP and file with CLS timely so all parties receive copies at least 3 business days ahead of the Arraignment/Case Plan Conference. Goal is to see consents come in more quickly thus driving permanency from the front end too.
- Case Transfer Staffing (CTS) Log/tracker- Once the list of sheltered cases is received from DCF, the Quality Assurance Supervisor or designee will review the cases in FSFN and prepare the Case Transfer Checklist Form. The Quality Assurance Supervisor or designee will send out an invite to the designated attendees via email and facilitates the staffing virtually via Zoom. Upon completion of the staffing the facilitator documents the CTS in FSFN

Meeting tab and uploads the Case Transfer Checklist Form that contains recommended follow-up for the child protective investigator as well as the case manager (if applicable). The judicial program director, supervisor and case manager will follow-up on recommended tasks that are outstanding to ensure they are completed.

➤ New Child Tracker- purpose is to identify all pregnant parents timely, follow new child protocol, determine legal sufficiency (if warranted). This also assists in projecting caseload #'s for FSC's.

- KFF created an internal workgroup consisting of placement, financial, FSC, FSCS, and Senior Leadership Staff. This group will address Quality Foster Parent Pre-Service Training, Effective Communication with Foster Parents (expectations, events, support etc.); Consistent Enhanced Placement Rates; Increased Quality Ongoing Training and Enhancing the current Foster Parent Support Group.

- Foster Parent Association Face Book Page was developed in November 2018 and continues to be utilized by foster parent and for recruitment purposes.

- Foster & Adoptive Parent Association is up and running and being led by a Foster Parent.

-KFF launched a Faith Based Community Initiative in February 2020 in efforts to recruit new foster parents and provide support to existing foster parents and kinship relatives, i.e. babysitting services and informal safety supports.

- LFC (Licensed Foster Care) Master List- purpose is to identify which foster homes will have an open bed(s) and approximate dates. This captures any child exiting to a relative, non-relative or parent. This is reviewed with supervisors monthly.

- KFF continues to utilize the Case Planning (CP) Conference that occurs on the same day as the arraignment. Case managers are discussing what case plans are and tasks with the parents and CLS (separately) ahead of the CP conference. At the CP conference, the parents are included in the discussion. The parent's counsel, parent, GAL program, GAL attorney, KFF and CLS attorney are all included in the Case Plan Conference.

-Incarcerated Parents is discussed during all non-judicial and judicial cases on an on-going basis to ensure engagement of parents that are incarcerated on an on-going basis.

- KFF has developed a Resource Guide for caregivers. KFF developed and implemented a Level 1 Licensing Program that provides holistic support services for those relatives & non-relatives that choose to participate. A licensing counselor is assigned to each relative/non-relative participating in the program.
- KFF has increased the social media communication with foster parents as well as developing a group email.
- KFF hired an additional placement specialist position to prioritize children in foster care and separated siblings and will assist with looking for relatives when a FAST case is failing or if more safety monitors are needed.
- FAPA (The Clay Chapter of the Foster and Adoptive Parent Association) is active including a Facebook page maintained by the association.
- KFF is holding placement stabilization staffing/s occur weekly to prevent disruption in placements, ensure additional services and supports are provided to foster parents with children who have emotional instability and behavioral issues due to trauma. Placement stabilization meetings are tracked and measured to monitor the number of placement disruptions/moves the child has, as well as, types of services and supports provided to meet foster parent needs for stabilization. In addition, KFF discusses placement stabilization during monthly permanency staffing/s.
- KFF utilizes the Placement Specialist to continue family finding efforts to continue to look for relatives as a possible placement
- Permanency Staffing/s continue to be held monthly to identify the cases that can move forward with permanency or address any barriers/challenges that may be causing the delays. KFF Staff as well as Children's Legal Services (CLS) attends these meetings and foster parents are also encouraged to attend.
- Case Managers send status letters to the court regarding visitation schedules for the parents which will show the efforts made by the agency to ensure that visits between the children and the parents are taking place (specifically regarding relative placement).
- KFF is conducting 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.

- Judicial Program Director implemented regular meetings with the GAL program to build relationships and acknowledge their important role in achieving permanency for children.

-KFF began utilizing contracted providers to complete adoption home studies to ensure they are completed timely.

**•Well-Being:**

- KFF revised the tracking process for medical/dental performance measures. Weekly data reports are sent out by the KFF Data, Policy and Project Analyst and are reviewed and monitored by Senior Leadership as well as supervisors to ensure the performance measures are met.

**III. Findings**

The following tables and graphs provide the number of case reviews completed by KFF in FY 19-20 and an analysis and evaluation of performance trends 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.

| Kids First of Florida<br>FY 19-20 Quality Assurance Case Reviews | Rapid Safety<br>Feedback | CQI CFSR<br>(with in-depth<br>interviews) | CQI CFSR<br>(no interviews) | Performance Improvement<br>Plan (PIP) (includes in-depth<br>interviews) |
|--|--------------------------|---|-----------------------------|---|
| Q1   | 8                        | 1   | 4                           | 1   |
| Q2   | 8                        | 1   | 4                           | 1   |
| Q3   | 8                        | 1   | 4                           | 1   |
| Q4   | 8                        | 1   | 4                           | 1   |

| <b>Rapid Safety Feedback %<br/>Average Strength Trending</b>         | <b>KFF 16-17<br/>% Average<br/>Q4 (n=36)</b> | <b>State 16-17<br/>% Average<br/>(n=798)</b> | <b>KFF 17-18<br/>% Average<br/>(n=35)</b> | <b>State 17-18<br/>% Average<br/>(n=841)</b> | <b>KFF 18-19<br/>% Average<br/>(n=32)</b> | <b>State 18-19<br/>% Average<br/>(n=709)</b> | <b>KFF 19-20<br/>% Average<br/>(n=32)</b> | <b>State 19-20<br/>% Average<br/>(n=805)</b> |
|--|--|--|---|--|---|--|---|--|
| 1.1 Family Assessment Sufficiency                                    | 26%  | 50%  | 33%                                       | 53%  | 69%                                       | 55%  | 61%                                       | 44%  |
| 1.2 Family Assessment Timely Completion                              | 34%  | 45%  | 29%                                       | 46%  | 53%                                       | 44%  | 39%                                       | 47%  |
| 2.1 Quality Visits with Children                                     | 49%  | 63%  | 44%                                       | 60%  | 97%                                       | 54%  | 88%                                       | 65%  |
| 2.2 Frequency of Visits with Children                                | 84%  | 77%  | 66%                                       | 77%  | 100%                                      | 75%  | 82%                                       | 80%  |
| 2.3 Quality of Visits with Mothers                                   | 58%  | 68%  | 80%                                       | 66%  | 94%                                       | 63%  | 88%                                       | 68%  |
| 2.4 Frequency of Visits with Mothers                                 | 66%  | 82%  | 58%                                       | 80%  | 84%                                       | 78%  | 68%                                       | 81%  |
| 2.5 Quality of Visits with Fathers                                   | 48%  | 55%  | 42%                                       | 54%  | 83%                                       | 50%  | 74%                                       | 56%  |
| 2.6 Frequency of Visits with Fathers                                 | 43%  | 54%  | 25%                                       | 51%  | 89%                                       | 51%  | 59%                                       | 53%  |
| 3.1 Completion of Background Checks and Home Assessments when Needed | 58%  | 70%  | 89%                                       | 75%  | 97%                                       | 70%  | 100%                                      | 74%  |
| 3.2 Background Checks and Home Assessments are Being Assessed        | 62%  | 76%  | 86%                                       | 78%  | 97%                                       | 75%  | 100%                                      | 79%  |
| 4.1 Safety Plan Sufficiency  | 33%  | 61%  | 32%                                       | 56%  | 94%                                       | 58%  | 57%                                       | 61%  |
| 4.2 Safety Plan Monitoring   | 37%  | 54%  | 36%                                       | 48%  | 94%                                       | 47%  | 42%                                       | 47%  |
| 5.1 Supervisor Consultations   | 31%  | 56%  | 64%                                       | 60%  | 84%                                       | 58%  | 61%                                       | 55%  |
| 5.2 Supervisor Follow-up and Recommendations                         | 26%  | 49%  | 66%                                       | 54%  | 75%                                       | 50%  | 60%                                       | 51%  |

| Rapid Safety Feedback % Strength YTD<br>by Qtr.                      | KFF                  | KFF                   | KFF                   | KFF                   | KFF                  | KFF                  | KFF                   | KFF                  | KFF                  | KFF                  | KFF                  | KFF                  | KFF                  | KFF                  | KFF                  | KFF                  | KFF                  | KFF                  |
|--|----------------------|-----------------------|-----------------------|-----------------------|----------------------|----------------------|-----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
|  | 16-17<br>Q1<br>(n=8) | 16-17<br>Q2<br>(n=10) | 16-17<br>Q3<br>(n=10) | 16-17<br>Q4 (n-<br>8) | 17-18<br>Q1<br>(n=9) | 17-18<br>Q2<br>(n=8) | 17-18<br>Q3<br>(n=10) | 17-18<br>Q4<br>(n=8) | 18-19<br>Q1<br>(N=8) | 18-19<br>Q2<br>(n=8) | 18-19<br>Q3<br>(n=8) | 18-19<br>Q4<br>(n=8) | 18-19<br>Q3<br>(n=8) | 18-19<br>Q4<br>(n=8) | 19-20<br>Q1<br>(n=8) | 19-20<br>Q2<br>(n=8) | 19-20<br>Q3<br>(n=8) | 19-20<br>Q4<br>(n=8) |
| 1.1 Family Assessment Sufficiency                                    | 13%                  | 50%                   | 40%                   | 0%                    | 0%                   | 25%                  | 20%                   | 88%                  | 63%                  | 50%                  | 63%                  | 100%                 | 63%                  | 100%                 | 38%                  | 44%                  | 63%                  | 100%                 |
| 1.2 Family Assessment Timely Completion                              | 50%                  | 40%                   | 20%                   | 25%                   | 22%                  | 0%                   | 30%                   | 63%                  | 88%                  | 13%                  | 38%                  | 75%                  | 38%                  | 75%                  | 13%                  | 56%                  | 38%                  | 50%                  |
| 2.1 Quality Visits with Children                                     | 63%                  | 80%                   | 30%                   | 25%                   | 11%                  | 38%                  | 40%                   | 88%                  | 100%                 | 88%                  | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 78%                  | 88%                  | 88%                  |
| 2.2 Frequency of Visits with Children                                | 100%                 | 90%                   | 70%                   | 75%                   | 78%                  | 50%                  | 60%                   | 75%                  | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 67%                  | 75%                  | 88%                  |
| 2.3 Quality of Visits with Mothers                                   | 75%                  | 67%                   | 40%                   | 50%                   | 67%                  | 75%                  | 80%                   | 100%                 | 100%                 | 75%                  | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 78%                  | 86%                  | 88%                  |
| 2.4 Frequency of Visits with Mothers                                 | 88%                  | 89%                   | 50%                   | 38%                   | 67%                  | 25%                  | 90%                   | 50%                  | 75%                  | 75%                  | 100%                 | 88%                  | 100%                 | 88%                  | 75%                  | 67%                  | 57%                  | 75%                  |
| 2.5 Quality of Visits with Fathers                                   | 100%                 | 43%                   | 50%                   | 0%                    | 14%                  | 60%                  | 43%                   | 50%                  | 100%                 | 57%                  | 75%                  | 100%                 | 75%                  | 100%                 | 83%                  | 63%                  | 83%                  | 67%                  |
| 2.6 Frequency of Visits with Fathers                                 | 80%                  | 57%                   | 22%                   | 14%                   | 0%                   | 25%                  | 25%                   | 50%                  | 100%                 | 67%                  | 88%                  | 100%                 | 88%                  | 100%                 | 75%                  | 63%                  | 33%                  | 67%                  |
| 3.1 Completion of Background Checks and Home Assessments when Needed | 25%                  | 70%                   | 60%                   | 75%                   | 56%                  | 100%                 | 100%                  | 100%                 | 100%                 | 88%                  | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 |
| 3.2 Background Checks and Home Assessments are Being Assessed        | 75%                  | 50%                   | 60%                   | 63%                   | 56%                  | 88%                  | 100%                  | 100%                 | 100%                 | 88%                  | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 | 100%                 |
| 4.1 Safety Plan Sufficiency  | 38%                  | 33%                   | 60%                   | 0%                    | 22%                  | 38%                  | 20%                   | 50%                  | 100%                 | 75%                  | 100%                 | 100%                 | 100%                 | 100%                 | 50%                  | 67%                  | 38%                  | 75%                  |
| 4.2 Safety Plan Monitoring   | 63%                  | 33%                   | 10%                   | 43%                   | 0%                   | 38%                  | 20%                   | 88%                  | 100%                 | 88%                  | 100%                 | 88%                  | 100%                 | 88%                  | 38%                  | 44%                  | 38%                  | 50%                  |
| 5.1 Supervisor Consultations   | 50%                  | 30%                   | 20%                   | 25%                   | 67%                  | 63%                  | 40%                   | 88%                  | 88%                  | 75%                  | 88%                  | 88%                  | 88%                  | 88%                  | 63%                  | 56%                  | 50%                  | 75%                  |
| 5.2 Supervisor Follow-up and Recommendations                         | 63%                  | 30%                   | 10%                   | 0%                    | 56%                  | 50%                  | 70%                   | 88%                  | 75%                  | 63%                  | 75%                  | 88%                  | 75%                  | 88%                  | 50%                  | 78%                  | 38%                  | 75%                  |

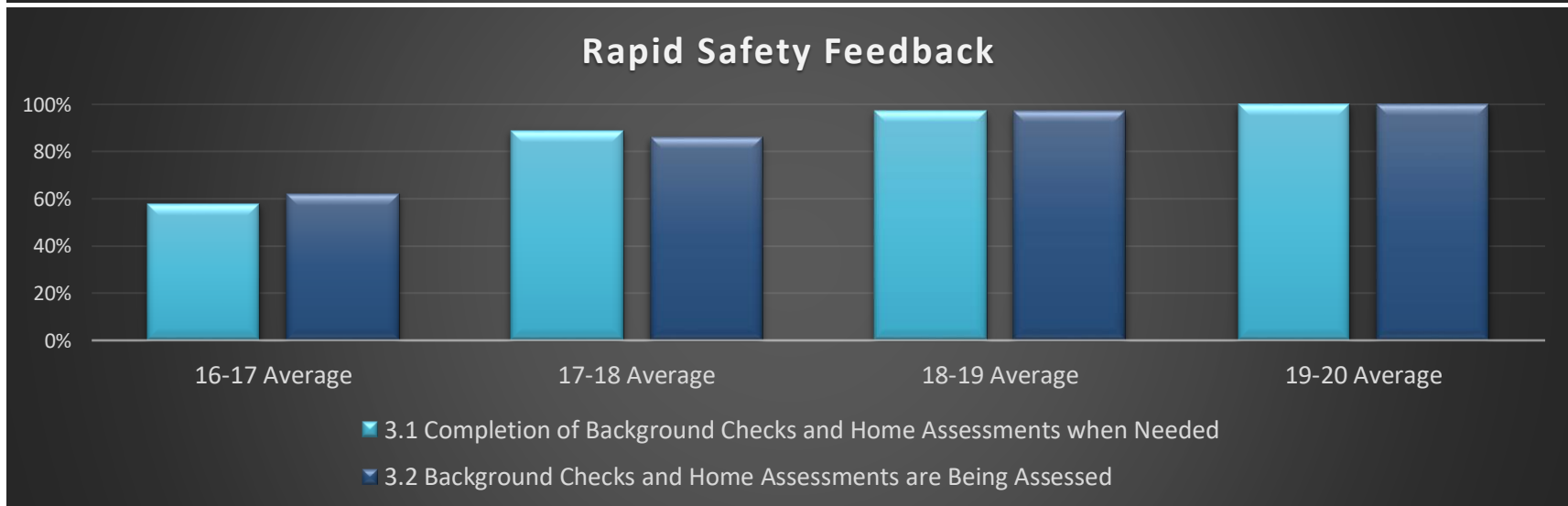
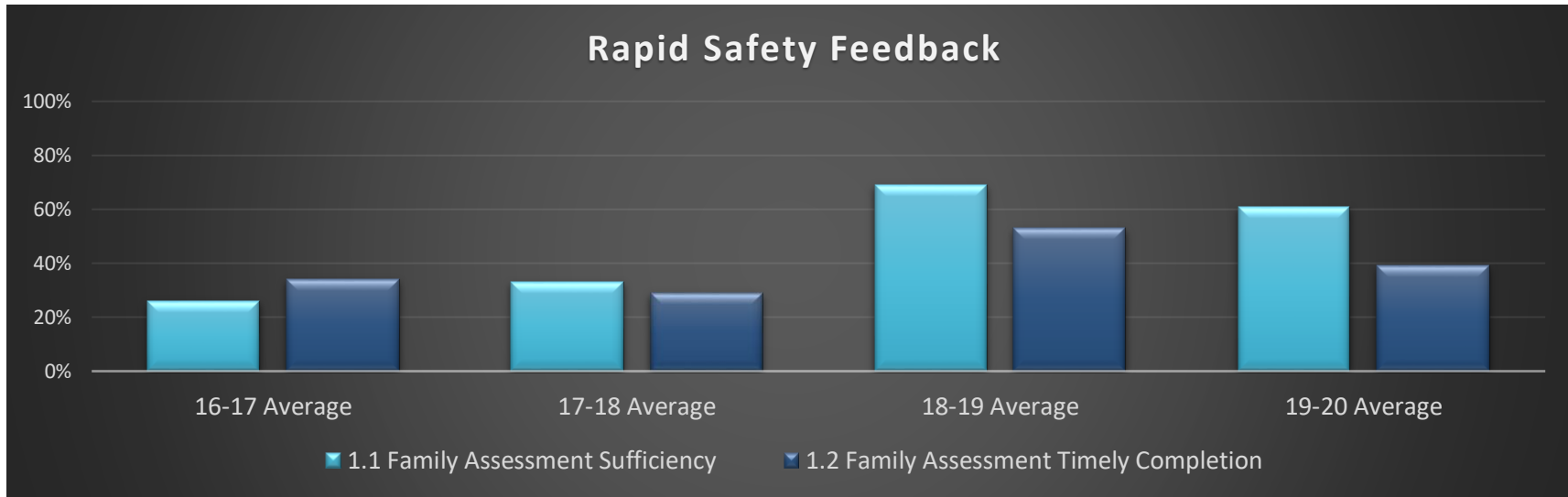


## IV. Gaps Between Findings and Benchmarks

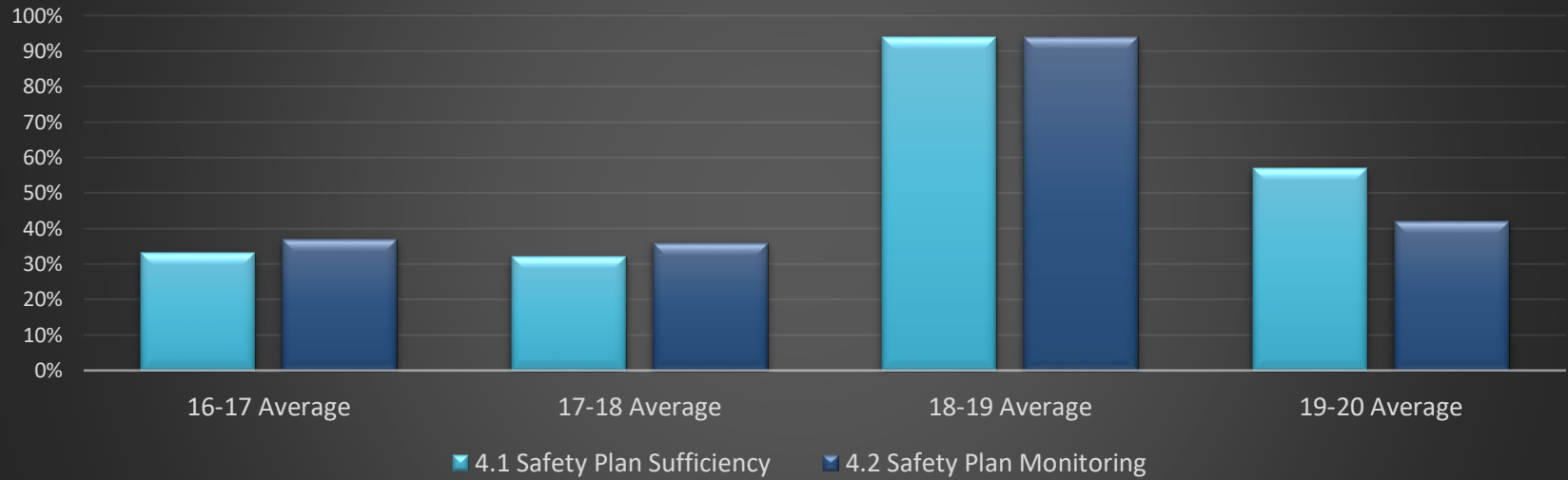
### Safety:

During FY 19-20 KFF experienced a decrease in performance for Rapid Safety Feedback (RSF) Item 1.1 *Family Assessment Sufficiency* (61% for FY 19-20 when compared to 69% in FY 18-19) and RSF 1.2 *Timely completion of Family Assessments* (53% in FY 18-19 when compared to 39% for FY 19-20). For the related CFSR/CQI items; specifically, Item 2; *Services to Family to Protect Child/ren in the Home and Prevent Removal or Re-Entry into Foster Care* and Item 3; *Risk and Safety Assessments and Management*; there is a correlation seen between the decrease in performance. It should be noted that KFF has had an average of 100% for two consecutive years for Item 2 which remains well above the CFSR Baseline of 76.50% and the PIP Target of 85.80%. However, KFF has seen a slight decrease in performance for Item 3 (46% for FY 19-20 when compared to 52% for FY 18-19). For other correlated safety items such as RSF Item 3.1 *Completion of Background Checks and Home Assessments when Needed* and RSF Item 3.2 *Background Checks and Home Assessments are Being Assessed* KFF's average was 100% for FY 19-20 which is well above the state average. RSF Item 4.1 *Safety Plan Sufficiency* (57% in FY 19-20 when compared to 94% in FY 18-19) and RSF Item 4.2 *Safety Plan Monitoring* (42% in FY 19-20 when compared to 94% in FY 18-19).; KFF seen a substantial decline in performance in both areas which is also aligned with performance as noted earlier in CFSR/CQI Item 3. In FY 19-20; there was also a slight decline in RSF Item 4.1 *Supervisor Consultations* (61% when compared to 84% in FY 18-19) & RSF Item 4.2 *Supervisor Follow-up/Recommendations* (60% when compared to 75% in FY 18-19) however KFF's average for both of those items remain above the state average. The gaps between the findings and the benchmarks include lack of sufficient information in the Family Functioning On-Going Assessment domains and/or Progress Updates; completion of the FFAO/Progress Updates at 90 day intervals and critical junctures; risk and safety assessments being conducted initially and on-going, appropriate safety plans being developed with the family; monitoring of those safety plans and limited documentation in the case file and FSFN. A DCF Contract Oversight Unit Review (On-site) of KFF was conducted in October 2018 and found that KFF was not meeting the performance measure regarding CFSR/CQI Item 3. KFF developed a corrective action plan (CAP) which was implemented in July FY19-20 and will continue through FY 20-21 in efforts to strengthen performance in

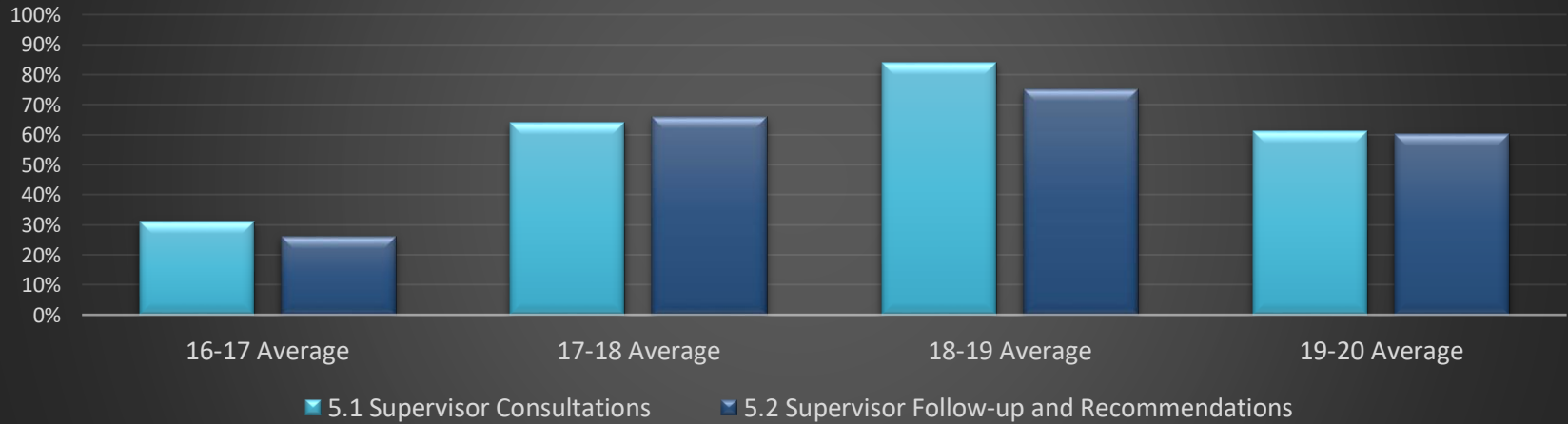
this area. Details of the CAP related to this item will be addressed in the annual update of the Quality Management Plan for FY 20-21.



### Rapid Safety Feedback



### Rapid Safety Feedback



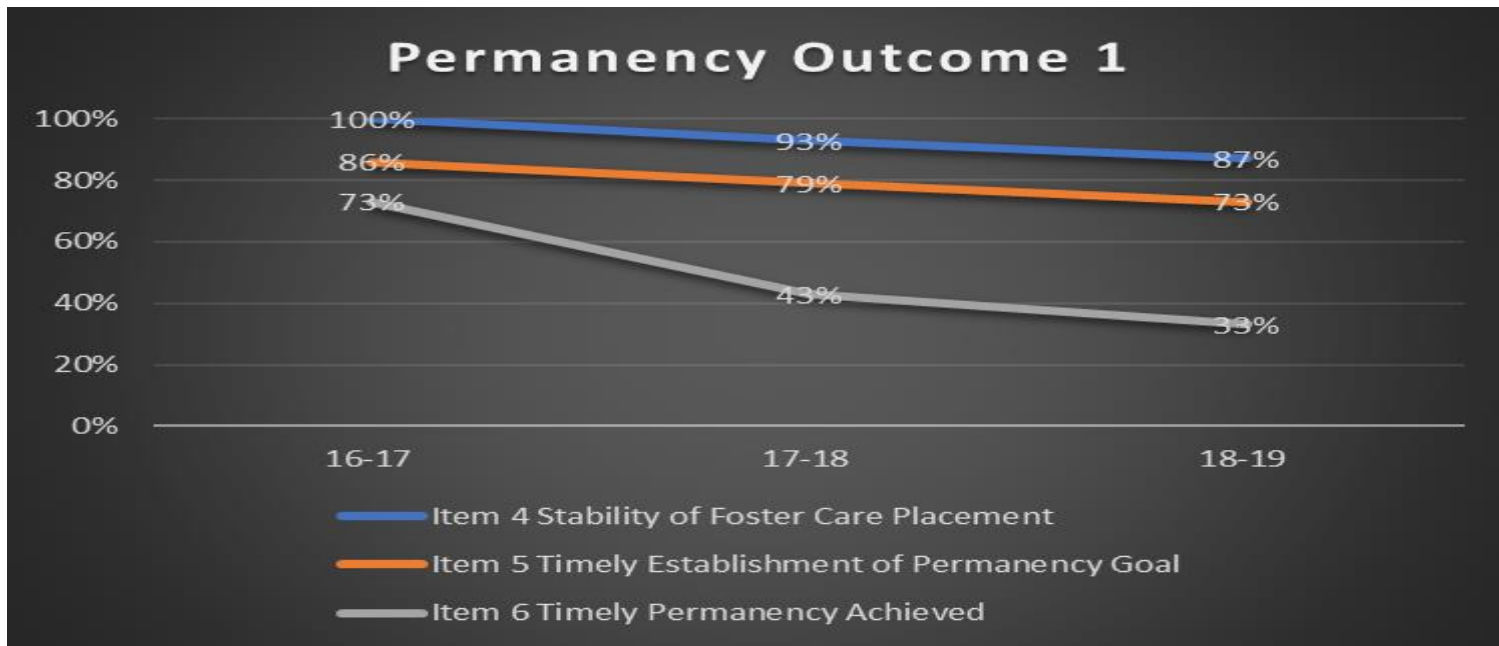


## Permanency Outcome 1:

KFF seen a notable decrease in performance for CFSR/CQI Item 4 *Stability in Foster Care Placement* during FY 19-20 (60% when compared to FY 18-19 at 87%). The gap between the findings and the benchmarks can be attributed to numerous placement settings/moves in the cases reviewed which were not in the child/ren’s best interest or consistent with achieving the children’s permanency goal/s. Of the 14 OOH cases reviewed during FY 19-20; there was a total of 26 placement settings (nine cases had one placement setting; two cases had two placement settings and three cases had three or more placement settings). The gap between the findings and the benchmarks can be attributed to the lack of agency efforts to stabilize initial placements (ensuring they are the “best fit” by completing adequate assessment of the child/ren’s needs) and ensuring appropriate services are provided when the child/ren have behavioral issues.

KFF has maintained performance of 73% for CFSR/CQI Item 5 *Permanency Goal for Child* which falls slightly below the CFSR Baseline of 74.50% and the PIP Target of 82.10%. Of the 14 OOH cases reviewed, five of the 14 rated as an area needing improvement for this item. The gap between the findings and the benchmarks for this decline in performance can be attributed to goals not being established timely, lack of concurrent goals and the goal not being appropriate to the child's needs for permanency and to the circumstances of the case. Of the five cases reviewed, one case involved the goal of reunification not being appropriate to the child's needs and to the circumstances of the case, two cases involved the goal of adoption not being established timely, one case involved the lack of a concurrent goal of adoption being added and one case involved a delay in the adoption goal being established.

KFF's performance for CFSR/CQI Item 6 *Timely Permanency Achieved* has steadily declined since FY 17-18. For FY 19-20; KFF's performance for this item is at 29% which is well below the CFSR/CQI Baseline of 67.30% and the PIP Target of 75.40%. The gap between the findings and the benchmarks can be attributed to the lack of agency efforts to achieve permanency timely, specifically when the goal was adoption. The gap between the findings and the benchmarks for this continued decline in performance can be attributed to goals not being achieved timely due to the lack of concerted efforts particularly when there was a goal of adoption or a concurrent goal of adoption should have been added. Of the 14 OOH cases reviewed, 13 of those cases rated as areas needing improvement (ANI). One case involved the adoption goal not being achieved timely due to the late assignment of an adoption specialist, in two cases the reunification goal was delayed by the court, two cases involved a delay in services being provided to the family which resulted in a delay in permanency being achieved timely, in five cases the lack of concurrent goal planning resulted in the ANIs and three were due to a delay in the adoption home studies being completed.



## Permanency Outcome 2:

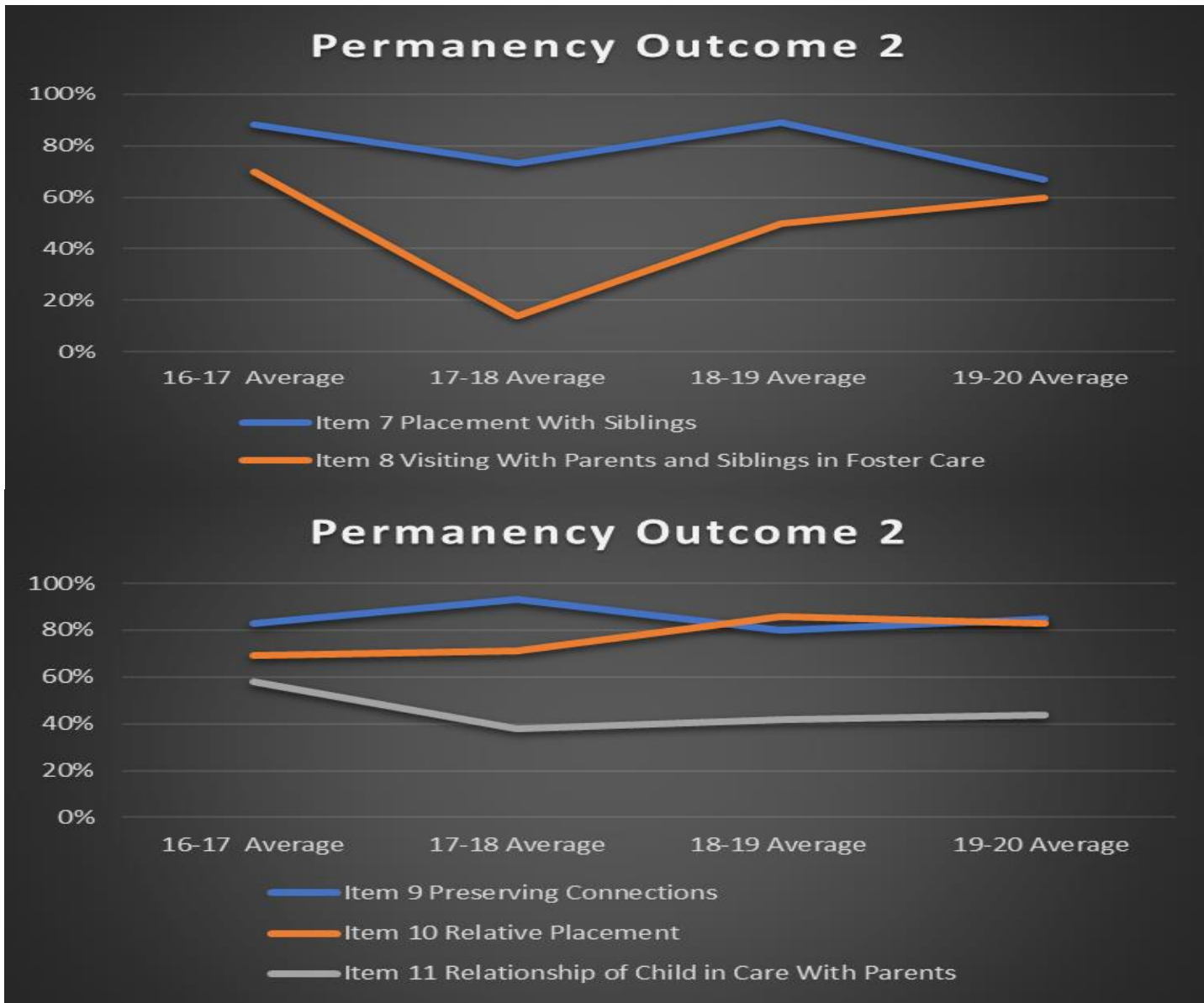
During FY 18-19; KFF was above the CFSR Baseline and PIP Target for CFSR/CQI Item 7 *Placement with Siblings* at 89%; however; during FY 19-20 KFF experienced a decline in performance, falling to (67%). The gap between the findings and the benchmark can be attributed to the lack of agency efforts in re-evaluating placing siblings together on an on-going basis.

In FY 19-20; KFF seen a slight increase in performance in Item 8 *Visiting with Parents and Siblings in Foster Care* (60% compared to 50% in FY 18-19) in addition to meeting the CFSR/CQI Baseline of 69%. There were 13 applicable OOH cases reviewed and five of the 13 were rated as an area needing improvement. The gap between the findings and the benchmark can be attributed to transportation assistance not being provided to the father. In another case, the father was incarcerated and there was a lack of agency efforts to ensure the father and child maintained other forms of contact such as phone calls or letters. Another case involved the lack of agency efforts to ensure sibling visits took place and in two of the cases there were no efforts to address the barriers to visitation with the parent/s.

During FY 19-20; KFF increased performance in Item 9 *Preserving Connections* to 85% when compared to 80% in FY 18-19 which is above the CFSR/CQI Baseline of 82%. There were 14 applicable OOH cases reviewed and two of those cases were rated as an area needing improvement due to the lack of extended family involvement with the child not being maintained in the same school after shelter.

KFF has seen a slight decrease in performance (83% in FY 19-20 when compared to 86% in FY 18-19) for Item 10 *Relative Placement*. There were 14 applicable cases reviewed and two of those cases were rated as an area needing improvement due to the lack of efforts to locate, identify, inform and evaluate paternal family members as a possible placement.

Item 11 *Relationship of Child in Care with Parents* increased slightly (44% in FY 19-20 when compared to 42% in FY 18-19). KFF's average still remains below the CFSR/CQI Baseline of 60% and has been for the last three consecutive years. The gap between the findings and the benchmark can be attributed to the lack of agency efforts to ensure that concerted efforts were made to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his or her parents. This item specifically looks at the agency's efforts to support or strengthen those relationships through encouraging the parent's participation in things such as the child's school functions, medical appointments, activities etc. and/or agency efforts to provide transportation for a parent to attend those functions/appointments or provide a therapeutic situation to strengthen the relationship. In addition, this item looks at other non-conventional ways to foster those relationships when necessary and foster parents encouraging those relationships. There were 11 applicable OOH cases reviewed and six of the 11 were rated as an area needing improvement. The gap between the findings and the benchmark can be attributed to the lack of agency efforts supporting one or both parents relationship with the child while in OOH care; specifically when there were one or both parents incarcerated during the period under review which was seen in three of the six cases reviewed for FY 19-20.





## Well-Being Outcome 1:

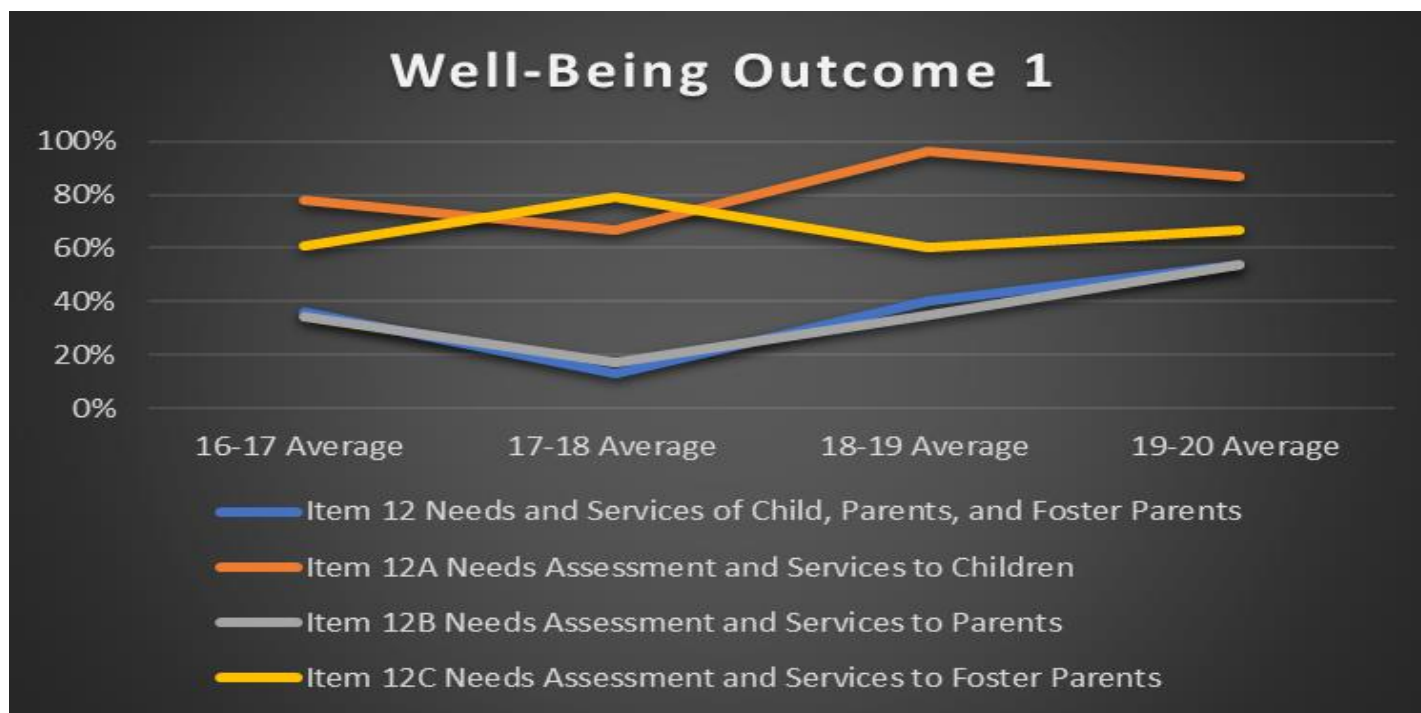
During FY 19-20; KFF seen an average increase in performance for Item 12 overall to include Items 12 B & C *Needs and Services to Parents and Foster Parents* however there was a slight decline in performance noted for Item 12A *Needs and Services to Child* specifically (87% in FY 19-20 when compared to 96% in FY 18-19). There was one case that attributed to the slight decline that involved the lack of agency efforts to adequately assess the child's needs and services as it relates to the child's social and emotional well-being. A DCF Contract Oversight Unit Review (On-site) of KFF was conducted in October 2018 and found that KFF was not meeting the performance measure regarding CFSR/CQI Item 12B. KFF developed a corrective action plan (CAP) which was implemented in July FY19-20 in efforts to strengthen performance in this area. KFF is no longer on a CAP for this item due to successfully meeting the performance measure during FY 19-20.

During FY 19-20; KFF has seen a decrease in performance for Item 13 *Child and Family Involvement in Case Planning* (50% in FY 19-20 when compared to 56% in FY 18-19) and is below the CFSR/CQI Baseline of 63.60% and PIP Target of 70.70%. There were 24 applicable cases reviewed and nine of those cases rated as an area needing improvement. The gap between the findings and the benchmarks can be attributed to the lack of continued efforts to engage the parents in the case planning process throughout the case and having age appropriate conversations with the child as it relates to case planning in language they can understand. A DCF Contract Oversight Unit Review (On-site) of KFF was conducted in October 2018 and found that KFF was not meeting the performance measure regarding CFSR/CQI Item 13. KFF developed a corrective action plan (CAP) which was implemented in July FY19-20 in efforts to strengthen performance in this area. Details of the CAP related to this item will be addressed in the annual update of the Quality Management Plan for FY19-20. KFF will continue on the CAP for this item in FY 20-21 until the performance measure is met.

KFF's performance for CFSR/CQI Item 14 *Caseworker Visits with Child* has declined somewhat from FY 18-19 (83% in FY 19-20 when compared to 96% in FY 18-19). The decrease was also noted in the related RSF Items (2.1 & 2.2) *Quality and Frequency of Visits with Children*. However, it should be noted that KFF is above the CFSR Baseline of 72.50% and the PIP target of 78.90%. There were 24 applicable cases for this item, four of which scored as an area needing improvement (three OOH and one In-Home). The gap between the findings and the benchmarks can be attributed to two of the cases involving the lack of quality conversations with the child that were age appropriate, and two of the cases

involving no conversations with the child about the upcoming adoption. One case involved the case manager not meeting with the child alone during at least part of each visit.

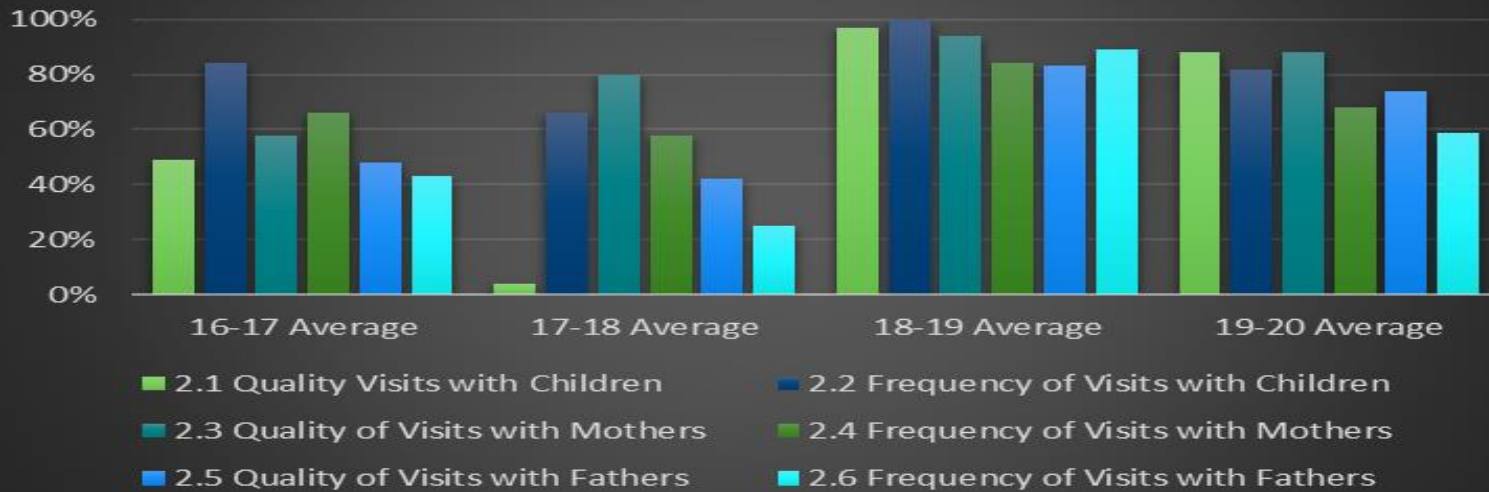
KFF's performance in CFSR/CQI Item 15 *Caseworker Visits with Parents* increased in performance in FY 19-20 (50% in FY 19-20 when compared to 35% in FY 18-19) however the corresponding RSF Items (2.3, 2.4, 2.5 & 2.6) *Quality and Frequency Visits with Mothers and Fathers* does not reflect the same increase. The RSF data represents a slight decline in performance for those items. More often than not, the RSF data revealed that the decline was due to the lack of contact and/or attempts to contact with the parent in those in-home cases, specifically the father (without incarceration being prevalent as it has been in the past).



## Well-Being Outcome 1



## Rapid Safety Feedback

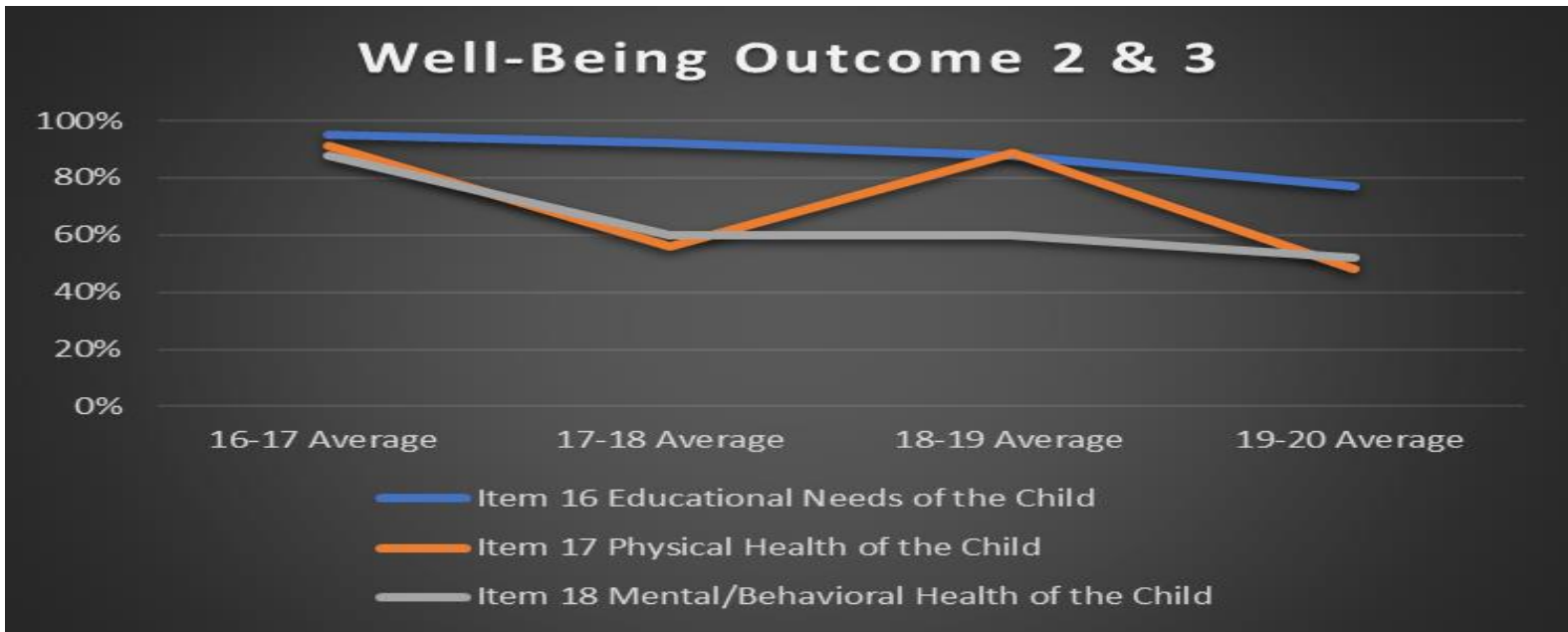


## Well-Being Outcome 2 & 3:

During FY 19-20; KFF's performance declined slightly (77% in FY 19-20 when compared to 88% for FY 18-19) and is below CFSR Baseline of 92% for CFSR/CQI Item 16 *Educational Needs of the Child*. There were 11 applicable cases reviewed and three of those cases rated as an area needing improvement. The gap between the findings and the benchmark can be attributed to the lack of follow-up on the child's Individual Education Plans (IEP) in all three cases.

During FY 19-20; KFF's performance declined for CFSR/CQI Item 17 *Physical and Dental Health of the Child* (48% in FY 19-20 when compared to 89% in FY 18-19) and is below the CFSR Baseline of 92%. There were 16 applicable cases reviewed and 8 of those cases rated as an area needing improvement. The gap between the findings and the baseline can be attributed to 5 cases involving the lack of follow-up on the child's dental health needs and the other cases involved the lack of follow-up on physical health needs such as hearing and asthma.

During FY 19-20; KFF seen a slight decline in performance for CFSR/CQI Item 18 *Mental/Behavioral Health of the Child* (52% in FY 19-20 when compared to 60% in FY 18-19) and is below the CFSR Baseline of 72%. There were 15 applicable cases for this item and nine of those rated as an area needing improvement. The gap between the findings and the benchmark can be attributed to the lack of providing mental health counseling and/or evaluations and the lack of oversight of Psychotropic Medications



## 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 for FY 20-21.