

**Annual Report** 

# 2013-2014 Quality Case Reviews

**ChildNet's Mission** ~ To protect abused, abandoned and neglected children in the communities we serve.

Continuous Quality Improvement

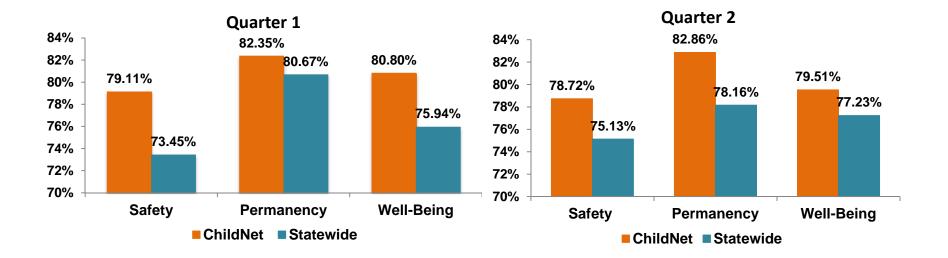


# Fiscal Year 2013-2014 Quality Case Review Process and Contract Monitoring Overview

Over the course of FY 2013-2014, ChildNet, Inc. completed six-hundred seventy-five (675) case file reviews utilizing various quality assurance standardized tools to assess child welfare practice related to safety, permanency, and well-being. ChildNet, Inc. completed case reviews either internally by reviewing case files of children receiving services through ChildNet's subcontractors. ChildNet, Inc. completed on-site contract programmatic monitorings of various providers serving children and families in Broward and Palm Beach Counties. Case file reviews are important to provide ChildNet, Inc. with an understanding of day-to-day case work practice and how it impacts child and family functioning and outcomes. Case file reviews are based on a sampling universe of children who are / were recently in out-of-home care and children who are / were served in their own homes. Samples are sufficiently large enough to make statistical inferences about the population served. Additionally, samples are stratified to include a proportion of cases that quantitative case file review data, noting significant trends and findings to drive change within ChildNet, Inc. to improve outcomes for children and families. Case file review data is shared with both internal staff and leadership, including external partners, such as ChildNet Board members and the Department of Children and Families (DCF). ChildNet, Inc. follows and complies with DCF's statewide quality assurance guidelines – "Windows Into Practice" - which includes the practice framework for conducting quality assurance reviews. These guidelines are posted on the Department's website and in the University of South Florida's Center for the Advancement of Child Welfare Practice.

- Quarter 1, both ChildNet Broward and ChildNet Palm Beach completed fifteen (15) case file reviews for a total of thirty (30) cases
  utilizing the Quality of Practice Standards (QPS) protocol. Additionally, four (4) case file reviews were completed using the Quality
  Service Reviews (QSR) protocol. In addition, ChildNet, Inc. completed twenty (20) supplemental reviews utilizing specific questions
  from the QPS protocol on children in out-of-home care who were prescribed psychotropic medications.
- Quarter 2, both ChildNet Broward and ChildNet Palm Beach completed fifteen (15) case file reviews for a total of thirty (30) cases utilizing the Quality of Practice Standards (QPS) protocol. Additionally, four (4) case file reviews were completed using the Quality Service Reviews (QSR) protocol. In addition, ChildNet, Inc. completed twenty (20) supplemental reviews utilizing specific questions from the QPS protocol on children in out-of-home care who were prescribed psychotropic medications. Furthermore, ChildNet, Inc. completed one-hundred thirty-eight (138) case file reviews on children who suffer from complex medical conditions.
- Quarter 3, ChildNet Broward completed seventy-two (72) case file reviews and ChildNet Palm Beach completed fifty-four (54) case file reviews utilizing the Rapid Safety Feedback (RSF) protocol. This quality assurance protocol focused on overarching child safety items, core concepts, and guidelines.
- Quarter 4, ChildNet Broward completed fifty-two (52) case file reviews and ChildNet Palm Beach completed fifty-one (51) case file reviews utilizing the Rapid Safety Feedback (RSF) protocol. ChildNet again focused on overarching child safety items, core concepts, and guidelines.





Psychotropic Medication Reviews		Palm	Beach		Broward					
Children in Out-of-Home care who are prescribed psychotropic medications	Applicable Q2	Q2 Outcome	Applicable Q1	Q1 Outcome	Applicable Q2	Q2 Outcome	Applicable Q1	Q1 Outcome		
The mother was encouraged and supported to be an active participant in shaping decisions pertaining to the child's psychotropic medications.	9	78%	12	83%	8	63%	8	63%		
The father was encouraged and supported to be an active participant in shaping decisions pertaining to the child's psychotropic medications.	4	75%	6	17%	4	75%	0	N/A		
The child was encouraged and supported to be an active participant in shaping decisions pertaining to psychotropic medications.	9	100%	10	100%	6	83%	6	83%		
Children prescribed a psychotropic medication are closely monitored by the case manager to ensure his/her safety and well-being.	11	73%	13	69%	11	55%	11	55%		



# **Highlighted strengths from Quarter 1 and Quarter 2 reviews:**

# Assessment – how well is the agency doing in conducting critical assessment activities?

> Documentation supported that case workers are ensuring that the children's needs are being assessed for case planning purposes; including education, health care, and mental / behavioral health needs.

# Family Engagement – Is the agency engaging and supporting families, to include regular contact and involvement in decision-making?

Documentation supported that case workers are making concerted efforts to maintain the child's important connections, including facilitating quality visitation (or other contact) between the child and family members.

# Service Planning and Provision – Does the agency provide services to children and families to promote positive outcomes and improve child well-being?

> Documentation supported that case workers are providing service referrals to case participants timely and service referrals are consistent with the needs of the child and family.

# Promoting Case Progress – Does the agency conduct activities that facilitate achieving and maintaining permanency for children?

> Documentation supported that the child was stable in the out-of-home placement and had positive relationships with parents, caregivers, key adults supporters and peers, as appropriate.

# Quality of Supervisory Reviews, Direction and Follow-up? Are regular supervisory reviews being conducted timely and do they document that all aspects of the child's safety, permanency and well-being were considered?

> Documentation supported that supervisors considered all aspects of the child's safety, permanency and well-being of those completed reviews.

# Recommendations from Quarter 1 and Quarter 2 reviews:

- > Re-fresher in-house training for case worker and supervisors on requirements for psychotropic medications.
- > Implementation and training of the exit interview application on the mobile phone device.
- > Greater emphasis on the importance of timely and qualitative supervisory reviews.
- > Stronger documentation of encouraging and supporting the parents to be an active participating in shaping decisions.
- > Focus on identifying all case participants in order to collaborate on problem solving to inform an effective working team.
- > Tracking to ensure unannounced visits to the child's current place of residence is completed every three months.
- > Timely follow-through to ensure service(s) is provided to address the child's medical and dental health care needs.



Quarter 3	Palm Beach			Broward			Statewide	
Case Management Rapid Safety Feedback Reviews	Applicable Cases	% Strength	% Area Needing Imprv	Applicable Cases	% Strength	% Area Needing Imprv	% Strength	% Area Needing Imprv
1 Case Planning	54	85.2%	14.8%	72	84.7%	15.3%	74.9%	25.1%
2 Safety Planning	54	74.1%	25.9%	72	69.4%	30.6%	60.9%	39.1%
3 Monitoring parental behavior change	54	88.9%	11.1%	72	80.6%	19.4%	74.8%	25.2%
4 Assessing emerging dangers	47	89.4%	10.6%	22	81.8%	18.2%	64.6%	35.4%
5 Quality of contacts with the child and family	54	81.5%	18.5%	72	80.6%	19.4%	66.7%	33.3%
6 Frequency of contacts with the child and family	54	57.4%	42.6%	72	80.6%	19.4%	69.3%	30.7%
7 Background checks and home studies	54	68.5%	31.5%	72	52.8%	47.2%	66.1%	33.9%
8 Communication with stakeholders	54	64.8%	35.2%	72	76.4%	23.6%	61.5%	38.5%
9 Supervisory case consultation	54	42.6%	57.4%	72	59.7%	40.3%	53.8%	46.2%

# **Highlighted strengths from Quarter 3 reviews:**

- Case Planning activities, whether through an approved case plan or informal case planning activities, were individualized to meet the needs of the family and child.
- ✓ Safety Planning activities, whether formal or informal, identified safety factors, present and/or impending danger, protective capacities, and working with caregivers to supplement protective capacities through safety interventions.
- ✓ Case worker's contacts with the child and family were individualized, meaningful, focused on case planning and service provisions, and well-documented to monitor the child's safety and well-being needs.
- ✓ Case worker's visits with the child and family occurred sufficiently to address known threats and emerging dangers.
- ✓ Background checks and home studies were sufficient and appropriate to ensure the child's safety.
- Case workers are interacting, communicating, and working with other professionals to coordinate the service delivery process to all parties.



Quarter 4	Palm Beach			Broward			Statewide	
Case Management Rapid Safety Feedback Reviews	Applicable Cases	% Strength	% Area Needing Imprv	Applicable Cases	% Strength	%Area Needing Imprv	% Strength	% Area Needing Imprv
1 Case Planning	51	68.6%	31.4%	52	67.3%	32.7%	78.6%	21.4%
2 Safety Planning	51	58.8%	41.2%	52	57.7%	42.3%	59.3%	40.7%
3 Monitoring parental behavior change	51	86.3%	13.7%	52	90.4%	9.6%	79.5%	20.5%
4 Assessing emerging dangers	34	79.4%	20.6%	12	83.3%	16.7%	67.6%	32.4%
5 Quality of contacts with the child and family	51	66.7%	33.3%	52	86.5%	13.5%	71.6%	28.4%
6 Frequency of contacts with the child and family	51	54.9%	45.1%	52	75.0%	25.0%	71.4%	28.6%
7 Background checks and home studies	51	64.7%	35.3%	52	57.7%	42.3%	69.2%	30.8%
8 Communication with stakeholders	51	62.7%	37.3%	52	80.8%	19.2%	67.5%	32.5%
9 Supervisory case consultation	51	80.4%	19.6%	52	50.0%	50.0%	61.1%	38.9%

# **Highlighted strengths from Quarter 4 reviews:**

- ✓ Case workers sufficiently monitored parent's behavior change, and routinely documented if the parent has the capacity, ability, and/or willingness to keep children safe.
- ✓ Monitoring of safety planning activities, whether formal or informal, continued to be assessed by the case worker, including monitoring family engagement in safety-related services.
- ✓ When applicable, case workers assessed emerging dangers and took immediate protective actions to ensure the child's safety.
- ✓ Case worker's visits with the child and family occurred sufficiently to address known threats and emerging dangers.
- Case management supervisors provided appropriate direction and recommendations as it relates to child safety, permanency and wellbeing.



### Recommendations from Quarter 3 and Quarter 4 reviews:

- Ongoing training and support in the development and monitoring of appropriate safety plans.
- Monitoring of quarterly supervisory reviews to ensure ongoing consults with case management staff.
- Continuous reminders on the importance and requirements of unannounced visits on a quarterly basis.
- Oversight and development current case plans to improve parental protective capacities and to safeguard from expiring.
- > Greater attention to evaluating and documenting family progress to ensure child's safety.
- > Ensuring communication with stakeholders, including documentation of service delivery, is included in the child's case file.

### Fiscal Year 2013-2014 Contract Monitoring Overview

Over the course of FY 2013-2014, ChildNet, Inc. completed on-site contract programmatic monitoring of eleven (11) Broward County providers and ten (10) Palm Beach County providers, accounting for a total of twenty-seven (27) programs. ChildNet, Inc. pays for and manages through traditional and formal subcontracts a network of child welfare services for the children and families in its communities. These subcontracted services include, but not limited to: assessment, family preservation & diversionary services, family reunification & strengthening services, residential & foster home management services, dependency case management & adoption services, and transitional independent living services. Contract monitoring is performed routinely to ensure that subcontracted providers of ChildNet, Inc. are fulfilling the terms and conditions of their contract (s) through a review of applicable policy and procedures, randomly selected child files and personnel files, and interviews with the clients and employees.

ChildNet, Inc. completed a review of over two-hundred (200) case files utilizing standardized tools that were developed specific to each subcontractor provider and service program. Contract monitoring incorporates a review of both qualitative and quantitative items, ensuring compliance with contractual requirements and Florida law. A final report was written for each contract monitoring and provided to the subcontractor which rates items as exceeding requirements, fully meeting requirements, conditionally acceptable or unacceptable. For those items rated conditionally acceptable, further attention by the provider is encouraged, and items rated unacceptable do require a performance improvement plan (PIP) submitted to the ChildNet contract manager within thirty (30) calendar days of the exit meeting for approval.

Noted subcontractor strengths include, but not limited to: ensuring children are free from re-abuse or re-neglect; timely development of the initial treatment / service plans; and completion of routine medical and dental examinations for children. Noted opportunities for improvement include, but not limited to: ongoing communication and sharing of the child's progress with case management staff; ensuring children attend follow-up appointments for healthcare related services; and timely submission of contractual deliverables (i.e. monthly reports and re-licensing packets).