

Continuous Quality Improvement Project

Wisconsin

Interview with Harry Hobbs, CQI Section Chief, Office of Performance and Quality Assurance
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CONTINUOUS QUALITY IMPROVEMENT (CQI) STRUCTURE

Department Structure

The CQI Unit was created in 2005 following the State's Round One CFSR, during which the State did not receive substantial conformity in the systemic factor related to having a Quality Assurance system. Wisconsin has a State-supervised/County administered Child Welfare system. Each of the State's 72 counties has its own Child Welfare/Child Protection Services system. Therefore, the CQI system was designed to allow for evaluation of each county's respective system.

In 2008, Wisconsin created a new Department of Children and Families and the CQI Section was transferred from the Division of Safety and Permanence (DSP) to the Bureau of Performance Management (BPM), which is in the Division of Management Services (DMS). DSP provides administrative oversight of the county Child Welfare systems.

The CQI Section has fourteen total positions and is headed by a Section Chief. There are eight contracted positions and six State positions. All contracted and State positions are CQI Specialists and are located in the Department of Children and Family's central office in Madison WI. State positions report directly to the Section Chief and contracted positions report to their Project Manager, who then reports to the Section Chief.

The CQI Section has an annual budget which covers staff salaries, review costs, training and \$75,000 to pay for Facilitators (see *Use of Data: Plan Development* section below for more information).

Staff Qualifications and Responsibilities

It is preferred that CQI Specialists, whether contract or State employees, have a Bachelor's Degree in social work (ideally a Master's Degree), and a substantial number of years of experience in the field of child welfare. The CQI section also uses trained Facilitators on a contractual basis. The role of the Facilitator is to assist counties in the development of their Action Plans after CQI has completed a Qualitative Service Review (QSR) of that county's child welfare system. There are no education requirements for Facilitators; however, they must be experienced child welfare practitioners and have established relationships with county leadership throughout the State. Since 2009 the five Area Administrators of the Bureau of Regional Operations have also be trained in the Facilitator protocol and serve as facilitators as well. Peer reviewers (see *Elements of the CQI System: Qualitative Reviews* below for a description of their role) mirror CQI Specialists in their education and child welfare experience.

CQI Specialists work exclusively on CQI-related activities.

Training

CQI Specialists attend numerous trainings, most of which are provided by the State's Regional Training Partnerships. CQI Specialists and our statewide network of QSR peer case reviewers attend a two day training with Ray Foster, Director of Human Systems and Outcomes (HSO). This is followed by two week-long QSRs during which each trainee is assigned a coach/mentor to model and teach them the various case reviewer duties, skills and competencies. Case reviewers who can demonstrate them are awarded certification, enabling them to receive a stipend of \$200.00 per day on subsequent reviews. Paul Vincent, Director of the Child Welfare Policy and Practice Group (CWP&PG) has provided the section with two one-day trainings on coaching and mentoring (2006 and 2011). Peer reviewers are also being trained on the State's safety assessment and planning model in order to generate consistency in their understanding of safety during case reviews.

Committees

Historically, Wisconsin has had a Statewide CQI Committee. The first Committee was trained on both the CFSR and QSR, and was responsible for ultimately choosing the QSR as the State's qualitative case review process. Activities of subsequent CQI Committees have included: synthesizing qualitative and quantitative data; developing a qualitative set of protocols for measuring front door practices; and, creating an ICWA compliance tool. The most recent Committee disbanded approximately two years ago. Development of a new Committee has not been called for as a result of the internal changes in the Department.

CQI PLAN

Expectations, Missions, and Objectives

The Department of Children and Families is currently revisiting the expectations, missions, and objectives for their CQI system. The audience served by the CQI Section has changed over the years; currently, the Secretary's Office is one of the top recipients of CQI data and findings. When the Section was first created, counties were mainly targeted for deliverables. Since moving into the Bureau of Performance Management the CQI Section has also begun developing deliverables for the Division of Safety and Permanency.

The State has multiple manuals available that describe the QSR system, including: how to select cases; how to prepare for reviews; how to organize findings; etc.

The State's CQI system is described as more improvement than compliance based. The CQI Section has declined requests to measure compliance to policies and standards due to their commitment to measuring outcomes.

CQI Policies

The State does not have specific CQI policies.

ELEMENTS OF THE CQI SYSTEM

Qualitative Reviews

Wisconsin began using Quality Service Reviews (QSR) in 2005. The State brought in Human Systems and Outcomes, Inc. and the Child Welfare Policy and Practice Group to provide training to staff in order to develop internal capacity within the State.

Peer reviewers complete a two-day training on the QSR and spend time in the field to further develop their competencies. Once certified, peer reviewers accompany the CQI Team as reviewers for the QSR. Currently, there are 75 certified peer reviewers in the State; approximately twenty percent of peer reviewers are retirees with prior child welfare experience.

The CQI Section has created a rigorous set of protocols and tools to assess child welfare practice in the State, covering the following areas: Access, Initial Assessment, Ongoing, Permanency Pathway (post termination of parental rights/adoption), and Indian Child Welfare Act compliance.

- **Access and Initial Assessment (IA):** The QSRs analyze the critical decision points in a case at the point of, and following, the receipt of an allegation of maltreatment. The Access and IA reviews have a foundation in the Access and IA Standards with a qualitative focus on best practice.
- **Ongoing:** QSRs consider child safety and appraise the agency's ability, using local resources, to achieve federal and State performance standards for permanency and well-being.
- **Permanency Pathway:** QSRs assess post termination of parental rights cases as they move toward adoption finalization. While considering child safety, permanency, and well-being, they also consider outcomes as jurisdiction of a child moves from the county to the state via a contracted private adoption agency.
- **Indian Child Welfare Act (ICWA):** The ICWA review ensures compliance with requirements related to the identification of American Indian children, proper tribal notification, and tribal placement preferences. [In 2009 the state passed new legislation called the Wisconsin Indian Child Welfare Act (WICWA) and CQI is currently developing a qualitative protocol to measure outcomes of service delivery for children/youth who are tribal members.]

Case reviewers work in teams. Typically six teams will review twelve cases over a four day period. The State conducts nine to twelve reviews annually. The State had originally agreed with the Children's Bureau to complete 12-16 reviews per year, but found this number to be too difficult to sustain. The Section uses a randomized, stratified sample. Stratification is based on age, gender, and caseworker. The Section may develop targeted QSRs to study parts of a system or target performance measurement in the future.

In addition to case file reviews, the peer reviewers and CQI team conduct interviews with those involved in the case (e.g. children, parents, out of home providers, service providers, informal supports, teachers,

etc.). The Unit averages 8.5 interviews per case. Stakeholder focus groups are also held in order to look at the macro system i.e. how the stakeholders and practice partners work with one another and contribute to outcomes for children and families. Fifteen to eighteen focus groups are conducted during a county review, which typically include the following stakeholders: foster children, foster parents, ongoing caseworkers, access and initial assessment caseworkers, law enforcement, educators, supervisors, judges, Guardian ad Litem, attorneys, tribal leaders, etc.

Following the case interview process, the case is scored and the case review team lead puts together a debriefing summary which points to the strengths, challenges, and valuable information uncovered in the case. This information is presented to the caseworker and supervisor along with suggestions to achieve enhanced outcomes. Next Case Presentation (or “Grand Rounds”) is held. This is a chance for the lead reviewers to give a ten minute summation of what was learned on the cases they reviewed. Agency personnel are invited to observe the meeting.

To address inter-rater reliability, the CQI Section has completed two inter-rater studies. With the help of Human Systems and Outcomes, Inc., the section used case simulation to test for degree of agreement across reviewers in the Ongoing protocol. All CQI Specialists and peer case reviewers participated in the study. Inter-rater studies have not been completed for the Access, Initial Assessment, or Permanency Pathways protocols as of yet.

Quantitative Data

The State’s SACWIS system is housed in the Division of Safety and Permanence. Ninety percent of the quantitative data utilized by the broad QA system is stored in the SACWIS system. Prior to the onsite QSR, the CQI Section pulls together a PowerPoint identifying varying performance measures for each county. The Section also uses SACWIS data (pre-QSR) to decide which additional questions should be added to the focus group questions (e.g. questions related to length of time to adoption/reunification, re-entry, placement stability, etc.).

In the last three to four years, the State has developed a KidStat system which utilizes federal performance measures and pulls data from the SACWIS system.

USE OF DATA

Reports

Quality Service Review reports are available by County on the State’s [website](#). The following reports may also be accessed on the State’s website: Lessons from the 2010 and 2011 Child Welfare Reviews; Review of Wisconsin County Child Welfare Practice: 2006-2010; 2011 ICWA Compliance Report; and Prevalence of Trauma Report. KidStat performance reports are also made available to the public (see [website](#)).

Data Software

The State currently uses FileMaker Pro as the foundation of their database and does not use a particular software for data analysis. The State is looking into using Access for their databases.

Plan Development and Training

When the State began conducting QSRs, they also encouraged counties to develop Action Plans. However, the State found that many of the Action Plans were targeted on systemic issues rather than on improving case practice. Also, because counties have different internal capacities for action planning, the State felt they needed the support and guidance of a Facilitator. As a result, five years ago the Section Chief and a contract vendor developed a comprehensive protocol Facilitators could use to guide counties in the construction of their Action Plan. Facilitators assisted counties in developing targeted Action Plans to improve some specific Core Practice Function (CPF) e.g. Engagement, Teaming, Assessment and Planning, etc. All Facilitators are either former or current child welfare experts. Facilitators work with the counties for three to four months during the Action Plan process. Four 3-4 hour meetings are needed to move through the complete facilitation process. One of the most important components of the process is the root cause analysis, during which the Facilitator chooses case stories which best illustrate favorable and unfavorable outcomes related to the CPF the county chose to improve. Cases are then explored to better understand the causes of these favorable/unfavorable outcomes. Spanning back to December 2010, County Action Plans can be found [here](#).

Data is used to develop the State's CFSP and APSR. It is also used by the State's training partnerships. Action Plans are sent to the Professional Development Team (associated with the University of Wisconsin and the Division of Safety and Permanency) to determine which types of training could help county staff develop the practice skills associated with the CPF in their Action Plan. The Team is also developing coaching and mentoring for supervisors who can then serve as coaches/mentors to their local county staff.

Systemic Issues

There is a statewide professional development council that is working with the University to develop an evaluation system for the State's training partnerships. Recruitment and retention issues are handled at the county level.

Identifying and Correcting Data Quality Issues

The CQI Section uses a quality assurance process on each QSR roll up sheet before it is entered into the database. A second quality assurance process is used when looking at the accuracy of the scores (i.e. comparing the scores with the content within the stories). If something does not resonate, the CQI Team returns to the database to see if changes need to be made.

Linking Data Sources

The CQI Team uses the QSR as a means of identifying some of the underlying causes contributing to the outcomes measured by quantitative data. For example, if the State is trying to understand re-entry, they may add a series of questions to their focus group to better understand what is influencing high re-entry rates.

Collaborative Data Analysis Efforts

The CQI Section has been working with a PhD researcher at the University of Wisconsin to identify which Core Practice Functions routinely contribute to favorable outcomes for children and families.