



Child Placement Agreements Quality Review Results

December 7, 2016



Agreement Quality Review Process

1. Review tool developed to assess quality of information recorded on pilot template.
2. Each site selected a mix of cases (7 Agreements per site).
3. A review team of 9 persons reviewed total of 35 cases.

1. Was Agreement scanned/stored in FSFN?
 2. If so, where?

FINDINGS:

- 19 yes/ 10 no/7 unknown
- Case Note, Participant, Ongoing Services, Meetings

RECOMMENDATION:

- Develop consistent FSFN method



3. Does narrative identify whether this is an initial placement, new incident, or placement change?

FINDINGS:

- 27 no/ 5 yes

RECOMMENDATION:

In Section I of template, add check box with following drop down options to select Purpose(s for Agreement:

- Initial Placement
- Update to Existing Agreement
- New Incident
- New information about child
- Change of Placement
- Recommendation from Qualified Assessor

4. Does narrative documentation provide concise and clear reason for Agreement?

FINDINGS:

- 24 yes/ 7 no

RECOMMENDATION:

Modify the instructions for I. Child Behaviors or Circumstances to read:

Describe the child's current behavior(s) or circumstance(s) that are the reason for creating this Agreement. Explain the basis for concerns (are concerns suspected or is dependable information already known). If this is an updated Agreement, describe the change in circumstances.

5. Is there sufficient information to know what type of Agreement is needed?

FINDINGS:

- 26 yes/ 5 no/1 maybe

RECOMMENDATIONS:

- FSFN hover definitions will help staff select correct Reasons for Agreement.
- “Current” added to narrative instructions will help to address.

6. Were the types of behaviors and sub-categories on the Agreement completed?

FINDINGS:

- 27 yes/ 5 no

RECOMMENDATIONS:

- FSFN business rule should require the selection of at least one category and one type

7. If information from a qualified assessor was required, is there documentation that it was obtained? 8. Date obtained? 9. Documented in child's record? 10. Name and title of assessor?

FINDINGS:

- 2 cases reviewed had sufficient information about exception required and detailed documentation
- Difficult to determine based on information whether exception based on qualified assessor was necessary
- CBHA's difficult to find in FSFN
- Other supporting evaluations difficult to find in FSFN

Recommendations, cont.

1. Training on where to store CBHAs
2. Add a Supervisor Approval section to Template

Supervisor Name:

- No exception required
- Exception required and received

Name of qualified assessor:

Date received:

Documentation: Instructions should state that brief reference be created to identify where documentation is , e.g. (Case Note or written document received)

11. Are placement requirements checked consistent with policy requirements?

FINDINGS:

- 20 yes/ 10 no
- Some had no requirements checked
- Many had only one checked-- Other

RECOMMENDATIONS:

Create a section for CFOP and section for additional.

Add drop down values for Other (for example):

- Child must be youngest child in bedroom
- Child must not share bedroom with child who is sexually aggressive
- Baby monitors should be in all bedrooms for sound monitoring
- Monitor child's use of electronic devices and social media

12. Are there narrative instructions added for each of the placement requirements checked? 13. Do caregiver instructions appear to provide useful and clear guidance?

FINDINGS:

- 22 yes/ 5 no/4 NA
- Best instructions directly from qualified assessors

RECOMMENDATIONS:

- 1) Specific training
- 2) Local protocols

14. Are any supports for caregiver and child described?

FINDINGS:

- 14 yes/ 10 no
- Best instructions for caregivers directly from qualified assessors
- Child supports tend to be the focus (treatment, therapy, etc.)

RECOMMENDATIONS:

- 1) Specific training
 - Expectations for caregiver regarding child's treatment (e.g. participation, direct communication with provider)
- 2) Local protocols

15. Is there a name and number of person(s) to call in an emergency?

FINDINGS:

- Most state that caregiver can call “title” (e.g. case manager, on-call staff, intake and placement staff, MRT)

RECOMMENDATIONS:

ADD NAME & PHONE NUMBER

- Agency # (Business Hours) _____
- Agency # (On-call) _____
- Case Manager _____
- Other _____

Other Recommendation for Signature Page

Worker completing agreement indicates who participated in development of Agreement.

Add one statement at top of signature page-- signing the Agreement:

All persons signing this agreement to the terms in this Agreement.”

