



PARTNERSHIP FOR  
**STRONG**  
**FAMILIES**

Quality Management

Annual Report

FY 2017-2018

## Introduction

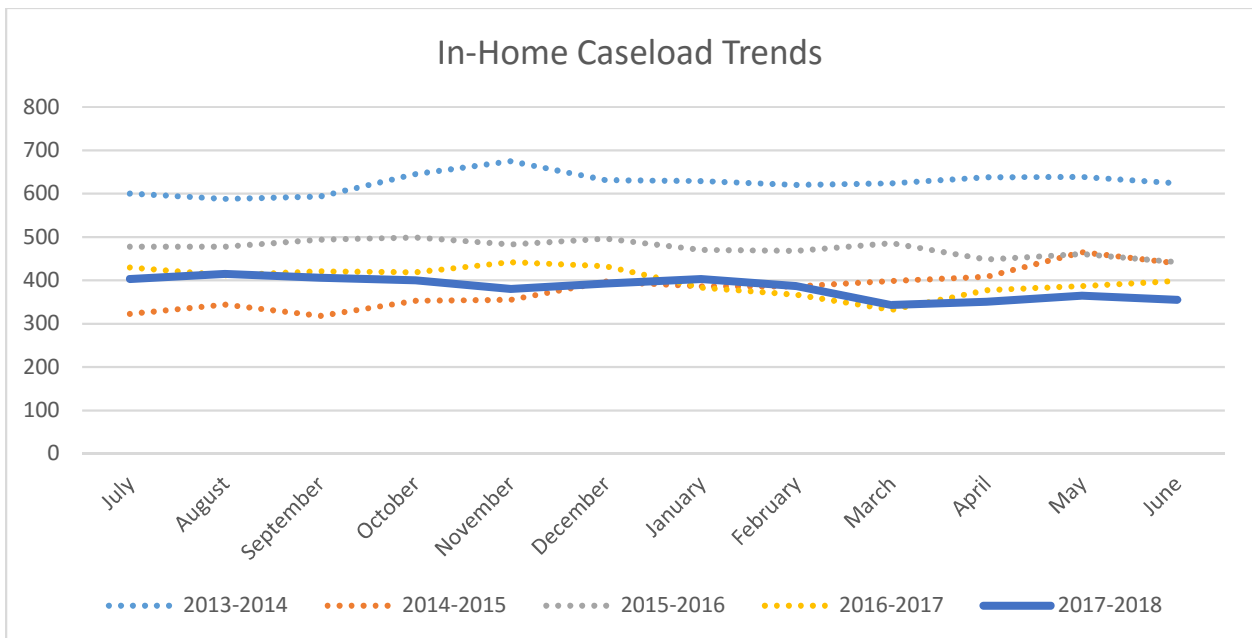
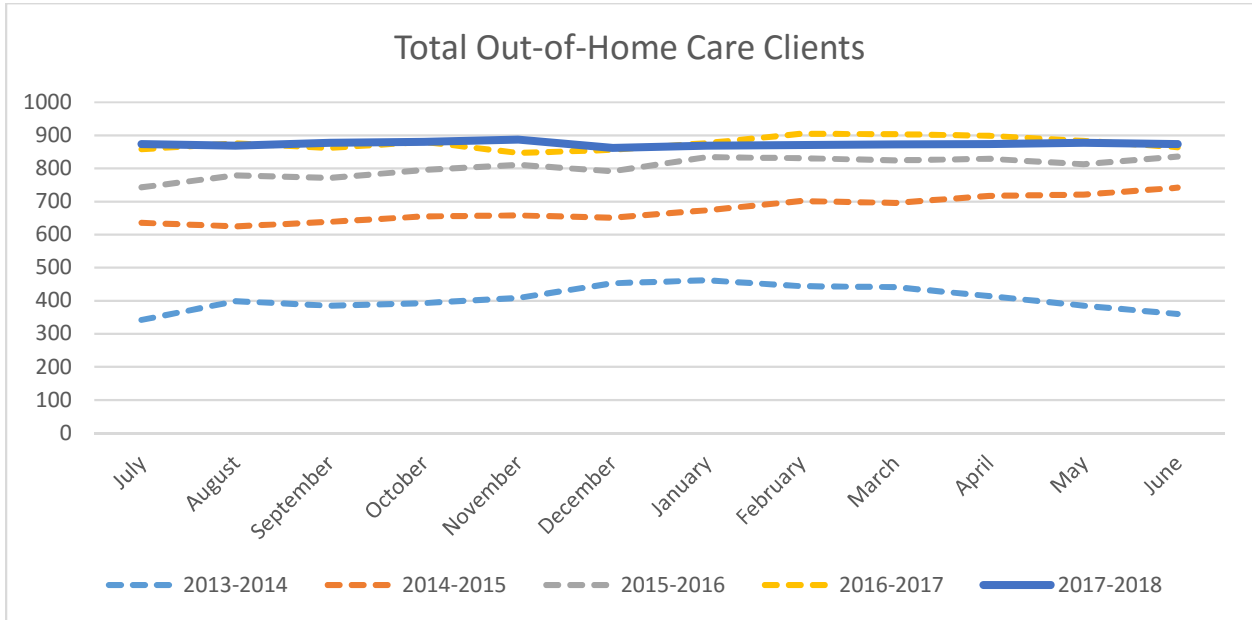
This report should be viewed as a snapshot of data and information and is by no means a total picture of all of Partnership for Strong Families (PSF) continuous quality improvement activities for the fiscal year 2017-2018. This report is designed to provide a review of some key activities and related performance. This information combined with other ongoing activities provide the basis for PSF's ongoing analysis of progress within the system of care. Data is, just that, data, and although important as it guides and assists with providing information for further analysis, the numbers themselves, separate and alone, do not tell the whole "story" of progress within the system of care. Partnership for Strong Families Quality Management Report is written to provide compliance data for several processes and to summarize the findings leading to areas to be addressed during the 2018-2019 fiscal year. PSF is continuously looking for ways to make improvements to the system of care and in services provided to children and families. PSF works in conjunction with system partners and stakeholders to review data, identify areas of need and to create action plans for improvement.

This report is comprised of data addressing caseload trends for PSF for the last four fiscal years, and performance with scorecard measures, case file reviews and other significant quality assurance/improvement activities. PSF utilizes this data to communicate internally and externally with stakeholders and to identify and address service and programmatic issues. The fact that caseloads have increased significantly each fiscal year involves dynamics which must be accounted for when reviewing/analyzing data for trends, identifying potential barriers, and in ongoing decision making and planning. PSF and its system partners review this data on an ongoing basis and strive to make changes in processes and programs in an effort to limit the number of cases coming into services, especially the number of children brought into out-of-home care. It is important to safely maintain children in their own homes with as little intrusion into their families as possible. PSF and its system partners work together to address ongoing issues related to caseloads and to identifying areas where improvements can be made. Co-constructed action plans are created and reviewed to determine if identified actions are having the desired impact and if not, new ideas and actions are implemented and reviewed until the issue is resolved. PSF and its system partners continue to strive to address caseloads, the number of children entering out-of-home care, timeliness of interventions, timeliness of case transfer, implementation of appropriate safety services, and other issues in an effort to focus on providing the best services to children in families to meet their individual identified needs. PSF covers 13 counties, most rural, within Judicial Circuits 3 and 8. This unique territory calls for focused interventions in each of the areas served as each has different issues, barriers, and needs. Working together with system partners PSF continues to enhance services and make improvement in performance in a collaborative approach while focusing on the safety, permanency and well-being of the children served.

Partnership for Strong Families, as indicated in the Contract Monitoring, Performance and Quality Management Plan, promotes the philosophy that everyone is a member of the contract monitoring and continuous quality assurance/improvement team. This includes stakeholders, families, children, caregivers, partner family parents, PSF staff, the PSF Board of Directors (including the Quality Assurance Sub-Committee), and sub-recipient provider staff at all levels. Data is regularly gathered and analyzed, and improvements are made to services and processes when compliance is not met or when safety/security issues arise. Information is shared to increase collaboration and knowledge and to promote best practice. All parties work together to identify and address areas in need of improvement, create action plans for improvement, monitor progress, and make adjustments when the data indicates the changes have not had the desired impact. PSF has four dedicated positions (three QA Monitors and one director) for performing QA and CQI activities. Agency capacity is addressed to include budget, performance and performance improvement goals, and timeframes.

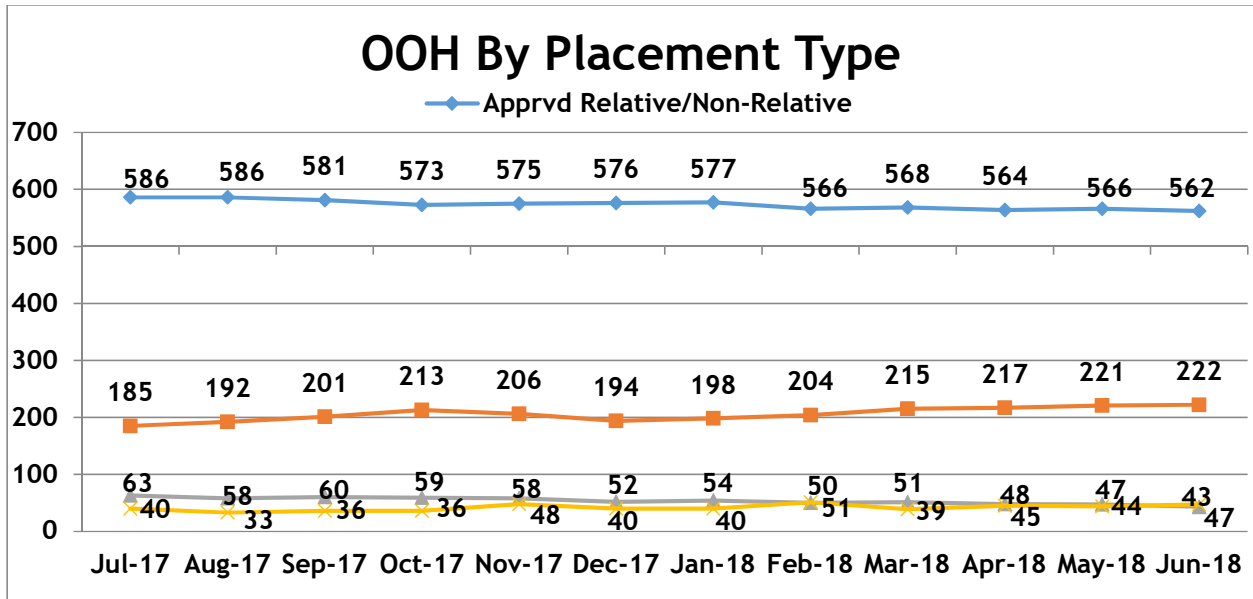
## Data

### PSF CASELOAD TRENDS 2013-2018

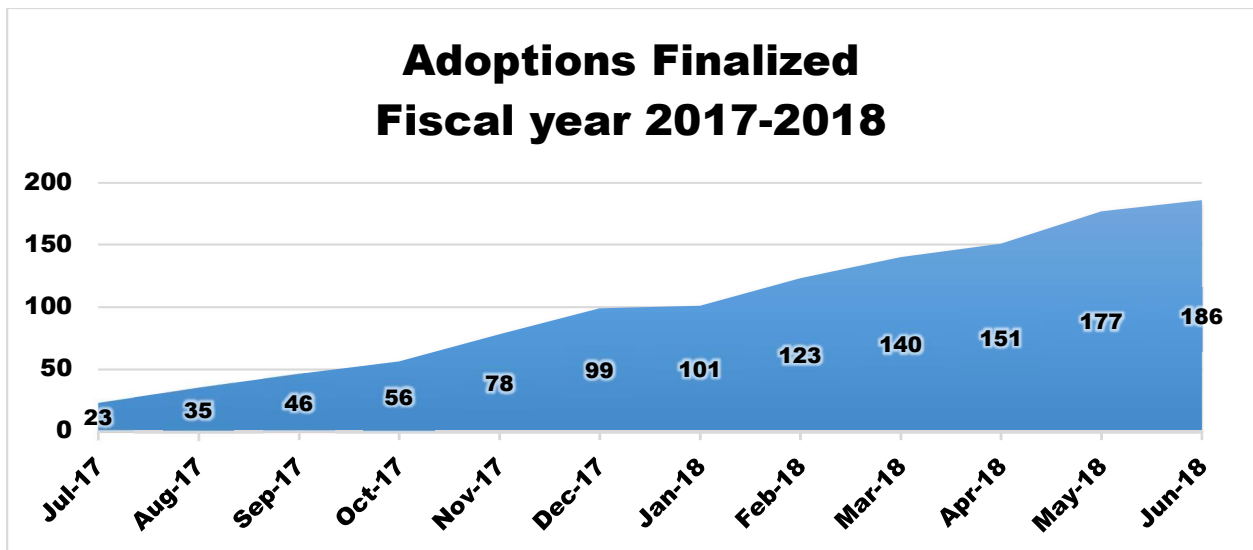


**OUT OF HOME CARE - CHILDREN BY PLACEMENT TYPE**

**FISCAL YEAR 2017-2018**

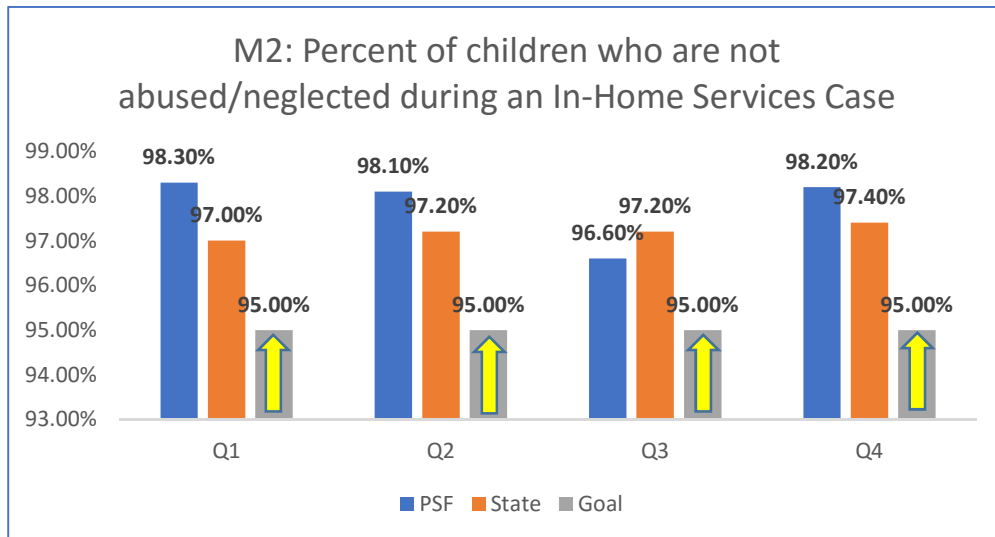
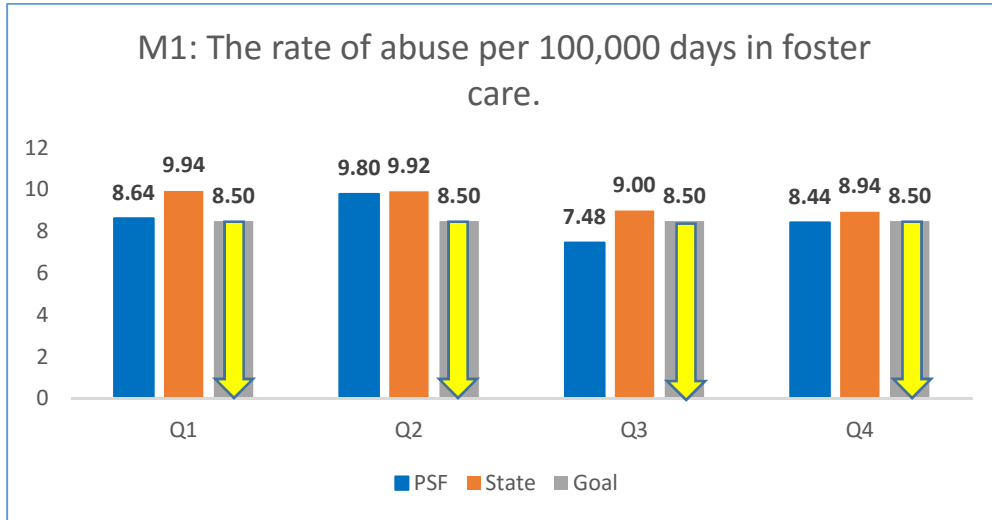


**NUMBER OF ADOPTIONS FINALIZED FISCAL YEAR 2017-2018**

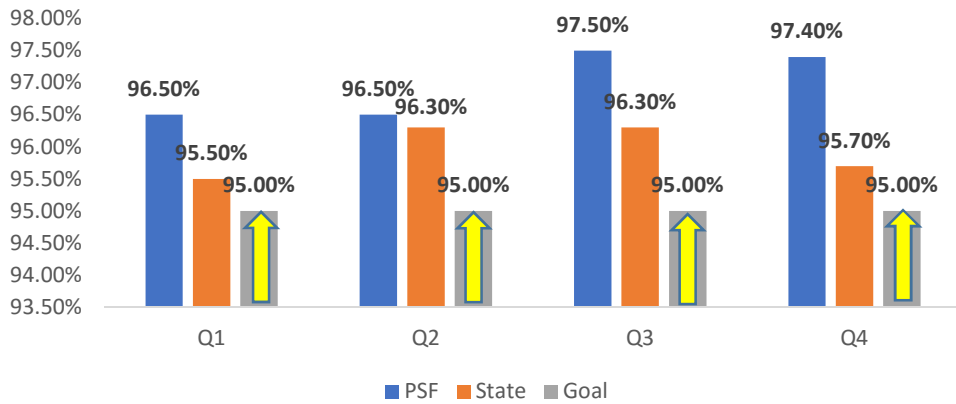


## SCORECARD MEASUREMENTS FISCAL YEAR 2017-2018

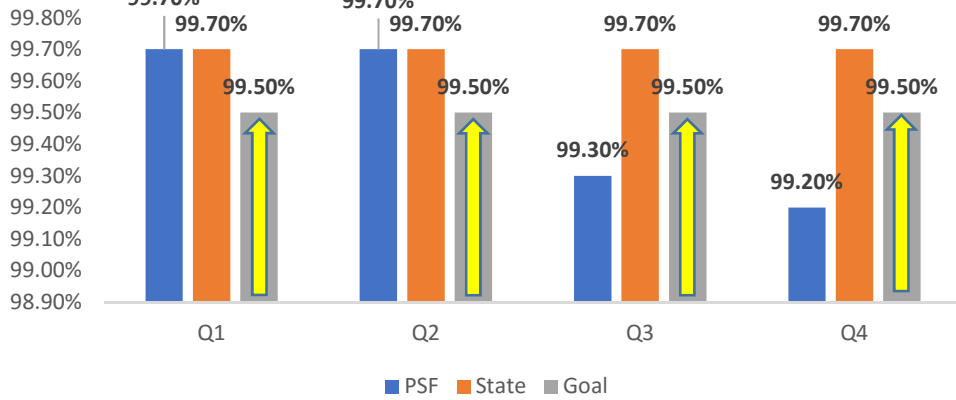
The following tables (M1 – M12) detail Partnership for Strong Families’ (PSF) performance for FY 2017-2018 Scorecard Measurements. The tables are broken out by quarter and include PSF performance, statewide performance and performance standards/goals.



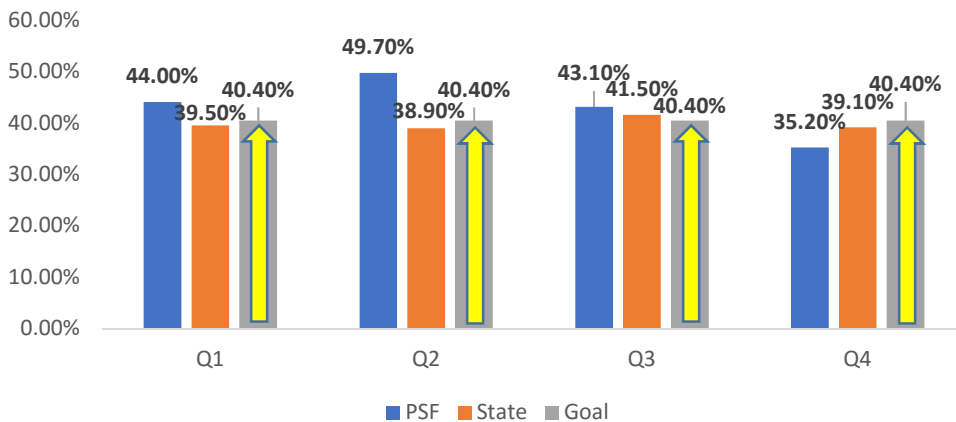
M3: Percent of children who are not neglected or abused after receiving services



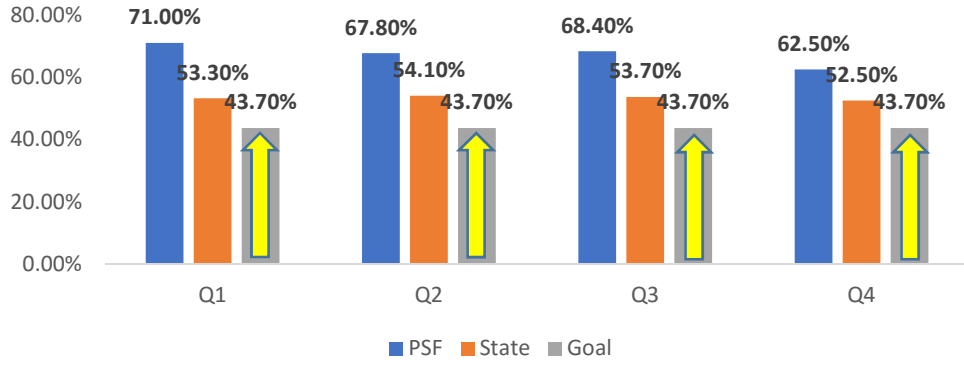
M4: Percent of children under supervision who are seen every 30 days



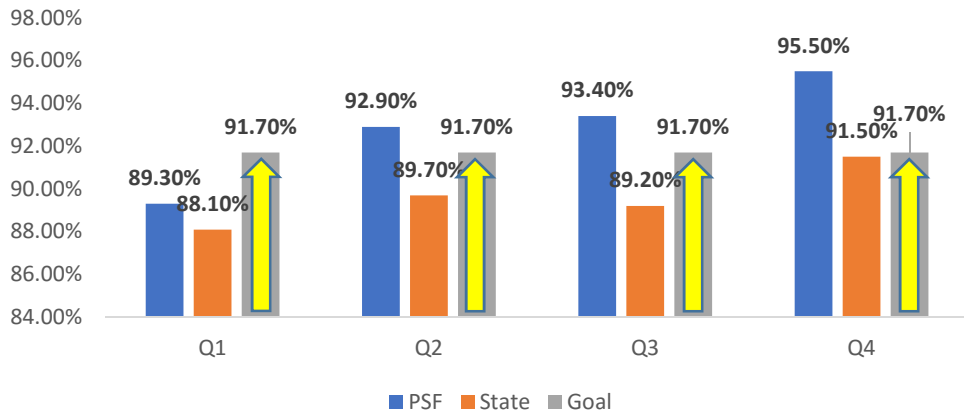
M5: Percent of children exiting to a permanent home within 12 months of entering care



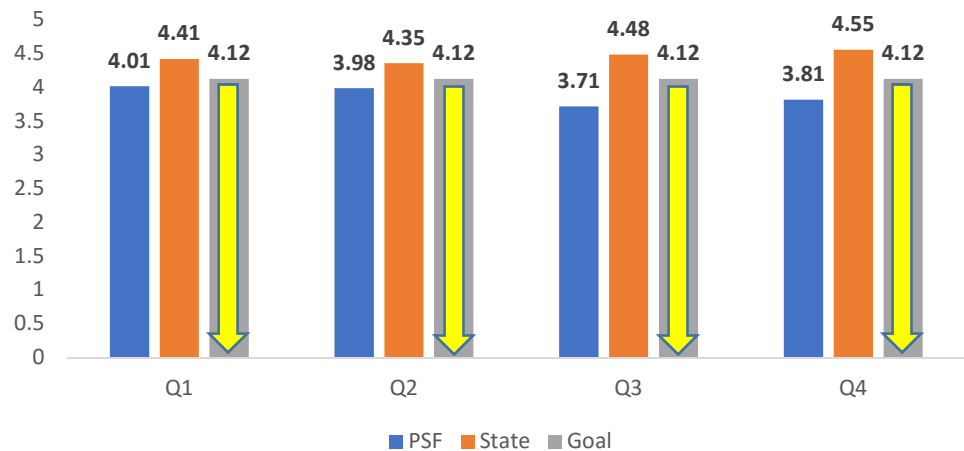
M6: Percent of children exiting to a permanent home within 12 months for those in care 12-23 months



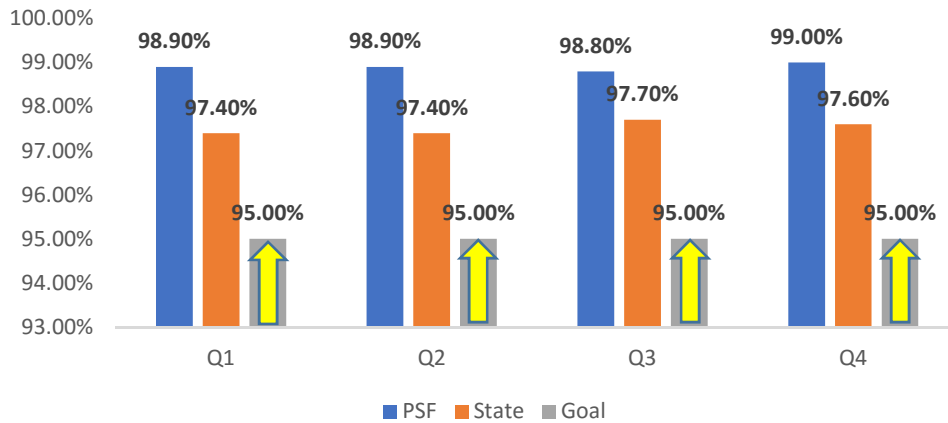
M7: Percent of children who do not re-enter care within 12 months of moving to a permanent home



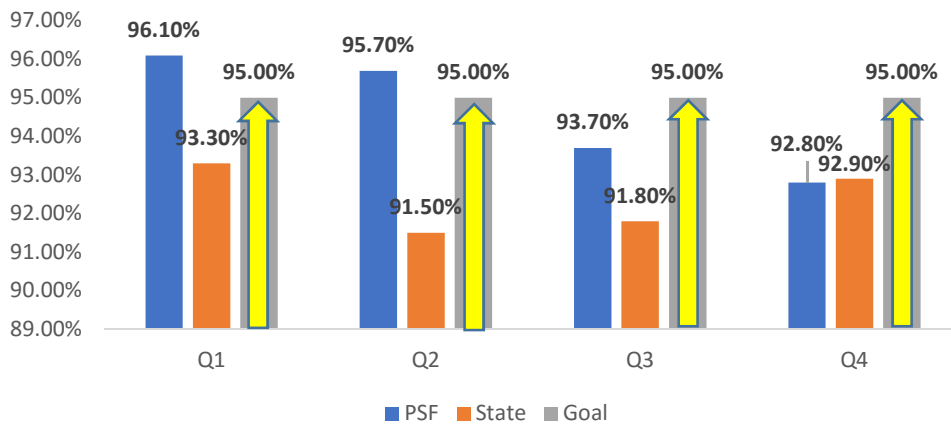
M8: Placement moves per 1,000 days in foster care



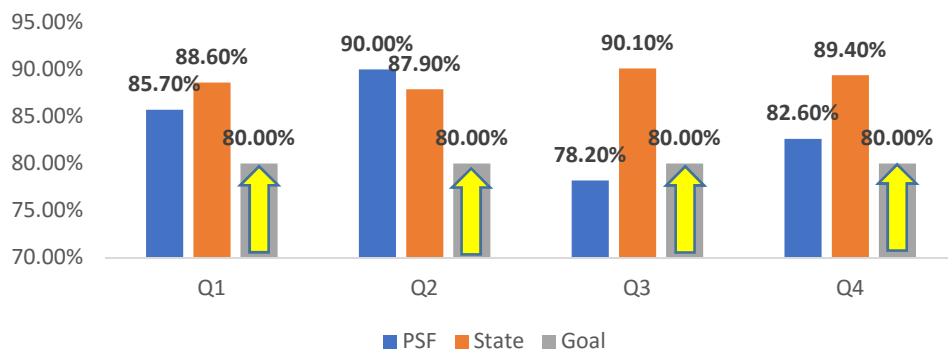
M9: Percent of children who received a medical service within the last twelve months



M10: Percent of children who received a dental service in the last seven months

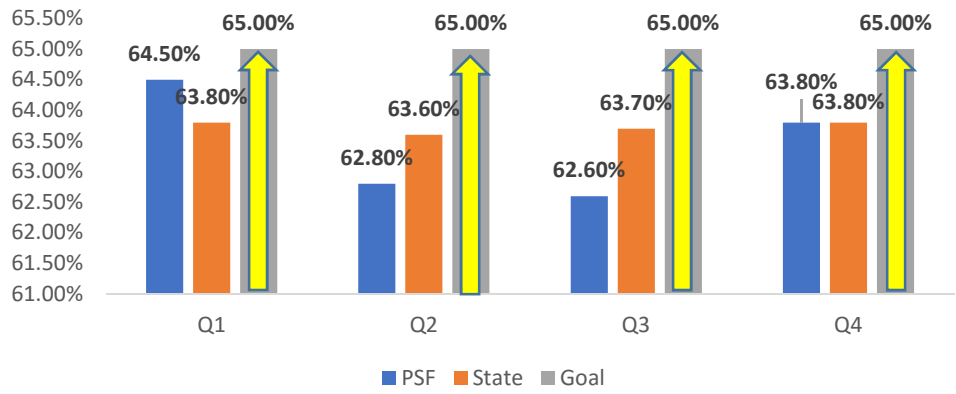


M11: Percent of young adults exiting foster care at age 18 completed/are enrolled in sec. ed., voc. ed., or adult ed.





### M12: Percent of sibling groups where all siblings are placed together



# SCORECARD PERFORMANCE OVER TIME

## BEGINNING Q2 OF FISCAL YEAR 2016-2017



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### CBC Scorecard Performance Table

Level: CBC Lead Agency  
Entity: Partnership for Strong Families



Step 1: Select Entity Level  
CBC Lead Agency

Step 2: Select an Entity  
Partnership for Strong Families

Step 3: Select Quarters to Display (the most recent six from the selected quarter will be displayed)  
From FY 2016 Q4

Scorecard Measure	FY 2016 Q4	FY 2017 Q1	FY 2017 Q2	FY 2017 Q3	FY 2017 Q4
M01: Rate of abuse per 100,000 days in foster care	8.13	8.79	8.85	10.31	9.92
M02: % of children who are not abused/neglect during in-home services	96.30	97.10	97.40	98.60	97.30
M03: % of children who are not neglected or abused after receiving services	93.40	96.80	94.10	96.80	100.00
M04: % of children under supervision who are seen every 30 days	99.70	99.80	99.80	99.80	99.70
M05: % of children exiting to a permanent home w/in 12 months of entering care	52.50	58.70	49.50	52.40	48.50
M06: % of children exiting to a permanent home w/in 12 months for those in care 12 to 23 months	63.20	56.70	58.80	58.00	64.90
M07: % of children who do not re-enter care w/in 12 months of moving to permanent home	93.40	95.80	97.20	95.00	97.70
M08: Placement moves per 1,000 days in foster care	3.24	3.63	3.33	3.48	4.01
M09: % of children in foster care who received a medical service in last 12 months	97.70	97.90	98.00	98.40	98.60
M10: % of children in foster care who received a dental service in last 7 months	91.50	96.50	93.00	92.50	93.70
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	95.00	95.20	89.40
M12: % of sibling groups where all siblings are placed together	65.50	66.20	67.40	65.50	65.50

Standard or Better Below Standard Red Zone

Last Updated: 7/11/2017

## CBC Scorecard Performance Table

Level: CBC Lead Agency  
Entity: Partnership for Strong Families



Step 1: Select Entity Level  
CBC Lead Agency

Step 2: Select an Entity  
Partnership for Strong Families

Step 3: Select Quarters to Display (the most recent six from the selected quarter will be displayed)  
From FY 2017 Q4

Scorecard Measure	FY 2017 Q4	FY 2018 Q1	FY 2018 Q2	FY 2018 Q3	FY 2018 Q4
M01: Rate of abuse per 100,000 days in foster care	9.91	8.64	9.80	7.48	8.44
M02: % of children who are not abused/neglect during in-home services	97.30	98.30	98.10	96.60	98.20
M03: % of children who are not neglected or abused after receiving services	99.50	96.50	96.50	97.50	97.40
M04: % of children under supervision who are seen every 30 days	99.80	99.70	99.70	99.30	99.20
M05: % of children exiting to a permanent home w/in 12 months of entering care	48.20	44.00	49.70	43.10	35.20
M06: % of children exiting to a permanent home w/in 12 months for those in care 12 to 23 months	65.20	71.00	67.80	68.40	62.50
M07: % of children who do not re-enter care w/in 12 months of moving to permanent home	97.70	89.30	92.90	93.40	95.50
M08: Placement moves per 1,000 days in foster care	4.12	4.01	3.98	3.71	3.81
M09: % of children in foster care who received a medical service in last 12 months	98.60	98.90	98.90	98.80	99.00
M10: % of children in foster care who received a dental service in last 7 months	93.80	96.10	95.70	93.70	92.80
M11: % of young adults exiting foster care at age 18 completed/are enrolled in sec. ed., voc. ed, or adult ed.	89.40	85.70	90.00	78.20	82.60
M12: % of sibling groups where all siblings are placed together	66.10	64.50	62.80	62.60	63.80

■ Standard or Better   
 ■ Below Standard   
 ■ Red Zone

Last Updated: 7/10/2018

## CASE FILE REVIEWS FISCAL YEAR 2017-2018

PSF Quality Assurance department completed a total of 84 file reviews in FY 2017-2018. The Rapid Safety Feedback tool was used for 40 reviews and the Child and Family Services Review tool was used with 36 file reviews and 8 additional PIP reviews. The scope and breadth of the review types are covered in the subsequent sections.

## RAPID SAFETY REVIEWS

Rapid Safety Feedback (RSF) case reviews are completed for randomly selected in-home cases, which are currently open at the time of review. Eligible cases include children (from birth until age 5) reunified with their parent(s) or residing in the home with their family. In the quarterly sample, a case from every unit of each CMA is chosen for review if possible. A Quality Assurance Monitor reviews documentation available in Florida Safe Families Network (FSFN) and rates the work in five different

item ratings which are broken up into sub-item ratings (listed as Items 1-5 below). The nature of the Rapid Safety Feedback tool changed from the previous fiscal year to provide additional data points which help provide qualitative findings. The tool used in the 2017-2018 Fiscal year captures participants separately and addressed frequency and quality of contacts with these participants in sub-item measurements detailed below. 40 RSF reviews were completed during FY 2017-2018.

After completing each review, the Quality Assurance Monitor who completed the review holds a case consultation with the current primary Family Care Counselor and Family Care Counselor Supervisor. These consultations are collaborative, with discussions of findings from the review and discussions of the casework activities that might not have been documented. While the information gathered in these consultations does not usually lead to changes in the file review tool, they are used as teaching opportunities for staff to further enhance their abilities to provide quality case management services.

<b>Item 1.1</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
Is the most recent family assessment sufficient?	20%	80%	10%	90%	10%	90%	30%	70%	18%	83%
<b>Item 1.2</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
Is the most recent family assessment completed timely?	0%	100%	20%	80%	10%	90%	0%	100%	8%	92%
<b>Item 2.1</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
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?	10%	90%	20%	80%	10%	90%	20%	80%	15%	85%
<b>Item 2.2</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>

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?	0%	100%	20%	80%	30%	70%	70%	30%	30%	70%
<b>Item 2.3</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
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?	10%	90%	10%	90%	0%	100%	10%	90%	8%	92%
<b>Item 2.4</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
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?	70%	30%	90%	10%	90%	10%	100%	0%	90%	10%
<b>Item 2.5</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
Is the quality of the visits between the case manager and the child's father sufficient	0.0%	100%	20%	80%	0%	100%	0%	100%	4%	96%

to address issues pertaining to safety and evaluate progress toward case plan outcomes?										
<b>Item 2.6</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
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?	33.33%	66.67%	30%	70%	40%	60%	25%	75%	33.33%	66.67%
<b>Item 3.1</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
Are background checks and home assessments completed when needed?	20%	80%	40%	60%	30%	70%	70%	30%	40%	60%
<b>Item 3.2</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
Is the information assessed and used to address potential danger threats?	20%	80%	40%	60%	30%	70%	70.0%	30.0%	40%	60%
<b>Item 4.1</b>	<b>Strength Q1</b>	<b>Area of Need Q1</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of Need Q3</b>	<b>Strength Q4</b>	<b>Area of Need Q4</b>	<b>Strength FY 2017-2018</b>	<b>Area of Need FY 2017-2018</b>
Is a sufficient safety plan in place to control danger threats to protect a child?	0%	100%	0%	100%	0%	100%	40%	60%	10%	90%
<b>Item 4.2</b>	<b>Strength Q1</b>	<b>Area of Need</b>	<b>Strength Q2</b>	<b>Area of Need Q2</b>	<b>Strength Q3</b>	<b>Area of</b>	<b>Strength Q4</b>	<b>Area of</b>	<b>Strength</b>	<b>Area of Need</b>

		Q1				Need Q3		Need Q4	FY 2017-2018	FY 2017-2018
Is the safety plan actively monitored to ensure that it is working effectively to protect the child(ren) from identified danger threats?	10%	90%	0%	100%	0%	100%	0%	100%	3%	97%
<b>Item 5.1</b>	Strength Q1	Area of Need Q1	Strength Q2	Area of Need Q2	Strength Q3	Area of Need Q3	Strength Q4	Area of Need Q4	Strength FY 2017-2018	Area of Need FY 2017-2018
Is the supervisor regularly consulting with the case manager?	0.0%	100%	0.0%	100%	30%	70%	10%	90%	8%	92%
<b>Item 5.2</b>	Strength Q1	Area of Need Q1	Strength Q2	Area of Need Q2	Strength Q3	Area of Need Q3	Strength Q4	Area of Need Q4	Strength FY 2017-2018	Area of Need FY 2017-2018
Is the supervisor ensuring recommended actions are followed up on?	10.0%	90.0%	0%	100%	0%	100%	10%	90%	3%	97%

## CHILD AND FAMILY SERVICE REVIEWS

For Fiscal Year 2017-2018, the PSF Quality Assurance department reviewed 36 cases using the federally developed Child and Family Service Review process. PSF additionally completed eight (8) PIP CFSR reviews during the fiscal year. There were a total of 44 reviews done using the CFSR tool.

In the quarterly CFSR Florida Continuous Quality Improvement (FL CQI) sample (which includes PIP reviews), a case from every unit of each CMA is chosen for review, if possible, with a 60/40 split between Out-of-Home and In-Home cases. Of these cases, 36 were reviewed utilizing only documentation located within FSN and PSF's electronic case file. Eight (8) cases were reviewed utilizing both documentation and interviews with case participants. After each review, a case consultation is held with the PSF Quality Assurance Monitor and the current or most recent primary Family Care Counselor and Family Care Counselor Supervisor. These consultations are collaborative

with discussions of findings from the review and discussions of the Family Care Counselor and Family Care Counselor Supervisor’s casework activities that might not have been documented. These consultations are teaching opportunities for staff to further enhance their abilities to provide quality case management services.

Performance Item or Outcome		Performance Item Ratings			Outcome Ratings			
		Strength	Area Needing Improvement	NA	Substantially Achieved	Partially Achieved	Not Achieved	NA
Safety Outcome 1	Children are, first and foremost, protected from abuse and neglect.				90% n=27	0% n=0	10% n=3	n=6
Item 1	Timeliness of Initiating Investigations of Reports of Child Maltreatment	90% n=27	10% n=3	n=6				
Safety Outcome 2	Children are safely maintained in their homes whenever possible and appropriate.				69% n=24	9% n=3	23% n=8	n=1
Item 2	Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care	85% n=11	15% N=2	n=23				
Item 3	Risk and Safety Assessment and Management	67% n=24	33% N=12	N=0				

Performance Item or Outcome		Performance Item Ratings			Outcome Ratings			
		Strength	Area Needing Improvement	NA	Substantially Achieved	Partially Achieved	Not Achieved	NA
Permanency Outcome 1	Children have permanency and stability in their living situations.				25% n=6	71% n=17	4% n=1	n=12
Item 4	Stability of Foster Care Placement	71% n=17	29% n=7	n=12				
Item 5	Permanency Goal for Child	83% n=20	17% n=4	n=12				
Item 6	Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	33% n=8	67% n=16	n=12				
Permanency Outcome 2	The continuity of family relationships and connections is preserved for children.				21% n=5	39% n=14	14% n=5	n=12



Item 7	Placement With Siblings	60% n=9	40% n=6	n=21				
Item 8	Visiting With Parents and Siblings in Foster Care	25% n=5	75% n=15	n=16				
Item 9	Preserving Connections	29% n=7	71% n=17	n=12				
Item 10	Relative Placement	63% n=15	38% n=9	n=12				
Item 11	Relationship of Child in Care With Parents	20% n=3	80% n=12	n=21				
Performance Item or Outcome		Performance Item Ratings			Outcome Ratings			
		Strength	Area Needing Improvement	NA	Substantially Achieved	Partially Achieved	Not Achieved	NA
Well-Being Outcome 1	Families have enhanced capacity to provide for their children's needs.				18% n=6	33% n=11	49% n=16	n=3
Item 12	Needs and Services of Child, Parents, and Foster Parents	25% n=9	75% n=75	n=0				
Item 12A	Needs Assessment and Services to Children	67% n=24	33% n=12	n=0				
Item 12B	Needs Assessment and Services to Parents	30% n=10	70% n=23	n=3				
Item 12C	Needs Assessment and Services to Foster Parents	83% n=19	17% n=4	n=13				
Item 13	Child and Family Involvement in Case Planning	26% n=9	74% n=26	n=1				
Item 14	Caseworker Visits With Child	39% n=14	61% n=22	n=0				

Item 15	Caseworker Visits With Parents	16% n=5	84% n=27	n=4				
Well-Being Outcome 2	Children receive appropriate services to meet their educational needs.				63% n=15	8% n=2	29% n=7	n=12
Item 16	Educational Needs of the Child	63% n=15	38% n=9	n=12				
Well-Being Outcome 3	Children receive adequate services to meet their physical and mental health needs.				45% n=13	14% n=4	41% n=12	n=8
Item 17	Physical Health of the Child	48% n=13	52% n=14	n=9				
Item 18	Mental/Behavioral Health of the Child	59% n=13	41% n=9	n=41				

## SCORECARD AND CASE REVIEW ANALYSIS

A direct correlation cannot be made between the scores on case file reviews and outcomes on scorecard measures. This is evidenced by PSF having low scores related to both Rapid Safety Feedback and CFSR/Florida Continuous Quality Improvement case reviews and PSF meeting most of the scorecard measures for the year. Although a direct correlation cannot be drawn, each process, separately, provides input into the system as a whole and provides data PSF and system partners utilize to identify both strengths and areas in need of improvement.

**Scorecard Analysis:** PSF had a strong scorecard performance year (Fiscal Year 2017-2018) highlighted by many of the measures being met each quarter. During Quarter 3, PSF did not have a single measure in the “Red Zone.” PSF also worked with DCF to address issues in data collection around the, “rate of abuse per 100,000 days in foster care.” By changing the practice around capturing new incidents of abuse, PSF saw this number decrease, and was in the green for Quarters 3 and 4. Although some measures did slip slightly, PSF had only one item that was in the “Red Zone” during the final two quarters. As soon as this measure was presented, PSF began investigating the possible reasons for this decrease. When compared to the overall State performance, PSF did very well throughout the 2017-2018 FY.

Subcontracted case management specific data shows case management performance fluctuates from measure to measure, month to month and agency to agency. PSF monitors each case management agency’s performance and compliance on a bi-weekly, monthly and quarterly basis. Additionally, internal monitoring takes place within subcontracted case management agencies. PSF collects data for analysis utilizing the data reports associated with each of the scorecard measures. This data is sorted to highlight each scorecard measure by subcontracted case management agency and for PSF

as a whole. PSF analyzes this data and shares this data with each case management agency and requests feedback from them regarding actions for improvement and areas of best practice.

As noted above, there was only one measure for which PSF was in the “Red Zone” during the final two quarters of the FY. The measure that was in the “Red Zone” was Measure 5, percent of children exiting to a permanent home within 12 months of entering care. PSF immediately identified this as an area that needed attention to understand the decrease in performance related to this measure. Quality Operations and the CMA Program Director's reviewed the data associated with Permanency Within 12 months to identify gaps and trends over time. In addition, the Operations Department conducted a review of the data associated with the errors to identify why Measure 5 is trending downward, when historically, PSF has met this Measure in the Green for months. As a result of the reviews by all the aforementioned parties, the following reasons for the drop in our scorecard on Measure 5 were identified:

- 1) There are some data errors that could have been avoided if submitted, closed and processed timely.
- 2) The Judiciary in Circuit 3 is extending case plans and giving parents with substance abuse issues more time to complete tasks.
- 3) Several children have case plan goals of Adoption and are assigned to Wendy's Wonderful Kids for specific child recruitment activities. These children have severe behavioral challenges as well as complex mental health needs.

PSF will continue to hold bi-weekly conference calls with the case management agencies to review individual agency performance on the various scorecard measures and work collaboratively to address barriers to compliance.

**Case Review Analysis:** Rapid Safety Feedback (RSF) and Child and Family Service Review (CFSR/FL CQI) data cannot, at this time, be reviewed across quarters and years or areas due to:

- Changes in the Rapid Safety Feedback tool
- Improvements made in statewide understanding and reviewing cases utilizing the CFSR (FL CQI) tool
- Inconsistent population criteria based on available cases in each circuit

Any comparison of data sets across time would be invalid as these changes and increased knowledge and skills effect answers and change the dynamics of the reviews. Although data across years is not meaningful at this time, the case consultations and outcome of the cases have been telling and have led to areas in need of improvement related to safety, permanency and well-being case practice.

Case consultations typically demonstrate that case documentation is not an accurate total reflection of case work activities being conducted. Although there are times information that should be known is not known, it is more often the case that the Case Manager knows the information but has not properly documented the information. Requests for action (RFA) are implemented when there are safety concerns on a case that need action and tasks are given when there are administrative issues pertaining to case documentation, etc., that need to be addressed. PSF QA maintains a tracker of all assigned RFAs and tasks and follow-up with the Case Manager until each action is completed. RFAs are documented in FSN as required.

Based on trends identified through the completion of the review tools, PSF QA partners with PSF Quality Operations and/or Training to plan for ways to address the noted trends. Collectively, areas such as parent engagement and safety planning have been discussed and plans have been formulated to address ways to enhance these areas. As areas of focus appear through individual reviews, QA staff reach out to other agency team members and discuss ways to address individualized findings. Analyzing and understanding case review trends requires a team approach and a collective response to address and enhance practice.

Areas of strength and areas for improvement have been identified through scorecard performance, through case file review consultations and via other continuous quality improvement activities. Areas of strength and need of improvement include, but are not limited to:

### **Safety:**

#### **Strengths:**

- Increased knowledge and utilization of safety plans
- Increased utilization of safety services both formal and informal

#### **Areas for Improvement:**

- Documentation of ongoing communication with safety service providers and case participants regarding the effectiveness of the safety plan
- Identification of and implementation of appropriate safety actions designed to address identified danger threats
- Updating safety plans as the case progresses
- Obtaining and utilizing background checks for case participants and safety service providers

### **Permanency:**

#### **Strengths:**

- Permanency goals are established in a timely manner and are appropriate to the status of the case
- Children receive permanency in a timely manner
- The number of adoptions per year has continued to increase
- Children have stability in their placements
- A majority of the children in out-of-home care placement are placed with relatives or non-relatives.
- Placement of siblings in the same placement

#### **Areas for Improvement:**

- Documentation of efforts to maintain a child's connections to their community when removal is necessary
- Documentation of child's visits with siblings and parents when in out-of-home care and separated from siblings
- Documentation of efforts to achieve permanency in a timely manner

## Well-Being:

### Strengths:

- Obtaining medical care for children in out-of-home care
- Assessment of the needs of children and caregivers in out-of-home care
- Children who are required to be seen every 30 days are seen at least every 30 days

### Areas for Improvement:

- Documentation of engagement of parents in services
- Engagement of parents in ongoing decision making for their children and in meeting their needs outside of visitation
- Documentation of engagement of parents, children and caregivers in ongoing case planning
- Documentation of efforts to engage parents in services
- Documentation of seeing children one on one during home visits
- Documentation of seeing children who are required to be seen more frequently than every 30 days as being seen as required

## **DEVELOPMENT OF THE PSF CFSR PERFORMANCE IMPROVEMENT PLAN (CFSR PIP)**

PSF Quality Assurance used the following: performance and quality improvement data; information gathered throughout the years; PSF Training; PSF Operations; and subcontracted Case Management Agencies to identify ways to improve case documentation. The outcome of strategic planning sessions and workgroups was to develop a way to facilitate and document purposeful contacts with children and families. Purposeful contact sheets were developed to capture interactions between workers, parents, caregivers, and children. Three contact sheets were developed to cater to the case type to include In-Home Cases, Out-of-Home Cases, and Parental Contact for Out-of-Home Cases. Additionally, extra child addendums and a provider contact sheet were also developed.

The intent is for Case Managers to utilize these contact sheets to assist with having and documenting purposeful communication during home visits and contacts with parents and service providers. These sheets assist Case Managers in meeting with the case participants to address and document ongoing engagement of participants in case planning, services and needs identification.

A pilot group of several Case Managers from each of the Case Management Agencies began piloting these sheets in April 2017. PSF QA conducted meetings with each of the Case Managers piloting the sheets, during which PSF was able to address the purpose of the sheets, review the questions, purpose of the questions for each of the sheets and to address concerns or issues related to the utilization of these sheets. The sheets were piloted, and feedback received during that piloting period.

After the pilot period was complete, PSF QA met with the program directors to discuss large scale implementation. It was identified that there were considerations for using physical sheets, which were leading to duplication of work with some CMA's. Additionally, there was concern around incentivizing the use of the sheets to encourage the enhancement of skills.

It was determined that the first item could be addressed through the creation of digital sheets that were accessible in the field and in the office. PSF QA worked with the team at Mindshare to add the sheets to the RDC app and to the desktop environment. The sheets are almost ready for use and full implementation.

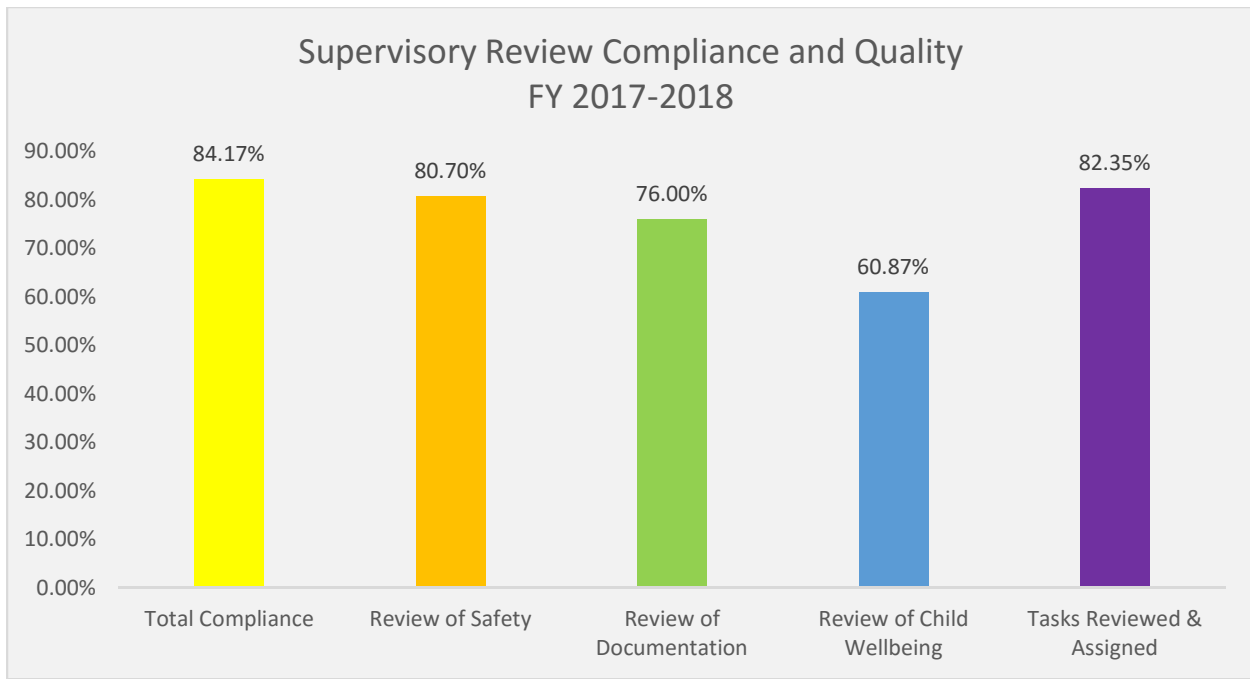
The second item was addressed through the creation of a proficiency evaluation. The PSF QA team developed a tool to assess for proficiency in information gathering and documentation. The review tool identifies items related to safety, permanency, and well-being, and provides the ability to see where those items relate back to RSF and CFSR reviews. If an individual can demonstrate proficiency in documentation they would no longer need to use the forms. However, if a later review indicates that documentation is not up to the standard, they would need to initiate the use of the forms once again.

PSF's goal is that the forms will serve as helpful guides for what to address and document for home visits and contact with case participants. It is believed if the information on these forms is obtained and documented the scores for our Child and Family Services Reviews and Rapid Safety Reviews will greatly improve. PSF additionally believes the information gathered on the forms could also be utilized by Case Managers to document other tasks such as completing progress updates, updating medication tabs, updating education tabs, completing judicial reviews, etc.

This continuous quality improvement activity is being implemented as a part of PSF's CFSR PIP and is being completed in collaboration with Case Managers who are doing the work with the children and families. Once the forms have been piloted, testing has been completed, and changes have been made, the documents will be finalized. PSF will continue to gather information and data as the contact forms are used to determine if the forms are resulting in the desired improvements in documentation. If needed, PSF will reconvene workgroups to review the data and findings and to develop new actions plans for improvement.

## **SUPERVISORY REVIEWS**

Supervisory reviews provide an opportunity for supervisors to assess and guide the case work of their staff members. Supervisors are required to complete a Supervisory Review regarding every child primary to their unit, every 90 days. PSF employs two avenues to monitor the Supervisory Reviews for both compliance and quality. For compliance, a report is generated on a quarterly basis detailing each supervisor's status on completing the required number of reviews, from which the percentage of supervisory reviews completed is formulated. For quality, when completing a case file review, the Quality Assurance Monitor completes an analysis of the quality of any supervisory reviews completed for that case during the period under review. PSF found the process of reviewing supervisory reviews as a part of case reviews enhanced the assessment of the supervisor's identification of the correct issues and tasks related to safety, permanency, and well-being.



Supervisory Reviews continue to be monitored throughout the year by PSF Quality Assurance to improve compliance and quality standards. Supervisory reviews are discussed following case file reviews, at inter-agency meetings and following the completion of each quarter. The performance information is gathered by PSF Quality Assurance and disseminated to each case management agency and broken down into both item compliance and unit performance. Supervisors are able to respond to their ratings in the event any corrections or updates are necessary.

Total compliance of Supervisory Reviews improved over the course of the fiscal year. The absence of compliance is not necessarily an absence of knowledge, worker supervision, or an accurate reflection of a supervisor’s understanding of Safety Methodology. However, as Supervisory Reviews are the only way to measure the above-mentioned items, PSF Quality Assurance continues to provide guidance, feedback, and information to prompt supervisors in meeting the compliance requirements.

Once completed, Supervisory Reviews tend to meet many standards for quality such as assessment of the safety plan, quality of notes and frequency of contacts. Supervisors need to continue to improve in overall compliance and meeting all quality standards.

**Strengths:**

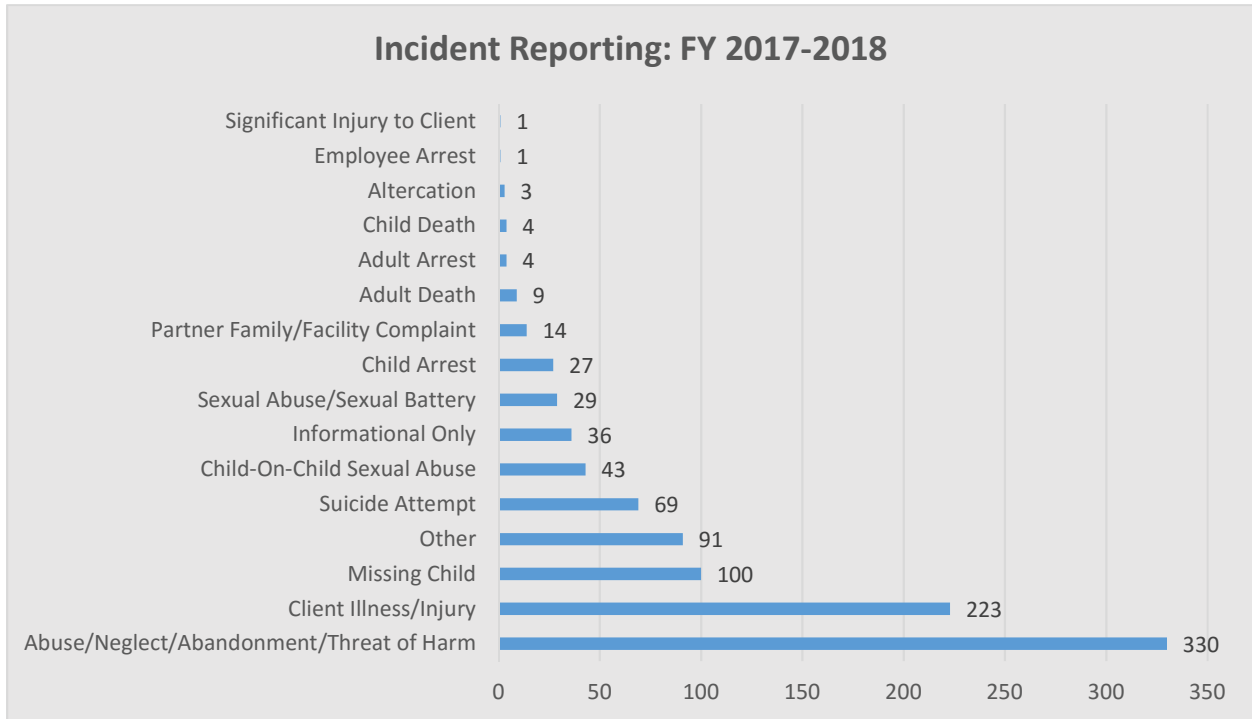
- There was an overall improvement in the completion of supervisory reviews in a timely manner.
- This was added as a measure for one of the case management contracts, with incremental quarterly improvement. The CMA demonstrated increased compliance each quarter.

**Opportunities for Growth:**

- Follow-up with tasks noted in supervisory reviews is not always completed and/or documented.  
Child well-being factors are not always substantially reviewed and are necessary for a quality review.

## INCIDENT REPORTING

Partnership for Strong Families requires incident reports to be completed on critical incidents related to twenty separate categories (see chart below). PSF tracks data monthly regarding the number of incidents per category, the number of incidents required to be entered into the DCF Incident Report and Analysis System (IRAS) and the number entered in to the DCF IRAS system in a timely manner.

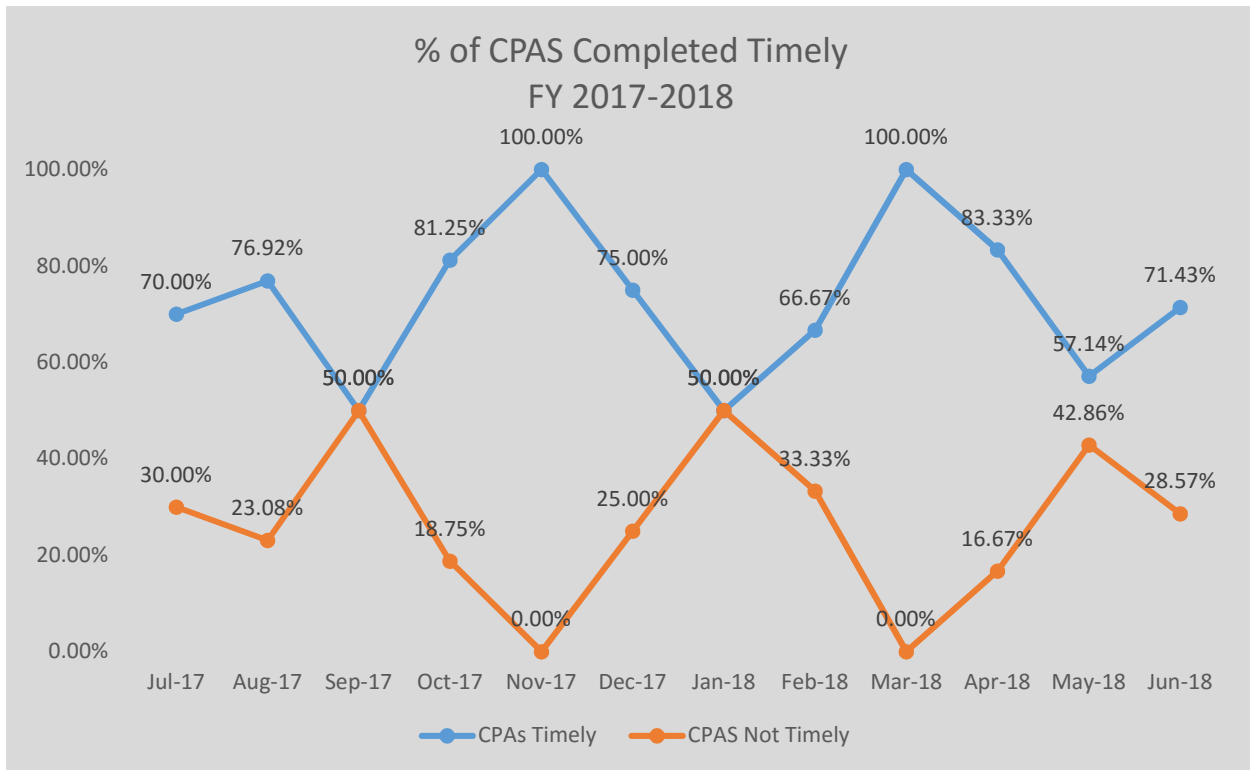


Partnership for Strong Families continues to process Incident Reports in the above mentioned categories. As in both the current Fiscal Year and prior Fiscal Years, most incident reports are related to a new abuse report or client illness & injury. For the 2017-2018 Fiscal Year, PSF Quality Assurance also included incident reports from Diversion cases to help capture the depth and scope of incidents within the PSF catchment area.



## CHILD PLACEMENT AGREEMENTS

Partnership for Strong Families continues to review and focus quality improvement activities and efforts toward Child Placement Agreements (CPA). Children in need of CPAs, whether it be a Care Precaution Plan or a Behavior Management Plan, have unique situations and issues that must be addressed in order to keep them, other children, caregivers and other case participants safe. PSF continues to monitor compliance with CPAs by reviewing data on a weekly and monthly basis.



### FY 2017-2018 Data:

- All CPAs were completed and uploaded to FSN as required.
- Data indicates a fluctuation in timely compliance of Child Placement Agreements being implemented.
- Placements in Department of Juvenile Justice and Baker Act Facilities do not count towards measure as these facilities may not be able to abide by placement restrictions but are not contracted with the Agency.

### System Barriers:

- Notice of a child moving by his/her therapeutic provider is not consistently given, resulting in a delay for Child Placement Agreement implementation.

### Strengths:

- All Required CPAs have been completed and uploaded into case record as required.
- Overall quality of Child Placement Agreements has improved.

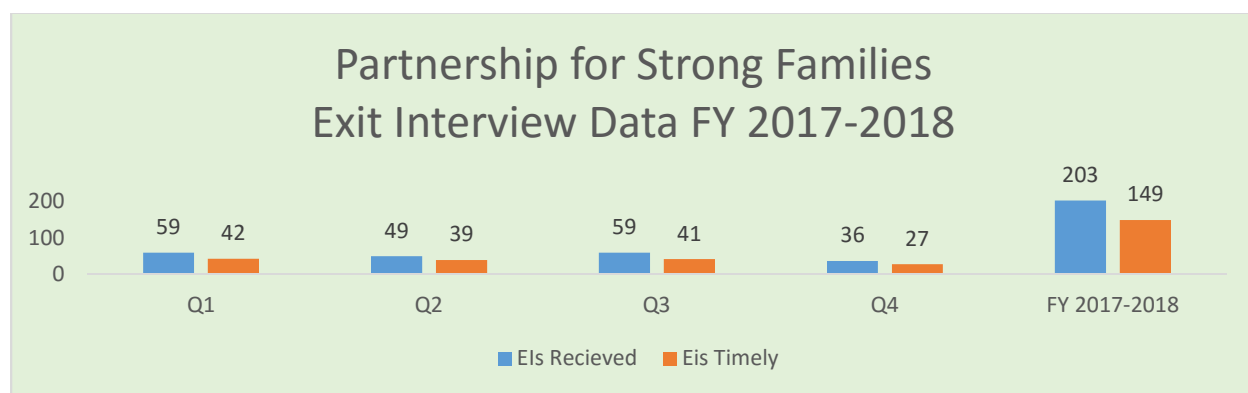
- Change if CFOP has provided allowance for verbal agreement by caregiver to be documented on date of placement and signatures to be obtained within 5 days in order for CPAs to be considered timely.

**Opportunities for Growth:**

- Continue activities designed to reinforce the need to complete Child Placement Agreements for children in out-of-home care with significant behavioral issues, activities to promote Case Manager understanding and management of Child Placement Agreements, utilizing the services of qualified evaluators to gauge the ongoing need for agreements and if changes can/should be made to agreements as situations change for the child.
- PSF QA has been working with PSF IT department to create a new P-Kids report to be able to track needed CPAs in real time. There is currently a delay due to a FSN technical issue.

**EXIT INTERVIEWS**

Exit Interviews provide insight and feedback on the quality of the placement of children in licensed out-of-home care. PSF gathers data on the number of exit interviews completed and the number completed timely with the child.



For FY 2017 – 2018 PSF processed 203 exit interviews. Of the 203 exit interviews processed 149 were completed with the child within the required timeframe (73%).

**Strengths:**

- PSF Quality Assurance continued to provide guidance and feedback to case management agencies to necessitate quick processing of exit interviews received.
- PSF Quality Assurance developed a quick reference sheet to help case management access information on Exit Interview standards. This was provided to all current staff and new trainees.
- PSF Quality Assurance is in the process of working with the PSF IT department on developing an online Exit Interview tool to simplify the process.

### **Opportunities for Growth:**

- Case Management agencies should continue to improve on Exit Interview compliance.
- Family Care Counselors should ensure all Exit Interviews are completed in person and separately, if applicable.
- Despite 73% of Exit Interviews being completed with the child within 5 days of leaving the placement, only 27 % of Exit Interviews have been submitted fully and accurately to PSF QA within the required six-day time frame. Over the course of the year the average delay was 15 days.

## **CONTRACT OVERSIGHT UNIT REVIEW -**

### **CORRECTIVE ACTION PLAN ITEMS**

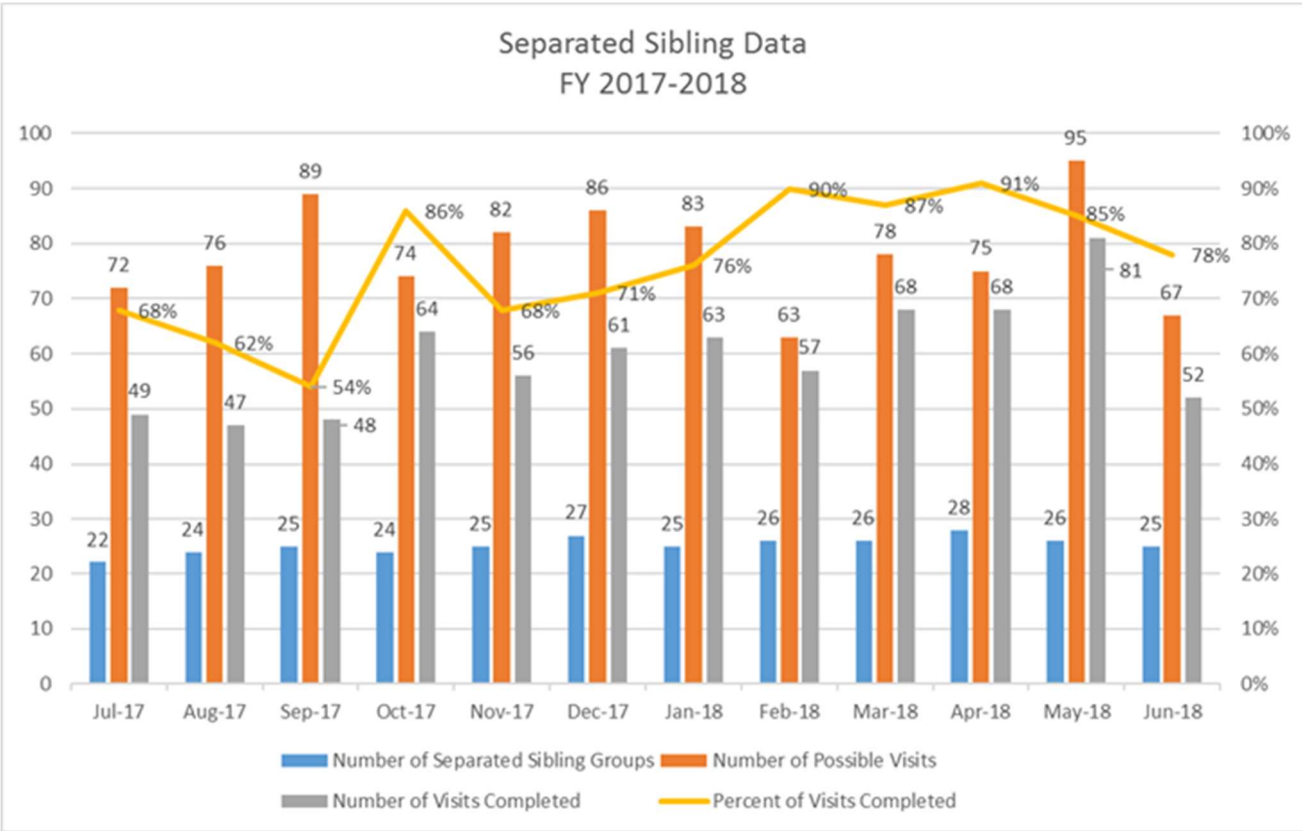
During the 2017-2018 Fiscal Year, PSF was taken off of the Corrective Action Plan regarding psychotropic medications and Separated Sibling Visitation. Although no longer under a COU CAP, PSF continues to monitor both of these items closely and shares that information with the DCF Contract Manager. PSF has been placed on a new CAP regarding mandatory reporting language within subcontractor contracts and regarding the proximity of placements to maintain connections. PSF has already provided a plan back to the DCF Contract Manager.

### **PSYCHOTROPIC MEDICATIONS (Previous COU CAP)**

PSF tracks Psychotropic Medication standards necessary for children served. PSF employs the use of a Clinical Specialist as a point of contact to track, encourage and assist Family Care Counselors in maintaining compliance standards. Partnership for Strong Families continues in its efforts to meet the goals outlined in the most current Corrective Action Plan, which was focused on the timeliness of pre-consent reviews and timely documentation in FSFN. PSF continues to assist Case Managers in knowing, understanding and implementing the requirements for children on psychotropic medications. In doing so PSF continues to utilize the services of the Clinical Specialist. PSF has created contractual performance measures around the area of pre-consents, which are included in all of the case management contracts. Additionally, psychotropic medication is a frequent topic of discussion at Partners Meetings (updates and open discussion for clarification) and is included in post-service training for case managers.

### **SEPARATED SIBLING VISITATION (Previous COU CAP)**

PSF tracks visitation between separated siblings in out of home care. PSF gathers and provides the data to case management agencies at the beginning of each month to review for updates and corrections as needed. While no longer on a DCF Contract Oversight Unit Corrective Action Plan for this measure, PSF still provides this data to DCF on a quarterly basis.



Visits between siblings was an area identified by the Contract Oversight Unit as needing improvement. PSF Quality Assurance developed a reporting tool to capture the amount of visitation taking place to document case management activities regarding separated siblings in out of home care.

Following the completion of the initial tool and subsequent correspondence with case management agencies, PSF Quality Assurance added additional measurements to capture the result of visits completed, and data points to capture on-going efforts to complete visitation between siblings, identify barriers, to include other forms of contact when traditional face to face contact is not possible. PSF Quality Assurance continues to review the data provided and works with the Case Management Agencies to continuously review the process and practice and to collect data. Additionally, PSF added measures within the case management agency contracts to provide additional accountability for each agency. This is measured quarterly and attached to penalties and/or incentives. The case management agencies have shown great improvement in this measure over the past fiscal year.

## **Mandatory Reporting – Subcontractor Requirements**

During the COU review it was found that three subrecipient contracts did not include specific language around mandatory reporting to the Inspector General. All other subrecipient contracts do include this language. PSF has already updated the contract template and added the required language into the new 18/19 FY contracts for the three providers where the language was missing. PSF conducted an internal review to ensure that there were no other subrecipient contracts lacking the mandatory language. It was found that the three contracts identified by COU were the only contracts lacking the required language.

## **Proximity of Placements to Maintain Connections**

PSF has placed more children out of county and out of circuit than other CBC's around the state. Although there are geographic and other considerations that play into this measure, PSF is dedicated to improvement. PSF is working to analyze the Key Indicator reports for Children Placed Out of County and Children Placed Out of Circuit to determine which fields are used to pull data, e.g., county of investigation assigned vs. child's residence county, case manager county of assignment, day that report is pulled monthly. If necessary, PSF will request changes to report criteria to more accurately reflect county of residence vs. county of placement. PSF will also review all children placed in licensed traditional care out of circuit/out of county for change of placement to county of removal if in the child's best interest. PSF will also assess current licensed placement capacity for each county and assess county/circuit for children currently placed in PSF licensed homes to assess priority of need for increased capacity. Additionally, PSF will increase foster parent recruitment activity in counties identified as having largest percent of children placed in licensed care out of county/out of circuit including, but not limited to, Taylor, Columbia, Lafayette, Levy, Dixie and Union County.

## **SUMMARY**

This Quality Management Annual Report represents PSF's performance in a variety of different continuous quality improvement activities during the 2017-2018 Fiscal Year. The data and corresponding analysis represent a sampling of the various types of activities that occur within the System of Care to address ongoing performance improvement. This listing is in no way an exhaustive list.

The information outlines PSF's current & historical performance, analysis and performance trends across multiple service delivery and management factors as they related to safety, permanency, and well-being. Additionally, this report addresses the local practice trends in response to Rapid Safety Feedback and Child and Family Service Reviews.

PSF works in conjunction with its subcontracted case management agencies and other stakeholders to address performance, identify areas in need of improvement and areas of best practice. These collaborated opportunities are seen in but not limited to: bi-weekly scorecard call; quarterly partner's meeting; barrier breakers meeting; CEO meeting; provider meeting; total quality management meetings; weekly/monthly/quarterly data review; sharing; and targeted training initiatives. Despite a

significant increase in caseload numbers for PSF's rural counties, PSF and its subcontracted case management agencies and other stakeholders work together to resolve barriers and to meet the needs of the children and families served. PSF and its subcontracted case management agencies performed well overall.

PSF plans to continue to work in conjunction with all system partners in ongoing continuous quality improvement activities. Specifics related to these activities are found in the PSF Strategic Plan 2016-2018 and the PSF Contract Monitoring, Performance and Quality Management Plan for Fiscal Year 2018-2019.

Some initiatives established in an effort to improve and sustain performance include, but are not limited to:

- **Secondary Assignment** – PSF has implemented a program with CMAs being assigned to case in a secondary role to assist Child Protective Investigator with safety plan oversight and to initiate engagement of parents/families early in the dependency process.
- **Safety Reduction Workgroup** - The Safety Reduction Workgroup was implemented during the 2016-2017 Fiscal Year to identify children with excessive lengths of stay. The Workgroup looked at ways to break down barriers to permanency by assessing child safety, training case party participants to provide safety, and working in collaboration with Children's Legal Services (CLS) to address legal issues.
- **Worker Incentives** - Sub-Contracted Agencies routinely offer additional incentives to support employees completing quality work and encourage performance with employees needing improvement.
- **Quality Parenting Initiative Meeting** – Meetings between PSF, subcontracted case management agencies (CMA), local service providers, and Partner Family parents were held to enhance the collaboration and teamwork of staff and Partner Family.
- **Partner Family Mentoring** - To aid with recruitment and retention and capacity for matching children to the best families, certain PSF Partner Family parents have been identified as mentors to provide support and assistance for newly licensed Partner Families.
- **Sibling Visitation Tracking** - CMAs have implemented new tracking measures to encourage frequent and quality visitation occurs between siblings placed in separate placements while in out of home care.
- **Targeted Training Initiatives** – PSF Staff Development has developed and implemented trainings for CMA supervisors, mentoring and coaching programs for new staff through the certification process, table talks, and Practice Model skill enhancement trainings.
- **Resource Center Services** - PSF has four active resource centers which aid prevention and diversion efforts which have shown significant impact on the rates of abuse in their respective areas.
- **Placement Stability Meetings** – PSF Operations department has opportunities for parties involved to assess, discuss and develop working action plans to meet the needs of children in out of home care.
- **Quality Assurance Team Meetings** – The QA department conducts team meetings to review information related to reviews, ongoing projects, and area's of focus as they arise.
- **Case Contact Forms** – Development and implementation of Case Contact form continuous quality improvement activity.

- **CMA Contract Measures** – Measure were added to the CMA contracts that are tied to incentives and/or penalties based on performance. These measures are continually monitored and incentives/penalties assessed quarterly.