



# FSSNF QM Plan 2019-20

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## Introduction

The Family Support Services of North Florida (FSSNF) strategic plan compliments FSSNF's mission statement which is, **“to be the leader in providing safety, stability, and quality of life for all children by working with the community to strengthen the family unit.”** FSSNF is committed to ensuring high-quality, community-based care for abused and neglected children in *North Florida*.

For fiscal year 19-20, Florida remains on a PIP for Items 1-6, Item 12, and Items 13-15. This year's focus for the Northeast Region will specifically be on Items 3, 4, 6, 12, and 13. FSSNF's fiscal year 18-19 PIP data indicates that the focus for this coming year should be in Items 1-4, 12, 13, and 15. While FSSNF's average PIP data indicates 7 Items falling below PIP target, the larger sample size rated through Continuous Quality Improvement (CQI) reviews indicate four items may be closer to or exceeding PIP targets in practice.

Item No.	Baseline	PIP Target	FSSNF Avg. PIP Score 18-19	FSSNF Avg. CQI Score 18-19*
1	91.5%	91.6%	85%	92.11%
2	76.5%	85.8%	60%	100%
3	71.3%	77.7%	55%	72.2%
4	81.8%	88.5%	75%	77.8%
5	74.5%	82.1%	100%	77.8%
6	67.3%	75.4%	75%	70.4%
12	51.3%	58%	33%	68.5%
13	63.6%	70.7%	44%	70%
14	73%	78%	77.7%	53.7%
15	43.5%	51%	44%	53.2

\*indicates that average does not include the PIP sample score

Therefore, FSSNF's primary practice focus for fiscal year 19-20 will be on:

- Item 3 Risk and Safety Assessment and Management
- Item 4 Stability of Foster Care Placement
- Item 13 Child and Family Involvement in Case Planning

FSSNF's additional area of focus will be consistency of practice on:

- Item 1 Timeliness of initiating investigations of Reports
- Item 2 Services to Family to Protect Child(ren) in the Home, Prevent Removal or Re-Entry into foster Care
- Item 12 Needs and Services of Child, Parent, and Foster Parents
- Item 15 Caseworker Visits with Parents

FSSNF will also monitor trends to ensure no further decline on:

- Item 6 Achieving Reunification, Guardianship, Adoption, or APPLA
- Item 14 Caseworker Visits with the Child
- Item 16 Educational Needs of the Child
- Item 17 Physical Health of the Child
- Item 18 Mental/Behavioral Health of the Child

FSSNF Process Improvement Plan for FY 19/20 includes the following goals and key activities:

1. Children are first and foremost protected from abuse and neglect; safely maintained in their homes, if possible and appropriate; and provided services to protect and prevent removal from their home.
  - a. Continuing to implement permanency staffing's at 3, 6, 9, 11+ months, innovation staffing's and fidelity staffing's. Aligning Permanency staffing questions to include PIP items.
  - b. FSSNF Safety Practice Specialist will send out weekly S.O.S. (Sound off on Safety) emails to our CMO's. Focusing on different safety practice guidelines.
  - c. Lowering the number of children that reenter care after reunification by utilizing the Daniel Post Reunification Support Services Program.
  - d. Provide Monthly groups for supervisors to focus on safety methodology.
  - e. Remodel the Supervisory tool to enhance supervisor reviews to meet the needs of the CFSR tool.
  - f. Collaborations between FSSNF CMO Services and QM with CMO units to work on preparing cases for PIP's and CQI's.
  - g. Sharing PIP performance data and discussing problems at every monthly CMO/CBC director and Supervisor meeting as well as monthly barrier breakers and CMO-CEO meetings.
  - h. Behavioral Health Integration workgroup and trainings.
  - i. Refresher CFSR training in October 2019.
2. Children have permanency and stability in their living situations and the continuity of family relationships and connections is preserved for children.
  - a. Enhance permanency and stability for children in their living situations.
    - i. FSSNF will improve the permanency and stability of children's living situations via our Family Resource Advocate position.
    - ii. FSSNF will actively recruit foster homes, continue utilizing the Quality Parenting Initiative (QPI) standards in recruitment, and use permanency staffing's to discuss placement stabilization.
  - b. Enhancement and continuation of family relationships and connections are preserved for children

- i. FSSNF will identify family and community relationships by documenting family trees and efforts to determine each child's connections to the community and document efforts to preserve those placements. CBCs are also actively recruiting foster homes in communities /zip codes where there are a large number of shelters.
  - c. Utilize Family Resource Advocates to improve the stability of children's placements.
  - d. Increase foster home recruitment and continue to utilize the Quality Parenting Initiative Standards.
  - e. Increase foster homes in high removal areas.
- 3. Families have enhanced capacity to provide for their children's needs and the well-being of children is improved through services to meet their education, physical health, and mental health needs.
  - a. FSSNF has implemented a sibling separation staffing process. Our QM department informs our Kids Central Placement office of which children are being staffed for permanency that month in order for Kids Central staff to give a report on efforts to get separated siblings placed together. QM staff bring this info to the Permanency staffing to find out what the FSC's are doing to get siblings placed together.
  - b. FSSNF Kids Central Placement office reviews Caregiver Supports and Strategies along with Contact information section of the Child Placement Agreement form to assess if caregivers are provided the supports and the contact of information in cases where assistance is needed in managing identified children's behaviors.
  - c. Strengthen accountability for identification of educational needs and implementation of services to address identified needs.
    - i. Strengthen accountability for identification of educational needs and implementation of services to address identified needs. Each CBC will enhance their partnership with the local school board(s) to ensure appropriate enrollment and services of children receiving protective services.
    - ii. Each CBC will identify a staff member or position that will be a single point of contact to be accountable for partnering with the school board.

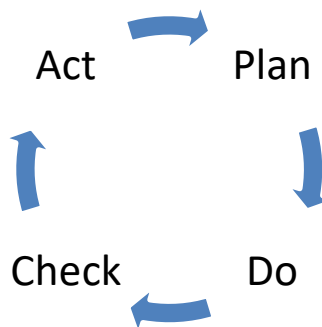
These goals and key activities are designed to improve FSSNF's data and ensure the PIP target goals are met and sustained.

## Section 1: QA Process

FSSNF implements a complete DCF-approved quality management process consistent with the DCF contract and service delivery model, and in compliance with state and federal law, administrative rule, and DCF operating procedures. One of the guiding principles behind accomplishing this is involving FSSNF staff at all levels, to include the Case Management Organizations (CMO) and community stakeholders. This approach holds the CMO accountable for leadership, direction, and compliance through an external quality assurance process, as well as the infusion of continuous quality improvement through an internal process focused on service delivery.

The quality assurance approach is designed as an external process that validates internal practices through the application of sound evaluation principles that ensure data is collected accurately, analyzed appropriately, and reported and acted upon effectively. FSSNF staff in collaboration with DCF provide external reviews, and coordinate all outside reviews of case management service delivery. While the quality assurance approach focuses on the external process, the quality improvement approach is an internal process driven and conducted by the CMO with the guidance and support of the FSSNF Quality Management (QM) team.

FSSNF utilizes the PDCA Cycle of Continuous Quality Improvement to facilitate quality improvement. The PDCA Cycle is comprised of four stages that starts with identifying the problem and concludes with action. The four stages are illustrated and defined below:



- **PLAN:** Analyze the current areas needing improvement, gather data, and identify possible actions to make improvements. Specify desired outcomes. Create a corrective action plan.
- **DO:** Implement planned actions for improvements.
- **CHECK:** Determine if the actions taken worked as intended and resulted in the desired outcomes; revise as needed.
- **ACT:** Standardize the actions for improvement that resulted in the desired outcomes.

## Section 2: Data Collection and Analysis

### A. Florida Safe Families Network

The FSSNF Performance Analytics Department receives weekly data reports from our CMO agencies and validates on the rolling schedule indicated below:

Agency	Scheduled Validation
Children's Home Society	1 <sup>st</sup> Monday of the Month
Daniel Memorial	2 <sup>nd</sup> Monday of the Month
Jewish Families and Community Services	3 <sup>rd</sup> Monday of the Month
Nassau – FSSNF	4 <sup>th</sup> Monday of the Month

If there is a discrepancy in the weekly report, our FSSNF data department sends out notice to our CMO for correction. In addition, Performance Analytics facilitates regular conversation with the CMO's regarding their data and performance. These meetings are held in-person monthly and on an ad-hoc basis when requested.

### B. DCF Contractual Requirements

FSSNF and the CMO are required to provide case management services in a manner that achieves performance targets outlined in contractual standards. A list of the performance standards and other review areas are as follows:

M	Description	M	Description
1	Rate of Abuse or Neglect per Day	8	Placement Moves Per 1,000 Days
2	Children Served In-Home with No Verified Maltreatment	9	Children Receiving Timely Medical Services
3	No Verified Maltreatment within 6 Months of Closure	10	Children Receiving Timely Dental Services
4	Children Seen Every 30 Days	11	Young Adults Enrolled in Education
5	Permanency within 12 Months	12	Sibling Groups Placed Together
6	Permanency within 12 Months (Children in Care 12-23 Months)	13	Adoptions Finalized
7	Children Who Do Not Re-Enter within 12 Months	14*	Incident Reports/Client Complaints

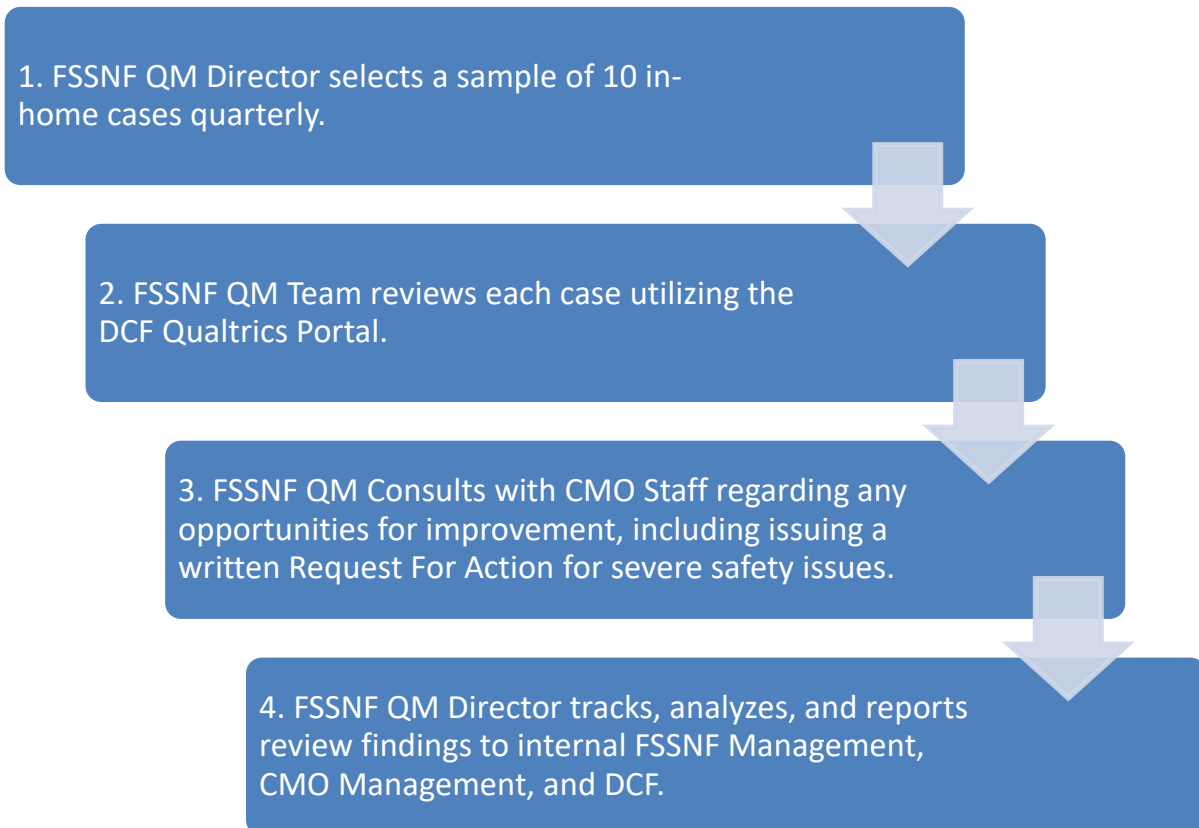
\*denotes a measure that is not captured on the DCF Scorecard

FSSNF accumulates the outcomes and performance indicators from FSNF, the DCF Web Portal, and other related-data sources into a monthly and quarterly scorecard. The scorecard is distributed in regularly scheduled meetings (or email) to the CMO CEOs and Directors to review, identify, and discuss with their staff the performance trends in need of immediate attention. This data is also shared with FSSNF Management and DCF.

### C. Statewide CBC Quality Assurance Rapid Safety Feedback Reviews

FSSNF will conduct ongoing Rapid Safety Feedback reviews focused on child safety in open Family Assessment and Support Team (FAST) family preservation and in-home court ordered services cases. These reviews focus on children ages 0-4. The rapid safety feedback review process allows limited statewide resources to focus reviews on a targeted population of children who are most impacted by negative outcomes before those unwanted outcomes occur.

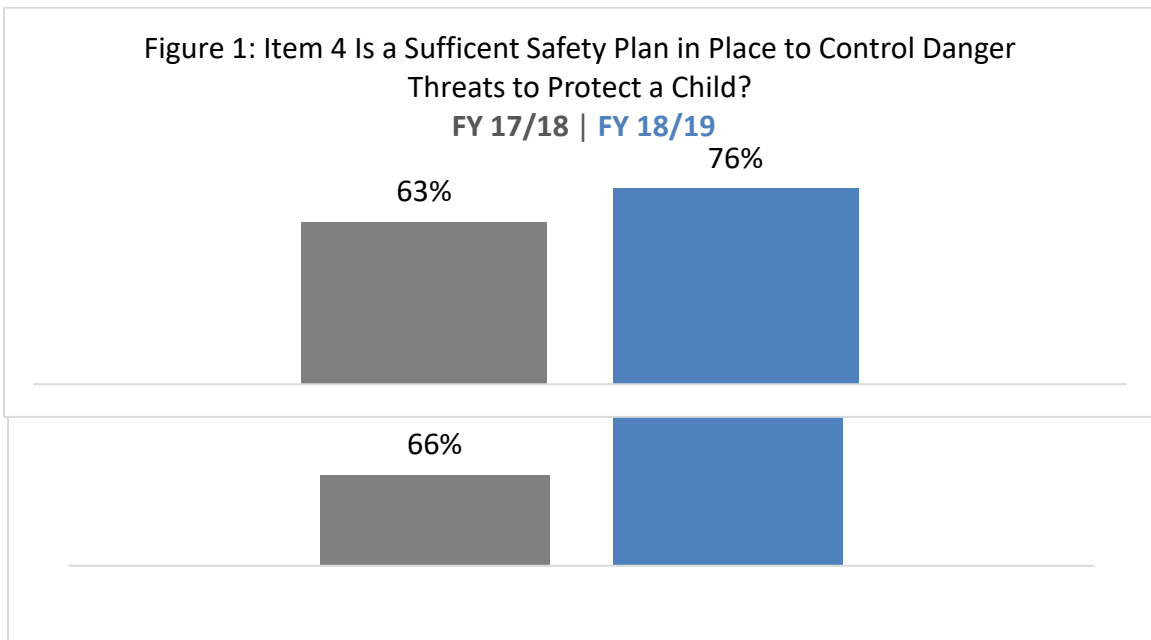
The reviews and consultations will assist in improving the quality of day-to-day case work practice provided to the children and families. The process for preparing and conducting the reviews will be as follows:





#### D. Innovations from RSF Review

FSSNF's scores have increased over the last fiscal year with regards to the RSF reviews, seeing the largest improvement in Safety Plan Sufficiency (Item 4, Figure 1). While also seeing an improvement in Supervisor Consults (Item 5, Figure 2). Success in these measures can be attributed to a renewed investment in CWCM Supervisory staff by FSSNF's Safety Practice Specialist position. This position was allocated to audit implementation of safety practice and offer mentorship and guidance to the CWCM and CWCM Supervisors and has resulted in the facilitation of a number of initiatives. One initiative is "Survive and Thrive," where best practices are shared and challenges discussed in an open forum. By bringing Supervisory staff to the table, FSSNF hopes to establish a culture of collaboration and teamwork between CMO agencies that supports Safety Practice and better outcomes for our children.



While FSSNF continues to work diligently to implement Safety Practice Methodology, a decrease was seen this year in Family Assessments (Item 1, Figure 3). In a response to this, and other scoring decreases seen in the CFSR, FSSNF QM and CMO Services departments have worked to re-engage front-line staff through innovations discussed later under Section G, Innovations on PIP Results.

Figure 3: Item 3 Are Family Assessments of Danger Threats, Child Vulnerability, and Family Protective Capacities Sufficient to Identify Safety Concerns and Case Plan Actions Needed to Effectively Address Caregiver Protective Capacities and Child Needs?



#### E. Florida Continuous Quality Improvement Reviews

Florida completes 20 Continuous Quality Improvement (CQI) Reviews every 6 months using the Child and Family Services Review (CFSR) tool. The federal CFSR tool in the CFSR portal will be used for the review of the selected cases. These reviews are done on in-home and out-of-home cases. The process for organizing, managing, and conducting the Florida CQI reviews for Duval and Nassau Counties will be as follows:

1. For out-of-home foster care cases the FSSNF QM Director will pull a report from the Federal CFRS portal. For in-home cases the FSSNF QM Director will pull a report from FSN. FSSNF QM Director will modify the listings by removing duplicates and creating a random sample of 4 cases per agency.

2. A random sample will then be assigned to the FSSNF QM Team. The FSSNF QM Team will review each selected case. The 2nd party review will be conducted by the FSSNF QM Specialist Manager and finalized.

3. FSSNF QM then consults with CMO Staff regarding any opportunities for improvement, including issuing a written Request For Action for severe safety issues.

4. FSSNF QM Director tracks, analyzes, and reports review findings to internal FSSNF Management, CMO Management, and DCF.

F. Federal Child and Family Services Review

The Federal Child and Family Services Baseline Review was conducted from April through August 2016 for FSSNF. The review process was a collaboration between DCF regional staff and the FSSNF QM Team. FSSNF reviewed 2 Foster Care and 2 In-Home cases during the CFRS review period. DCF conducted the 2<sup>nd</sup> party review and the Children’s Bureau made the final approval in the CFRS portal. Florida completed its CFRS cases in September 2016 and the Children’s Bureau issued the final report on December 28, 2016. The state was given 90 days to develop a Program Improvement Plan (PIP) for failing to meet performance goals. The PIP was approved on March 28, 2017 by the Children’s Bureau and implementation began July 1, 2017.

Since Implementation, 8 periods have elapsed with the latest concluding in June 2019. The PIP has been extended through the 2019/2020 Fiscal Year and FSSNF cases will be reviewed in the following schedule:

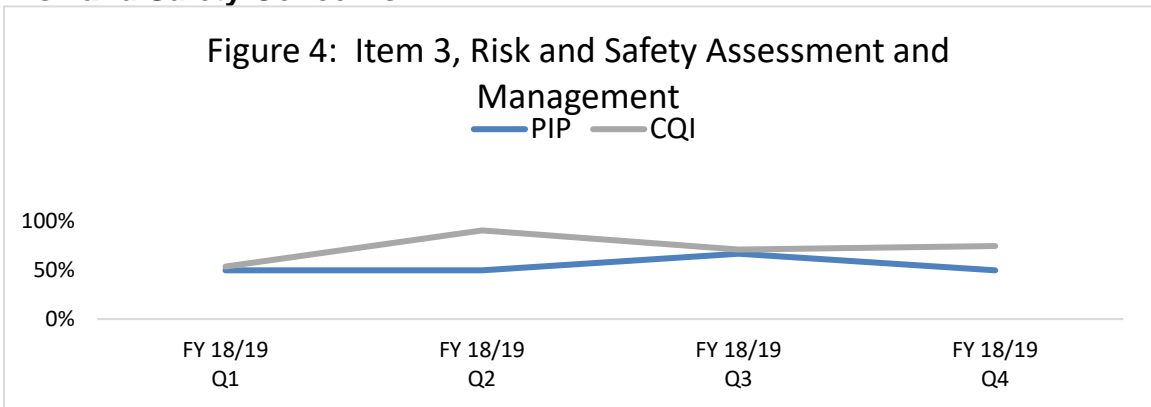
Review Month	Case Type
July 2019	Out of Home

September 2019	In-Home
October 2019	Out of Home
December 2019	In-Home
January 2020	Out of Home
March 2020	In-Home
April 2020	In-Home
May 2020	Out of Home

**G. Innovations on PIP Results**

FSSNF Management regularly reviews trends indicated on both the Florida CQI's and PIP's and has implemented several innovations in the last year aimed at targeting specific areas needing improvement as well as improving outcomes and timely permanency for all children served. The following are specific innovations correlated to specific areas of opportunity highlighted on the PIP:

**Risk and Safety Concerns**

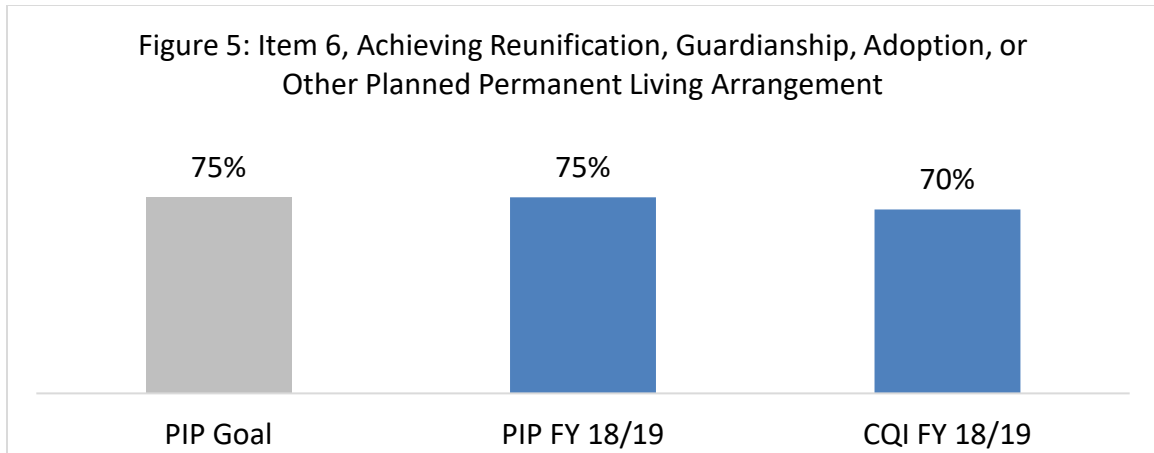


FSSNF has identified an area of opportunity within CFSR Item 3, Risk Assessment and Safety Outcomes, and has applied a two-pronged approach through education and mentorship to improve this measure for our children. In May of 2019, FSSNF retained Action for Child Protection to provide Safety Practice Training to QM staff internally and at the CMO level. The goal of this training was to provide staff with tools for better consultations and case conversations that revolve around child safety, conditions for return, and the parent's protective status.

FSSNF has also implemented Fidelity Staffing's at case onset. These staffing's are held one week following Case Transfer on sample cases with a Reunification goal. The conversation is held as a round-table discussion between FSSNF's Safety Practice Specialist, the CWCM, and the CWCM Supervisor and is aimed

at collaboratively developing effective safety plans, SMART case plan outcomes, and engaging the family.

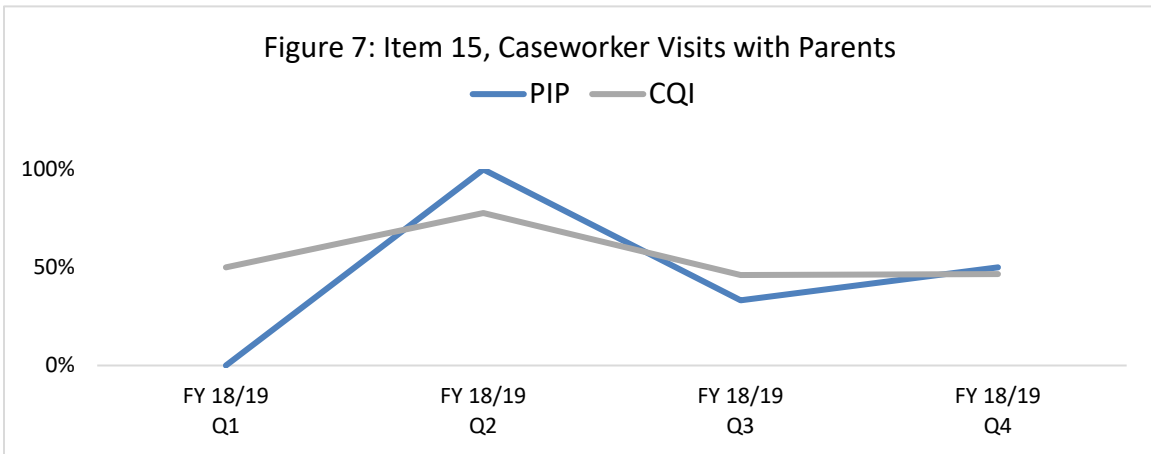
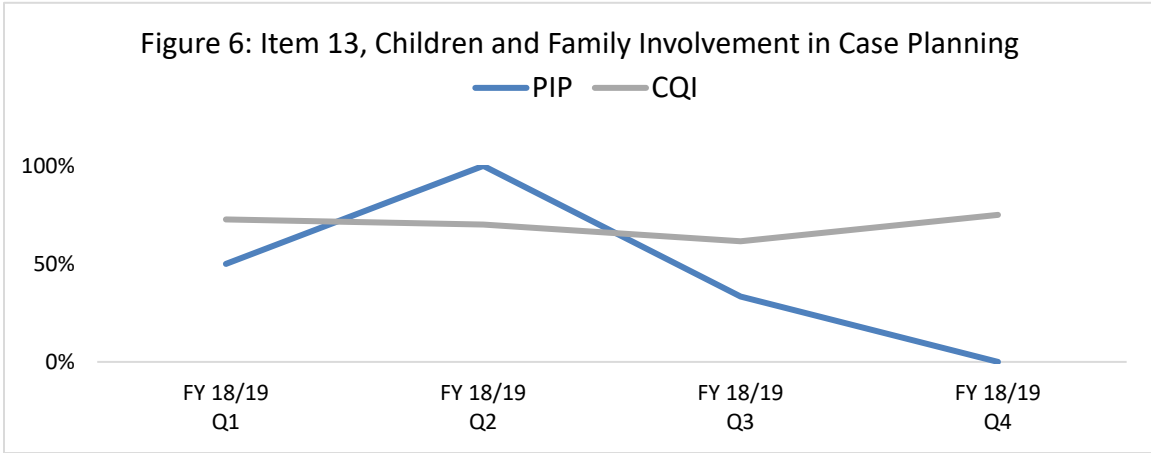
### Timely Permanency



FSSNF QM and Performance Analytics place heavy emphasis on identifying any and all areas that may impact a child’s achievement of timely permanency. FSSNF did meet the PIP goal with the PIP’s completed in FY 18/19. However FSSNF did not meet the PIP goal from the CQI’s completed in FY 18/19 which has allowed FSSNF to become aware of some systematic barriers in relation to this item. FSSNF will continue to work with the system as a whole to overcome any barriers to achieving timely permanency.

One contributing innovation have been the aptly-named Innovation Staffing’s. These staffing’s are targeted at cases that have reached the 8-month mark that have not achieved permanency and serve as a live application of the FSSNF Barrier Breakers meeting held monthly. Contributors to the conversation include FSSNF Safety Practice, CLS, and CMO Staff. During this conversation, any barriers to permanency are discussed and dialogue is focused around critical and creative case management that will obtain timely—and lasting—permanency.

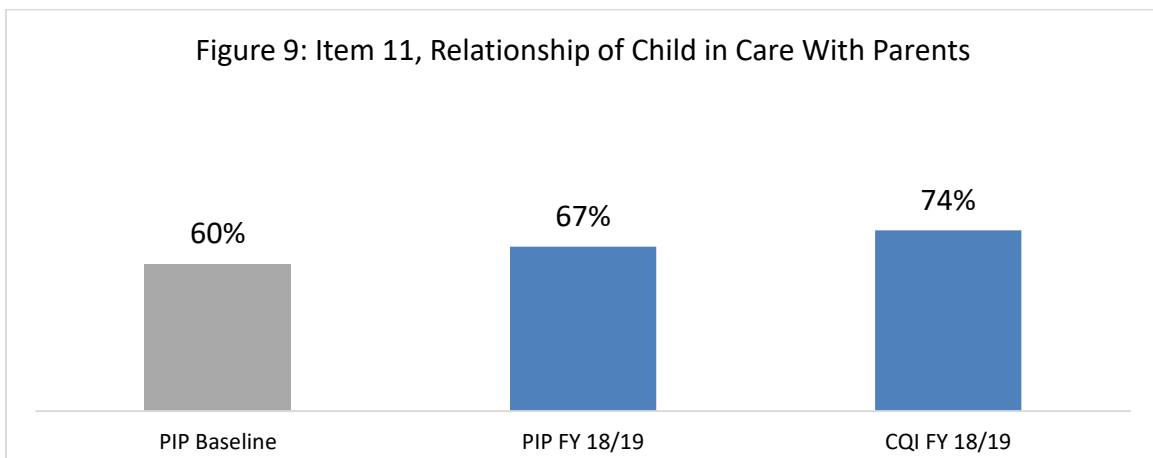
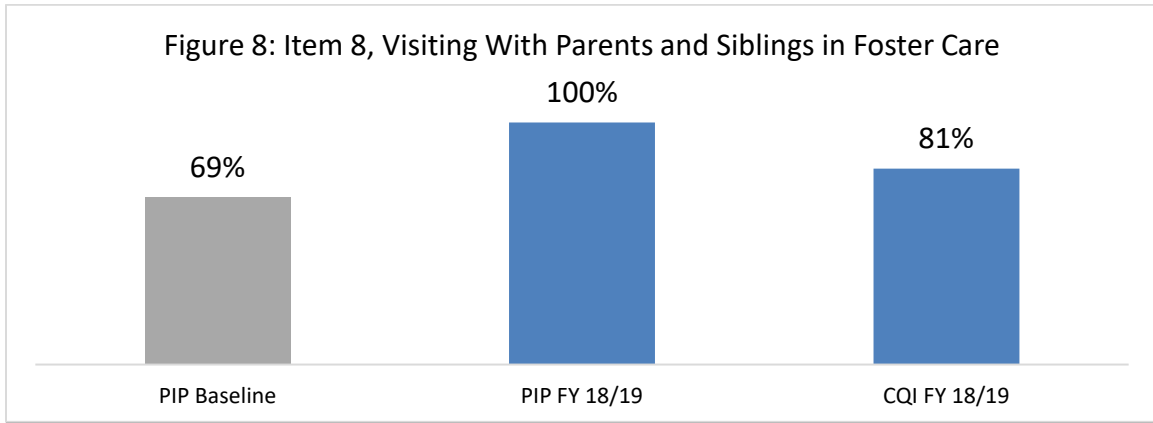
### Family Engagement in Case Planning



FSSNF has also identified a local issue where workers are not engaging families in the case planning process and maintaining quality visits with the parents. FSSNF's average for PIP item 13 did not improve from the baseline of 63.6 and instead dropped to 45.7%. The CQI average of this item did meet the PIP goal of 70%. FSSNF's average for PIP item 15 has improved from the baseline for this fiscal year at 45.7% but it remains below the PIP goal of 51%. These two items will be a focus of FSSNF in fiscal year 19-20.

To improve this measure and secure better outcomes for our children, FSSNF has purchased evidence-based Family Group Decision Making methodology training from the University Of Colorado School Of Medicine. This methodology serves as an overlay to better engage families served in the case planning process, and has a tentative system-wide implementation date of fall 2019.

## Parent-Child Relationships



In regards to PIP items 8 and 11 in respect to child-parent relationships and visitation FSSNF has improved substantially in both areas. Additional training has been done with the CMO's to ensure they understand what item 11 and building relationships means.

All of our PIP action items and local initiatives are aimed to improve outcome measures for our children and families. The success of these action items will be based on the monitored CQI Foster Care and In-Home Care, RSF, and CFSR PIP case review data. FSSNF Director of Quality Management tracks data from CQI In-Home, CQI Foster Care, and RSF outcomes each quarter for signs of improvement. The data is also compared to last Fiscal Year results for Fiscal Year to Fiscal Year comparison. If improvements are not evident, existing procedures are reevaluated and/or new procedures are created. FSSNF also created a Performance Analytics department to review agency data trends and come up with corrective measures as needed. This department works closely with the QM Department and CMO Services Department at FSSNF to address areas needing improvement.

### **Section 3: Internal Reporting of Findings**

1. Data and analysis reporting:
  - a. FSSNF Director of Quality Management provides quarterly data reports for reviews that have been completed and includes a summary of strengths and areas needing improvement. Recipients of the quarterly reports include: CMO Directors and FSSNF Management.
  - b. FSSNF Performance Analytics regularly reviews trend information supplied by QM to determine areas of concern, and provide quantitative/qualitative overlaid data upon identifying a need for escalation and further review.
2. Meetings with the FSSNF Board of Directors:



- a. FSSNF Management staff regularly discusses patterns and trends identified in both our Quantitative (Scorecard) and Qualitative (QM) data with the FSSNF Board of Directors.
3. Meetings with Regional Administrator to Review CBC Performance:
    - a. FSSNF Management and DCF Contract Managers, Circuit Administrator and other staff meet quarterly at our Partnership meeting to discuss performance measures, current outcomes, resolutions/corrective action plans, DCF Scorecard, and other concerns.
    - b. FSSNF has a monthly Barrier Breakers meeting with various community stakeholders as well as our CMOs, CLS, and DCF partners to review areas needing improvement for better overall child safety practice and support for our families.
  4. Risk Committee Meetings:
    - a. The Risk Committee Meetings occur at least quarterly. The purpose of this meeting is to review and assess risks as it relates to client incidents, staff accidents, client grievances, building inspections, etc.
    - b. As of July 2019, FSSNF Performance Analytics reviews Incident Report information in conjunction with FSSNF QM to identify children in our care that represent potential risk and safety concerns and provides this data to FSSNF Senior Management.
  5. Quality Management (QM) Department Meetings:
    - a. The QM Department Meetings occur weekly to review current and open analyses, best practice, and cases with barriers from Permanency staffing's.
    - b. The purpose of this meeting is to review and discuss the findings of current case audits to improve child welfare practice, discuss new policies and procedures, develop and implement strategies for continuous quality improvement system-wide, and share "best practices" of child welfare.

All data input and reports will be completed and/or provided to the DCF Office of Family and Community Services-Child Welfare and other entities per the contract due dates.

## **Section 4: Supplemental/Other Reviews**

### **A. Supplemental Reviews**

Intense statewide media focus on child deaths during or following involvement with DCF and/or the CBCs resulted in the development and implementation of the supplemental reviews for children ages 0-5. FSSNF QM Staff review hundreds of out-of-home cases per year and address safety and compliance issues through Requests for Action. The reviews are divided as follows: Reunification Home Studies, Relative/Non-Relative Home Studies, and 0-3 Targeted Permanency and Well-Being reviews.

### **B. Discretionary Reviews**

The FSSNF Quality Management Team will continue to work with the DCF Circuit/Region to respond to and complete special discretionary review requests (i.e. special case audit requests, child death reviews, etc.) within a mutually

agreeable timeframe. This activity will likely require specially designed review tools and other protocols depending on subject matter. The FSSNF Quality Management Team will utilize the DCF approved review tool to complete these reviews

### C. Systemic Factor Reviews

Systemic challenges are identified when agencies that provide ancillary services team up to assess and address the needs of children in child welfare. The DCF Regional Administrator and executive staff, FSSNF CEO and executive staff, and service provider agency staff participate in a standing Barrier Breakers team meeting to identify and resolve barriers. These barriers are identified in trends seen quantitatively by FSSNF Performance Analytics and Qualitative case-specific data provided by the FSSNF QM Team.

An example of this type of analysis are the Incident Report analyses conducted by both aforementioned departments. Monthly, FSSNF Performance Analytics pulls a listing of the previous month's incident reports and identifies areas of concern, passing along the list of specific cases and children to QM. The FSSNF QM Team will then perform a case file review to ensure there are no safety concerns.

In the event that a safety concern exists, the issue will be escalated to FSSNF Senior Management and CMO Leadership.

## **Section 5: Description of QA/CQI Internal Resources**

FSSNF Director of Quality Management supervises staff dedicated to quality operations, assurance and improvement activities. The staff currently includes one Quality Management Specialist Manager, one Oversight Coordinator and four Quality Management Specialists. The Oversight Coordinator focuses on special reviews and projects from the Senior Management Team in addition to processing Incident Reports, Psychotropic Medications, and Client Grievances. FSSNF Quality Management does have the capacity to have a Lead Quality Management Specialist. The Director of Quality Management and staff, when appropriate, will attend all DCF and Region trainings pertaining to quality assurance and quality improvement issues, as well as other state and national conferences on best practices in service delivery and quality management.

FSSNF Quality Management Specialists work with the established CMO QM staff to ensure contractual compliance on cases for RSF, CQI, and PIP's, in addition to Incident Report follow up and Permanency staffing action items. FSSNF QM Oversight Coordinator works with the CMO point of contact for Psychotropic Medication compliance on a weekly basis.

The Director of Quality Management reports to the FSSNF Vice President-Legal, General Counsel; the FSSNF Vice President-Legal, General Counsel reports to the FSSNF Chief Executive Officer; and the FSSNF Chief Executive Officer reports to the Board of Directors.



The Director of Quality Management and the Quality Management Specialist Manager are responsible for planning, implementing and reporting on case management quality improvement and DCF-required processes. It is also their responsibility to identify trends from all reviews and seek solutions for improvement while working with the FSSNF Training staff and CMO's to address findings in future trainings.

The Quality Management Specialist Manager supervises staff dedicated to quality assurance and improvement activities.

Other responsibilities of the Quality Management Specialist Manager, the Lead Quality Management Specialist, and/or the Quality Management Specialists:

**Quality Management Specialist Manager, Lead Quality Management Specialist, Quality Management Oversight Coordinator, and the Quality Management Specialists:**

- In collaboration with FSSNF service delivery staff and CMO, complete all DCF-required quality assurance reviews and interviews. For FY 19-20 this will be Rapid Safety Feedback (RSF); Continuous Quality Improvement (CQI) reviews; Child and Family Services Reviews (CFSR) also known as Program Improvement Plan (PIP) Reviews.
- Complete internal 0-5 Supplemental case reviews.
- Complete DCF-required supplemental reviews as directed.
- Analyze completed reviews to identify case practices that contributed to ratings of area needing improvement.
- Assist the CMO in quality improvement planning by ensuring compliance with statute, rule, and policy.
- Process incident reports and enter into IRAS as required by FSSOP.
- Review client complaints, work on resolutions and track results.
- Review and track compliance for psychotropic medications for all children in out of home care.
- Conduct permanency staffing's on a monthly basis at the CMOs' sites.
- Facilitate, monitor, and report on PIP activities.

## **Section 6: Description of QA/CQI External Resources**

### **A. Lead agency and sub-contracted provider agencies**

FSSNF implements and supports a continuous quality improvement system that includes input by all levels of FSSNF staff and partners across departmental and community lines. FSSNF currently provides direct court-ordered dependency services in Nassau County and subcontracts with the following CMOs to provide in-home and out-of-home services:

1. Children's Home Society
2. Daniel Memorial, Inc.
3. Jewish Family & Community Services, Inc.

### **B. Reporting and Communication**

Reports of Quality Management activities include the results of qualitative reviews such as the CFSR and are shared with the FSSNF Management Team, FSSNF Board of Directors, the FSSNF and DCF Contract Management staff, the DCF Northeast Region staff, the DCF Office of Family and Community Services-Child Welfare, and each of our CMO's. The benefit of sharing these results is to encourage individuals to work across departmental and community lines to improve quality of services and to realize the importance of customer satisfaction and services provided to the children and families we serve.

### **Schedule of QA/CQI Activities**

- A. Rapid Safety Feedback review: Conducted the first month of each quarter
  - July 2019 (at least 10 cases throughout the quarter)
  - October 2019 (at least 10 cases throughout the quarter)
  - January 2020 (at least 10 cases throughout the quarter)
  - April 2020 (at least 10 cases throughout the quarter)
- B. Continuous Quality Improvement (CQI) Reviews: Conducted the second and third month of each quarter
  - August and September 2019 (at least 10 cases)
  - November and December 2019 (at least 10 cases)
  - February-March 2020 (at least 10)
  - May-June 2020 (at least 10 cases)
- C. Federal Child and Family Services Review PIP cases: Conducted Monthly
  - July 2019-June 2020 (as indicated on page 9)

D. Additional Reviews: Conducted Ongoing

- Supplemental Review: Reunification Reviews for children 0-5
- Supplemental Review: Relative and Non-Relative placement for children 0-5
- Supplemental Review: 0-3 Targeted Permanency and Well-Being